

My name is Melody Meanor. I worked for Planned Parenthood of the Rocky Mountains as a Health Center Manager of Family Planning in Casper, Wyoming, from October 10th 2011 – June 15th 2012. I then moved to Delaware where I served as the Health Center Manager of Family Planning at Planned Parenthood of Delaware, Wilmington, DE, from June 25th 2012 – September 14th 2012.

I have a Bachelor's Degree in Social Work and a Master's Degree in Health Care Administration. I have a 6 year management background enabling me to work with various populations in a multitude of organizational settings. In addition, I have two years of doctoral studies in the field of Health Care Services. I served as part of the management team at both the Wyoming Planned Parenthood clinic and at Planned Parenthood of Delaware.

At both jobs with Planned Parenthood clinics, my job was to manage family planning services – the portion of the Planned Parenthood activities that did not relate to abortions. This included the distribution of pharmaceutical contraception, community education on birth control, pap smears, breast screenings, and other operational responsibilities. As a manager, I was assigned oversight of entry level staff members. These entry level staff members that I supervised are called "health center assistants" in Planned Parenthood terminology. Unfortunately, Planned Parenthood of Delaware failed to properly train these health care assistants.

My immediate supervisor at Planned Parenthood of Delaware was Gloria Johnson, the Vice President of Medical Services. Further up the chain was Dr. Carole Meyers, the Medical Director of Planned Parenthood of Delaware. Both of these women had serious deficiencies as managers. When I arrived at the Planned Parenthood of Delaware, patient charts were totally disorganized. There was no system in place to follow up with patients on important medical issues. Gloria Johnson often encouraged untrained health care assistants to take unethical actions with patient charts. These included covering up timely charting of events by documenting follow ups outside of the policy guidelines set and determined by Planned Parenthood of Delaware. I was asked to falsify employee records and write up employees for things that I had not seen based on hearsay, along with other unethical requests.

One area I attempted to correct was inadequate protection of patient confidentiality and privacy. At the beginning of my employment, I struggled to correct negative patient care violations that involved HIPAA violations. Untrained health center assistants simply did not understand the importance of protecting patient privacy. My attempts to train and discipline health center assistants were significantly undermined by Gloria Johnson.

I quickly began to advocate for a more ethical approach to handling patient charts and the implementation of a series of protocols to ensure appropriate patient follow up. Gloria Johnson rejected these requests for reforms. Prior to my resignation, I personally warned Ruth about the unethical behavior of Gloria Johnson. However, Ruth refused to take any action to protect patients from the disorganization and unethical actions of Gloria Johnson. The Medical Director, Dr. Carole Meyers should have put a stop to these sorts of behaviors. However, at the same time as she was serving as the Medical Director of Planned Parenthood of Delaware, Dr.

Meyers was simultaneously employed by the Planned Parenthood Federation of America as an auditor inspecting other Planned Parenthood affiliates. Dr. Meyers spent much of her time out of the office of Planned Parenthood of Delaware, which was very unsafe for patients, attempting to ensure that other Planned Parenthood affiliates were keeping patients safe. Dr. Meyers should have spent her time ensuring the safety of the patients of Planned Parenthood of Delaware. Dr. Meyers did not resign from Planned Parenthood of Delaware until months after I left. To my knowledge, however, she still serves as an auditor for the Planned Parenthood Federation of America.

Generally, health center assistants are not required by Planned Parenthood of Delaware to have medical credentials and/or prior health care work experience. More specifically, the minimal education requirement for employment as a Health Center Assistant is a high school diploma or equivalent. As a result, it is essential that health care assistants receive rigorous on-the-job training by Planned Parenthood of Delaware. This training should consist of a combination of classroom-based and hands-on job training to ensure their ability to understand and accurately perform the job.

A failure to receive proper training and appropriate supervision by Planned Parenthood of Delaware can result in serious mistakes by health care assistants which may compromise overall patient health care. This would not be the fault of the health care assistant, but rather of Planned Parenthood of Delaware management and/or clinical team personnel who have failed to properly train these health care assistants once they are on the job.

Most of the abuses I observed at Planned Parenthood of Delaware stemmed from the fact that untrained health care assistants were assigned serious medical responsibilities that they were not trained to perform. Within the first few weeks of my employment by Planned Parenthood of Delaware, I suggested implementing a health care assistant comprehensive training program. These suggestions were rejected by management.

The failure to properly train health care assistants was aggravated by greater demands for services than Planned Parenthood of Delaware was able to meet given the number and quality of the staff. Because Pennsylvania has much stricter parental consent laws than Delaware, Planned Parenthood of Delaware received many underage patients from Pennsylvania in addition to the Delaware women who received abortions.

As a result, a great deal of Planned Parenthood of Delaware resources had to be redirected to assist in abortion services. The untrained health care assistants hired to focus on family planning were diverted to help with abortions. Furthermore, newly hired health care assistants were discouraged from asking questions and were confronted with a backlash of verbal abuse.

There were a number of occasions in the few short months that I worked at Planned Parenthood of Delaware that I requested guidance and training for health center assistants. These requests for training were repeatedly disregarded and denied by my immediate supervisor, Gloria Johnson, the Vice President of Medical Services for Planned Parenthood of Delaware.

While I quickly recognized that health care assistants were not being properly trained, it was only much later in my employment that I subsequently discovered that Planned Parenthood of Delaware was using an expired set of medical guidelines and procedures published by the Planned Parenthood Federation of America. Planned Parenthood of Delaware had never updated to account for the revisions and improvements offered in subsequent guideline protocols. Even then, there was no effort to train health care assistants even on the expired protocols Planned Parenthood of Delaware relied on.

The second reason I have come forward is to support the prior testimony and statements of Joyce Vasikonis and Jayne Mitchell- Werbrich. Although I only worked for Planned Parenthood of Delaware for three months, I frequently worked with Joyce Vasikonis during this time and less so with Jayne Mitchell-Werbrich.

I was offended when Planned Parenthood of Delaware attempted to discredit the testimony that Joyce and Jayne brought forward a few months ago. That is because I saw many of the same systematic kinds of patient endangerment and abuse that Jayne and Joyce spoke of in their testimony.

In its effort to discount the testimony of Joyce and Jayne, Ruth Lytle Bartleby, CEO of Planned Parenthood of Delaware, suggested that the mistreatment of patients during abortion procedures exposed by Jayne and Joyce had gotten mixed up in abortion politics. That is simply not true. Jayne and Joyce are both pro-choice. And so am I. What we are all concerned about is patient safety – something that Planned Parenthood of Delaware does not seem to be concerned with.

Furthermore, while Planned Parenthood of Delaware acknowledged that there had been problems in the abortion services it had provided, Planned Parenthood of Delaware representatives contended that there were no problems in its handling of pap smears, breast examinations, contraception, and family planning. This is false and Planned Parenthood of Delaware should be held accountable for its inability to properly manage preventive health services including contraception and health screenings.

Despite the best efforts of people like Joyce and Jayne, the level of care afforded by Planned Parenthood of Delaware to patients seeking pap smears and contraception was just as dangerous and negligent as the level of care provided to patients seeking abortions. That is because Planned Parenthood of Delaware was more concerned about its bottom line profits than it was about the care and treatment of women.

When I started in June, there were 200 STD tests that had come back positive for chlamydia, gonorrhea, or both. The tests had been run between November 2011 and May 2012. This was a very serious issue. If left untreated, gonorrhea and chlamydia can cause long-term effects on the reproductive system in men and women that can lead to painful conditions and/or sterilization. Some of these 200 patients came in for further checkups. When they did, I was able to tell them about their positive tests. They were usually quite angry that they had not been called by Planned Parenthood. I spent a great deal of time placating these patients. To this day, I believe that the women who tested positive for chlamydia and/or

gonorrhea between November 2011 and May 2012 have never been told about their positive STD tests. Additionally, chlamydia and gonorrhea are extremely contagious if left untreated. It is reasonable to believe that these 200 women may have spread these STDs far and wide in Wilmington. Many of the victims may not realize that the fact that Planned Parenthood never warned these patients is the reason for the spread of this disease.

Another very serious problem was pap smears and colposcopies. When a woman has an abnormal cellular change in her pap smear, she typically is recommended to get a second pap smear or a colposcopy depending on the grade of the cellular change. The colposcopy determines if the woman has cellular change that, if left untreated, can lead to cervical cancer. When I arrived at Planned Parenthood, I discovered that there were 87 colposcopies of women who had had an irregular pap smear that had not been properly filed in patient charts or reported to the patient. Gloria Johnson took possession of these patient records and they disappeared. Gloria Johnson reacted to this failure to protect any of these patients who may have been at risk from cervical cancer by announcing that Planned Parenthood of Delaware would no longer do any colposcopies. I do not believe Gloria Johnson ever filed the colposcopies or followed up with those patients. I do not know how many of the 87 colposcopies needed to return for follow up services in family planning. I also do not know how many of these 87 patients may have tested positively for alarming cellular change.

Planned Parenthood of Delaware CEO Ruth Lytle-Barnaby was quoted in a June 6, 2013 article in the Delaware News Journal that, "During this time we were audited or reviewed almost a dozen times by various agencies as well as by our national accreditation team. This process has profoundly strengthened our agency." This statement implies that Planned Parenthood Federation of America had no reason to believe that Parenthood of Delaware had failed to meet Federation accreditation expectations. This is false. Planned Parenthood Federation of America was aware of many of the deficiencies at Planned Parenthood of Delaware and failed to take appropriate action.

During its reviews of Planned Parenthood of Delaware, Planned Parenthood Federation of America found a number of violations, including, a Class 1 violation for a failure to properly train staff; an unspecified Class 1 violations in clinical services for failure to have a proper system in place for following up with women who had irregular results on breast examinations; and a Class 1 violation for using legally expired patient consent forms.

I saw that there was no process for collecting data and reporting productivity. I witnessed untrained health center assistants improperly billing for patient services. I was also told by the business department that Planned Parenthood of Delaware was violating its grant guidelines. The business department told me that grants given for a specific purpose had been "borrowed from" to cover payroll expenses. There is a prohibition in many laws that prevent certain grants from being used to pay for the staff salaries of surgical staff. But the business department apparently did not feel the need to strictly follow grant guidelines.

Planned Parenthood of Delaware received criticism from Planned Parenthood Federation of America for having unclear protocols on dealing with patients who had HIV and

the correct handling of pharmaceutical drugs. And the Federation also noted that Dr. Liveright did not wash his hands in between patients.

Abortions were a significant source of revenue at Planned Parenthood of Delaware. And, unfortunately, in several ways, Planned Parenthood of Delaware treated abortion much more as a business transaction than as a service to clients. At the request of Gloria Johnson, I was essentially placed in the role of a health center assistant or direct care supporter relating to abortions. Abortion is a very serious decision. It is advisable to make sure that a woman understands her right to abortion services and has made a decision on her own if she wants an abortion to be performed. It is a violation of her right to choice if she is pressured by someone else into an abortion. It would be wrong for her to be pressured by her boyfriend, her parents, or her Planned Parenthood counselor. I was very determined to ensure that the women truly wanted the abortion. Otherwise, regret and other serious negative emotional consequences can result.

This was not the general practice at Planned Parenthood of Delaware. Often, Planned Parenthood would rush through properly explaining the pros and cons of receiving an abortion, which can result in pushing women towards making the life changing decision to have an abortion. When counseling, I took time with the patient and made sure she really wanted the abortion. Gloria Johnson criticized me for this practice contending it took too much time.

Another serious problem I encountered with abortion was the administration of the drug RhoGAM. If a woman is Rh negative, that means that she lacks a specific kind of protein in her blood. Rh negative women need the drug RhoGAM after any birth, miscarriage, or abortion. If an Rh negative woman does not get RhoGAM within seventy two hours of the abortion, then any time she conceives an Rh positive baby in the future, her own immune system will attack it. This can result in severe, even fatal, problems to the baby. The negative effects of an Rh negative woman not receiving RhoGAM within the first seventy two hours can seriously impact future pregnancies for the rest of her life

Planned Parenthood of Delaware left the responsibility for making sure that Rh negative women received the RhoGAM they needed to health care assistants. These health care assistants were not properly trained on how important it was that the women receive RhoGAM.

Many of the women who receive abortions are poor. What should have happened is that Rh negative patients scheduling an abortion should have been told in advance that in addition to the cost of the abortion there may be an additional \$120 cost for a shot called RhoGAM that they absolutely needed. That way, the women could work to obtain the money she needed for the procedure including the RhoGAM shot before the appointment.

Instead, Planned Parenthood failed to instruct its health center assistants to properly inform abortion services patients of the additional costs that they may encounter in addition to the abortion itself. One of the costs that they often neglected to mention to Rh negative women was the RhoGAM shot. Because they did not notify the patient of these costs in advance, the health care assistants would tell the patients during the abortion procedure process that they had the option of getting RhoGAM but that it can cost an additional \$120

depending on their gestational age. Low income patients often said that they could not afford to pay the additional charge that they were not warned about. Then, the health care assistants would attempt to barter with the patients over how they could obtain the additional money, suggesting that they might be able to get it from a support person. When the patients kept insisting that they could not afford it, the health care assistants in some cases would indicate that the patient had declined the drug and document the chart accordingly.

Planned Parenthood management knew about this deficiency and let it remain in place. This is a betrayal of the grants to provide abortions to poor women that were made for just such a situation as this. Dr. Carole Meyers had this issue of failure to deliver RhoGAM brought to her attention by clinical nurses such as Jayne Mitchell-Werbrich. However, while I worked there, no action was put in place to protect patients from being taken advantage of as Planned Parenthood allowed the health center assistants to treat the critical RhoGAM shot as a business transaction instead of an absolutely necessary part of their medical care.

A serious problem at Planned Parenthood of Delaware regarded the storage of pharmaceutical drugs. Planned Parenthood of Delaware did not have a system in place for legally disposing drugs. At one point, I overheard Gloria Johnson telling my coworker, Marcy Williams, to dispose expired medications by flushing the old pharmaceutical drugs down the toilet. I refused to do that because it is bad for the environment and risks contaminating the sewer system. Also, there was no system in place to prevent employees from taking or stealing drugs. Drugs were not locked away or counted carefully. In fact, valuable drugs were stored in the same closet where employees kept their jackets and coats. This could allow an employee to steal the drugs without Planned Parenthood of Delaware ever being able to discover the crime. All in all, I believe that Ruth Lytle-Barnaby has misled the public as well as Planned Parenthood of Delaware clients. She implied that Planned Parenthood of Delaware had not ceased to be in good standing with the Planned Parenthood Federation of America when in fact they were on probation from the Federation with violations that included everything from poor business practices to failure to have a system in place to follow up with women who had irregular breast findings. She said that Planned Parenthood of Delaware operated with charitable principles when in fact they failed to give RhoGAM to poor women unable to produce \$120 on the spot. As I said before, that is because Planned Parenthood of Delaware was more concerned about its bottom line profits than it was about the care and treatment of women.

I am sorry for the women that hoped they were getting quality medical care from Planned Parenthood of Delaware. Many of these women are poor or minority women who had turned to Planned Parenthood of Delaware in their moment of need. I would urge anyone who has had an STD test at Planned Parenthood to see an outside physician. If she is positive, I would urge her to seek justice. I would urge any woman who has had an abortion at Planned Parenthood to find out if she is Rh negative. If she is, I would urge her to go to an outside physician to determine if she missed her RhoGAM shot. If she has, I would urge her to seek justice. I would urge any woman who has a colposcopy at Planned Parenthood to get a

colposcopy outside of Planned Parenthood. If she has cervical cancer, I would urge her to seek justice. Planned Parenthood of Delaware abused its employees and its patients. Gloria Johnson, Dr. Carole Meyers, and Planned Parenthood of Delaware should be held accountable for their neglectful conduct that has put women in unnecessary danger. Thank you.