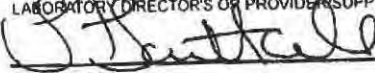


State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/13/2018</b>
NAME OF PROVIDER OR SUPPLIER <b>PLANNED PARENTHOOD SOUTH ATLANTIC-CHARLOTTE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2964 HYDRAULIC ROAD CHARLOTTESVILLE, VA 22901</b>		
(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
T 000	Initial Comments  An unannounced First Trimester Abortion Facility Biennial Licensure Inspection was conducted July 12, 2018 and July 13, 2018 by two (2) Medical Facilities Inspectors from the Office of Licensure and Certification, Virginia Department of Health.  The facility was not in compliance with 12 VAC-412 Regulations for the Licensure of Abortion Clinics (Amended 3/22/2017).	T 000	An automatic lock system has been installed which will ensure that any records temporarily placed in the room will be appropriately secured.  The controlled substances within the room were in fact double locked with the controlled substances inside a locked box within a locked cabinet.	07/20/18
T 360	12 VAC5-412-310 Record Storage  Provisions shall be made for the safe storage of medical records or accurate and eligible reproductions thereof according to applicable federal and state law, including the Health Insurance Portability and Accountability Act (42 USC § 1320d et seq).  This RULE: is not met as evidenced by: Based on observations and staff interview, facility staff failed to ensure that medical records were stored in a secure area.  Findings include:  Three (3) patient records containing personal information were observed lying on top of a shelf just inside the door where medications were also being stored. The records had prescriptions for oral contraceptives (OCP's) and Tylenol #3 lying on top of them, and were accessible to anyone who opened the door, which was not locked.  An interview was conducted with Staff Member (SM)#1 on 7/13/18 at 11 30 a.m. and a discussion was held related to the controlled substances not being stored under double lock, and medical	T 360		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE



TITLE

Vice President, Patient Services

(X6) DATE

10/5/18

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/13/2018</b>
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T 360	Continued From Page 1  records with unsigned prescriptions lying on the records. SM #1 stated "You are right, that door should be kept locked, I'm sure they got busy and didn't think about locking the door behind them. That is an easy fix".  The concern was reviewed again with SM #1 at the exit conference on 7/13/18 at 12:30 p.m.	T 360		

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