

Division of Health Service Regulation

REC'D AUG 06 2014

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ab0015	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/09/2014
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NAME OF PROVIDER OR SUPPLIER PIEDMONT-CAROLINA MEDICAL CLIN	STREET ADDRESS, CITY, STATE, ZIP CODE 2425 RANDLEMAN RD GREENSBORO, NC 27406
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dtb 8/8/14 approved

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E 131	<p>.0302 PERSON IN AUTHORITY</p> <p>10A NCAC 14E .0302 Person in Authority The governing authority shall designate a person to have authority and responsibility for the administrative and professional functions of the clinic.</p> <p>This Rule is not met as evidenced by: Based on observation, nursing staffing schedules review, procedure log review and staff and physician interviews, the facility's governing authority failed to provide oversight of nursing functions by failing to ensure there was one registered nurse (RN) on duty in the clinic at all times when patients are in the facility and failing to obtain a physician's order for medications administered.</p> <p>The findings include:</p> <ol style="list-style-type: none"> The facility failed to ensure there was one registered nurse (RN) on duty in the clinic at all times when patients are in the facility for 59 of 97 procedure days. <p>~ cross refer to 10A NCAC 14E .0307 Nursing Service</p> <ol style="list-style-type: none"> The facility staff failed to obtain a written physicians order for medications administered for 3 of 20 patient records reviewed (#2, 3, 14) <p>~ cross refer to 10A NCAC 14E .0312 Medications and Anesthesia</p>	E 131	<p>E131</p> <p>The medical director will be the person of authority to monitor the administrative and professional functions of the clinic.</p> <p>This has been corrected. A RN is now scheduled and will be present on all procedure days and will be present. Staff has been informed that if RN is not available procedures are not to be performed. We will supply what ever documentation the State requires to confirm this is occurring.</p> <p>Receptionist will be responsible for making schedule for RNs and keeping these records for review and monitoring by the State. Schedules and time sheet will be keep by the office manager. Medical director shall be responsible for insuring that procedures are not performed if RN is not available and will audit these records monthly to insure compliance.</p> <p>Pre operative orders will be prepared by the medical director and signed by physicians working at the clinic. This has been completed as of June 1, 2014</p>	6/1/2014
E 147	<p>.0306(B) PERSONNEL RECORDS</p> <p>10A-14E .0306 (b) Job Descriptions: (1) The facility shall have a written description which describes the duties</p>	E 147		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *Ron MD* TITLE *medical Director* (X6) DATE *7/16/2014*

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E 147	<p>Continued From page 1</p> <p>of every position.</p> <p>(2) Each job description shall include position title, authority, specific responsibilities and minimum qualifications. Qualifications shall include education, training, experience, special abilities and license or certification required.</p> <p>(3) The facility shall review annually and update all job descriptions, and shall provide a current copy to each employee or contractual employee assigned to the position.</p> <p>This Rule is not met as evidenced by: Based on personnel file review and staff interview the facility failed to review annually and update all job descriptions in 5 of 5 employees personnel records reviewed (#1, #2, #3, #4 and #5).</p> <p>The findings include:</p> <p>1. Personnel file review of RN staff #1 revealed the staff member was a registered nurse and had worked at the facility since 1992. Review of job descriptions located in RN staff #1's personnel file included the following: Counselor and Recovery Room Nurse. Review of the job descriptions revealed no documentation of an annual review of the job descriptions. File review revealed the last annual evaluation and review of the job descriptions was in 2012.</p> <p>Interview with administrative staff on 05/09/2014 at 1640 revealed there was no documentation available of an annual review of the job descriptions.</p> <p>2. Personnel file review of RN staff #2 revealed the staff member was a registered nurse and had</p>	E 147	<p>E147</p> <p>The Medical Director is responsible for review of all job descriptions and for insuring that these are reviewed annually and keep up to date.</p> <p>Annual evaluations of personnel will be done and completed by September 1 of each year. These will be keep on file for review.</p> <p>LPN will prepare and keep these files up to date for review by the medical director.</p> <p>A review and updating is now under way of every job at the clinic.</p> <p>The update will include job descriptions listing, qualifications, education, training, experience, special abilities and licenses or certifications required.</p> <p>This has been completed as 7/15/2014</p>	7/15/2014

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E 147	<p>Continued From page 2</p> <p>worked at the facility since 1989. Review of job descriptions located in RN staff #2's personnel file included the following: Counselor and Recovery Room Nurse. Review of the job descriptions revealed no documentation of an annual review of the job descriptions. File review revealed the last annual evaluation and review of the job descriptions was in 2012.</p> <p>Interview with administrative staff on 05/09/2014 at 1640 revealed there was no documentation available of an annual review of the job descriptions.</p> <p>3. Personnel file review of lab staff #3 revealed the staff member was a Lab Technician and had worked at the facility since 2000. Review of job descriptions located in lab staff #3's personnel file included the following: Lab Technician. Review of the job description revealed no documentation of an annual review of the job description. File review revealed the last annual evaluation and review of the job description was in 2012.</p> <p>Interview with administrative staff on 05/09/2014 at 1640 revealed there was no documentation available of an annual review of the job descriptions.</p> <p>4. Personnel file review of LPN staff #4 revealed the staff member was a licensed practical nurse and had worked at the facility since August 1977. Review of job descriptions located in LPN staff #4's personnel file included the following: receptionist, counselor, lab technician, sterilization technician, procedure room nurse and recovery room nurse. Review of the job descriptions revealed no documentation of an annual review of the job descriptions. File review revealed the last annual review of the job</p>	E 147	See above	

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E 147	<p>Continued From page 3</p> <p>descriptions was 2012.</p> <p>Interview with administrative staff on 05/09/2014 at 1640 revealed there was no documentation available of an annual review of the job descriptions.</p> <p>5. Personnel file review of administrative staff #5 revealed the staff member was an administrative staff member. Review of job descriptions located in administrative staff #5's personnel file included the following: receptionist, procedure room nurse, environmental technician and management. Review of the job descriptions revealed no documentation of an annual review of the job descriptions. File review revealed the last annual review of the job descriptions was 2012.</p> <p>Interview with administrative staff on 05/09/2014 at 1640 revealed there was no documentation available of an annual review of the job description.</p>	E 147	<p>See above</p> <p>E 150. The Medical Director is responsible for insuring that health records are up to date and in compliance with State and local regulations. LPN shall be responsible for collecting and filing such records for review by the Medical Director and State.</p> <p>This will be reviewed on annual basis by the Medical Director by September 1 annually.</p>	7/15/2014
E 150	<p>.0306(E) PERSONNEL RECORDS</p> <p>10A-14E .0306 (e) Employee and contractual employee records for health screening, education, training and verification of professional certification shall be available for review by the Division.</p> <p>This Rule is not met as evidenced by: Based on personnel file review and staff interview the facility failed to obtain annual TB status assessment for 2 of 5 employees reviewed.</p> <p>The findings include:</p>	E 150		

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E 150	<p>Continued From page 4</p> <p>1. Personnel file review of RN staff #2 revealed the staff member was a registered nurse and had worked at the facility since 1989. Review of health record did not reveal a TB assessment or TB test for 2013. Review revealed the last assessment was in February 2012.</p> <p>Interview with administrative staff on 05/09/2014 at 1640 revealed there was no documentation of TB assessment after 2012 available. Interview revealed RN staff #2 works at another facility and the assessment would have been done there, but confirmed the documentation was not available in the facility's personnel file.</p> <p>2. Personnel file review of lab staff #3 revealed the staff member was a Lab Technician. Review of health record revealed lab staff #3 had previously had a positive TB skin test result and subsequently needed assessment and potentially chest xray. Review revealed the last TB assessment documented was in October 2012.</p> <p>Interview with administrative staff on 05/09/2014 at 1640 confirmed there was no TB assessment completed for lab staff #3 after 2012.</p>	E 150	<p>A data base has been created for confirmation of TB testing as required. All employees required to have TB testing have been instructed to bring in these test results immediately so they can be placed in there files as well as the master file.</p> <p>All employees who job requires a license or certification have been asked to provide their current certificates immediately if they are not in our possession and these will be keep in the employee's file. The LPN will be responsible for collecting and holding these records for annual review by the Medical Director This has been completed on 7/15/2014 and reviewed annually by the Medical Director on or before September 1 each year.</p>	
E 151	<p>.0307 NURSING SERVICE</p> <p>10A-14E .0307 (a) There shall be a minimum of one registered nurse with experience in post-operative or post-partum care who is currently licensed to practice professional nursing in North Carolina on duty in the clinic at all times when patients are in the facility.</p> <p>(b) There shall be supporting personnel sufficient to meet patient</p>	E 151	<p>E151</p> <p>The Medical Director is responsible for insuring that a RN is present on all procedure days. He has communicated to staff that no procedures are to be performed without RN present on site.</p>	6/1/2014

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E 151	<p>Continued From page 5</p> <p>needs and to provide safe patient care.</p> <p>This Rule is not met as evidenced by: Based on observation, nursing staffing schedules review, procedure log review and staff and physician interviews, the facility failed to ensure there was one registered nurse (RN) on duty in the clinic at all times when patients are in the facility for 59 of 97 procedure days.</p> <p>The findings include:</p> <p>Interview on 05/07/2014 at 1030 with LPN staff #4 revealed the facility scheduled abortion procedures on Monday afternoon, Thursday morning, Friday afternoon and Saturday morning.</p> <p>Interview on 05/08/2014 at 1055 with LPN staff #4 revealed there was no registered nurse working in the clinic on 05/08/2014. Interview revealed the registered nurse that was scheduled for 05/08/2014 had called out that morning around 0855 due to a conflict with another job. Interview with the staff member revealed she was unable to get another registered nurse to replace her. The staff member stated "It happens from time to time. (The physician) is going to watch over the recovery room and do procedures."</p> <p>Observation on 05/08/2014 at 1135 revealed the following staff working in the clinic on 05/08/2014: Physician A, administrative staff #5 (office manager), LPN staff #4 (LPN), LPN staff #6 (LPN) and lab staff #3 (Lab technician). Observation at 1135 revealed Physician A was in the procedure room with LPN staff #6 and Patient #34 who was having a surgical abortion procedure. LPN staff #4 was in the recovery room with two patients (#36 and #35). Administrative</p>	E 151	<p>Receptionist is responsible for making out the RN schedules and keeping these records as well as time sheets so as to confirm that an RN has been present on procedure days. Procedures are to be canceled and rescheduled if RN is not present. Staff has been informed at there will be no exceptions to this rule. Medical Director will do weekly reviews to insure compliance. This has been completed.</p>	

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E 151	<p>Continued From page 6</p> <p>staff #5 was in the front office reception area giving post procedure instructions to a patient that had just had a surgical procedure completed. Lab staff #3 (lab technician) had already left the clinic for the day. Patient #31 was sitting outside the lab area waiting to go to the procedure room for her surgical procedure. Observation at 1140 revealed Physician A came out of the procedure room, washed his hands in the sink and immediately entered another procedure room where patient #31 had been moved. At 1145 LPN staff #6 brought Patient #34 into the recovery room (now three patients in the recovery room with LPN staff member #4). Observation revealed LPN staff #6 left the clinic at 1151 after all the procedures for the day had been completed. Observation revealed Physician A left the clinic at 1212. Observation at 1212 revealed three patients remained in the recovery room with LPN staff #4. Observation revealed the last patient (#31) left the clinic at 1240 (33 minutes after Physician A left the clinic).</p> <p>Review of the procedure log for 05/08/2014 revealed a total of six surgical abortion procedures were performed on 05/08/2014.</p> <p>Interview on 05/08/2014 at 1205 with Physician A revealed he was made aware around 1030 that there was no registered nurse in the clinic. The physician stated "I was here to supervise the LPNs and I am immediately available." The physician explained that the surgical procedures normally lasted from two to seven minutes and he could be available in the recovery room if needed. The physician stated "If there were complications, I would take care of it. I don't think I was putting patients at risk today. An RN would not have made a difference. I felt patients were safe, absolutely. I have surgery scheduled at 1230. I</p>	E 151	See above	

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E 151	<p>Continued From page 7</p> <p>need to leave."</p> <p>Telephone interview on 05/08/2014 at 1224 with Physician B revealed he was the owner of the clinic. Interview revealed the physician had not been made aware of the failure to have a registered nurse (RN) on 05/08/2014 until the surveyor asked to speak with him. Physician B stated "Sometimes we have difficulty getting RNs, especially on Thursdays." The physician stated he always stayed until all the patients had left the clinic. The interview revealed the RNs had full time jobs and it was difficult getting RNs into the clinic because of the conflict with their other jobs. Physician B stated "I understand that we have a problem on Thursday. It has been going on at least six months. It is a chronic problem.... I know it is a problem. I will fix it. We just won't have procedures when there is no nurse here. I know it is a requirement."</p> <p>Telephone interview on 05/08/2014 at 1248 with RN staff #2 revealed she is a registered nurse and was scheduled to work at the facility on 05/08/2014. Interview with the nurse revealed she works at a local hospital in a management role and is "always on call." Interview revealed the nurse was called to work at the hospital and unable to work at the facility today (05/08/2014). The nurse stated she called in around 0900 to report that would not be in to work at the facility. The nurse stated she normally worked at the facility every other Thursday and this was the "first time that I can recall calling in."</p> <p>Review of facility staff work schedules from November 1, 2013 through May 9, 2014 revealed there was no RN on the premises on the following dates: November 4, 7, 9, 11, 14, 18, 21 and 25, 2013 (eight days); December 2, 5, 9, 12, 13, 14,</p>	E 151	See above	

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E 151	<p>Continued From page 8</p> <p>16, 19, 21, 23, 27, 28, and 30, 2013 (thirteen days); January 6, 9, 13, 16, 20, 23, 25, 27 and 30, 2014 (nine days); February 1, 3, 6, 8, 10, 17, 20, 24 and 27, 2014 (nine days); March 3, 6, 10, 13, 17, 20, 24, and 27, 2014 (eight days); April 3, 7, 10, 12, 17, 18, 24, 25 and 28, 2014 (nine days); and May 1, 5 and 8, 2014 (three days).</p> <p>Review of daily procedure logs from November 1, 2013 through May 9, 2014 revealed a total of sixteen procedure days in November 2013; sixteen procedure days in December; seventeen procedure days in January 2014; fifteen procedure days in February; sixteen procedure days in March; twelve procedure days in April; and five procedure days in May. Review of the daily procedure logs revealed surgical abortion procedures were conducted on the following dates: November 4, 7, 9, 11, 14, 18, 21 and 25, 2013; December 2, 5, 9, 12, 13, 14, 16, 19, 21, 23, 27, 28, and 30, 2013; January 6, 9, 13, 16, 20, 23, 25, 27 and 30, 2014; February 1, 3, 6, 8, 10, 17, 20, 24 and 27, 2014; March 3, 6, 10, 13, 17, 20, 24, and 27, 2014; April 3, 7, 10, 12, 17, 18, 24, 25 and 28, 2014; and May 1, 5 and 8, 2014.</p> <p>The review revealed there was no registered nurse in the facility when procedures were occurring on 8 of 16 procedure days in November 2013; 13 of 16 procedure days in December 2013; 9 of 17 procedure days in January 2014; 9 of 15 procedure days in February 2014; 8 of 16 procedure days in March 2014; 9 of 12 procedure days in April 2014; and 3 of 5 procedure days in May, 2014 for a cumulative total of 59 of 97 (61%) procedure days without a registered nurse in the facility.</p> <p>Interview on 05/08/2014 at 1530 with</p>	E 151	See above	

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E 151	Continued From page 9 administrative staff #5 revealed she coordinates the staff work schedules. The staff member stated she makes the calendar out about a week prior to the procedures the following week. The staff member stated she writes down the staff names on the calendar. Interview revealed RN staff #7 (RN) works on Fridays and RN staff #1 works on Saturdays. Interview revealed RN staff #2 was called on 05/07/2014 to work on 05/08/2014. Interview revealed she has only had one day (March 31, 2014) in the past six months that she had an RN scheduled to work on a Monday or Thursday. The staff member reviewed the staff work schedules and confirmed that there was no RN on the premises for 59 of 97 days when procedures were completed at the facility.	E 151	See above	
E 159	.0312(A) MEDICATIONS AND ANESTHESIA 10A-14E .0312 (a) Medication (1) No medication or treatment shall be given except on written order of a physician. (2) Medications must be administered in accordance with the Nurse Practice Act of the State of North Carolina, and must be recorded in the patient's permanent record. This Rule is not met as evidenced by: Based on closed medical record review and staff and physician interviews, the facility staff failed to obtain a written physicians order for medications administered for 3 of 20 patient records reviewed (#2, 3, 14) The findings include:	E 159	E159 The Medical Director is the responsible party for preparing pre and post op orders. Pre operative orders have been created to insure patient's do not receive any medications without a physician's order. All pre and post op orders are to be signed by the ordering physician. This will be reviewed weekly by LPN to insure all orders have MD signatures.	7/1/2014

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E 159	<p>Continued From page 10</p> <p>1. Review of the clinic record of Patient #14 revealed a 15 year-old female presented to the clinic on 03/01/2014 for a surgical abortion. The review revealed an ultrasound which showed she was "too early" and the plan was for the patient to return later. Review revealed "Cipro 500 mg (1) po (by mouth)" and "Naproxen 500 mg (1) po" were administered at 0900 by LPN staff #4. The review further revealed a blank "Doctor's Post-Op Orders" sheet; no written order for medications and no physician signature.</p> <p>Interview with LPN staff #4 revealed these medications are routinely given to everyone and physicians write the order at the time of the procedure. Interview revealed the patient did not have the procedure so the written orders were not done. Further interview revealed there was no written standing order for these two medications to be administered pre-procedure.</p> <p>Interview with Physician A on 05/08/2014 at 1015 am revealed "there is a standing order for pre-op meds. Every patient gets them." Further interview revealed the standing order "may not be in writing" and "we sign these at the time of the procedure." Continued interview acknowledged an understanding that "we need to have a written order" before medications are administered.</p> <p>2. Review of the clinic record of Patient #3 revealed a 29 year old female presented to the clinic on 03/13/2014 for a medical abortion. Review revealed LPN staff #4 administered "Cipro 500 mg (1) po" and "Naproxen 500 mg 1 po" at 0955. Review revealed the Physician order sheet was left blank, there were no written orders for the two medications and there was no physician signature.</p>	E 159	<p>See above</p> <p>Education of Staff</p> <p>All changes to the policy and procedure manual for the clinic will be placed both in the main Policy and and Procedure Manual and in a separate note book in the recovery room that will be readily available to the staff for review on a monthly basis so as to educate the staff concerning any new changes in procedures, policies or job responsibilities.</p> <p>This note book will be entitled "Policy and Procedure Updates"</p>	7/15/2014

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ab0015	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/09/2014
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NAME OF PROVIDER OR SUPPLIER PIEDMONT-CAROLINA MEDICAL CLIN	STREET ADDRESS, CITY, STATE, ZIP CODE 2425 RANDLEMAN RD GREENSBORO, NC 27406
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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
E 159	<p>Continued From page 11</p> <p>Interview with LPN staff #4 on 05/08/2014 at 1550 confirmed the patient received the medications and no written physician order was obtained.</p> <p>3. Review of the clinic record of Patient #2 revealed a 22 year old female presented to the clinic on 01/30/2014 for a medical abortion and on 02/06/2104 for a follow-up surgical abortion. Review revealed the patient returned again on 03/06/2014 with a positive pregnancy test. Review revealed LPN staff #4 administered "Cipro 500 mg (1) po" and "Naproxen 500 mg 1 po" on 03/06/2014 at 0928. Review revealed an ultrasound was done and the physician determined the patient had "...complete abortion..." and therefore no procedure was performed. Further review failed to reveal a written physician's order for the medications administered. The "Doctor's Post-Op Orders" sheet was blank, with no written orders and no physician signature.</p> <p>Interview with LPN staff #4 on 05/09/2014 at 1500 confirmed the medications were administered to Patient #2. Interview revealed the patient returned with a planned procedure. Interview revealed the procedure was not done, but the medications were administered. Interview confirmed there was no written physician order for the medications. Continued interview revealed the process of medication administration changed on 05/09/2014 to give the medications after the procedure and after a written physician order is obtained.</p>	E 159	See above	