Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	55C0001076	07/10/2019
Name of Provider or Supplier	**Street Address, City, State**	
Plastic Surg Assoc Of Orange County	1310 Stewart Drive, Suite 610, Orange, CA	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
E0033	Methods for Sharing Information CFR(s): 416.54(c)(4)-(6) 403.748(c)(4)-(6), 416.54(c)(4)-(6), 418.113(c)(4)-(6), 441.184(c)(4)-(6), 460.84(c)(4)-(6), 441.184(c)(4)-(6), 460.84(c)(4)-(6), 482.15(c)(4)-(6), 483.73(c)(4)-(6), 483.475(c)(4)-(6), 484.102(c)(4)-(5), 485.68(c)(4), 485.625(c)(4)-(6), 485.727(c)(4), 485.920(c)(4)-(6), 491.12(c)(4), 494.62(c)(4)-(6). [(c) The [facility] must develop and maintain an emergency preparedness communication plan that complies with Federal, State and local laws and must be reviewed and updated at least every 2 years [annually for LTC facilities]. The communication plan must include all of the following: (4) A method for sharing information and medical documentation for patients under the [facility's] care, as necessary, with other health providers to maintain the continuity of care. (5) A means, in the event of an evacuation, to release patient information as permitted under 45 CFR 164.510(b)(1)(ii). [This provision is not required for HHAs under 484.102(c), CORFs under 485.68(c)] (6) [(4) or (5)]A means of providing information about the general condition and location of patients under the [facility's] care as permitted under 45 CFR 164.510(b)(4). *[For RNHCIs at 403.748(c):] (4) A method for sharing information and care documentation for patients under the RNHCI's care, as necessary, with care providers to maintain the continuity of care, based on the written election statement made by the patient or his or her legal representative. *[For RHCs/FQHCs at 491.12(c):] (4) A means of providing information about the general condition and location of patients under the facility's care as permitted under 45 CFR 164.510(b)(4). This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to ensure complete emergency preparedness communication plan. This was evidenced by failing to

	provide documents to show procedures for the release of patients' information in the event of a disaster. This could result in the facility not being prepared for a disaster and cause possible harm to patients, staff, and visitors. Findings: During record review with the Medical Assistance on 7/10/19, the EPP plan was reviewed. At 12:14 p.m., the facility's EPP failed to address the method for the release of patients' information and location {under 45 CFR164.510(b)(4)} in the event of an emergency. During an interview with the Nursing Director, she stated verbally how the facility would release patient information in the event of an emergency, but stated there was no policies and procedures documented in the EPP.