PRINTED: 04/12/2011 Texas Department of State Health Services FORM APPROVED STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY IDENTIFICATION NUMBER COMPLETED A. BUILDING B. WING 140000 NAME OF PROVIDER OR SUPPLIER 03/15/2011 STREET ADDRESS, CITY, STATE, ZIP CODE WHOLE WOMANS HEALTH OF FORT WORTH, LLC 1717 SOUTH MAIN STREET FORT WORTH, TX 76110 SUMMARY STATEMENT OF DEFICIENCES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) ið Prefix Tag (XIS) COMPLETE DATE A 000 TAC 139 Initial Comments A 000 Note: The State Form is an official, legal document. All information must remain unchanged except for entering the plan of correction, correction dates, and the signature space. Any discrepancy in the original deficiency citation(s) will be referred to the Office of the Texas Attorney General (OAG) for possible fraud. If Information is inadvertently changed by the provider/supplier, the State Survey Agency (SA) should be notified immediately. An unannounced Re-licensure survey was conducted on site. An entrance conference was held with the facility Administrator and the Clinical Manager (Personnel #1 and #2) at 8:00 AM on 03/14/11 to explain the purpose and process, that is, to ascertain compliance with the requirements at 25 TAC 139 - Texas Abortion Facility Reporting and Licensing Rules. Survey findings for the Re-licensure survey was discussed with the facility Administrator (Personnel #1), and by conference call with the Director of Medical Services for the company (Personnel #7), at an exit conference at 4:30 PM on 03/15/11. They were provided the opportunity to respond to the investigation findings and to provide evidence of compliance with regulations surveyed. Survey findings will be sent by e-mail, and a plan of correction for any deficiencies noted should be returned to the Arlington Zone office within 14 calendar days. Recommend Re-licensure of this Abortion Facility. Deficiencies cited. A 229 Director of Medical Services NTATIVE'S SIGNATURE VGV611

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AND PLAN	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/ IDENTIFICATION NUMBER	CLIA ER: ,	(X2) MUI A. BUILD	LTIPLE CONSTRUCTION	(X3) DATE S' COMPLE	
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A 283	Continued From page	5		A 283	041,0121017		-
	Requirements The physical and environments	/	A 283	A 283- Staff re-training on proper infection disposal of expired or unused medical supplies.	ations and	1	
1	a licensed abortion faci	lity are as follows.	101		Completed by 4	/30/11	
	a licensed abortion facility are as follows. (1) A facility shall: (A) have a safe and sanitary environment, properly constructed, equipped, and maintained to protect the health and safety of patients and staff at all times; This Requirement is not met as evidenced by: Based on observation and interview, the facility had not ensured a safe environment, equipped to protect the health and safety of their clients, in that, they had: A) expired equipment (curettes), in 1 of 2 operating rooms, and B) expired medications in the Medication Area, where these items had been available for client use.		ď		Effective immediately (3/15/11) all emedicines and medical supplies were from the facility according to OSHA infection control management policity. The Administrator of the facility will and supervise the	e removed and WWH es. leted 3/15/11	
h p th in			to		medical supply inventory and for pur that are expired or unused.		
- 1	ndings included:						
US	uring a tour of the facility /14/11 with the Clinical a surveyor observed the	Director (Personnal #2)).				
A) #2.	A) 5 - curettes, expired 07/10, in operating room #2.						•
exb	22 - Gentamicin Injectat ired 03/01/11, in the Me 3 - Ampicillin injectable ired 02/11, in the Medic	dication Area.					
in ar Clini the s	n interview at 8:40 AM of cal Director (Personnel above equipment was a able for olient use.	on 03/15/11 with the					

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A 287 A 287	Continued Field page 6		A	287	A 287		
A 201	139.48(1)(E) Physical Requirements	& Environmental	A	287	All liquids in the facility will be to the composition and expirati Completed	labeled according on date. by 4/30/11	
	The physical and envir a licensed abortion fact (1) A facility shall; (E) store hazardous cle compounds in a secure substances;	flity are as follows.	for				
h h 2	This Requirement is no Based on observation at ad not ensured a safe ad not labeled an unida operating rooms.	nd interview, the facility	y				
Di 03 the	uring a tour of the facilit dring a tour of the facilit 3/14/11 with the Clinical e surveyor observed are ottle, which contained a s 2 operating rooms.	Director (Personnel #	1				
wh Bet Shi labi bott labe	an Interview at 8:40 AM nical Director (Personn nical Director (Personn nical Director) (Personn	el #2), she was asked and she sald it was surgical procedures ottles were usually jotten these new they had not been		į į	A 326- An in-service will be provies on the provies of the provies of the provies to ensure understanding a with OSHA and WWH infection collectors are also becomes a provies of the provi	and sterilization and compliance patrol,	
1	.49(d)(5)(C)(闸) infection		A 326	i	ncluding open position of hinged Completed by	4/30/11	
(d) f disin supp te Form	Policies and procedures rection, sterilization, an ilies.	for decontamination, d storage of starile		E	s part of Whole Woman's Health rocess, the Administrator will sup rocess to ensure best practice. On-Going Sup	ervise this	

HID FLAG	PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLI		IIA (X2) MUL.	TIPLE CONSTRUCTION NG :	(XS) DATE S COMPLI			
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F CO we set with direct control of the control of t	Continued From page (5) Equipment and ster. (C) Preparation for ster. (Hi) All articles to be stern as all surfaces shall be sterilizing agent for the sterilizing agent for the temperature. This Requirement is not be associated as a serilizing agent for the temperature. This Requirement is not be associated as a serilizing agent for the serilizing where sterile supplies we cake ages of tenaculums on the "closed" position. Findings included: On a tour of the facility a with the Clinical Director surveyor observed the foliant that the Clinical Director surveyor observed the foliant in the Pathology Room has naculum that had been sold." Surgery Room #2 had 4 a seculum that had been sold." Beview of the facility "Procontamination, Disinfect contamination, Disinfect rage of Sterille Supplies 109, required that "all institized will be arranged a city exposed to the sterilized will be arranged as city exposed to the sterilized time and temper	rilization procedures, rilization, prization, prilization, prilization, prilization, prilization, prilization, prilization, prilization, prilization, and record of correctly arrange all ed, in that, 2 of 3 areas ere stored contained at that had been starilization that had been starilization packaged in the prilization packaged in the prilization packaged at starilization agent: d 1 starile packaged starilization with the tips starilized with the tips prilization, and procedure for ion, Starilization, and all surfaces will be difficult agent for the prilization agent for the prilizat	d	OCHCEN				

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In an interview at 11:00 of Clinical Director (Person above sterifized items had the tipe of the instrument that did not allow for the blo-burden to be exposed.	nel #2), she verified to ad been packaged with is in a "closed" position	he h				,
139.56(c) Emergency Sei c) Personnel providing di se currently certified in ba American Heart Association cross, or the American Sa natifute, or in accordance rofessional licensure required in their job descrip aquired in their job descrip apponsibilities.	irect patient care shall sic life support by the on, the American Red afety and Health with their individual	.	446	A 446 A CPR class has been scheduled staff in BCLS who are providing care.	on-site to recertify direct patient Completed 4/30/11	
during the survey on 03	ord review, the facility oviding direct patient I in basic life support, descriptions for 3 of 3 # 3 and #4).					
onnel #2: Her job descriptor required she have a capitation (CPR) certification	ption as the Clinical cardiopulmonary on for providing					
during to the second se	ter who were protection of the survey on 03. Her job descripted she have a control of the control of the protection of	ersonnel records for three clinical nel who were providing direct patient the survey on 03/14/11, revealed the clinical tree she have a cardiopulmonary (CPR) cartification for providing port. She did not have a current blied on 02/06/11.	the survey on 03/14/11, revealed the Her job description as the Clinical lited she have a cardiopulmonary (CPR) certification for providing	the survey on 03/14/11, revealed the Her job description as the Clinical lited she have a cardiopulmonary (CPR) certification for providing	the survey on 03/14/11, revealed the It: Her job description as the Clinical lited she have a cardiopulmonary (CPR) certification for providing port. She did not have a current olired on 02/06/11.	the survey on 03/14/11, revealed the Her job description as the Clinical lited she have a cardiopulmonary (CPR) certification for providing port. She did not have a cardiopulmonary

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11 11 11 11 11 11	Continued From page Advocate required she resuscitation (CPR) ce basic life support. She CPR, as it expired on 1 Personnel #4: Her job Advocate required she resuscitation (CPR) cer basic life support. She CPR, as it expired on 0 In Individual Interviews a with Personnel #2, #3 and hey were required to he heir CPR certifications fupport had expired.	have a cardiopulmonaritification for providing of did not have a current 0/05/10. description as a Patier have a cardiopulmona diffication for providing did not have a current 2/10. at 1:30 PM on 03/14/11	ary				
(a	39.60(a) State and Fed) A licensed abortion fa impliance with all state intaining to handling of c	citity shall be in	A 483	i i	A 483 An In-service will be provided to responsible for handling medicate an proper storage of controlled as medications. A lock will be installed in the designation the locked box containing medications so they are properly accurred, in a double locked area.	ions to re-train ad non-controlled gnated area to	
revi all s drug polic 2 op the 0	is Requirement is not not not on observation, into seed on observation, into seed on observation, into seed on observations and B) had not follower, in that, drugs had no counseling rooms, the Med Counseling hallway file ings included:	rviews, and record not in compliance with ertaining to handling o wed their drug security of been secured in 2 of licetion Americani.	f	A	li non-controlled medications wi cure locked area to ensure safety All to be Completed by 4		
Durin	ng a tour of the facility a W11 with the Clinical Dis	t 11:40 AM on rector (Personnel #2),		-			

AND PLAN	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIERA IDENTIFICATION NUMB	CLIA ER:	(X2) MULTIP	LE CONSTRUCTION		(X3) DATE SU COMPLET	RVEY
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1	the surveyor observed	the following		. 400			1	
1	drugs:	are lollowing misecrite	đ					
	0						1	
Ī	Operating Room #1:		ſ	1			-	
- 1	2 - Atropine, injectable, (mg/ml) bottles, in an u	0.4 milligrams/milliliter	' 1	1			1	
)		mocked drawer.						
	Operating Room #2:							
	2 - Atropine, injectable,	0.4 mg/ml bottles, in ar	, 1	- 1			J	
1	Inlocked drawer.							
٨	Medication Area:							
7	he Medication Area on	nsisted of an onen wide						
- 1"	convery, located off the	main clinical hallum.	ł					
, u	we'd by chents to get to	the Recovery Doon -	nd					
w	ed no door for security. here the facility's medic	I his open halfway wa	s	}				
- UI	BUCKER CEDINOTS, IN AN	Unfortend melinania						
a:	IU disc where their safe	(for controlled	1	1			- 1	
m	edications) sation the c	Dillinter fon Al die den						
1 111	is area was toured, the lowing was observed:	safe was unlocked. Th						
1.0.	towing was observed;							
Me	edication in unlocked se	rfe·		1				
15	- Atropine injectable, 0	4 ma/mi	- 1					
8	- Atropine injectable, 0	.1 mg/ml.						
Me	diretion either and an o		1	-				
4 -	dication sitting out on the Lidocaine 1% injectable	ne counter top.	1		•			
8-1	Lidocaine 1% injectable	f, 10 mg/ml, unopened.						
i				1			1	
Med	fication in unlocked cab	oinets:		1			1	
43 -	Gentamicin injectable	80 ma/2 ml		1				
13 -	Vasopressin injectable	, 20 units/ml.					1	
74 -	Ampicillin injectable, 2 Pitocin injectable, 10 ui	gram bottles.		1				
- 1			1					Ì
Medi	cation in unlocked refri	Jerator:						
Rhod	am and Micro Rhogam	y	1	1				
Cytot	The state of the s	!	1	f			- 1	

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	Depo-Provera		[7903			
- 1				1			
	Medication in unlocke	d file cabinet, in the					
- 1	Conusellud usliman.				•		
1	33 - Cytotec (misopros	stol), 200 microgram		1			1
- 1	tablets, used for pregr	iancy termination.			•		ĺ
ı	in an interview at 12:0	0 PM on 03/14/11 with t	ha l				
- 1	Charge Director (Deta	Onnel #21 shawaa		1		1	
, ,	I THE THEOREGICSTON CHAIN	MARIN SEAMONTH COMMON AND CO. C. C. C.					
	and one assig JO". NW	en asked why the safe, 38, was not locked, she					
	aru ene nag "unlocked	it to make the and a re-					
"	ing any ackny to clieck a	She verified that allow	.			1	
	ad ned mail DeliAnsa. Q	Meeting by the annual	1				
"	redication Area, to get	to the Recovery Room.					
In	en interview at 12:30	PM with the Lieuw					
1 71	ncercoust Mritse (FAM)	(Personnel #44)					
1 ***	so agree MILL CAPUTED	Differ uppered has been a fee.				[
1 90	TOURCE IN CADIFIAL AM	MV from other	•	1			
rlic	Int know " Character	facility, and she said "st	ie			1	
of :	33 Cytotec tablets wer	d that an opened bottle			•		
cat	pinet in the Counseling	t pallman a ut au nuiocked tile					
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Man	racility's "Procedure f	for Handling Controlled					
,	STOCKED TO BE STOCKED TO BE	0.7207		1		1	
two	locks, i.e. in a safe, in	ust be secured behind					
ı						1	
The	state rules & regulatio	ns found at 25 Tayee					
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-At 482.25(b)(2)(i), a	s of practice, consistent	- (