Alabama Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	C5103	A. BUILDING: _____ B. WING _____	01/11/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
REPRODUCTIVE HEALTH SERVICES	811 SOUTH PERRY STREET MONTGOMERY, AL 36104

(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
L 000	INITIAL COMMENTS Licensure deficiencies were cited as a result of the on-site licensure inspection conducted 1/11/19. A plan of correction is required.	L 000		
L 100	ALABAMA LICENSURE DEFICIENCIES THE FOLLOWING ARE LICENSURE DEFICIENCIES AND REQUIRE A PLAN OF CORRECTION. This Rule is not met as evidenced by: 420-5-1-.04 Physical Environment. (6) Equipment and Supplies. (c) The facility must maintain a record for all equipment containing the following information: manufacturer, make, and model of the equipment; date of purchase of the equipment; any dates on which the equipment was removed from service for repair or maintenance and, if applicable, date tests, maintenance, or repairs performed on the equipment, including all routine inspection and maintenance performed by clinic personnel; the names and qualifications of the company and technician performing the tests, maintenance, or repairs; and the results of any tests, maintenance, or repairs. In addition, all manufacturer literature and information must be maintained in this record. If any of this information is not available for equipment purchased prior to October 2006, the fact of the missing information shall be noted in the equipment record, and equipment must be immediately tested and, if necessary, calibrated or repaired. (d) Medication and supplies which have deteriorated or reached their expiration dates	L 100		

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L 100	Continued From page 1 shall not be used for any reason. All expired or deteriorated items shall be disposed of promptly and properly. Each facility shall examine all stored medications and supplies no less frequently than once each month and shall remove from its inventory all deteriorated items and all items for which the expiration date has been reached.... Based on the review of Maintenance Log, tour of the facility, agency policy, and staff interview, it was determined the facility failed to: 1. Ensure electronic fans in patient care areas were inspected and maintained in Maintenance Log. 2. Ensure all expired supplies and medication(s) were removed and not available for use. 2. Ensure medications for single use were discarded after use. Findings include: Policy: Equipment Policy and Maintance Log Reviewed: 1/2/13 Policy: This policy is established to assure that all the equipment in use is in good working order and safe to use. Equipment will be inspected at least annually by an outside inspector to assure that it is maintained and calibrated. A monthly internal inspection will be done by the director or other designated staff member to assure that various other safety equipment and spot checks are performed.... All information regarding the equipment including manufacturer's instructions will be retained in the log book.	L 100		

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L 100	Continued From page 2 1. A tour of the facility was conducted on 1/10/19 at 10:00 AM, during the tour the following equipment was observed by the surveyor with no documentation of an inspection date and/or preventive maintance date: Lasko brand electronic desk top fan(s) in the Procedure room 1, Procedure room 2, and the Ultrasound room and a Lasko brand electronic Tower fan in the recovery room. Review of the Monthly Checklist of Equipment dated 1/2/19 and 9/4/18 revealed no documentation of the desk top fans located in procedure room 1, procedure room 2, or Ultrasound room. Further review of the Monthly Checklist of Equipment dated 1/2/19 and 9/4/18 revealed no documentation of the tower fan located in the recovery room. Review of the HERR Enterprises Facility Inspection dated 8/2/18 revealed no documentation of the desk top fans located in procedure room 1, procedure room 2, or Ultrasound room. Further review of the HERR Enterprises Facility Inspection dated 8/2/18 revealed no documentation of the tower fan located in the recovery room. During the tour of the facility the following expired supplies and/or medications were observed and available for patient use: Two Jelco IV catheters with expiration date of 10/18 in the Emergency Kit for the facility.	L 100		

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L 100	Continued From page 3 Four Atropine Sulfate 1 mg/ml with expiration date of 7/18 in the Emergency Kit for the facility. One 8 mm (millimeter) Disposable Flexible Curette with expiration date of 12/18 located in the third supply drawer of procedure room 1. During an interview conducted on 1/11/19 at 10:00 AM with Employee Identifier (EI) # 1, Registered Nurse, EI # 1 confirmed the above finding and verbalized the desk top fans and the tower fan have been placed in the patient care areas since the last inspection which took place on 8/2/18. 2. On 1/10/19 the facilities medication box was observed by the surveyor. EI # 2, Administrative Assistant, was present during observation. During the observation a single dose vial of Medroxyvogesterone Acetate was observed with opened date of 11/16/18 and "Xtra" (extra) written on the vial. During an interview conducted on 1/10/19 at 11:00 AM, EI # 2 verbalized that the single dose vial of Medroxyvogesterone Acetate was used to complete a injection when the dose in the first vial used was not enough for the total dosage to be administered. EI # 2 then verbalized the single dose vial was dated and labeled the "Xtra" for use in a similar situation. The facility failed to discard medication marked as single dose use after use.	L 100		