STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
DIVISION OF HEALTH SYSTEMS REGULATION

LICENSING INSPECTION REPORT

Name and Address of Entity

Planned Parenthood of Southern New England - Danbury
44 Main Street
Danbury, CT 06810

Signature of DHSR Staff

Marsha A. Mehmel, RN, MPA, Nurse Consultant

Licensure Category : family planning/medical abortion

Licensed ~~Capacity~~ # : 0004 Census : N/A

Licensed Capacity : _____ Census : _____

Date(s) of Onsite Inspection : November 26, 2013

Date(s) Additional Information Obtained: _____

Personnel Contacted : Antonietta Schaalman, Health Center Manager (RN); Jennifer Ryan, APRN; Jennifer Tomasini, Advanced Clinical Asst.

REVIEW/FINDINGS/PROCESS (complete all applicable)

[X] Licensing Inspection: [ ] *Initial* [X] *Renewal* [ ] *Other:* _____

[X] Revisit for the Purpose of implementation of a plan of correction for a letter dated 12/16/11.

[ ] See Complaint Investigation # _____

[ ] See Reportable Event Investigation # _____

[ ] See Certification file.

[X] Violations of the Public Health Code of the State of Connecticut and/or Regulations of Connecticut State Agencies were identified at the time of this inspection.
See violation letter dated _____

[ ] Citation # _____ was issued to this facility as a result of this inspection.

[ ] Violations of the Public Health Code of the State of Connecticut and/or Regulations of Connecticut State Agencies were not identified at the time of this inspection.

[ ] Citation # _____ was verified as corrected. _____ was notified that the licensee was no longer required to post Citation (see narrative).

[ ] Citation # _____ was not corrected (see narrative).

[ ] Narrative Report / Additional Information Attached.

[ ] Referral(s) to: _____

REPORT SUBMITTED BY Marsha A. Mehmel, RN, MPA **DATE OF REPORT** 11/27/13

[X] Approval for Issuance of License granted by : Donna Ortelle, RN, MSN (Supervisor / Title) 3/21/14 (Date)

ENTITY: Planned Parenthood of Southern New England - Danbury

DATE(S) OF VISIT: November 26, 2013 Page 2 of ___

LICENSING INSPECTION NARRATIVE REPORT

✓ An entrance conference was held.

Licensure inspection conducted onsite.

The following was inspected/reviewed:

- ✓ facility inspection
- ✓ personnel files
- ✓ quality assurance/clinical record review audit
- ✓ fire drill log/disaster plan
- ✓ agency policies and procedures
- ✓ clinical record review
- ✓ staff interviews
- ✓ in-service (training) log
- ✓ OSHA/infection control policies/procedures
- ✓ review of bylaws, including organizational chart
- ✓ CLIA certificate

✓ An exit conference was provided.

Violations of the Public Health Code of the State of Connecticut were identified as a result of this on-site inspection.

SIGNATURE Marsha A. Mehmel, RN, MPA
Nurse Consultant

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

March 21, 2014

Antonietta Schaalman, RN, Health Center Manager
Planned Parenthood Of Connecticut Inc - Danbury
44 Main Street
Danbury, CT 06810

Dear Ms. Schaalman:

An unannounced visit was made to Planned Parenthood Of Connecticut Inc - Danbury on November 26, 2013 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting a licensure inspection.

Attached is a the violation of the Regulations of Connecticut State Agencies and/or General Statutes of Connecticut which was noted during the course of the visit.

You may wish to dispute the violation and you may be provided with the opportunity to be heard. If the violation is not responded to by April 4, 2014 or if a request for a meeting is not made by the stipulated date, the violation shall be deemed admitted.

Please address the violation with a prospective plan of correction which includes the following components:

1. Measures to prevent the recurrence of the identified violation, (e.g., policy/procedure, inservice program, repairs, etc.).

2. Date corrective measure will be effected.

3. Identify the staff member, by title, who has been designated the responsibility for monitoring the individual plan of correction submitted for each violation.

If there are any questions, please do not hesitate to contact this office at (860) 509-7400.

Respectfully,

Loan Nguyen RN, SNC / DD

Loan Nguyen, RN, SNC
Supervising Nurse Consultant
Facility Licensing and Investigations Section

LN:mb

cc: Mary Bawza, COO

Phone: (860) 509-7400
Telephone Device for the Deaf (860) 509-7191
410 Capitol Avenue - MS # 12HSR
P.O. Box 340308 Hartford, CT 06134
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DATE OF VISIT: November 26, 2013

THE FOLLOWING VIOLATION(S) OF THE REGULATIONS OF CONNECTICUT STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES WERE IDENTIFIED

The following is a violation of the Regulations of Connecticut State Agencies Section 19-13-D51 Pharmaceuticals (4).

1. Based on observation of the clinic on 11/26/13, staff interview and policy review, the family planning clinic failed to follow agency policy on outdated pharmaceuticals. The findings include:
   a. Laboratory storage cabinets identified two (2) 15cc bottles of Tri-chloraceutic Acid Cauterant with an expiration date of 05/13.
   b. Nursing station: procedure cart identified one (1) 8 fluid ounce bottle of Providone-Iodine Solution with an expiration date of 08/13; medication cabinet identified two (2) Hemoccult Tape with Developer Kits, both with an expiration date of 11/12; Johnson and Johnson First Aid Kit identified three (3) 1/32 ounce packages of antibiotic ointment with an expiration date of 02/13.
   c. Examination Room #1 procedure cart identified 1 (one) 15ml bottle of Hemoccult Developer with an expiration date of 08/13 and in the storage cabinet 1 (one) 15ml bottle of Hemoccult Developer with an expiration date of 03/13.
   d. Examination Room #2 procedure cart identified one (1) 15ml bottle of Hemoccult Developer with an expiration date of 08/13.
   e. Blood drawing room at the hand washing sink identified 1 (one) 16 fluid ounce pump dispenser of Dial Antibacterial Liquid Soap with an expiration date of 07/20/13.
   f. Counseling room #1 identified in a wicker basket BASIC condoms: two (2) packages with an expiration date of 04/13, two (2) packages with an expiration date of 06/13 and one (1) package with an expiration date of 09/13.

Interview and review of clinic policy and observations during inspection of the clinic with the Health Center Manager on 11/26/13 failed to identify disposal of outdated pharmaceuticals, in accordance with clinic policy. The clinic policy directed the monthly monitoring of expiration dates of pharmaceuticals, followed by proper disposal of expired items.

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DEPT. OF PUBLIC HEALTH
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Rec accepted 04/21/14

Planned Parenthood®
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April 4, 2014

Ms. Loan Nguyen, RN, SNC
Supervising Nurse Consultant
Facility Licensing and Investigations Section
State of Connecticut
Department of Public Health
410 Capitol Avenue – MS #12HSR
PO Box 340308
Hartford, CT 06134

Re: Planned Parenthood of Southern New England – 44 Main Street, Danbury

Dear Ms. Nguyen,

This letter represents an acknowledgement of the violations found during the November 26, 2013 Danbury site visit and a Plan of Correction.

Violation: 1 a. thru e. – Failure to follow agency policy on outdated pharmaceuticals
Correction: A staff meeting was held on Tuesday, December 3, 2013 to review the organization's policies of accepting new inventory into the health center, marking expiration dates on products and monthly checks of existing inventory. The regularly scheduled clinic assistant staff review all existing inventory of all products used in the center on the first business day of the month.

Violation: 1 f. – Failure to follow agency policy on outdated pharmaceuticals specifically condoms placed in wicker baskets around the health center for patients to access.
Correction: A staff meeting was held on Tuesday, December 3, 2013 to review the organization's policies of reviewing medical inventory once a month to ensure that no expired medications are dispensed to clients. The regularly scheduled clinic assistant staff looks through each basket of condoms before placing new inventory into the basket on the first business day of the month.

These violations and agency policy have been reviewed with the Center Manager, Antonietta Schaalman. To ensure the products used in the health center are safe for public use, all products used are checked on a monthly basis. The Center Manager is responsible for monitoring the Plan of Correction and ensuring that it is upheld. I also intend to perform periodic inspections to ensure these corrections remain in force.

Thank you for your attention to this matter. Please do not hesitate to contact me with any questions or concerns.

Sincerely,

Kelly J. O'Brien
Regional Director

cc: Mary Bawza, COO

Providing answers. Honoring choices. Creating hope.