

State of GA, Healthcare Facility Regulation Division

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>044-287</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>09/24/2014</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CLIFF VALLEY CLINIC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1924 CLIFF VALLEY WAY, NE ATLANTA, GA 30329</b>
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(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
V 000	Opening Comments  A State re-licensure survey was conducted on September 22, 2014. Cliff Valley Clinic was not in compliance with Chapter 290-5-32 Rules and Regulations for Performance of Abortion After the First Trimester of Pregnancy and Reporting Requirements for All Abortions. The following deficiency was cited.	V 000		
V 030 SS=F	290-5-32-.03(1) Procedure for Filing Certificate of Abortion  In addition to the medical records requirements of Chapters 290-5-6 and 290-5-33 of the Rules and Regulations of the Georgia Department of Human Resources, the physician who performs the abortion shall file with the Commissioner of Human Resources or his designee, within ten (10) days after an abortion procedure is performed, a Certificate of Abortion. It is expressly intended that the privacy of the patient shall be preserved and, to that end, the Certificate of Abortion shall not reflect the name of the patient but shall carry the same facility number, or other identifying number reflected on the patient's medical records. A duplicate of the Certificate of Abortion will be made a part of the patient's Medical record and neither the aforesaid duplicate certificate nor the Certificate of Abortion which is filed with the Commissioner or his designee shall be revealed to the public unless the patient executes a proper authorization which permits such a release or unless the records must be made available to the District Attorney of the Judicial Circuit in which the hospital or health facility is located as provided by Code Section 16-12-141 (d) of the Official Code of Georgia Annotated.  Repealed: F. Dec. 18, 2012; eff. Jan. 7, 2013.	V 030		

State of GA Inspection Report LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE <b>10/08/14</b>
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V 030	<p>Continued From page 1</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and staff interview the facility failed to ensure that the Certificate of Abortion was filed with the Department for two (2) patients (#4 and #7) of ten (10) patients.</p> <p>Findings include:</p> <p>Review of the policy manual revealed no evidence of a Policy addressing filing of Certificate of Abortion.</p> <p>Review of patient #4, revealed the date of abortion as [REDACTED] however there was no evidence that the Certificate of Abortion was filed with the Department within the regulatory timeframe of ten (10) days.</p> <p>Review of patient #7, revealed the date of abortion as [REDACTED] however there was no evidence of that the Certificate of Abortion was filed with the Department within the regulatory timeframe of ten (10) days.</p> <p>Interview conducted with the facility's Clinical Manager on 9/23/2014 revealed that the certificate was a two page document and that the second page which contained the date of filing was inadvertently omitted and could not be retrieved.</p>	V 030		