Missouri Department of Health and Senior Services				Dir		PRINTED: 08/17/2009 FORM APPROVED	
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MOA-0014			ER/CLIA MBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING		(X3) DATE SURVEY COMPLETED	
			B. WING		08/05/2009		
NAME OF PROVIDER OR SUPPLIER STREET AS			DDRESS, CITY, STATE, ZIP CODE			03/2009	
REPROD	OUCTIVE HEALTH SE	RVICES / PLANNI		REST PARK DUIS, MO 6			
(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 CORREC (EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APPR DEFICIENCY)	ON SHOULD BE COMPLIE APPROPRIATE DAT	
L 0 00	- 000 Initial Comments			L 000	RECEILE :		
	A licensing inspection to determine compliance with the state regulations for abortion facilities was conducted on August 5, 2009. Complaint #MO00054656 was investigated in conjunction with the licensing inspection and was determined to be unsubstantiated. Deficiencies as a result of the licensing inspection are as follows:				AUG 2 5 2009		
	the licensing inspection are as follows: 19 CSR 30-30.060(1)(B)(3) The administrator shall be responsible for The administrator shall be responsible for a written plan for evacuation of patients and personnel in the event of fire, explosion or other internal disaster. The plan shall be kept current and all personnel shall be knowledgeable of the plan. This regulation is not met as evidenced by: Base on record review and interview, the facility failed to assure that all staff are knowledgeable of the written fire evacuation plan by not having fire drills in accordance with facility policy. Findings include: 1. Fire drill records provided during the survey indicated that the facility has had only one fire drill per year since 2006. The fire drill records indicate drills were held on 11/09/06, 9/12/07, 6/25/08, and 7/06/09. A review of the policy "Planned Parenthood of the St. Louis Region and SW Missouri Security Protocols and Emergency Evacuation Procedures" revealed that two (2) fire drills are to be done annually. An interview with the Vice President of Patient Services at approximately 3:30 PM on 8/05/09 confirmed the findings.			RHS of PPSLR will ensure that fire and evacuation drills are performed twice annually, generally one in every six month period. How and When: To rectify this in 2009, a drill will be done in October 2009 with documentation kept at the administrative office. Who: The responsibility for the drill(s) is that of the Vice President of Patient Services and the Vice President of Finance and Operations. Provisions Instituted: To prevent future deficiencies, reminders for the drills have already been entered into the 2010 calendar. This will occur for subsequent years.			5y 5)31)v9
ssouri Depar	tment of Health and Senic	or Services				1	

LABORATORY DIRECTOR'S OR PROVIDER'S UPPLIER REPRESENTATIVE'S SIGNATURE VICE PROVIDER'S UPPLIER REPRESENTATIVE'S SIGNATURE

STATE FORM

6899

61C511

TITLE Paint Shukes (X6) DATE

(X6) DATE

(X6) DATE

(X6) DATE

(X7) DATE

(X7) DATE

(X7) DATE

(X7) DATE

(X7) DATE

(X8) DAT

Missouri Department of Health and Senior Services STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING B. WING MOA-0014 08/05/2009 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **4251 FOREST PARK AVENUE** REPRODUCTIVE HEALTH SERVICES / PLANN! SAINT LOUIS, MO 63108 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE **PREFIX** REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) L1160 Continued From page 1 L1160 RHS of PPSLR does provide training L1160 19 CSR 30-30.060(3) Patient care services shall L1160 for all surgical technicians. RHS of be under PPSLR will ensure documentation of such training is in the personnel Patient care services shall be under the direction records and available for review. of an RN. An RN shall be present in the clinical area whenever there is a patient in the procedure room or recovery room. An LPN or a surgical How: technician shall be present in the procedure room The training check list for the whenever there is a patient in the procedure surgical technician training will be room. The surgical technician shall be a certified surgical technologist or shall provide completed, as we review with the documentation of training in assisting abortion two staff lacking it, all of the procedures. standards and responsibilities of working in the procedure room. This This regulation is not met as evidenced by: will then be copied for their Based on record review and interview, the facility failed to assure that all surgical technicians personnel file and a copy given to (non-licensed assistive staff present in the each staff member. procedure room) provide documentation of training in assisting abortion procedures or When: certified surgical technologist credentials. This will be completed within one 1. A review of the 4 personnel files of staff month – by Sept 30th. identified as medical assistants (non-licensed staff who assist with abortion procedures) Who: revealed that 2 personnel files lacked any The Clinical Manager (NP) working documentation of training in assisting abortion procedures or documentation of surgical with the Training and Quality technologist certification. An interview with the Systems Coordinator will oversee the Vice President of Patient Services at training and the documentation for approximately 3:30 PM confirmed this finding. this review and subsequent new hires. **Provisions Instituted:** All new surgical technician hires will be given a copy of the training checklist on the first day of the position. They will be assigned a qualified trainer. The training and Missouri Department of Health and Senior Services the checklist must be completed 6899

on sheet 2 of 2

within two weeks and before the tech

can work independently. The Director of Surgical Services, who is the immediate supervisor, will ensure this is completed and sent to HR for filing in the personnel record.