## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

(X1) LICENSE NUMBER 7003195 SURVEYOR ID 26992 (X3) DATE SURVEY COMPLETED

1/5/17

NAME OF FACILITY
Whole Women's Health of Peoria

STREET ADDRESS, CITY, STATE, ZIP CODE 7405 N. University, Peoria, Illinois, 61614

(X4) PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY SHOULD BE PRECEDED BY FULL REGULATORY IDENTIFYING INFORMATION)	PREFIX TAG	PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERRED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
T000	A complaint survey was conducted 1/2/17 through 1/5/17. The Pregnancy termination Center was not in compliance with Illinois Administrative Code: TITLE 77: PUBLIC HEALTH CHAPTER I: DEPARTMENT OF PUBLIC HEALTH SUBCHAPTER e: VITAL RECORDS PART 505 PREGNANCY TERMINATION REPORT CODE, as evidenced by:			So
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AGENCY MANAGER/REPRESENTATIVE'S SIGNATURE

TITLE Clinic Manager

DATE 2-1-2017

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T025	205.410 a) Equipment shall be in good working order and shall be available in numbers sufficient to provide quality patient care based on the types of procedures to be performed in the facility.  a) Monitoring equipment, suction apparatus, oxygen and related items shall be available within the surgical and postoperative recovery areas. Cardiac and pulmonary resuscitation equipment shall be available in all facilities.  This Regulation is not met as evidence by:		The Clinic Manager is responsible for ensuring that preventative maintenance is completed on all equipment. The Clinic Manager contacted the maintenance company while the IDPH inspector was on site. The technician explained it was an oversight during their previous visit to inspect all the clinic equipment. The Clinic Manager scheduled the technician to return to inspect the 3 suction machines on January 17, 2017. The inspection report is attached. The Clinic Manager will ensure all future preventative maintenance is completed per Whole Woman's Health policy by communicating to the maintenance company all the equipment that is to be inspected.	January 17, 2017
	Based on observation, document review and staff interview, it was determined the Pregnancy Termination Center (PTC) failed to ensure medical equipment is inspected and maintained to ensure safety. This has the potential to affect all patients receiving care from the PTC.		ii	
	Findings include:			1
	1. During a tour of the PTC conducted on 1/3/17 at 11:00 AM with the Director of Clinical Services (E #1), three (3) operating rooms had no documentation of preventative maintenance completed on any of the suction machines available for use.			
	2. Facility policy reviewed 1/5/17 at approximately 11:00 AM titled "Review Equipment maintenance records" states "Make sure annual maintenance is up-to-date on all medical equipment".			
	3. An interview with E #1 was conducted on 1/5/17 at 11:30 AM. E #1 stated that no answer concerning no documentation found for preventative maintenance for the suction machines.			
	MANAGER/REPRESENTATIVE'S SIGNATI IRE		DATE 1	

AGENCY MANAGER/REPRESENTATIVE'S SIGNATURE

TITLE Clinic Manager

DATE 2-1-2017

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T028	d) The facility shall have written procedures to assure the safety in storage and use of all narcotics and medications in accordance with State and federal law. This Regulation is not met as evidence by:  Based on observation, document review and staff interview, it was determined the Pregnancy Termination Center (PTC) failed to ensure outdated drugs were not available for use in patient care area. This has the potential to affect all patients receiving medications from the PTC.		The Clinic Manager is responsible for ensuring that expired medications are wasted per WWH policy. The expired medications in question were disposed of via the medical waste company per WWH policy. Oral medications will no longer be stored in the stock closet. All oral medications will be stored and locked in the medication cabinets in the recovery room. The Clinic Manager will conduct an in-service with staff to review the WWH policy and ensure that expired medications are disposed of per WWH policy.  Completion date: Medications moved to locked medication cabinets on January 6, 2017. In-service to be completed on February 1, 2017.	
	<ol> <li>Findings include:</li> <li>During a tour of the PTC conducted on 1/3/17 at 11:00 AM with the Director of Clinical Services (E #1), four boxes of equate (220 milligrams) 150 count with an expiration date of 11/16 were found in a patient medication closet.</li> <li>Facility policy reviewed 1/5/17 at approximately 11:00 AM states Medication Therapy Practices Medication Inventory and Audit "2. All expired medications and supplies will be disposed according to WWH wasting medication procedure".</li> <li>Wasting Medication "1. All expired non controlled medications should remain in the original bottle, and be disposed into the Medical RX disposal container. This container will be removed from the facility be a specialized contracted company for proper disposal".</li> </ol>			
	3. E #1 was interviewed during the tour and E#1 stated that the medication should have been removed per policy.		et	

AGENCY MANAGER/PERPECENTATIVE'S SIGNATURE

TITLE Clinic Manager

DATE 2-1-2017



## MULTIPLE EQUIPMENT FORM

Practice:

Whole Women's Health

Street: 7405 N University

City/ST/Zip: Peoria IL

Contact: Holly

E-mail/Fax hworsfold@wohlewomanshealth.com

Phone # 309-691-9019

City/ST/Zip:	T COITA IL				Dur	Ext		14	1		I			Next
Location	Equipment	Mfg	Model #	3/N	Cord				Current	Service	Action			PM
						micr	Gnd			Comments Pass/Fail	Item	Int		Due
OR 3	Suction Pump	Berkely	SV 10	6971	120	16	32	0	N/A		N	Α	N/A_	Jan-18
OR 2	Suction Pump		VC-II	4326	210	25	52	116	N/A		N	Α		Jan-18
OR 1	Suction Pump	Berkely	VC-II	2633	170	27	76	137	N/A	3	N	Α	N/A	Jan-18
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ITEMS NEEDING ACTION					
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	4.7				-
Requested In:	spection Interval			Test equipment used	5,9
Q = Quarterly		Technician:	Lucas Martin	Safety Analyzer	
S = Semi Annual					
A = Annual					
B =Biannual					
		Date:	01/10/2017		

Phone: 800-667-3570