

Utah Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: UT000535	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/13/2015
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NAME OF PROVIDER OR SUPPLIER METRO HEALTH CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 160 S 1000 E SUITE #120 SALT LAKE CITY, UT 84102
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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
G 000	Initial Comments On 10/8/15 a relicensure survey was conducted. The facility was surveyed according to R 432-600 rules for abortion clinics and a class I deficiency was cited.	G 000		
G 985	R432-600-15(6)(c) Emergency and Disaster (c) Fire drills and documentation shall be in accordance with R710-4, State of Utah Fire Protection Board. The actual evacuation of patients during a drill is optional. This STANDARD is not met as evidenced by: THIS IS A CLASS II DEFICIENCY: Based on record review and interview, it was determined fire drills and documentation were not in accordance with R710-4, State of Utah Fire Protection Board. Findings Include: On 10/08/15, a review of the facility fire drills for the past year was conducted. Two fire drills were documented as part of an inservice on 03/19/15 and 09/17/15. On 10/08/15, an interview was initiated with the clinic manager, who acknowledged the two fire drills were part of an inservice. A review of the fire drill rule was conducted. The clinic manager verbalized understanding that fire drills were not to be held as part of an inservice and must be conducted and documented independent from inservice training.	G 985		
G2415	R432-600-30(3) Water Supply	G2415		

11-13-15
 POC
 Acceptable
 Complete
 date
 11-20-15

Your Agency Name LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	<i>[Signature]</i>	TITLE	VP Clinical Programs of Health	(X6) DATE	3/15
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STATE FORM

6899

WV5M11

If continuation sheet 1 of 2

NOV 10 2015

Bureau of Health Facility Licensing,
Certification and Resident Assessment

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Utah Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: UT000535	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____		(X3) DATE SURVEY COMPLETED 10/13/2015
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G2415	<p>Continued From page 1</p> <p>(3) Hot water temperature controls shall automatically regulate temperatures of hot water delivered to plumbing fixtures used by patients. The facility shall maintain hot water delivered to patient care areas at temperature between 105 degrees and 120 degrees F.</p> <p>This STANDARD is not met as evidenced by: THIS IS A CLASS I DEFICIENCY:</p> <p>Based on observation and interview, it was determined the facility was not maintaining hot water delivered to patient care areas at a temperature between 105 degrees and 120 degrees.</p> <p>Findings include:</p> <p>On 10/8/15, at 4:00 PM, the temperature of hot water in front bathroom waiting area and the back recovery room bathroom was tested with the clinic manager present and found to be 137 Farenheit. The Clinic Manager acknowledged the water temperature was not safe for patient care areas.</p> <p>A CLASS I DEFICIENCY WAS ISSUED ON 10/8/15 AND AN ACCEPTABLE PLAN OF CORRECTION WAS OBTAINED FROM THE FACILITY MANAGER. SEE ATTACHED COPY.</p>	G2415		

Your Agency Name
STATE FORM

6899

WV5M11

If continuation sheet 2 of 2

UTAH DEPARTMENT OF HEALTH
BUREAU OF HEALTH FACILITY LICENSING CERTIFICATION AND
RESIDENT ASSESSMENT
CLASS ONE/REPEAT DEFICIENCY STATEMENT

Class One
Repeat Deficiency

Facility: Metro Health Clinic 0535

Survey/ Investigation Date: 10/8/15 Follow-up Date: 10/22/15

Rule Citation: R 432-600-30 (3)

Observation: Based on observation & interview, it was determined the facility was not maintaining hot water delivered to patient care areas at temperatures between 105 degrees & 120 degrees.
On 10/8/15, at 4:00pm, the temperature of hot water in front bathroom waiting area and the back recovery room bathroom was tested with the clinic manager present and found to be 137°F.
The Clinic Manager acknowledged the water temperature was not safe for patient care areas.

Plan of Correction: contacted building manager to find out where the clinic water heater is located. Building manager states there are several water heaters for all businesses and would prefer to change water temperature himself. Building Manager will change temp tomorrow 10/9/15 morning. Veronica Galindo clinic manager will check water temp tomorrow morning and the next 3 business days after that monthly.

Completion Date: 10/22/15

Surveyor: Aileen Watkins RN Date: 10/8/15

Provider: V Galindo Date: 10/8/15



Planned Parenthood Association of Utah

Dear Ms. Richins;

This is Planned Parenthood's response to Meto Health Center's recent survey and the Statement of Findings.

In response to the finding related to: R432-600-30(3): G2415; Water Supply, I am attaching the documentation of water temperatures for 2 weeks. I have also included the revised policy and procedures for Water Supply issues at the clinic.

The Plan of Correction related to the R432-600-15(6) (c) Emergency Disaster has been completed as follows:

Finding: Fire drills and documentation were not in accordance with R710-4.

Plan: The clinic manager revised the clinics Emergency Procedure policy and procedure to include: Fire drills and disaster drills must be done twice a year and must be separate. The fire drill schedule is June and December and the Disaster Drills will be conducted in March and September. The revision date noted is 10/2015.

If you any additional information, please contact me.

Sincerely,


Penny Davies

Planned Parenthood Association of Utah
Metro Health Center
160 South 1000 East #120
Salt Lake City, Utah 84102

October 9, 2015

On October 8, 2015 the Department of Health came to Metro Clinic to do an inspection on the facility. It was determined that the water temperature in the facility was too hot. The water temperature should be 105-120 degrees F but the water temperature of in the clinic was 137 degrees F.

October 9 –Water temperature was adjusted at 9am. Water temperature tested at 9:35am: 122 degrees F, water temperature retested at 4pm, 119 degrees F

October 12 – Water temperature tested at 4:45pm, 137 degrees F. Temperature readjusted.

October 13 – water temperature tested 10:00am, 115 degrees F.

October 14 – Water temperature tested at 3:25pm, 117 degrees F.

October 15 – Water temperature tested at 11:15am, 120 degrees F.

October 16 – Water temperature tested at 9:00am, 125 degrees F. Temperature readjusted.

October 19 – Clinic close

October 20 - Water temperature tested at 11:00am, 120 degrees F

October 21 – Water temperature tested at 4:00pm, 117 degrees F

October 22 – Water temperature tested at 1:20pm 116 degrees F

October 23 – Water temperature tested at 2:15pm, 115 degrees F

October 24 – Water temperature tested at 10:40am, 114 degrees F

Water will be tested once a week for a month to ensure temperature is within range of 105-120 degrees F.

2. Cylinders will be stored in well ventilated area and be checked routinely to assure proper working order.

Metro Health Center

Policy: Workspaces will provide proper foot-candles of lighting to assure adequate light.

Rule: R432-600-29

1. At least 30 foot-candles of light shall illuminate reading, pt care and working areas in pt treatment areas and not less than 20 foot-candles of light shall be provided in the rest of the room. R432-600-29 (1)
2. All accessible storeroom, stairway, exit and entrance areas shall be illuminated by at least 20 foot-candles of light at floor level. R432-600-29 (2)
3. All corridors shall be illuminated with a minimum of 20 foot-candles of light at floor level. R432-600-29 (3)
4. Other areas shall have the following lighting:
 - a. Procedure rooms- 50 foot candles
 - b. Medication preparation areas- 50 foot-candles
 - c. Charting areas- 50 foot-candles
 - d. Reading rooms- no such rooms
 - e. Laundry areas- no such rooms
 - f. Bathrooms (no showers) - 20 foot-candles R432-600-29 (4)(a)(b)(c)(d)(e)(f)

Metro Health Center

Policy: Plumbing and drainage facilities shall be maintained in compliance with the Utah Plumbing Code. R432-600-30 (1)

Rule: R432-600-30

Water Supply

1. Requirements of Utah Plumbing code and Utah Public Drinking Water Regulations were met when the building was built and passed inspection. R432-600-30 (2)
2. Hot water temperatures controls are set and controlled by the building manager. Hot water tanks are set between 105 and 120 degrees F. R432-600-30 (3)
 - a. Water temperature shall be tested monthly to ensure that hot water temperatures are within range.
 - b. Water temperature shall be tested using an instant read thermometer and recorded in the monthly Facility Checklist.
 - c. In the case that hot water temperature is out of range staff shall alert Clinic Manager immediately or alert building manager to set hot water tank to the correct temperature.
3. There shall be grab bars at each toilet used by patients. R432-600-30 (4)
4. Toilets and hand washing facilities shall be maintained in operating condition. Any plugged system must be reported to facility manager and repaired as soon as possible. R432-600-30 (5)

Metro Health Center

Policy: The clinic staff will follow emergency evacuation procedures to assure all occupants safety in case of an emergency. Fire drills and Disaster drills must be done twice a year and must be separate. Regular trainings will take place to assure familiarity with situations. Emergency drill documentation must include date, time, participant names and brief description of the emergency situation and outcome.

Fire drill Schedule: June and December

Disaster drill Schedule: March and September

Rule: R432-600-15

1. Metro Health Center has the responsibility to assure the safety and well-being of patients in the event of an emergency or disaster. An emergency or disaster may include but is not limited interruption of public utilities, explosion, fire, earthquake, bomb threat, or any other event. **R432-600-15(1)**
2. The clinic manager shall be in charge of facility operations during any significant emergency. If not on the premises, the manger shall may every reasonable effort to get to the facility or alert administration staff (VP Clinical Programs, IT, CEO, etc) so they can get to the facility to relieve subordinates and take charge during the emergency. **R432-600-15(2)**
3. PPAU along with Metro staff will have a developed plan, coordinated with state and local officials, to respond to emergencies. **R432-600-15(3)**
 - a. The plan is in writing and shall be distributed/or made available to all staff to assure prompt and efficient implementation. All new staff receives training during orientation. **R432-600-15(3)(a)**
 - b. The emergency plan shall be reviewed and updated at least annually by administrative staff **R432-600-15(3)(b)**
4. The names and telephone numbers of administration and clinic staff and emergency responders shall be maintained and readily accessible to all staff **R432-600-15(4)**
5. The emergency plan will include the following: **R432-600-15(5)** see plan (page 2-3) and PPAU security procedures (pages 4-54)
 - a. Evacuation of occupants to a safe place within the facility or to another location **R432-600-15(5)(a)** see
 - b. Delivery of emergency care and services to facility occupants when staff is reduced due to the emergency **R432-600-15(5)(b)**
 - c. The person(s) with decision making authority for fiscal, medical and personnel management **R432-600-15(5)(c)**
 - d. An inventory of available personnel, equipment, and supplies and instructions on how to acquire additional assistance. **R432-600-15(5)(d)**
 - e. Assignment of personnel to specific tasks during an emergency **R432-6 R432-600-1500-15(5)(e)**
 - f. Names and numbers of on call providers and staff shall be available **R432-600-15(5)(f)**
 - g. Written incident reports need to be sent to administration offices **R432-600-15(5)(g)**
6. There is a written fire emergency and evacuation plan developed for Metro Health Center **R432-600-15(6)**