

Agency For Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AC13950033	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/20/2009
NAME OF PROVIDER OR SUPPLIER A-1 WOMAN'S HEALTH CARE, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 1250 SW 1ST STREET MIAMI, FL 33135		
(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
A 000	INITIAL COMMENTS	A 000		
	An unannounced visit was made to the facility on April 20, 2009, in order to conduct a Complaint Investigation Survey CCR#2009004223. There were 2 out of 4 allegations substantiated at the time of the survey. The facility was not in compliance with 390.014 F.S., 59A-9 F.A.C. at the time of the survey. The following deficiencies were identified. Recommend a plan of correction.			
A 100	Physical Plant Req.-2nd Trimester	A 100		
	The following are minimum standards of construction and specified minimum essential physical plant requirements which must be met when providing second trimester abortions.		<i>We will provide.</i>	
	(1) Consultation room(s) with adequate private space specifically designated for interviewing, counseling, and medical evaluations;		<i>We do provide an adequate space for interviewing, counseling, and medical evaluations for patient confidentiality.</i>	<i>5/2/09</i>
	(2) Dressing rooms designated for staff and patients;		<i>We provide a private dressing room for staff & patients</i>	<i>5/2/09</i>
	(3) Handwashing station(s) equipped with a mixing valve and wrist blades and located in each patient exam/procedure room or area;		<i>We provide a handwashing station in exam room with adequate equipment.</i>	<i>5/2/09</i>
	(4) Private procedure room(s) with adequate light and ventilation for abortion procedures;		<i>All equipment has been checked and is adequate for abortion procedures.</i>	<i>5/4/09</i>
	(5) Post procedure recovery room(s) equipped to meet the patient's needs;		<i>The recovery room is equipped to meet patient's needs.</i>	<i>5/4/09</i>
	(6) Emergency exits wide enough to accommodate a standard stretcher or gurney;		<i>We will make sure emergency exit is accommodated for any emergencies that may occur.</i>	<i>5/4/09</i>
	(7) Cleaning and sterilizing area(s) adequate for the cleaning and sterilizing of instruments;		<i>All areas are cleaned in top condition and sterile cleaning area for instruments.</i>	<i>5/2/09</i>

AHCA Form 3020-0001

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

TITLE

Office manager

(X8) DATE

5/14/09

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A 100	Continued From Page 1 (8) Adequate and secure storage area(s) for the storage of medical records and necessary equipment and supplies; and (9) If not otherwise required by the Florida Building Code, at least one general use toilet room equipped with a hand washing station. Chapter 59A-9.022, F.A.C. This Standard is not met as evidenced by: Based on observation and interview, the facility failed to ensure Adequate and secure storage area(s) for the storage of medical records and necessary equipment and supplies. Findings include: During a tour of the facility conducted on 4-20-2009 at 9:35 am, the surveyors observed in the recovery room, the rear exit door was blocked by a file cabinet, paper shredder, and an examining screen. Staff advised the patients can still exit. The surveyors advised the blocked door was a safety hazard. The surveyors demonstrated the iron door opens inward, and therefore, the items obviously are blocking the exit. Staff confirmed the findings and advised the items will be moved. Correction date: 5-20-2009	A 100	We will provide a secure storage area for medical records & necessary equipment and supplies. We do provide a private bathroom for male persons in our facility. we have all medical records stored in file cabinets adequate for storage All other medical equipment and supplies is stored in a locked secure storage area. Exit door has been cleared to facilitate exiting in case of an emergency.	5/4/09 5/4/09 5/4/09
A 150	Clinic Supplies/Equip. Stand.-2nd Trimester Each abortion clinic providing second trimester abortions shall provide the following essential	A 150		

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A 150	Continued From Page 2 clinic supplies and equipment: (a) A surgical or gynecological examination table(s); (b) A bed or recliner(s) suitable for recovery; (c) Oxygen with flow meters and masks or equivalent; (d) Mechanical suction; (e) Resuscitation equipment to include, at a minimum, resuscitation bags and oral airways; (f) Emergency medications, intravenous fluids, and related supplies and equipment; (g) Sterile suturing equipment and supplies; (h) Adjustable examination light; (i) Containers for soiled linen and waste materials with covers; and (j) Appropriate equipment for the administering of general anesthesia, if applicable. Chapter 59A-9.0225(1), F.A.C. This Standard is not met as evidenced by: Based on observation and interview, the facility failed to maintain current, clean and up to date supplies. Findings include: During a tour of the procedure room conducted	A 150	Examination table is available. All bed recliners are suitable. We will make sure all equipment needed for patient care is available and checked periodically. We will make sure oxygen flow meters are running properly for patient use. and resuscitation bags are covered & sterile for RTs use in case of an emergency. We have an adjustable examination light. We have appropriate equipment for administering general anesthesia.	5/8/09 5/8/09 5/8/09

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A 150	Continued From Page 3 on 4-20-2009 at 9:35 am, the surveyors observed expired emergency medications: Sodium Bicarbonate expired on 2/2009, Lidocaine 2% expired on 3/2009, Epinephrine expired on 1/2009, Nitroglycerin expired on 3/2009, Naloxone expired on 2/2009, and Procainamide expired on 7/2008. The surveyors observed dust in the resuscitation bag, which was not covered or maintained in any type of protective covering. The surveyors observed 3 opened boxes of CBC tubes with an expiration date of July 2001, July 2002, and October 2000. The surveyors observed an empty Oxygen tank within the procedure room. The surveyors asked staff if this is the only Oxygen tank currently on-site at the facility. The staff confirmed there was no other oxygen tank on-site at the facility. The surveyors observed dust and debris in the nasal cannula connector to the mask of the oxygen tank. The surveyors observed examining tools wrapped in blue covering stored inside the cabinet of the suctioning machine. Staff explained the tools wrapped in the blue material is sterile tools used by the physician. The surveyors without touching the tools, observed the tape was undone, and the sterility of the tools compromised. Correction date: 5-20-2009	A 150	All medications were updated. The oxygen tank was refilled.	5/2 5/6.
A 151	Clinic Supplies/equip. Stand.-2nd Trimester Emergency equipment shall be provided for immediate use, maintained in functional condition, and capable of providing at least the following services: (a) Inhalation therapy	A 151		

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A 151	Continued From Page 4 (b) Defibrillation (c) Cardiac monitoring (d) Suctioning (e) Maintenance of patient airway Chapter 59A-9.0225(2), F.A.C. This Standard is not met as evidenced by: Based on observation and interview, the facility failed to ensure emergency equipment is provided for immediate use, and maintained in functional condition. Findings include: During a tour of the procedure room conducted on 4-20-2009 at 9:35 am, the surveyors did not see a defibrillator and a cardiac monitor. The resuscitation bag was dusty. The staff was asked to provide their defibrillator and cardiac monitor. Staff advised on 4-20-2009 at 10:15 am, the facility did not have a defibrillator and a cardiac monitor. Correction date: 5-20-2009	A 151	All instruments needed for second trimester abortions were ordered and updated. All equipment will be provided for immediate use and maintained in functional condition Defibrillation, cardiac monitoring, maintenance of Patient Airway. The ARND is responsible for Patient Safety during procedure.	5/8/09 5/8/09
A 153	Clinic Supplies/equip. Stand.-2nd Trimester Resuscitative Medications Required. The clinic shall have a crash cart at the location the anesthetizing is being carried out. The crash cart must include, at a minimum, those emergency medications to support the procedures performed as determined by the medical director.	A 153	All medications in the crash cart were updated	5/22

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A 153	Continued From Page 5 Chapter 59A-9.0225(4), F.A.C. This Standard is not met as evidenced by: Based on observation and interview the facility failed to have adequate resuscitative medication as required. The findings include: Observation during the tour of the facility on 4/20/2009 revealed that the emergency crash cart is kept inside a cabinet under the sink. Interview with Sample Employee#1 revealed that the facility renews the emergency crash cart every 2 years and as needed. Further observation of the crash cart contents revealed the following emergency medications: Sodium Bicarbonate expired on 2/2009, Lidocaine 2% expired on 3/2009, Epinephrine expired on 1/2009, Nitroglycerin expired on 3/2009, Naloxone expired on 2/2009, and Procainamide expired on 7/2008. Observation of the medication box next to the procedure bed revealed ampules of Epinephrine that were expired last 2008. Interview with Sample Employee#1 on 4/20/2009 at 11:30am confirmed the above findings. Correction date: 5-20-2009	A 153	All medications were updated in the crash cart. We will check it periodically to make sure we update it before it expires.	4/22
A 156	Clinic Supplies/equip. Stand.-2nd Trimester Equipment Maintenance. (a) When patient monitoring equipment is utilized, a written preventive maintenance program shall be developed and implemented. This equipment shall be checked and/or tested in accordance with manufacturer's specifications at	A 156	All equipment will be maintenance once a year to make sure it is in excellent working condition	5/11/09

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A 156	Continued From Page 6 periodic intervals, not less than annually, to insure proper operation, and a state of good repair. After repairs and/or alterations are made to any equipment, the equipment shall be thoroughly tested for proper calibration before returning it to service. Records shall be maintained on each piece of equipment to indicate its history of testing and maintenance. (b) All anesthesia and surgical equipment shall have a written preventive maintenance program developed and implemented. Equipment shall be checked and tested in accordance with the manufacturer 's specifications at designated intervals, not less than annually, to ensure proper operation and a state of good repair. (c) All surgical instruments shall have a written preventive maintenance program developed and implemented. Surgical instruments shall be cleaned and checked for function after use to ensure proper operation and a state of good repair. Chapter 59A-9.0225(7), F.A.C. This Standard is not met as evidenced by: Based on observation and interview, the facility failed to ensure preventive maintenance was completed on equipment utilized for patient monitoring. Findings include: During a tour conducted on 4-20-2009 at 9:35 am, the surveyors observed the following equipment needing current preventive maintenance: Ultrasound, suction unit, and the sterilization machine.	A 156	we will keep a log of the maintenance of all equipment. All equipment will be maintained once a year to make sure it is in excellent working condition. All surgical instruments will be checked for function to insure proper operation.	5/11/09 5/11/09 5/11/09

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A 156	Continued From Page 7 The administrator advised they have a company who provides the preventive maintenance. The administrator was unable to demonstrate at the time of the survey, that the equipment received preventive maintenance. The surveyor requested to review service logs or invoices demonstrating compliance with this requirement. Correction date: 5-20-2009	A 156		
A 202	Clinic Personnel-2nd Trimester Orientation. Each facility shall have and execute a written orientation program to familiarize each new staff member, including volunteers, with the facility and its policies and procedures, to include, at a minimum, fire safety and other safety measures, medical emergencies, and infection control. In-service Training. In-service training programs shall be planned and provided for all employees including full time, part time and contract employees, at the beginning of employment and at least annually thereafter and will also apply to all volunteers to insure and maintain their understanding of their duties and responsibilities. Records shall be maintained to reflect program content and individual attendance. The following training shall be provided at least annually, and for surgical assistants and volunteers, must include training in counseling, patient advocacy and specific responsibilities associated with the services they provide: (a) Infection control, to include at a minimum, universal precautions against blood-borne diseases, general sanitation, personal hygiene such as hand washing, use of masks and gloves, and instruction to staff if there is a likelihood of transmitting a disease to patients or other staff	A 202	<i>All new employees will be trained and given 90 day probation period. Each employee will have a job description explaining duties and responsibility. We will keep all employee records in file. An annual training will be given every year to update employees duties and responsibilities. They will be informed on how to deal with Infection Control & safety.</i>	<i>5/10/09 5/11/09.</i>

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A 202	<p>Continued From Page 8</p> <p>members. (b) Fire protection, to include evacuating patients, proper use of fire extinguishers, and procedures for reporting fires; (c) Confidentiality of patient information and records, and protecting patient rights; (d) Licensing regulations; and (e) Incident reporting.</p> <p>Chapter 59A-9.023,(4) and (5), F.A.C.</p> <p>This Standard is not met as evidenced by: Based on record review and interview the facility failed to have a written orientation program that includes policy and procedures for fire safety, confidentiality and protection of patients rights, licensing regulations and infection control as required. The findings include:</p> <p>Review of the employee file of Sample Employee #2 on 4/20/09 revealed no evidence of documentation of attendance to an orientation program that included the following: infection control, fire protection, confidentiality of patient information and records and protecting patients rights, licensing regulations and incident reporting.</p> <p>Interview with Sample Employee#1 on 4/20/09 revealed that he/she does not maintain a personnel record of himself/herself in this facility. He/she states that his/her Medical Assistant Certificate is framed on the wall behind the front desk. Staff #1 advised he/she works the front desk, but helps out with the patients when needed. Personnel record review for both staff #1 and #2, revealed there were no job descriptions detailing each staffs' responsibilities and duties at the facility.</p> <p>Correction date: 5-20-2009</p>	A 202	<p>Employees will be informed on fire protection on how to evacuate Patients.</p> <p>Employees will be informed how to deal with Patient Confidentiality protecting Patients rights, licensing regulations and incident reporting.</p> <p>We will have a copy of Job Descriptions for all employees.</p>	5/11
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FORM APPROVED

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A 202	Continued From Page 9	A 202		
A 250	<p>Clinic Policies/Procedures-2nd Trimester</p> <p>An abortion clinic providing second trimester abortions shall have written policies and procedures to implement policies and to assure that quality patient care shall relate specifically to the functional activities of clinic services. These written procedures shall apply to second trimester abortions and shall be available and accessible to clinic personnel and shall be reviewed and approved annually by the clinic's medical director. These clinic policies and procedures shall include but not be limited to the following:</p> <ol style="list-style-type: none"> (1) Patient admission; (2) Pre- and post-operative care; (3) Physician ' s orders; (4) Standing orders with required signatures; (5) Medications, storage and administration; (6) Treatments; (7) Surgical asepsis; (8) Medial asepsis; (9) Sterilization and disinfection; (10) Documentation: Medical records and facility records; (11) Patient discharge; (12) Patient transfer; (13) Emergency measures; (14) Incident reports; (15) Personnel orientation; (16) Inservice education record; (17) Anesthesia; (18) Equipment and supplies: availability and maintenance; (19) Volunteers; and (20) Visitors. <p>Chapter 59A-9.024, F.A.C.</p>	A 250	<p>Clinical policies will be kept to assure the quality of Patient Care, shall relate specifically to functional activities of clinic services. And will be available to clinic personnel and renewed by clinic's director.</p> <p>5/11/09</p>	

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A 250	Continued From Page 10 This Standard is not met as evidenced by: Based on record review, the facility failed to have their written policies and procedures reviewed and approved by the medical director, and to ensure those policies included at a minimum: Patient admission; Pre- and post-operative care, Physician ' s orders, Standing orders with required signatures, Medications storage and administration, Treatments, Surgical asepsis Medial asepsis, Sterilization and disinfection. Documentation: Medical records and facility records, Patient discharge, Patient transfer, Emergency measures, Incident reports, Personnel orientation In-service education record ,Anesthesia Equipment and supplies: availability and maintenance, Volunteers and Visitors. Findings include: During facility record review conducted on 4-20-2009, the surveyors requested to review the facility's policies and procedures. The surveyor was provided with a biomedical waste policy and confidentiality of patient information and records policy. The surveyor asked if there were any other policies as listed in the regulatory requirement. Staff #1 stated no. The policies and procedures provided, were not patient centered. The policies provided address employees and facility staff. The facility's policies did not meet the minimum standards at the time of the survey. Correction date: 5-20-2009	A 250	<i>Clinical policies will be kept and reviewed by clinical director</i>	<i>5/11/09</i>
A 301	Medical Screening/eval.-2nd Trimester Laboratory Services. (a) Laboratory services shall be provided on-site	A 301		

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A 301	Continued From Page 11 or through arrangement with a laboratory that holds the appropriate federal Clinical Laboratory Improvement Amendments (CLIA) certificate and state of Florida clinical laboratory license issued pursuant to Chapter 483, Part I, F.S. (b) All laboratory services provided on-site shall be performed in compliance with state of Florida clinical laboratory licensure and federal CLIA provisions. Rh factor. Rh testing for Rh negative patients shall be conducted, unless reliable written documentation of blood type is available. All laboratory test reports shall be placed in the patient ' s medical record. All laboratory test and storage areas, records and reports shall be available for inspection by the agency. If a person who is not a physician performs an ultrasound examination, that person shall have documented evidence that he or she has completed a course in the operation of ultrasound equipment. The physician, registered nurse, licensed practical nurse, advanced registered nurse practitioner, or physician assistant shall, at the request of the patient and before the abortion procedure is performed, review the ultrasound evaluation results with the patient, including an estimate of the probable gestational age of the fetus. A test for anemia shall be performed. Chapter 59A-9.025(2), (4), (5), (6), (7), and (8) F.A.C.	A 301	We will check all all factors to determine the Patients blood type. A Clia certificate from the lab will be provided All Laboratory reports will be placed in Patients medical records. Laboratory test will be stored and available for inspection. The Doctor himself will perform the U/S (ultrasound) A hemoglobin is done to check if the Patient is anemic.	5/11/09 5/11/09 5/11/09

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A 301	<p>Continued From Page 12</p> <p>This Standard is not met as evidenced by: Based on interview, the facility failed to ensure the person who is not a physician performing ultrasound examinations, shall have documented evidence that he or she has completed a course in the operation of ultrasound equipment.</p> <p>Findings include:</p> <p>During the tour of the procedure room on 4-20-2009 at 9:35 am, the surveyors inquired about the use of the ultrasound equipment. Facility staff advised only the physician operates the ultrasound equipment. The surveyors asked the administrator what is his/her role at the facility. The surveyors asked the administrator if he/she assists with patient care. The administrator denied providing hands on care, and advised staff #2 is the medical assistant who assists with patient care.</p> <p>During an interview with the administrator in his/her office at 10:45 am, the administrator stated the facility is actively working on purchasing a new ultrasound machine. The administrator further stated that he/she conducts ultrasound examinations on the patients sometimes per the physician's request. The administrator states when the physician wants to know the gestation of the fetus prior to his/her arrival, the physician will tell the administrator to conduct an ultrasound examination of the patient. The surveyors requested to review the administrator's qualifications/credentials demonstrating he/she has completed a course or training in ultrasound equipment. The administrator advised he/she has not received training or completed a course in the operation of ultrasound equipment.</p> <p>Correction date: 5-20-2009</p>	A 301	<p>The Doctor performs the ultrasound, no one is allowed to perform an U/S unless licensed.</p> <p>The Doctor will be the only one performing ultrasounds. unless he request to hire an ultrasound tech.</p>	<p>5/14/09</p> <p>5/14/09</p>	

Agency For Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AC13950033	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/20/2009
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NAME OF PROVIDER OR SUPPLIER A-1 WOMAN'S HEALTH CARE, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1250 SW 1ST STREET MIAMI, FL 33135
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A 301	Continued From Page 13	A 301		
A 302	<p>Medical Screening/eval.-2nd Trimester</p> <p>Laboratory Equipment and Supplies.</p> <p>(a) All equipment and supplies for the collection, storage, and testing of specimens shall meet the provisions of Rule 59A-7 F.A.C., and shall be maintained according to manufacturer 's instructions and in a manner that ensures accurate test results.</p> <p>(b) Temperature controlled spaces for the storage of specimens or testing supplies shall be monitored and recorded to ensure that the proper storage temperature is maintained.</p> <p>(c) All dated supplies and materials shall not be used beyond their expiration date.</p> <p>(d) Adequate facilities and supplies for the collection, storage and transportation of laboratory specimens shall be available on site.</p> <p>Chapter 59A-9.025(3), F.A.C.</p> <p>This Standard is not met as evidenced by: Based on observation, the facility failed to ensure all equipment and supplies for the collection, storage, and testing of specimens shall be maintained according to manufacturer's instructions and in a manner that ensures accurate test results.</p> <p>Findings include: During a tour of the procedure room conducted on 4-20-2009 at 9:35 am, the surveyors observed 3 opened boxes of CBC tubes with an expiration date of July 2001, July 2002, and</p>	A 302	<p>We will make sure ^{testing of} all specimens meet the provisions Rules.</p> <p>Temperature controlled spaces will be monitored to ensure proper storage temperature.</p> <p>We will check supplies to make sure nothing is expired.</p> <p>A lab box is available on site to send out specimens.</p>	<p>5/11</p> <p>5/11</p> <p>5/11</p>

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A 302	Continued From Page 14 October 2000. Facility staff denied use of the tubes at the time of their discovery. Correction date: 5-20-2009	A 302		
A 350	Abortion Procedure-2nd Trimester Any abortion clinic which is providing second trimester abortions must be in compliance with the following standards relative to second trimester abortion procedures: (1) A physician, registered nurse, licensed practical nurse, advanced registered nurse practitioner, or physician assistant shall be available to all patients throughout the abortion procedure. (2) The abortion procedure will be performed in accordance with obstetric standards and in keeping with established standards of care regarding the estimation of gestational age of the fetus. (3) Anesthesia service shall be organized under written policies and procedures relating to anesthesia staff privileges, the administration of anesthesia, and the maintenance of strict safety controls. (4) Prior to the administration of anesthesia, patients shall have a history and physical examination by the individual administering anesthesia, including laboratory analysis when indicated. (5) Appropriate precautions, such as the establishment of intravenous access at least for patients undergoing post-first trimester abortions.	A 350	All important personnel will be present through out the abortion & Patient Care. Physician, ARNP, medical assistants. All abortion procedure will be performed in accordance with obstetric standards. Anesthesia will be organized under written policies and procedures. All patients will have a history and physical examination by the ARNP. All appropriate precautions will be established	5/11/09 5/11/09 5/11/09 5/11/09

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NAME OF PROVIDER OR SUPPLIER A-1 WOMAN'S HEALTH CARE, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 1250 SW 1ST STREET MIAMI, FL 33135		
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A 350	Continued From Page 15 (6) Appropriate monitoring of the patient's vital signs by professionals licensed and qualified to assess the patient's condition will occur throughout the abortion procedure and during the recovery period until the patient's condition as specified by the type of abortion procedure performed, is deemed to be stable in the recovery room. Chapter 59A-9.026, F.A.C. This Standard is not met as evidenced by: Based on record review and interview, the facility failed to ensure anesthesia service is organized under written policies and procedures relating to anesthesia staff privileges, the administration of anesthesia, and the maintenance of strict safety controls. Findings include: During clinical record review for 3 (#1, #2, and #5) out of 5 sampled patients, the surveyors reviewed documentation indicating patients #1, #2, and #5 received general anesthesia during their procedure. The surveyors requested to review the facility's protocol, policies and procedures for the administration of anesthesia, and safety controls. Facility staff were unable to provide documentation demonstrating written policies and procedures relating to anesthesia, at the time of the survey. Correction date: 5-20-2009	A 350	All vitals will be monitored before and after procedure to assure patient's safety. Written policies & procedures relating to anesthesia will be kept.	5/14/09
A 600	Clinical Records A permanent individual clinical record shall be kept on each clinic patient. Clinical records shall	A 600	A clinical record will be kept on each patient	5/14/09

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A 600	Continued From Page 16 be complete, accurately documented, and systematically organized to facilitate storage and retrieval. (a) Clinical records shall be complete, accurately documented, and systematically organized to facilitate storage and retrieval. (b) Clinical records involving second trimester abortion procedures shall be kept confidential and secure. (c) Operative reports signed by the physician performing the second trimester abortion shall be recorded in the clinical record immediately following the procedure or that an operative progress note is entered in the clinical record to provide pertinent information. Chapter 59A-9.031(1), F.A.C. This Standard is not met as evidenced by: Based on record review, the facility failed to ensure clinical records for 3 out of 5 sampled patients were complete and accurately documented. Findings include: During clinical record review for 3 (#1, #2, and #5) out of 5 sampled patients, the surveyors reviewed documentation indicating patients #1, #2, and #5 received general anesthesia during their procedure. The 3 sampled records did not include the drug used for general anesthesia. The first letter of the drug and the dosage were recorded. The 3 sampled clinical records did not include documentation demonstrating the patients vitals were being monitored while under general anesthesia, such as heart monitoring,	A 600	Clinical records will be documented & organized to facilitate storage & retrieval - Clinical records involving second trimester abortion procedures will be kept confidential & secure. Operative reports will be signed by the Doctor following the procedure and entered in the clinical record. we will make sure the ABNP documents the whole word of the anesthesia not only the first letter. we will make sure he documents vitals heart monitoring and blood pressure.	5/9/09 5/9/09 5/10/09

PRINTED: 05/01/2009
FORM APPROVED

Agency For Health Care Administration

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A 800	Continued From Page 17 breathing, and blood pressure. Correction date: 5-20-2009	A 600		



CHARLIE CRIST
GOVERNOR

Better Health Care for all Floridians

HOLLY BENSON
SECRETARY

May 11, 2009

Administrator
A-1 Woman's Health Care, Inc
1250 SW 1st Street
Miami, FL 33135

CCR# 2009004223

Dear Administrator:

This letter reports the findings complaint investigation survey CCR# 2009004223 that was completed on April 20, 2009 by Camelle Toledano, Registered Nurse and Kim Ody, Health Facility Evaluator of this office.

Attached is the provider's copy of the State Form 3020, which indicates the following deficiencies that were identified on the day of the visit:

- St - A - 0100 - - Physical Plant Req.-2nd Trimester
- St - A - 0150 - - Clinic Supplies/equip. Stand.-2nd Trimester
- St - A - 0151 - - Clinic Supplies/equip. Stand.-2nd Trimester
- St - A - 0153 - - Clinic Supplies/equip. Stand.-2nd Trimester
- St - A - 0156 - - Clinic Supplies/equip. Stand.-2nd Trimester
- St - A - 0202 - - Clinic Personnel-2nd Trimester
- St - A - 0250 - - Clinic Policies/procedures-2nd Trimester
- St - A - 0301 - - Medical Screening/eval.-2nd Trimester
- St - A - 0302 - - Medical Screening/eval.-2nd Trimester
- St - A - 0350 - - Abortion Procedure-2nd Trimester
- St - A - 0600 - - Clinical Records.

Please provide a plan of correction to this Field Office, in accordance with enclosed instructions, for the identified deficiencies **within ten calendar days of receipt of this faxed report. All deficiencies shall be corrected no later than May 20, 2009.**

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
<http://ahca.myflorida.com>



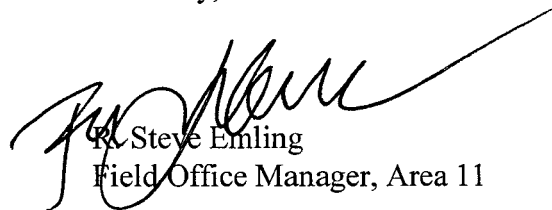
Miami Field Office
8355 N.W. 53rd Street, First Floor
Miami, FL 33166
Phone (305) 499-2165; Fax (305) 499-2190

A-1 Woman's Health Care, Inc
May 4, 2009
Page 2

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for all assistance provided. Should you have any questions please call Ric Garcia, RNC and Supervisor HHA/Hospital Unit at (305) 499-2165.

Sincerely,



Steve Enling
Field Office Manager, Area 11

YJ

Enclosures: State Form 3020 and Guidelines