

Reviewed 2-21-19

*[Signature]*PRINTED: 01/22/2019
FORM APPROVED

Texas Health and Human Services Commission

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 008444	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 01/08/2019
NAME OF PROVIDER OR SUPPLIER SUBURBAN WOMENS MEDICAL CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 17070 RED OAK DRIVE SUITE 509 HOUSTON, TX 77090			
(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
6 000	<p>TAC 139.1 Initial Comments</p> <p>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.</p> <p>(a) Purpose. The purpose of this chapter is to implement the Texas Abortion Facility Reporting and Licensing Act, Health and Safety Code, Chapter 245, which provides the Health and Human Services Commission with the authority to establish rules governing the licensing and regulation of abortion facilities and to establish annual reporting requirements for each abortion performed. This chapter also implements the Woman's Right to Know Act, Health and Safety Code, Chapter 171.</p> <p>(b) Scope and applicability.</p> <p>(1) Licensing requirements.</p> <p>(A) A person may not establish or operate an abortion facility in Texas without a license issued under this chapter unless the person is exempt from licensing requirements.</p> <p>(B) The following need not be licensed under this chapter:</p> <p>(i) a hospital licensed under Health and Safety Code, Chapter 241;</p> <p>(ii) an ambulatory surgical center licensed</p>	6 000			

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LABORATORY

SIGNATURE

TITLE

(X6) DATE

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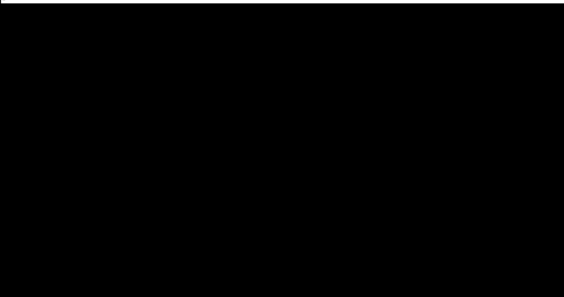
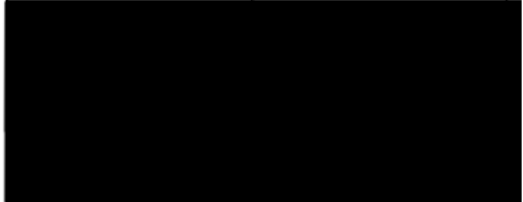
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01/04/19

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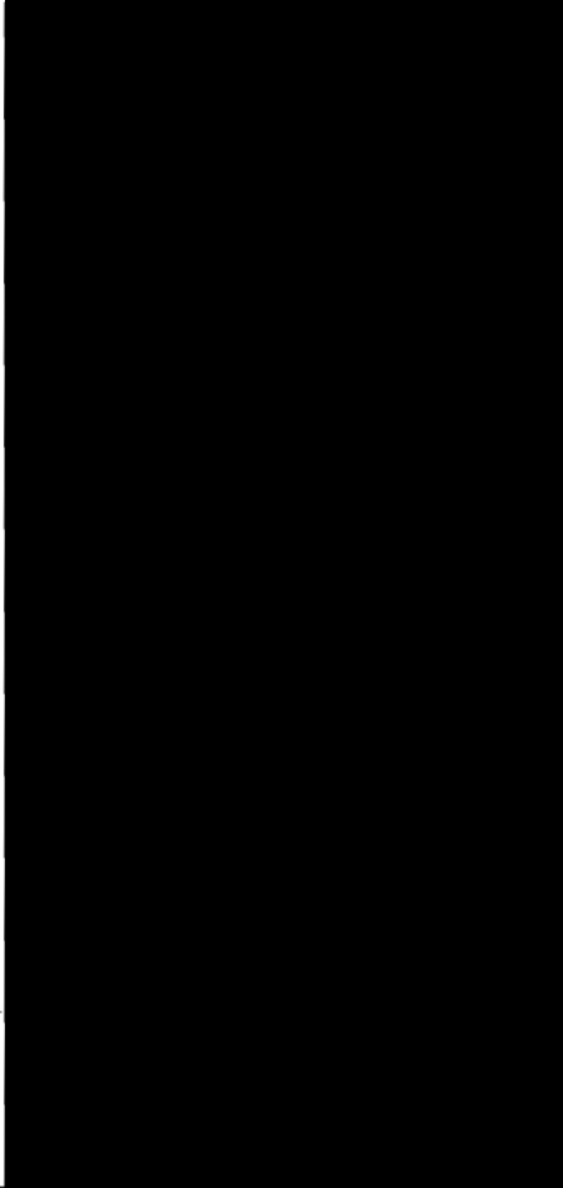

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6 000	Continued From page 1 under Health and Safety Code, Chapter 243; or (iii) the office of a physician licensed by the Texas Medical Board and authorized to practice medicine in the State of Texas, unless the office is used for the purpose of performing more than 50 abortions in any 12-month period. (2) Reporting requirements. All licensed abortion facilities and facilities and persons exempt from licensing shall comply with §139.4 of this title (relating to Annual Reporting Requirements for All Abortions Performed). An entrance conference was held with the facility nurse the morning of 1-7-19. The purpose and process of the licensure resurvey were discussed, and an opportunity given for questions. Continued licensure is recommended, with an approved plan of correction. An exit conference was held with the facility nurse and medical assistant the afternoon of 1-8-19. Preliminary findings of the survey were discussed, and an opportunity given for questions.	6 000			
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6 005	Continued From page 2 	6 005			02/28/19


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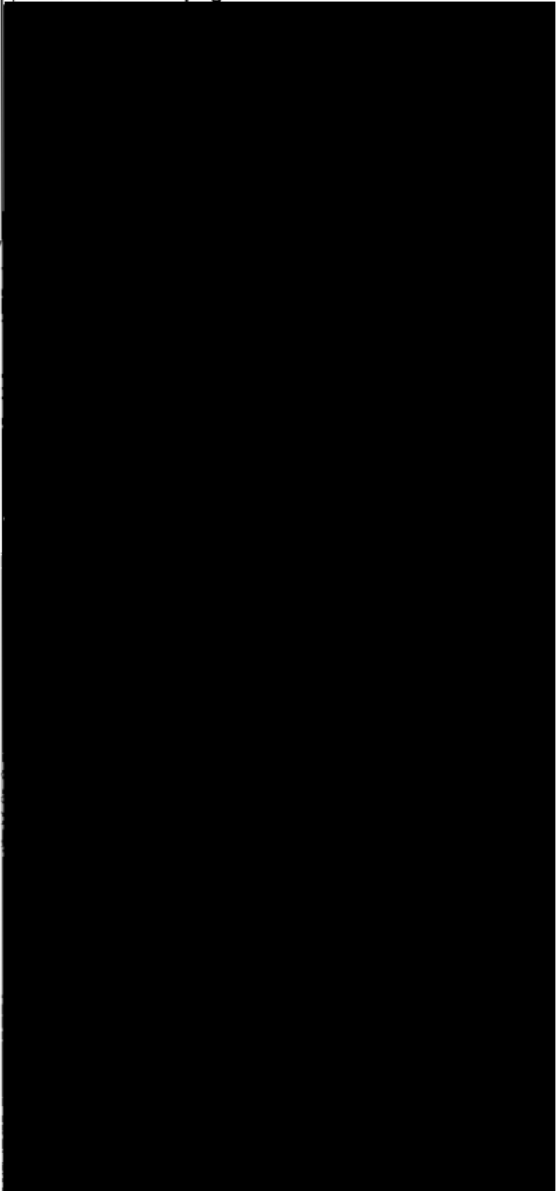

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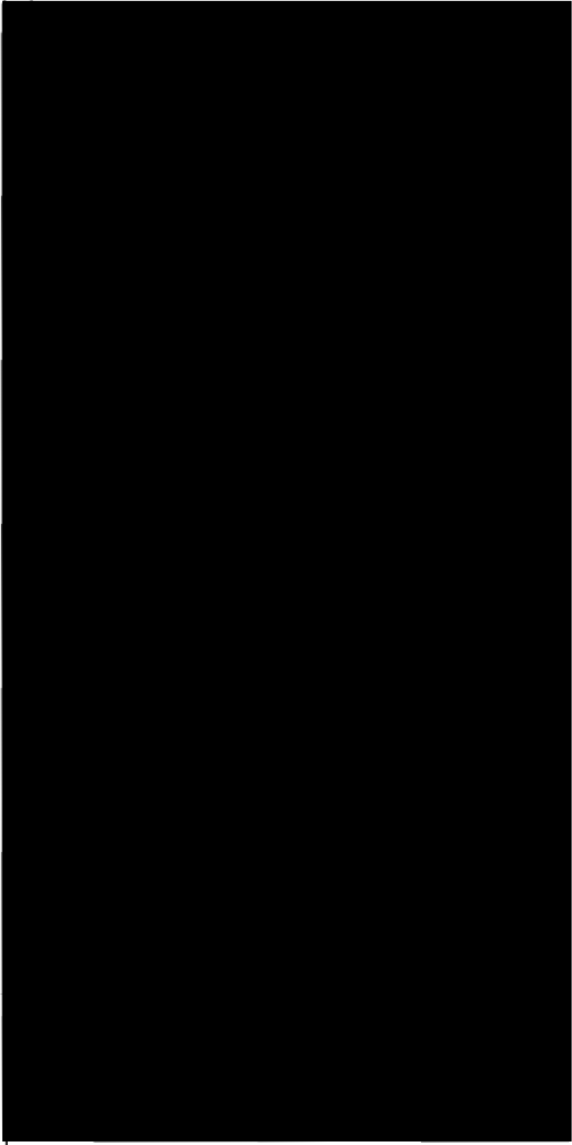
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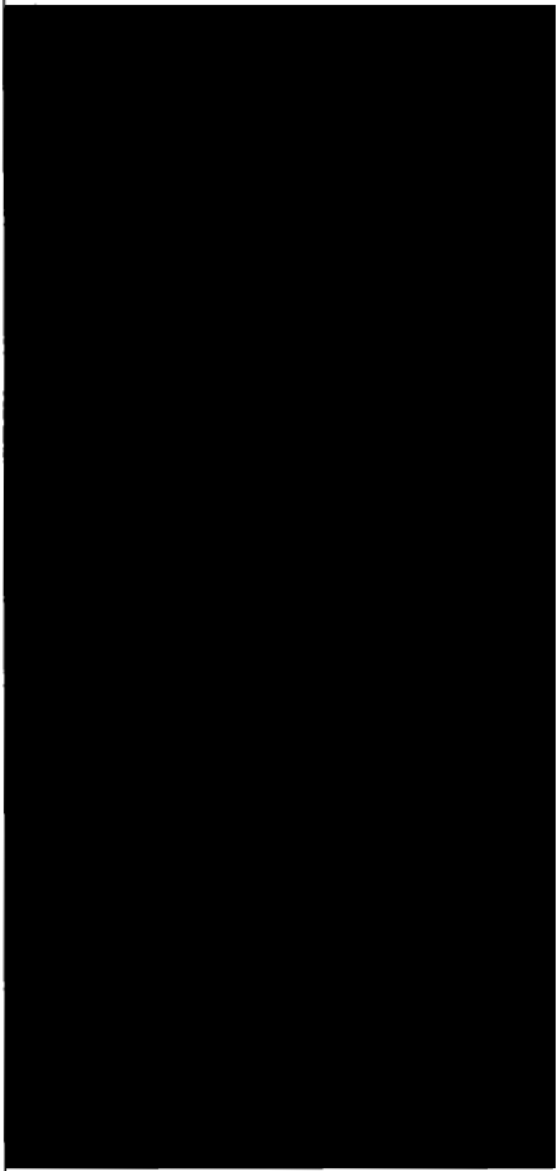
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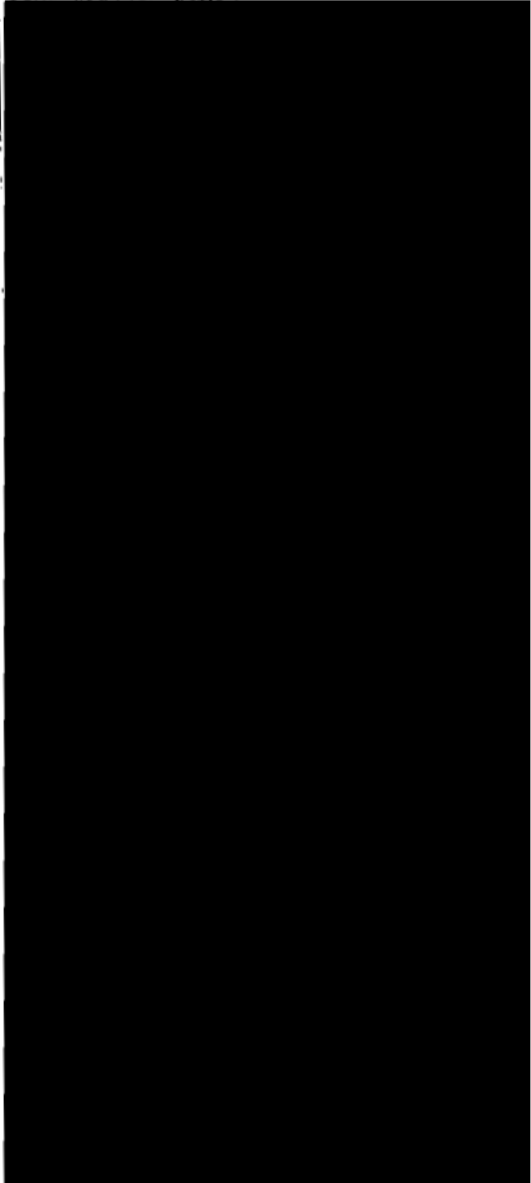
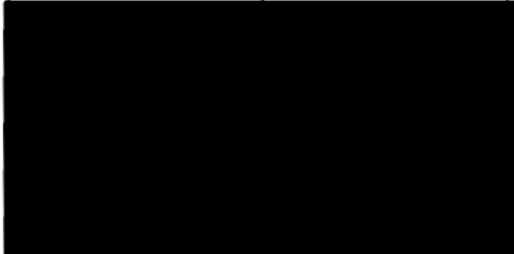
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6 007	Continued From page 6 	6 007			

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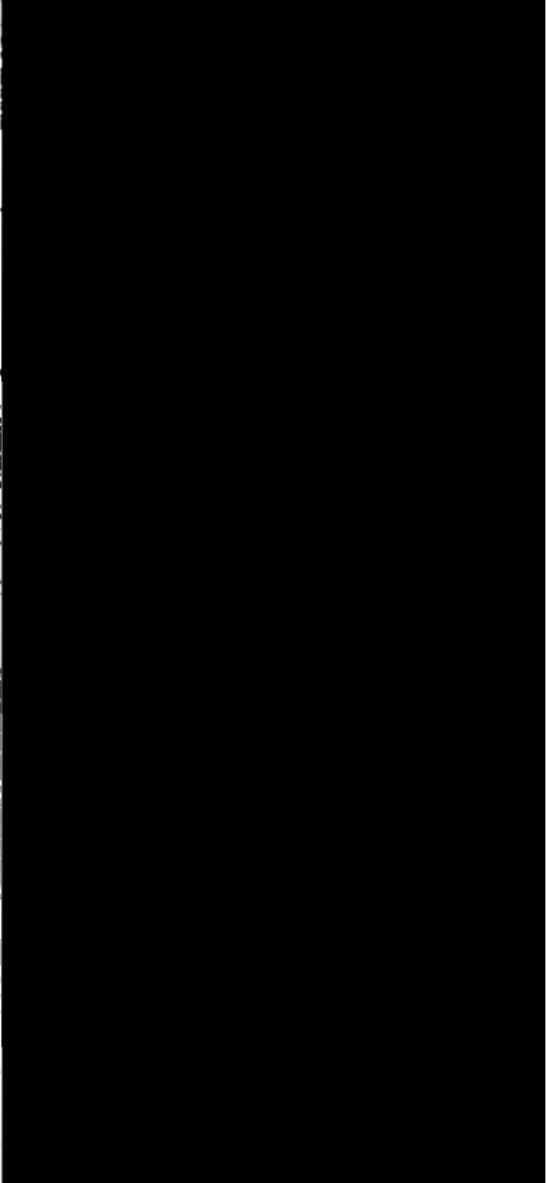
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6 007	Continued From page 7 	6 007			
6 009		6 009			02/28/19

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6 033	Continued From page 9	6 033			
6 033	<p>TAC 139.48 Physical and Environmental Requirements</p> <p>The physical and environmental requirements for a licensed abortion facility are as follows.</p> <p>(1) A facility shall:</p> <p>(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;</p> <p>(B) equip each procedure room so that procedures can be performed in a manner that assures the physical safety of all individuals in the area;</p> <p>(C) have a separate recovery room if moderate sedation/analgesia, deep sedation/analgesia, or general anesthesia are administered at the facility;</p> <p>(D) have a written protocol for emergency evacuation for fire and other disasters tailored to the facility's geographic location. Each staff member employed by or under contract with the facility shall be able to demonstrate their role or responsibility to implement the facility's emergency evacuation protocol required by this subparagraph;</p> <p>(E) store hazardous cleaning solutions and compounds in a secure manner and label substances;</p> <p>(F) have the capacity to provide patients with liquids. The facility may provide commercially packaged food to patients in individual servings.</p>	6 033	<p>I, The Medical Director in addition to maintaining equipments in safe working condition will make sure The Cosmetic appearance of all instruments and equipments is properly maintained to be consistent with TAC 139.48.</p>	02/28/19	

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6 033	<p>Continued From page 10</p> <p>If other food is provided by the facility, it shall be subject to the requirements of Chapter 228 of this title (relating to Retail Food);</p> <p>(G) provide clean hand washing facilities for patients and staff including running water, and soap;</p> <p>(H) have two functioning sinks and a functioning toilet; and</p> <p>(I) have equipment available to sterilize instruments, equipment, and supplies in accordance with §139.49(d) of this title (relating to Infection Control Standards) before use in the facility.</p> <p>(2) The equipment for vacuum aspiration shall be electrically safe and designed to prevent reverse pump action in facilities that provide vacuum aspiration.</p> <p>(3) Projects involving alterations of and additions to existing buildings shall be programmed and phased so that on-site construction shall minimize disruptions of existing functions. Access, exit ways, and fire protection shall be maintained so that the safety of the occupants shall not be jeopardized during construction.</p> <p>This Requirement is not met as evidenced by: Based on observation and interview, the facility failed to ensure a safe and sanitary environment, properly maintained to protect the health and safety of patients and staff at all times.</p> <p>Findings included:</p>	6 033			

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6 033	Continued From page 11 During a tour of the facility on the afternoon of January 8, 2019, along with Clinic Nurse (Employee ID #2) and Medical Assistant (Employee ID #3) the following was observed: In procedure room #1, a free standing chrome finished exam lamp was seen to have visible surface rust on the base of the unit. In procedure room #2, a suction machine was seen to have visible surface rust on the bottom edges of the back and sides of suction equipment. An accumulation of dust and debris was also observed underneath and behind the suction machine. In procedure room #3, a suction machine was seen to have visible surface rust on the bottom edges on the back and sides of the equipment along with an accumulation of visible dust on the back lower portion of the suction equipment. Interview with the clinical nurse on January 8, 2019 at 3:30 p.m. confirmed the findings of the rust, dust and debris in the procedure rooms. Employee ID #2 stated that she had not noticed that before.	6 033			
6 041	TAC 139.56 Emergency Services (a) A licensed abortion facility shall have a readily accessible written protocol for managing medical emergencies and the transfer of patients requiring further emergency care to a hospital. The facility shall ensure that the physicians who practice at the facility: (1) have active admitting privileges at a hospital that provides obstetrical or gynecological health	6 041	I, The Medical Director will make provisions for continued patient safety. The Medical Director's concern for the mentioned specific case was absolutely for making sure the patient was safe post op. I, The Medical Director will make sure the Clinic Emergency services are in accordance with TAC 139.56.		02/28/19

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6 041	<p>Continued From page 12</p> <p>care services and is located not further than 30 miles from the abortion facility;</p> <p>(2) provide the pregnant woman with:</p> <p>(A) a telephone number by which the pregnant woman may reach the physician, or other health care personnel employed by the physician or the facility at which the abortion was performed or induced with access to the woman's relevant medical records, 24 hours a day to request assistance for any complications that arise from the performance or induction of the abortion or ask health-related questions regarding the abortion; and</p> <p>(B) the name and telephone number of the nearest hospital to the home of the pregnant woman at which an emergency arising from the abortion would be treated.</p> <p>(b) The facility shall have the necessary equipment and personnel for cardiopulmonary resuscitation as described in §139.59 of this title (relating to Anesthesia Services).</p> <p>(c) Personnel providing direct patient care shall be currently certified in basic life support by the American Heart Association, the American Red Cross, or the American Safety and Health Institute, or in accordance with their individual professional licensure requirements, and if required in their job description or job responsibilities.</p> <p>This Requirement is not met as evidenced by: Based on a review of documentation and staff interview, the licensee failed to provide a patient with the name and telephone number of the</p>	6 041	<p>I, The Medical Director will obtain current CPR card hence forth. (The State has not required Physicians to carry or have CPR card)</p>		02/28/19

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6 041	<p>Continued From page 13</p> <p>nearest hospital to the home of the pregnant woman at which an emergency arising from the abortion would be treated. The facility also failed to ensure the personnel providing direct patient care were currently certified in basic life support as required in their job description or job responsibilities.</p> <p>Findings included:</p> <p>In 1 (patient # 11) out of 22 clinical records reviewed the patient's driver's license listed their place of residence to be in Milwaukee, Wisconsin and the facility provided the name and telephone number of Huntsville Memorial hospital in Huntsville, Texas as the hospital located nearest to her home of the patient. The information provided to the patient was not the nearest hospital to the home of the patient's residence.</p> <p>The above was confirmed in an interview with the facility physician and administrator (Employee ID #1) on the afternoon of January 7, 2019.</p> <p>Review on the morning of January 8, 2019 of Physician/Administrator (Employee #1) file documented a signed job description dated 12/04/2016 titled "SWMC - Administrator", Responsibilities: Overall coordination of clinic functions. Specific Responsibilities:.....9) Have a current CPR certification.</p> <p>Review of the Physician/Administrator (Employee ID #1) employee file documented an Adult/Child/Infant CPR card with a date issued October 7, 2016 and expiration date October 7, 2018. No current CPR card was documented in employee record.</p> <p>Interview with Employee ID #1 on the morning</p>	6 041			

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6 041	Continued From page 14 January 8, 2019 confirmed he did not have a current CPR. No additional documentation was received prior to exit.	6 041			