

Alabama Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: C3704	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/22/2004
NAME OF PROVIDER OR SUPPLIER NEW WOMAN ALL WOMEN HEALTH CAR		STREET ADDRESS, CITY, STATE, ZIP CODE 1001 17TH STREET SOUTH BIRMINGHAM, AL 35205		
(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) COMPLETE DATE
L 100	<p>ALABAMA LICENSURE DEFICIENCIES</p> <p>THE FOLLOWING ARE LICENSURE DEFICIENCIES AND REQUIRE A PLAN OF CORRECTION.</p> <p>This Rule is not met as evidenced by:</p> <p>420-5-1-.02 Administration (2)(e) Policies and Procedures</p> <p>Licensure requires policies and procedures for operation of the facility shall be formulated and reviewed annually by the governing authority. They shall include at least the following: (e) Provision for annual review and evaluation of the facility's policies, procedures, management and operation.</p> <p>420-5-1-.03 Patient Care Policies and Procedures.</p> <p>Licensure requires patient care policies and procedures shall be developed, reviewed yearly, and revised as necessary. Patient care policies and procedures shall be consistent with professionally recognized standards of practice and shall be in accordance with the Alabama Nurse Practice Act. Copies of the policy and procedures manual shall be available to the nursing staff.</p> <p>Based on a review of the clinic policy and procedure manual, it was determined the clinic failed to assure the manual had been reviewed and evaluated annually.</p> <p>Findings include:</p> <p>On review of the clinic policy and procedure manual, it was noted the manual had not been updated since 9/28/1996 to include changes in the medical staff.</p>	L 100		

Health Care Facilities

TITLE

(X6) DATE

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

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L 100	Continued From page 1 _____	L 100		
	<p>420-5-1-.03(3)(f)2 Admission and Examination Procedures</p> <p>Licensure requires prior to an abortion, the physician who is to perform the abortion, the referring physician, or a qualified counselor has informed the woman in person:</p> <p>(i) The name of the physician who will perform the abortion in writing or a business card.</p> <p>(ii) The nature of the proposed abortion method and associated risks and alternatives that a reasonable patient would consider material to the decision of whether or not to undergo the abortion.</p> <p>(iii) The probable gestational age of the embryo or fetus at the time the abortion is to be performed, and the probable anatomical and physiological characteristics of the embryo or fetus at the time the abortion is to be performed. If the fetus is viable or has reached a gestational age, as defined in these rules, of more than 19 weeks.</p> <p>Based on review of medical records and personnel files, interviews with clinic staff and patients, the clinic failed to ensure that counseling was provided by the physician performing the procedure or a qualified counselor.</p> <p>Findings include:</p> <p>1. An interview with clinic staff members, including two non-licensed, on 7/20/04 at 11:00 AM revealed they provide counseling services to patients prior to receiving abortions.</p>			

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L 100	Continued From page 2 2. A review of two non-licensed personnel records revealed no documentation qualifying them to provide counseling to patients prior to receiving abortions.. 3. On 7/22/04 at 11:20 AM a patient in the waiting area stated she had watched the videos, however had not received counseling. This patient had a procedure performed on 7/22/04. 4. A review of four medical records, for patients who underwent abortion procedures, revealed non-licensed staff had provided counseling. _____ 420-5-1-.03(7)(a) Infection Control Infection Control Committee. 1. Licensure requires there shall be an infection control committee composed of a physician and registered professional nurse who shall be responsible for investigating, controlling, and preventing infections in the facility. 3. There shall be continuing education provided to all staff on causes, effects, transmission, prevention, and elimination of infection at least annually. Based on interview with clinic staff, it was determined the clinic did not have an infection control committee, continuing education for staff, nor do they investigate potential infections. Findings include:	L 100		

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L 100	Continued From page 3 1. An interview with clinic staff on 7/22/04 at 11:20 AM revealed they were unable to provide documentation of an infection control plan, a committee, continuing education or evidence of investigation of potential infections. _____ 420-5-1-.02 Administration (3) There shall be a facility wide quality improvement program to evaluate patient care and facility services. The program shall be ongoing, have statistical summaries and a written plan of implementation. Based on interview with clinic staff, it was determined the clinic does not have a written quality assurance plan, they do not have a quality assurance committee, nor do they have any statistical information available for review. 1. An interview with clinic staff on 7/22/04 at 11:00 AM revealed they have no quality assurance plan, and they do not do any statistical information. _____ 420-5-1-.03 Patient Care (3) Admission and Examination Procedures (d) Laboratory Tests 4. Each abortion and reproductive health	L 100		

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L 100	Continued From page 4 center must develop and retain on file a written quality assurance plan governing the performance of all laboratory procedures performed on premises. Facilities will be subject to unannounced inspections by the Department of Public Health to determine that on premises laboratory procedures are being correctly and accurately performed. Based on interview with clinic staff, it was determined the clinic did not collect statistical lab information on the lab procedures it provided. These tests include: pregnancy tests, hemoglobins and RH factors. Findings include: 1. An interview with clinic staff on 7/22/04 at 11:00 AM revealed they do not have a quality assurance plan for lab procedures. Debbie Wetzel, RN Vicky Whatley, RN	L 100		