<u>Division</u>	of Health Service Re	egulation (1997)			FURM APPROVED
	NT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA (DENTIF/CATION NUMBER;	4	E CONSTRUCTION	(X3) DATE BURVEY COMPLETED
		AB0007	B. WING		10/09/2014
NAME OF	PROVIDER OR SUPPLIER	STREET AL	DORESS, CITY, 5	STATE, ZIP CODE	CAL
HALIBA	IRK WOMEN'S CLINIC	4040 CH	LESPIE STRI		V
		FAYETTE	VILLE, NC 2		00/05/2015
(X4) ID PREFIX TAG	EACH DEFICIENC	NTEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECT (EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPRO DEFICIENCY)	LD BE COMPLETE
E 165	.0314 CLEANING (EQUIPMENT	OF MATERIALS AND	E 165		
	testing log review, of staff interview, the f of infection by falling	patient care shall I or I or Use for different Ining, handling, Ulies and equipment Ssion of infection			
!	The findings includ	e :			
	Autoclave", not date order to assure ade surgical equipment 3M Attestation Indicarequired. Testing of performed once each recorded in the qual the manufacturer of technician and supermanager"	y policy, "Attestation of bd, revealed, "POLICY: In quate sterilization of essential by the autoclave, testing with extors and incubator is the primary autoclave will be the week and results of the testity control book (provided by the testing kit) by the surgical ervised by the facility on			
	10/09/2014 revealed equipment procession two procedure room	tour of the facility on I 2 autoclaves in the ing room located between the s. Review of the autoclave the last documented Attest			

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

Sal Mmeso

PRINTED: 11/17/2015 FORM APPROVED

Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA (X3) DATE SURVEY STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION **IDENTIFICATION NUMBER:** COMPLETED AND PLAN OF CORRECTION A. BUILDING: AB0007 10/09/2014 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 1919 GILLESPIE STREET HALLMARK WOMEN'S CLINIC FAYETTEVILLE, NC 28306 PROVIDER'S PLAN OF CORRECTION SUMMARY STATEMENT OF DEFICIENCIES (X5) COMPLETE DATE (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX PREFIX CROSS-REFERENCED TO THE APPROPRIATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) E 165 Continued From page 1 E 165 performed once each week and results of the test recorded in the quality control book (provided by the manufacturer of the testing kit) by the surgical technician and supervised by the clinic manager...". Observation during tour of the facility on 10/09/2014 revealed 2 autoclaves in the equipment processing room located between the two procedure rooms. Review of the autoclave testing log revealed the last documented Attest (biological testing) was done on 03/22/2014 (6 months, 17 days ago). Observation of the Attest spore vials revealed the vials expired in November 2006 (7 years, 11 months ago). Interview on 10/09/2014 at 1000 with the surgical technician revealed the testing had not been done since 03/22/2014 because "we haven't done a lot of procedures". Interview revealed the autoclave is used weekly to sterilize surgical equipment. Interview on 10/09/2014 at 1015 with the facility administrator confirmed the autoclave had not been tested weekly per the facility's policy. NC00093287

Division of Health Service Regulation STATE FORM

EE7Y11

Incubator Monitoring Inspection- Control Testing

Date	Time in	Date	Time	Color	Initails
	incubator		Removed	Results	
10/13/2014	10:40	10/15/2014	10:40	yellaw	mJ.
10/20/2014	10:40	10/22/2014	10:40	willow	mJ
10/27/2014	10:40	10/28/2014	10:40	Yeilaw	mj
11/3/2014	10:40	11/5/2014	10:40	valian	MJ
11/10/2014	10.30	11/12/2014	10.50	Wellaw	2005
11/17/2014	In 30	11/19/2014	10:40	Vellors	1117
11/24/2014	10.40	11/26/2014	10.50	vellow	M5
12/1/2014	10.30	12/3/2014	1050	VP//Ud	MJ
12/8/2014	10 30	12/10/2014	621	VP//ou	MT
12/15/2014	10 40	12/17/2014	10 5.0	Trelling	MY
12/22/2014	10 %	12/24/2014	10 40	Vellow	MT
12/29/2014	10 30	12/31/2014	10 40	Vellow	MJ
1/5/2015	1000.	1/7/2015	1030	wallow	m\
1/12/2015	10 00	1/14/2015	1030	vellous	MJ
1/19/2015	1000	1/21/2015	16 38	Vollay	m3
1/26/2014	10 00	1/28/2015	10 30	1/0//00	inT
2/2/2015	1000	2/4/2015	1000	16/140	MS
2/9/2015	1000	2/11/2015	1/1 30	Vol/as	MT
2/16/2015	10 00	2/18/2015	10 30	Vollen	mī

Find Caparing

Autoclave Weekly Cleaning Log

(To be completed once each week on both autoclaves)

Date Cleaned	Autoclave	Time of Day Cleaning Completed	Initals
12/15/2014	Tuttnauer 2340M	Q y asso	M3
12/15/2014	Rîtter M9	0 15	M T
12/22/2014	Tuttnauer 2340M	9 am	ma
12/22/2014	RitterM9	DI DE SM	mb
12/29/2014	Tuttnauer 2340M	9 8000	m 5
12/29/2014	Ritter M9	G is non	MS
01/05/2015	Tuttnauer 2340M	900 pm	MJ
01/05/2015	Rîtter M9	930 sm	ω
01/12/2015	Tuttnauer 2340M	9 30 Am	<i>A</i> ()
01/12/2015	Ritter M9	900 Am	ms
01/19/2015	Tuttnauer 2340M	9 AM	mi
01/19/2015	Ritter M9	430 Dem	mJ
01/26/2015	Tuttnauer 2340M	G30 Am	mJ
01/26/2015	Ritter M9	gam	0.15
02/02/2015	Tuttnauer 2340M	Gam	MJ
02/02/2015	Ritter M9	930	mit
02/09/2015	Tuttnauer 2340M	gan	m5
02/09/2015	Ritter M9	930	NJ

Autoclave Weekly Cleaning Log

(To be completed once each week on both autoclaves)

Date Cleaned	Autoclave	Time of Day Cleaning Completed	Initals
10/13/2014	Tuttnauer 2340M	9.30	MI
10/13/2014	Ritter M9	980 am	mJ
10/20/2014	Tuttnauer 2340M	9.30	M Z
10/20/2014	RitterM9	9.80 am	m J
10/27/2014	Tuttnauer 2340M	9.30	<i>D</i> .0
10/27/2014	Ritter M9	9.00 am	mJ
11/3/2014	Tuttnauer 2340M	9:30	m.5
11/3/2014	Ritter M9	9am	ms
11/10/2014	Tuttnauer 2340M	9 Am	MJ
11/10/2014	Ritter M9	9 30 AM	nn J
11/17/2014	Tuttnauer 2340M	gam	m 3
11/17/2014	Ritter M9	10 30	MJ
11/24/2014	Tuttnauer 2340M	gram	mJ
11/24/2014	Ritter M9	1030	_ m _ Z
12/1/2014	Tuttnauer 2340M	gam	m I
12/1/2014	Ritter M9	10 00	m \(\)
12/8/2014	Tuttnauer 2340M	9 Am	m l
12/8/2014	Ritter M9	1000	M3
			1.5

Feral Copping

Attest Biological Monitoring Inspection

03/02/2015		02/23/2015	02/16/2015		02/09/2015	02/02/2015	,	01/26/2015	01/19/2015	49.	01/12/2015	01/05/2015		12/29/2014	12/22/2014		12/15/2014	12/08/2014		12/01/2014		Date
Ritter M9	2340M	Tuttnauer	Ritter M9	2340M	Tuttnauer	Ritter M9	2340M	Tuttnauer	Ritter M9	2340M	Tuttnauer	Ritter M9	2340M	Tuttnauer	Ritter M9	2340M	Tuttnauer	Ritter M9	2340M	Tuttnauer		Sterilizer
0 57 K)	こなら)	C WAN	7/TV		かない	1 1	>	24	Cl A AN	> -	(A) FANS	Q p	-	0.50) (3) (3)	9000	GRESS		Autoclave	Time Placed in
08 10		ر ا ا	2000		C 70	930	5,	ار الم	920	()U	,	930	939	b	10 00	10.00	·	000	930	>	Incubator	Time Placed in
03/04/2015		02/25/2015	02/18/2015		02/11/2015	02/04/2015		01/28/2015	01/21/2015		01/14/2015	01/07/2015		12/31/2014	12/24/2014		12/17/2014	12/10/2014		12/03/2014	The state of the s	Date
Durin/e	DU10/10		a/(timily	Dury) a		اله تاديماله	11/2 ATT	> ~	punole	Durplie		aldund,	Durol &		Jours/e	DW.VO/A	, ,	purple	Purple			BI Color
- Z	111	<u> </u>	アア	MI		120	MC	\	Pr. X		7	33	NO PE	-	MJ	3	is J	ZI	N. C.			initials

Attest Biological Monitoring Inspection

Date	Sterilizer	Time Placed In	Time Placed in incubator	Date	BI Calor	Initials
10/13/2014	Tuttnauer			10/15/2014		
	2340M	10 0.33	10:40		Duroly	<i>p</i>) <u>u</u>
10/13/2014	Ritter M9	_	10:40	10/15/2014	0 1000 10	した
10/20/2014	Tuttnauer	- 1	-	10/22/2014	1 . 1	
	2340M	0	(O) F		DC1 >014	3
10/20/2014	Ritter M9	-	(0) 40	10/22/2014	0400	DM
10/27/2014	Tuttnauer			10/29/2014	,	
	2340M	10 ct 30	10 HD		ourola	きょ
10/27/2014	Altter M9	100		10/29/2014	Dungle	ma
11/3/2014	Tuttnauer			11/5/2014	1 1	
	2340M	10 000	10:40	-	Dintelle	mJ
11/3/2014	Ritter M9	100m	(O; 4D	11/5/2014	Durole	mix
11/10/2014	Tuttnauer			11/12/2014		
	2340M	1630	10.50		Durble	T.m.
11/10/2014	Ritter M9	10 30	1050	11/12/2014	burale	ma
11/17/2014	Tuttnauer			11/19/2014	1	
	2340M	10.30	(0) 50		0 32 YECE	7
11/17/2014	Ritter M9	iduo	04:01	11/19/2014	Aja wyc	ラム
11/24/2014	Tuttnauer			11/26/2014	- 4	
	2340M	1 030	10.40		Ouxale	えん
11/24/2014	Ritter M9	?: >ン	چ د ک	11/26/5014) T	

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Autoclave Cleaning Protocol

WARNING: The cleaning solution contains alkaline ingredients. Avoid contact with skin, clothing and eyes. In the event of contact, flush with water. If irritation continues, see M.D. DO NOT ingest.

Equipment Needed: Gloves, protective goggles, apron, cleaning solution and distilled water.

Autoclaves must be cleaned weekly

- 1.) Drain and refill the reservoir with clean distilled water.
- 2.) Add one ounce of Speed Clean to the inside of a cool chamber.
- 3.) Run one unwrapped cycle (shortest cycle) at 270 degrees for 6 minutes.
- 4.) Instruments should not be sterilized while cleaning the autoclave.
- 5.) Drain the reservoir and allow the autoclave to cool.
- 6.) Remove the trays, tray rack and tray plate. Hand wash with water and Speed Clean using a soft cloth. Also wash the strainer mounted on the exhaust hole at the bottom of the chamber. Wipe out the inside of the chamber also using Speed Clean and a soft cloth. Be careful to NOT touch the heating element located inside on the back panel, towards the bottom. DO NOT use steel wool or brushes, they will damage the autoclave.
- 7.) Re-install components in the chamber. Make sure the tray is pushed to the back of the chamber.
- 8.) Run a full cycle with no solution, distilled water only.
- 9.) Drain water and refill with distilled water.

Autoclave is now ready for use

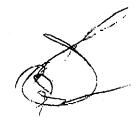
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Autoclave Testing Protocol

Autoclaves must be tested weekly

- 1.) Grab a new Biological Indicator (BI) and write the following info on the sterilizing strip located on the indicator:
 - -Machine being cleaned (brand)
 - -Load #
 - -Date
- 2.) Place (BI) inside of autoclave with first cleaning cycle.
- 3.) After BI has remained in autoclave for ONLY one cycle, remove BI and allow to cool before the vial is snapped/crushed
- 4.) Place vial in incubator and allow it to sit for at least 48 hours.
- 5.) After 48 hours, remove BI from incubator and log color on Autoclave Testing Log Spreadsheet. When running correctly, BI should turn purple/brown. If BI turns any other color except for purple/brown, bring results to the attention of Management.
- 6.) Discard BI appropriately
- 7.) Repeat weekly

Autoclave is now ready for use



Incubator Testing Protocol

Incubator control must be tested weekly

- 1.) Grab an unused Biological Indicator(BI) and snap/crush it. This breaks the glass ampule that is inside the plastic vial of the BI. DO NOT run BI through autoclave for incubator testing protocol.
- 2.) Place crushed vial inside incubator and let sit for at least 48 hours before reading results.
- 3.) After 48 hours read results. Results should be yellow. If BI turns any other color except for yellow, bring results to the attention of Management.
- 4.) Discard BI appropriately.
- 5.) Repeat weekly to insure incubator is working properly.



16/28/14