

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: <u>10000000X</u>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/31/2018
NAME OF FACILITY Stone Valley Surgical Center		STREET ADDRESS, CITY, STATE, ZIP CODE 123 Main Street, Anywhere, USA 66000		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY SHOULD BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERRED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
Q 0241	<p>416.51(a) Sanitary Environment</p> <p>The ASC must provide a functional and sanitary environment for the provision of surgical services by adhering to professionally acceptable standards of practice.</p> <p>This STANDARD is not met based on observation, review of manufacturer's directions for use (DFU), and interview. The ASC failed to provide a functional and sanitary environment through adherence to acceptable standards of practice. Specifically, reprocessing staff did not follow the manufacturer's Directions For Use (DFU) for McKesson Multi-Enzymatic Cleanser. Therefore, it was not possible to determine if instruments were adequately precleaned prior to high-level disinfection.</p> <p>Findings follow:</p> <ol style="list-style-type: none"> 1. Observation in the Dirty Instrument Room on 6/15/18 at 10:15 a.m. revealed the Scope Technician at the sink running water to cover the endoscope and dispensing one and one-half pumps of McKesson Multi-Enzymatic Cleanser. The sink had no lines to designate 1 gallon of water. There was no measuring device used to dispense the McKesson Multi-Enzymatic Cleanser. 2. Review of McKesson Multi-Enzymatic Cleanser's directions for use on 6/15/18 at 10:20 a.m. revealed "Manual Cleaning: Use ½ to 1 ounce of McKesson Multi-Enzymatic Cleanser per one gallon of water for general purpose cleaning." 3. During an interview with the Scope Technician on 6/15/18 at 10:26 a.m., she confirmed she had not measured: <ol style="list-style-type: none"> a. The amount of water added. b. The amount of cleanser dispensed during the cleaning of the endoscope. 	Q0241	<p>Director of Endoscopy Services and Infection Control RN spoke to the individuals involved for immediate remediation, purchased measuring cups, and added a gallon-marker line to the sink in the Dirty Instrument Room.</p> <p>In-service training for all scope technicians for manual cleaning procedures was also provided. The DFUs were laminated and posted above the sink for staff to have at all times. In addition, ongoing observational audits for all staff were immediately implemented.</p> <p>Director of Endoscopy Services and Infection Control RN initiated weekly monitoring set up to identify and remediate any further incidences. Monitoring will continue for 2 months to ensure compliance.</p>	06/15/2018
<p>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 reverse for further 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.</p>				
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE			TITLE	(X6) DATE

For Training Purposes Only

PLAN OF CORRECTION RESPONSES

TAG #	ACTION	TITLE OF RESPONSIBLE PERSON FOR THE PLAN OF CORRECTION IMPLEMENTATION	COMPLETION DATE
Q0241 Page 12	Director of Endoscopy Services and Infection Control RN spoke to the individuals involved for immediate remediation, purchased measuring cups, and added a gallon-marker line to the sink in the Dirty Instrument Room.	Director of Endoscopy Services and Infection Control RN	6/14/2017
	In-service training for all scope technicians for manual cleaning procedures was also provided. In addition, ongoing observational audits for all staff were immediately implemented.	Director of Endoscopy Services and Infection Control RN	6/15/17
	Director of Endoscopy Services and Infection Control RN initiated weekly monitoring set up to identify and remediate any further incidences.	Director of Endoscopy Services and Infection Control RN	Initiated 6/20/2017 Ongoing