PRINTED: 03/13/2015
FORM APPROVED

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AF-0007	(X2) MULTIPLE CONSTRUCTION A. BUILDING ____ B. WING ____	(X3) DATE SURVEY COMPLETED 03/10/2015
NAME OF PROVIDER OR SUPPLIER: AMETHYST HEALTH CENTER FOR WOMEN, INC	STREET ADDRESS, CITY, STATE, ZIP CODE: 9309-B FORESTWOOD LANE MANASSAS, VA 20110		

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{T 000}	12 VAC 5- 412 Initial comments An unannounced First Trimester Abortion Facility Licensure Revisit inspection, following the facility's October 2014 Biennial Licensure inspection, was conducted on 03/09/2015 through 03/10/2015. Two Medical Facilities Inspectors from the Office of Licensure and Certification, Virginia Department of Health conducted the inspection. The agency continued to not be in compliance with 12 VAC- 412 Regulations for the Licensure of Abortion Clinics. (Effective 06/20/2013). Deficiencies were cited.	{T 000}		
{T 095}	12 VAC 5-412-170 H Personnel H. Personnel policies and procedures shall include, but not be limited to: 1. Written job descriptions that specify authority, responsibility, and qualifications for each job classification; 2. Process for verifying current professional licensing or certification and training of employees or independent contractors; 3. Process for annually evaluating employee performance and competency; 4. Process for verifying that contractors and their employees meet the personnel qualifications of the facility; and 5. Process for reporting licensed and certified health care practitioners for violations of their licensing or certification standards to the appropriate board within the Department of Health Professions. This RULE: is not met as evidenced by: Based on interview and document review, it was determined the facility staff failed to implement agency policy to document annual evaluations and retain within the individual personnel files for two (2) of eight (8) employees.	{T 095}	Amethyst Health Center for Women's (AHCW) practice at the time of the inspection was to perform staff evaluations annually. The administrator completed annual staff evaluations in January 2015. Due to a misunderstanding, these evaluations did not include the two physicians because they worked as independent contractors and not full-time employees at AHCW. Actions to correct the deficiency and prevent a recurrence: The administrator performed the annual evaluations on Employee #7 and #8 on March 7, 2015 and placed copies in the personnel files. AHCW changed its annual evaluation policy to specifically reference the inclusion of independent contractors. Actions to maintain compliance: As part of AHCW's quarterly Quality Assurance program meetings, the administrator will review all personnel files to ensure each file contains a current annual evaluation, and report back to the Quality Improvement Committee as part of the "VDH/OLC Inspection Deficiencies" review. All corrections will be completed by April 10, 2015.	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Mr Beurskens
TITLE: President
(X6) DATE: 4-3-15

State of Virginia

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NAME OF PROVIDER OR SUPPLIER AMETHYST HEALTH CENTER FOR WOMEN, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 9380-B FORESTWOOD LANE MANASSAS, VA 20110		

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(T 095)	Continued From Page 1 The findings included: Eight (8) personnel files (Employees #1-#8) were reviewed on 3/9/15 from approximately 2:30 PM to 4:00 PM. The review revealed two (2) employees (Employees #7 and #8) had no evidence of an annual evaluation. Staff #1, interviewed at approximately 12:15 PM on 3/10/15, acknowledged there were no annual evaluations for Employee #7 and #8. Staff #1 stated, "I did not think credentialed staff had to be evaluated because they were contract employees. I will do these evaluations."	(T 095)		
(T 100)	12 VAC 5-412-170 I Personnel I. A personnel file shall be maintained for each staff member. Personnel record information shall be safeguarded against loss and unauthorized use. Employee health-related information shall be maintained separately within the employee's personnel file. This RULE: is not met as evidenced by: Based on interview and document review, it was determined the facility staff failed to implement the facility's policy related to maintaining health information separately within the employees' personnel files for four (4) of eight (8) employees. The findings included: Eight (8) personnel files (Employees #1- #8) were reviewed on 3/9/15, at approximately 2:30 PM to 4:00 PM. The review revealed four (4) employees (Employee #1- #4) had health information within the employee file.	(T 100)	Amethyst Health Center for Women's practice at the time of the inspection was to maintain employee health-related information separately within the employee's personnel file, in a sealed manila envelope for confidentiality, meeting the requirement. Actions to correct the deficiency: As requested by the inspector, the administrator created new files for the employee health-related information that are separate from the primary personnel files, and ensured that all health-related information is now located in these new, separate files. Actions to prevent a recurrence of the deficiency and maintain compliance: Amethyst Health Center for Women's policy on employee personnel record content reflects this practice. Further, now that the system has been set up, all future employee health-related information will be placed in the separate files, maintaining compliance.	

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NAME OF PROVIDER OR SUPPLIER: AMETHYST HEALTH CENTER FOR WOMEN, INC	STREET ADDRESS, CITY, STATE, ZIP CODE: 9380-B FORESTWOOD LANE MANASSAS, VA 20110		

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{T 100}	Continued From Page 2 Staff #1 was interviewed on 3/10/15 at approximately 12:15 PM and acknowledged the surveyor's findings. Staff #1 showed the surveyor he/she had placed all health information dated after the previous survey of 10/21/14 in an envelope for confidentiality, but had left old health information in the file. Staff #1 stated, "I will go through the files and pull all health information and place in confidential manila envelopes."	{T 100}	All corrections will be completed by April 10, 2015.	
{T 170}	12 VAC 5-412-220 B Infection prevention B. Written infection prevention policies and procedures shall include, but not be limited to: 1. Procedures for screening incoming patients and visitors for acute infectious illnesses and applying appropriate measures to prevent transmission of community acquired infection within the facility; 2. Training of all personnel in proper infection prevention techniques; 3. Correct hand-washing technique, including indications for use of soap and water and use of alcohol-based hand rubs; 4. Use of standard precautions; 5. Compliance with blood-bourne pathogen requirements of the U.S. Occupational Safety & Health Administration. 6. Use of personal protective equipment; 7. Use of safe injection practices; 8. Plans for annual retraining of all personnel in infection prevention methods; 9. Procedures for monitoring staff adherence to recommended infection prevention practices; and 10. Procedures for documenting annual retraining of all staff in recommended infection prevention practices. This RULE: is not met as evidenced by:	{T 170}	Amethyst Health Center for Women ensures that all staff members receive infection prevention and emergency training and documents evidence of these trainings in the personnel files. Due to a misunderstanding about whether independent contractor employees were required to receive these trainings, the files lacked documentation at the time of the inspection for both trainings for Employee #6 and emergency training for Employee #8. The administrator presented clear documentation to the inspector demonstrating that Employee #8 received infection prevention training with the rest of the staff on January 6, 2015 but this documentation was not included in the Statement of Deficiencies. Actions to correct the deficiency: Employees #6 and #8 and the rest of the staff will receive the annual emergency training, performed by the City of Manassas Fire and Rescue Department, before April 10, 2015. Employee #6 will receive infection prevention training before April 10, 2015. Actions to prevent a recurrence of the deficiency and maintain compliance: Amethyst Health Center for Women's policy requires these trainings to be conducted annually for all staff and documented in the personnel record. As part of AHCW's quarterly Quality Assurance program meetings, the administrator will review all personnel files to ensure each file contains updated documentation	

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NAME OF PROVIDER OR SUPPLIER AMETHYST HEALTH CENTER FOR WOMEN, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 9300-B FORESTWOOD LANE MANASSAS, VA 20110		

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
(T 170)	Continued From Page 3 Based on interview and document review, it was determined the facility staff failed to ensure that employee attendance for annual education for infection prevention and emergency training was documented in personnel files for two (2) of eight (8) employees. The findings included: Eight (8) personnel files (Employees #1-#8) were reviewed on 3/9/15 from approximately 2:30 PM to 4:00 PM. The review revealed there was no evidence of infection prevention and emergency training for Employees #6 and #8. Staff #1, interviewed on 3/10/15 at approximately 12:15 PM, acknowledged the surveyor's findings. Staff #1 stated, "Employee #6 only worked on Saturdays, when needed, but the agency would provide infection prevention and emergency training for all staff and place documentation in employee files."	(T 170)	of all trainings, including infection prevention and emergency trainings, and report back to the Quality Improvement Committee as part of the "Staffing Patterns and Performance" review, which will ensure compliance is maintained. All corrections will be completed by April 10, 2015.	
(T 180)	12 VAC 5-412-220 D Infection prevention D. The facility shall have an employee health program that includes: 1. Access to recommended vaccines; 2. Procedures for assuring that employees with communicable diseases are identified and prevented from work activities that could result in transmission to other personnel or patients; 3. An exposure control plan for blood-bourne pathogens; 4. Documentation of screening and immunizations offered/received by employees in accordance with statute, regulation or recommendations of public health authorities, including documentation of screening for tuberculosis and access to hepatitis B vaccine;	(T 180)	Amethyst Health Center for Women's practice at the time of the inspection was to document the immunizations offered and any refusals for all staff, but, due to a misunderstanding, it did not include such documentation for the two physicians, Employees #7 and #8, because they worked as independent contractors and not full-time employees at AHCW. AHCW documents this immunization and screening information in its "Amethyst Health Center for Women, Inc. Staff Hepatitis B Vaccine Consent Form" packet. (See Attached)	

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	AF-0007	A. BUILDING _____ B. WING _____	03/10/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AMETHYST HEALTH CENTER FOR WOMEN, INC	9380-B FORESTWOOD LANE MANASSAS, VA 20110

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(T 180)	Continued From Page 4 5. Compliance with requirements of the U.S. Occupational Safety & Health Administration for reporting of workplace-associated injuries or exposure to infection. This RULE: is not met as evidenced by: Based on interview and documentation review, it was determined the facility staff failed to provide evidence that screening and immunizations for tuberculosis and hepatitis B were offered/received by two (2) of eight (8) employees. The findings included: Document review of eight employees (Employees #1- 8) revealed no evidence of screenings and immunizations offered/received by employees in accordance with statute, regulation or recommendations of public health authorities for Employee #7 and #8. During an interview on 3/10/15, at approximately 12:15 PM, Staff #1 acknowledged there was no evidence of immunizations offered for Employee #7 and #8. Staff #1 stated, "I did not know the files of credentialed employees were required to have this documentation, but that it would be requested and placed in the personnel files."	(T 180)	Actions to correct the deficiency: Employee #7 completed the documentation on March 24, 2015, and Employee #8 completed the documentation on March 25, 2015 and it was recorded in their files. Actions to prevent a recurrence of the deficiency and maintain compliance: Amethyst Health Center for Women's policy requires documentation of screenings and immunizations "offered/received/ declined by employees and credentialed consultants." As part of AHCW's quarterly Quality Assurance program meetings, the administrator will review all personnel files to ensure each file contains updated immunization documentation, and report back to the Quality Improvement Committee as part of the "Staffing Patterns and Performance: VDH/OLC Inspection Deficiencies" review, which will ensure compliance is maintained. All corrections will be completed by April 10, 2015.	

AMETHYST HEALTH CENTER FOR WOMEN, INC. STAFF HEPATITIS B VACCINE CONSENT FORM

I have read the information pertaining to the Hepatitis B vaccine. I have had an educational session addressing Hepatitis B viral infection. I have had the opportunity to ask questions, and they have been answered to my satisfaction. I believe I understand the benefits and risks of the vaccine and consent to receive the vaccine.

_____ _____

Name Age

_____ _____

Signature Date

AMETHYST HEALTH CENTER FOR WOMEN, INC. STAFF HEPATITIS B VACCINE DECLINATION FORM

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with the Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

I have already received the Hepatitis B vaccine and have proof that I do not need the vaccine at this time.

_____ _____

Name Date

_____

Signature

_____ _____

Witness Date

AMETHYST HEALTH CENTER FOR WOMEN, INC. EMPLOYEE TUBERCULOSIS (MANTOUX) SCREENING TEST CONSENT FORM

I have had an educational session on Tuberculosis (TB). This session included information regarding the Mantoux skin test, which is used to determine if the bacteria which causes tuberculosis is residing in my body. I understand that I may be occupationally exposed Tuberculosis and I may be at risk for acquiring Tuberculosis. I understand that the CDC and OSHA recommend that I be tested for exposure to TB. I have been given the opportunity to be tested using the Mantoux skin test, at no charge to myself. I have had the opportunity to ask questions regarding TB and the skin testing program. Based on the information, I have elected to participate in this program.

_____

Name

_____ _____

Signature Date

Administered by _____ Read on _____ Result_____

AMETHYST HEALTH CENTER FOR WOMEN, INC. EMPLOYEE TUBERCULOSIS (MANTOUX) SCREENING DECLINATION FORM

I have had an educational session on Tuberculosis (TB). This session included information regarding the Mantoux skin test, which is used to determine if the bacteria which causes tuberculosis is residing in my body. I understand that I may be occupationally exposed Tuberculosis and I may be at risk for acquiring Tuberculosis. I understand that the CDC and OSHA recommend that I be tested for exposure to TB. I have been given the opportunity to be tested using the Mantoux skin test, at no charge to myself. However, I decline TB screening at this time. I understand that, by declining this screening, I am at risk of having TB without my knowledge. I understand that I will be able to obtain testing for TB in the future if I choose to change my mind.

_____

Name

_____

Signature

_____

Date

AMETHYST HEALTH CENTER FOR WOMEN, INC. EMPLOYEE TB SURVEILLANCE ANNUAL SCREEN FOR POSITIVE REACTION

NAME _____

JOB CLASSIFICATION _____

Since records indicate that you have previously tested positive on PPD skin testing the following questions must be answered each year as part of our annual TB surveillance program.

Please complete this form and return to _____

During the past year, have you experienced or are you now experiencing any of the following signs/symptoms

PLEASE CIRCLE WITH	YES	NO
Weight loss (unrelated to dieting)	YES	NO
Persistent cough (2-3 weeks duration)	YES	NO
Fever/Night Sweats	YES	NO
Weakness or Fatigue	YES	NO
Coughing up blood	YES	NO

_____ _____

SIGNATURE DATE

ACHW 2.4.4.D.4-1b

Amethyst Health Center for Women, Inc.

Amethyst Health Center for Women Written Attestation

All of the following corrections were completed by April 10, 2015, except as noted.

T 095

The administrator performed the annual evaluations on Employee #7 and #8 on March 7, 2015 and placed copies in the personnel files. AHCW changed its annual evaluation policy to specifically reference the inclusion of independent contractors.

T 100

As requested by the inspector, the administrator created new files for the employee health-related information that are separate from the primary personnel files, and ensured that all health-related information is now located in these new, separate files.

T 170

Employees #6 and #8 and the rest of the staff will receive the annual emergency training, performed by the City of Manassas Fire and Rescue Department, on April 21, at 1pm. The training was scheduled for April 8, before the April 10 deadline, but then the trainer, Amelia Gagnon, was unable to attend, and she rescheduled for April 21. Employee #6 received infection prevention training on March 21, 2015.

T 180

Employee #7 completed the documentation on March 24, 2015, and Employee #8 completed the documentation on March 25, 2015 and it was recorded in their files.

MR Beurskens

Elizabeth Beurskens, President, Amethyst Health Center for Women

4-20-15

Date