

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/16/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15C0001005	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 11/19/2019
NAME OF PROVIDER OR SUPPLIER SURGICAL CENTER OF NEW ALBANY			STREET ADDRESS, CITY, STATE, ZIP CODE 2201 GREEN VALLEY RD NEW ALBANY, IN 47150		
(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) COMPLETION DATE	
Q 000	INITIAL COMMENTS This visit was for a federal recertification survey of an ambulatory surgery center. Facility number: 005386 Dates: 11/18/19 to 11/19/19 QA: 11/25/19	Q 000			
Q 084	GOVERNING BODY RESPONSIBILITIES CFR(s): 416.43(e) The governing body must ensure that the QAPI program- (1) Is defined, implemented, and maintained by the ASC. (2) Addresses the ASC's priorities and that all improvements are evaluated for effectiveness. (3) Specifies data collection methods, frequency, and details. (4) Clearly establishes its expectations for safety. (5) Adequately allocates sufficient staff, time, information systems and training to implement the QAPI program. This STANDARD is not met as evidenced by: Based on document review and interview, the governing body (GB) failed to ensure that the Quality Assurance Performance Improvement (QAPI) program specified data collection methods, frequency and details for performance measures of care and services furnished in the center for 9 services/functions (housekeeping, contracted laboratory, maintenance, nursing, security, discharge, transfer, medication errors and response to patient emergencies) in 1 facility.	Q 084		1/15/20	

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

TITLE

(X6) DATE

01/15/2020

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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Q 084	Continued From page 1 Findings include: 1. Review of the document titled Quality Assessment Performance Improvement Plan, approved 1/23/19, lack documentation of specified data collection methods, frequency and details for performance measures for monitoring of housekeeping, contracted laboratory, maintenance, nursing, security, discharge, transfer, medication errors and response to patient emergencies. 2. Review of Staff/QAPI meeting minutes dated 6/20/19, 5/20/19, 4/20/19, 3/27/19, 2/27/19, 1/23/19, 12/26/18, 11/28/18, 10/31/18, 9/26/18, 8/29/18, 8/29/18, 7/30/18, 6/26/18, 5/23/18, 4/27/18, and 3/28/18 lacked documentation of data and/or data collection for housekeeping, contracted laboratory, maintenance, nursing, security, discharge, transfer, medication errors and response to patient emergencies. 3. On 11/19/19, between approximately 1:00 p.m. and 2:30 p.m. A1, Administrator, verified the QAPI Plan did not provide for data collection methods and that no methods with frequency and detail had been established for monitoring of housekeeping, contracted laboratory, maintenance, nursing, security, discharge, transfer, medication errors and response to patient emergencies.	Q 084			
Q 242	INFECTION CONTROL PROGRAM CFR(s): 416.51(b) The ASC must maintain an ongoing program designed to prevent, control, and investigate infections and communicable diseases. In	Q 242		11/20/19	

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Q 242	<p>Continued From page 2</p> <p>addition, the infection control and prevent program must include documentation that the ASC has considered, selected, and implemented nationally recognized infection control guidelines.</p> <p>This STANDARD is not met as evidenced by: Based on document review, observation and interview, the center failed to ensure implementation of nationally recognized infection control guidelines for sterilization of instruments as observed for 16 sterile packaged ratcheted instruments in 1 facility.</p> <p>Findings include:</p> <ol style="list-style-type: none"> Review of the policy titled Handling, Care, and Storage of Surgical Supplies and Instruments, reviewed 1/23/19, indicated the following: Post Procedures: In routine cases, all hinged instruments shall be left in an open position Cleaning of Surgical Instruments: With hinges open, instruments are placed in the ultrasonic cleaner or instrument washer... Review of documentation from the AAMI, Association for the Advancement of Medical Instrumentation, website at https://www.aami.org/standards/index.aspx, October 2018 News publication titled Asked & Answered: Peel Pack Instrument Storage, indicated that the requirement was that ratcheted instruments should be left unlatched for sterilization. On 11/18/19, between approximately 11:30 AM and 12:00 PM, during facility tour, in the presences of A1, Administrator, the following was 	Q 242			

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Q 242	Continued From page 3 observed: In the sterile supply room were plastic totes of sterile supplies. Noted among see through peel pack sterile packaged supplies were 4 towel clips ratcheted closed in their sterile package, 6 scissors ratcheted closed in their sterile package, 4 sponge sticks ratcheted closed in their sterile package and 2 Allis clamps ratcheted closed in their sterile package. 4. On 11/18/19, between approximately 11:30 AM and 12:00 PM, A1 indicated the center follows AAMI standards of practice for the instrument sterilization and that their policy is to keep all ratcheted instruments in the open positions for packaging and sterilization.	Q 242			