

COMMONWEALTH of VIRGINIA

M. Norman Oliver, MD, MA State Health Commissioner Department of Health
Office of Licensure and Certification

TYY 7-1-1 OR 1-800-828-1120 9960 Mayland Drive, Suite 401 Henrico, Virginia 23233-1485 Fax (804) 527-4502

February 22, 2019

Facility Administrator Alexandria Women's Health Clinic 101 S. Whiting St. Suite 215 Alexandria, Virginia 22304

RE: Alexandria Women's Health Clinic

First Trimester Abortion Facility (FTAF) Biennial Licensure Inspection

Facility ID: AF-0014

Dear Facility Administrator,

An unannounced First Trimester Abortion Facility Biennial Licensure Inspection was conducted January 15, 2019 through January 16, 2019 and January 24, 2019 by two (2) Medical Facilities Inspectors from the Virginia Department of Health's Office of Licensure and Certification.

Enclosed is the licensure inspection report. The facility was not in compliance with 12VAC5-412 regulations for the Licensure of Abortion Facilities, amended November 2018. This document contains a listing of deficiencies found at the time of this inspection.

You are required to submit a plan for correcting the deficiencies cited. Your statements shall reflect the specific detailed actions you will take to correct deficiencies, prevent a recurrence of the deficiencies, and measures implemented to maintain compliance. You must also give the expected completion date of each deficiency.

Completion of corrective actions shall not exceed 45 working days from the last day of the inspection.

After signing and dating your Plan of Correction, retain one copy of the report for your file and return the original to OLC within 15 (fifteen) working days of receipt of the inspection report. The Administrator shall be notified if any item in the plan of correction is determined to be unacceptable. Failure to submit an acceptable plan of correction may result in a penalty in accordance with the Code of Virginia §32.1-27 or in denial, revocation or suspension of a license in accordance with 12VAC5-412-130.



Facility Administrator Alexandria Women's Health Clinic February 22, 2019

Page 2

A copy of the completed form will be kept on file in this office and will be available for public review. The Virginia Department of Health – Office of Licensure and Certification is required to make copies of this report available to other Federal and State regulatory or reimbursement agencies upon request.

Thank you for the cooperation that was extended to our inspectors during this investigation. If you should have any question or concerns regarding this report or the report findings, please contact me at (804) 367-2164.

Sincerely,

Douglas Middlebrooks, PhD

Supervisor, Division of Acute Care Services

Enclosure

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	existence of a human possible witnesses or trafficking to the eval assistance or report in in a place readily visit public, such as the probability or patient restricts	shall post notice of the n trafficking hotime to at r victime of human isbility of a means to gi primes. This notice shall ble and accessible to to adent admitting area or noms. The notice shall se of §40,1 - 11.3 C of to the properties of the properties of §40,1 - 11.3 C of the and the properties of the properties of §40,1 - 11.3 C of the trafficking the properties of §40,1 - 11.3 C of the properties of §40,1 -	lert sin sil be he		Corrective action to by: The facility shall human trafficking information to ale	display hotline		
	facility staff falled to e	et as evidenced by: n and staff interview, th neum the posting of th a trafficking hotine was accessible to the publi	e e		possible witnesses victims. The inforwill be posted in a	mation in area		
	p.m., the inspectors viposting relating to the	beginning 1/16/19 at 1 vers unable to locate a existence of a human in the fecility. At 3:30	LA .		where the patient privacy, such as: restrooms, Sonogra and counseling room	nas patient im room 1.		
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¥ 006	the inspectors interviewed Staff Member #1 (Abarnate Administrator) regarding the posting. Staff Member #1 stated, "I did not know about that. We do not have enything posted, but I will get the information and do that right away." On 1/16/19 at 1:00 p.m., Staff Member #1 presented the survey team with a posting regarding the human trafficking holline and shared plane as to where the information would be posted within the facility that would be accessible to the public (counseling area, patient bathrooms, and waiting area). On 1/24/19 at 3:00 p.m., the inspectors discussed the findings with Staff Member #1 (Aliamate Administrator) and Staff Member #2			Y 005	Toolu The administrator w responsible for check and updating the in- as needed every m	iill be ang Formation	2 22 19
7 000 T	(Administrator). 12 VACS-412-180 B Personnel The abortion facility shall obtain written epplications for employment from all staff. The abortion facility shall obtain and verify information on the application as to education, training, experience, appropriate professional licensure, if applicable. This RULE: is not met as evidenced by: Besed on a review of eight (8) staff records, facility staff failed to ensure that one (1) staff member had a written application on file (Staff Member #6). Findings included: A review of the personnel record for Staff Member (SM) #6, a CRNA (Certified Registered Nurse Anesthets), evidenced the lack of a written application. Information related to SM #6%		nation Lure, if s, facility hiber (16).	T Q65	corrective action to by providing write application on state personal record relate and experience. The administrator verify that all prand/or staff obtains	ven en F±les laked ining will	2019

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advantion, training, and experience was unevalenced to the lack of a written application? Concern related to the lack of a written application which documented Stat 870 advantant, but not an application? Concern related to the lack of a written application which documented Stat 870 advantant Administrator, on 1724/19 at approximately 4:00 p.m. Stat 81 stated 790, I don't have a written application from (him/her). (Stat 870 name) is good about bringing things live that to me, even before I asid, so fill get it? Trail 2 VACS-412-180 E Parsonnel Job Descriptions. 1. Written job descriptions that adequately describe the duties of every position shall be maintained. 2. Each job description shall include: position titls, authority, specific responsibilities and minimum qualifications. 3. Job descriptions shall be reviewed at least annually, legit current and given to each employee and volunteer when assigned to the position and when reviewed. To the facility will implement an annual review and documentation for yb descriptions for all Staff members. 2. A written job description for ultrasound technician	OAQ ID STANARY PREFUX BEACH DEPICIES TING REQUILATION O	ICY MUST BE PRECEDED BY H	ULL IDIO	PREFIX	GRACH CONSTITUTE ACTION SHOUL CROSS SEFERINGED TO THE APPRO		COMPLETE
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Bessed on staff intension and the review of eight (8) personnel records, facility szaff failed to: Will CR UNDER TO STUFF	Job Descriptions. 1. Written job descriptions describe the duties of maintained. 2. Each job descriptions the descriptions of minimum qualification. 3. Job descriptions are annually, kept current employee and volunt position and when reference the first RUILE: Is not medicated on staff intervi-	Job Descriptions. 1. Written job descriptions that adequately describe the duties of every position shall be maintained. 2. Each job description shall include: position title, authority, specific responsibilities and minimum qualifications. 3. Job descriptions shall be reviewed at least ennually, kept current and given to each employee and volunteer when assigned to the position and when revised. This RULLE: Is not met as evidenced by: Bessed on staff interview and the review of eight			1. The facility will implement an annuteview and clocumutor you descriptions all staff members 2. A written you defor ultrasound technicall be added to S	al ntation for excription ician itaff	21 2 2119

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T 095	1 - Conduct an annual review of job descriptions for eight (8) of eight (8) staff whose personnal records were reviewed. 2 - Ensure that the personnal record for one (1) staff member responsible for performing ultrasounds (Staff Member #2), included a job description for ultrasound technician, and. 3 - Ensure that two (2) staff members met the			T 085	3. The yob description for surgical Technological Technological Assimilation be reviewed updated. Staff #7 will contain the GED on 3/22	logist stant and lor molete	262)19 362)19
	3 - Ensure that two (2) staff members met are minimum qualifications stated in the job description for the position heather performed (Staff Members #5 and #7). Findings included: 1. A review of eight (8) personnel records evidenced that eight (8) of eight (8) records tacked documentation that job descriptions were reviewed arrivally. 2. A review of the personnel record for SM #2, the Administrator, who is also responsible for performing uttresounds, lacked a written job description for uttresound technician. 3. A review of the personnel record for SM's #5 and #7 revealed job descriptions for Surgical technologist pob descriptions for Surgical technologist pob description for that position "be a graduate of a certified surgical technician program". An internew with SM #1 was conducted on 1/16/19 at 11:15 a.m., and he/she stated "No, they have not graduated from a surgical technician program".				The facility will a employee files with updated documental training related to duties. The administrator review each emplosite annually.	pdate h tion/ o their will	
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T 270	p.m. 12 VACS-412-280 E	Anesthesia Services		T 270	T270	3/28/19
	The anesthesia ser under the supervisity Virginia who is certitechniques and has requirements.	vice shall be directed b on of a physician licent fled in advanced result met the continuing ed	ied in citative		Corrective action to ACLS has been so for March 28, 20	cheduled
	Based on staff Intel documentation, fac anesthesia service appreciation of a phresuscitative technic Findings included:	met as evidenced by: nylew and review of faci fity staff failed to ensus a were performed unde ysician certified in adve iques. dure log for the period i	re that ir the enced		all Physiciancs) refor performing abores well as the Photosporsible for produced anesthesia.	tions ysiaans)

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T 270	Continued From Page 5 1/3/19 and 1/15/19 evidenced that SM #4,			T 270	7270	a 16 13	2/20/19		
	procedures together	8, exectheriologist, per on the following days : p, 1/8/19, 1/10/19, 1/11	1		The administrator review each Physic	cian(s)			
	(SM) 84, a physicism surgical abortions at physicism, responsite services for surgical revealed that neither in ACLS (Advanced Both 8M 84 and SM	eviewed for Staff Membi, responsible for perfor the facility, and SM iff le for providing anesth abordons at the facility r SM iff nor #8 were or Cerdiac Life Support). #8 were certified in BL on the dates listed abo	ming 3, a tale rithed		fik annually in a to be in full com	phance			
	SN/ #1, the Assistant Administrator was Interviewed on 1/16/19 at approximately 12-15 p.m., and stated "(SM #4 and #6 have their CPR documentation in their email, they will get it to me".		CPR						
	On 1/24/19 at 3:00 p eurosyons that "ACL #4 and SM #6% nam	o.m. SM #1 advised the S had been echeduled nes) next month".	for (SM						
	Concerns related to procedure days when BM and SM #8 worked together, and the tack of AC cartification for either provider, were discussed with SM's #1, Assistant Administrator, and SM Administrator, on 1/24/19 at approximately 4:00 p.m.		SM #2,	·	T330		alosto		
T 250	12 VACS-412-270 E	quipment and Supplies	•	T 390		ماديد) allesk		
	equipment and supp	hall maintain medical ples appropriate and r patients based on the of services provided, to	e iewel, o		The facility will pro sterile suturing kits will a checklist for	the the			

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Table Continued From Page 8 1. Abad or rectiner suitable for recovery; 2. Copyen with flow meters and mests or equivalent; 3. Mechanical suction; 4. Resuscitation equipment to include, as a ministrum, resuscitation tages and oral elevays; 5. Emergency medications, intravenous fluids, and related supplies and equipment; 6. Startle suburing equipment and supplies; 7. Adjustable examination light; 8. Containers for solled linen and waste materials with covers; and 9. Refrigerator. This RULE; is not met as evidenced by: Based on observation and staff interview, the facility simples were available in the event those materials were required during an emergency. The Sindings included: During a review of the facility emergency medical equipment and supplies card on 1710/19 at approximately 10.03 a.m., the impresence were not able to locate any starfie suturing materials. Staff Member #1 stated, "They were expired, so I disposed of them and they have been re-ordered but they haven't arrived yet."	

AME OF PROVIDER OR SUPPLIER LEXANDRIA WOMEN'S HEALTH CLINIC ALEXANDRIA, VA. 22304 ALEXANDRIA, VA. 22304 INC. AMERICAN PLAN OF CONSECTION (IXS) COMPLETE COMPLETE	iste of Vir isterient of a PLAN OF C	STEMENT OF DEPICIENCIES 19 PLAN OF CORRECTION 19 PLAN OF CORRECTION 19 PROVIDENCIAL INSURFICIATION MUNICIPALITY APPORTS		FIGURIOSE (X1) PROVIDERIGIAPLIERICIA (X2) BLUD PLE CONTINUO (X2) BLU		COOKSTRUCTION	papaire suitiev completed 01/24/2019	
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On 1/2/4/19 at 2:10 p.m., the inspectors interviewed Staff Monther #1 as to whether the supplies (suturing materials) trad been received by the facility. Staff Monther #1 stated, 190. It is not here. Next there I will not dispose of them until I have received the new supplies, so at least we will have amenting we could use if there were an emergency." On 1/2/4/19 at 3:00 p.m., the inspectors discussed the findings with Staff Member #1 (Alternate Administrator) and Staff Member #2 (Administrator).	(tg) ID PREFIX TAG			IOH)	PROBLEM	CACH CONNECTIVE ACTOR	₩ WHOCEDIE	STANOO STANO
	T 330	On 1/24/19 at 3:10: interviewed Staff M supplies (subting in the facility. Staff M here. Next time I whave received the inhave something we emergency." On 1/24/19 at 3:00 the findings with St. Administrator) and	p.m., the inspectors omber 61 as to whether naturially had been receivement of the stated, "No. It is not dispose of them unew supplies, so at least a could use if there were p.m., the inspectors distant of them at Member 61 (Alternati	i is not ntit i we will an	Y 390			