CAMELBACK FAMILY PLANNING

4141 NORTH 32ND STREET, SUITE 105
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(602) 279-2337

Facility ID: MED4426

License: AC5013

Health Survey Comments

The following deficiencies were found during an on-site State Compliance survey conducted on 10/15/19 and 10/17/19. Based on the rules found at R9-10 Article 15, Abortion Clinics, the Department has authorized the following scope of service: Abortion Services.
Pamela Frost, RN 10/29/19

Findings Report Summary

Findings for: Citation 1 **Corrected Date:** 12/06/2019	**Rule/Statute:** Administration **Rule Text:** R9-10-1503. Administration B. A licensee shall: 3. Designate a medical director who is licensed according to A.R.S. Title 32, Chapter 13, 17, or 29. The licensee and the medical director may be the same individual;	**Survey Text:** **R9-10-1503.B.3.**~ Based on review of Arizona Revised Statute, State Regulation R9-10-1501. Definitions, policy and procedure, observations on tour, and staff interview, the Department determined the licensee failed to ensure that the no coercion signs were conspicuously posted on the premises in accordance with A.R.S. 36-2153(H). This deficient practice posed the risk of a woman being forced to have an abortion to be unaware of her rights to contact agencies to receive protection from any actual or threatened physical, emotional or psychological abuse. Findings include: Arizona Revised Statute (A.R.S.) 36-2153(H) requires: "...An abortion clinic...shall conspicuously post signs that are visible...that are clearly readable and that state it is unlawful for any person to force a woman to have an abortion and a woman who is being forced to have an abortion has the right...to receive protection...." State Regulation R9-10-1501. Definition revealed: "Conspicuously posted" means placed at a locationwithin an abortion clinic that is accessible and visible to patients and the public. Policy and procedure regarding the posting of the required "no coercion signage" was requested. No policy was provided. Observation on tour of two procedure rooms on 10/15/19, and one exam room on 10/15/19, and 10/17/19, revealed no conspicuously postings of signs as defined in A.R.S. 36-2153(H). The signage measured in the exam room on 10/17/19, consisted of a 1 3/4" x 8 1/2" sized purple piece of copy paper taped to the cupboard over the hand washing sink. An individual would have to specifically walk up and bend over the sink in order to

		read the signage. Physician #6 revealed during interview conducted on 10/15/19, that the abortion rules do not designate a required size of the requisite signage, and that the signage is that size because s/he does not want to intimidate his/her clients.
Findings for: Citation 2 **Corrected Date:** 12/06/2019	**Rule/Statute:** Medical Records **Rule Text:** R9-10-1511. Medical Records A. A licensee shall ensure that: 2. A medical record is accessible only to the Department or personnel authorized by the abortion clinic''s policies and procedures;	**Survey Text:** **R9-10-1511.A.2.**~ Based on review of policy and procedure, observation, and staff interview, the Department determined that the licensee failed to ensure patient's medical records were not accessible to unauthorized individuals in the facility. This deficient practice posed the potential risk that sensitive patient information could be compromised. Findings include: Facility Patient Rights and Responsibilities revealed: " ...MEDICAL RECORDS: Patients have the right to have medical ...records kept in confidence ...." Facility policy titled "A. Confidentiality of Patient Records/Information" revealed: " ...3. All clinical records are kept in a secured area and only authorized office personnel will have access to the files ...." Facility policy titled "Patient Confidentiality Policy", Policy number 2-8, reviewed 7/1/19, revealed: " ...To define a code of behavior intended to protect the confidentiality of patients ...1. All information regarding patients ...is considered confidential. The facility will develop consistent approaches to the handling of data across the system that will balance the patient's rights to privacy and confidentiality ...All patient information is considered confidential ...." Facility policy titled "Medical Record Documentation Policy", Policy number 6-16, reviewed 7/1/19, revealed: " ...The following categories of staff shall be authorized to view patient medical records and make entries into chart: a. Nursing staff b. Medical staff c. Front office ...." Observation during tour on 10/15/19, with Physician #6, RN #6 and Employee #7, revealed unsecured paper medical records. The medical records were stored on non-lockable cabinets in the front office. There was no door separating the office from the rest of the facility. The office also included an extremely large 'checkout window' with no availability for closure. Physician #6, RN #6 and Employee #7 confirmed during interview on 10/15/19, that the paper medical records are not secured in the front office, and that the contracted cleaning crew has access to

		the front office for cleaning. The cleaning crew clean the office after hours unsupervised.
Findings for: Citation 3 **Corrected Date:** 12/06/2019	**Rule/Statute:** Equipment Standards **Rule Text:** R9-10-1513. Equipment Standards A licensee shall ensure that: 6. Equipment and supplies are clean and sterile, if applicable, before each use;	**Survey Text:** **R9-10-1513.6.**~ Based on review of policy and procedure, and staff interview, the Department determined that the licensee failed to implement a process to demonstrate how high-level disinfection cleaning for the various ultrasound vaginal cavity probes was maintained as evidence by no documentation to identify when the probes were cleaned. This deficient practice posed a potential risk during an invasive procedure for the transmission of infections due to cross contamination if there is no documentation that a probe has been high-level disinfected according to manufacturer's recommendations. Findings include: Facility Patient Rights and Responsibilities revealed: " ...MEDICAL CARE: Patients have the right to quality care and treatment consistent with available resources and generally accepted standards ...." Facility procedure titled "To clean the vaginal cavity probe" revealed: " ...Vaginal probes are considered semi-critical instruments and must be high-level disinfected ...the probe will be placed in the Revital-Ox RESERT HLD for the required eight minute soak. A timer will be started when the probe is placed in the container ...This process will occur at room temperature (>=68 degrees F +/-4 DEGREES) and a log will be kept of the temperature of the room ...." A log documenting the high-level disinfection of the various ultrasound vaginal cavity probes was requested. No policy was provided. Physician #6 and RN #6 confirmed during interview on 10/15/19, that the facility is not documenting the high-level disinfection of the various ultrasound vaginal cavity probes.