

McHenry County Blog



Illinois Abortion Facility Inspection Update – Part 3

Posted on [03/02/2012](#) by [Cal Skinner](#)

This is the third in a series of posts written by a friend of McHenry County Blog about inspection of abortion clinics by the Illinois Department of Health:

Access Health Clinic, Downers Grove



On 5/18/11 a nursing survey was done. Several violations were found

Terminal cleaning in one of the ORs was insufficient. They found a red stain on the wall, loose debris on the floor and standing water in a small bucket.

There were no post counseling notes in patient files.

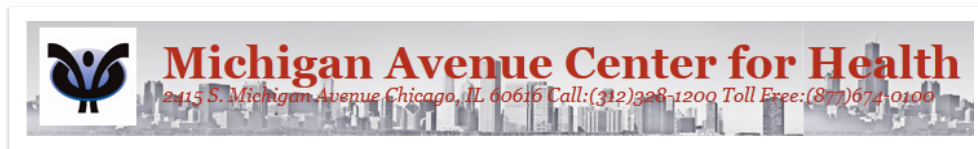
The correction was to notify the cleaning company and inform them of their lack of diligence and to submit a form for post counseling notes.

On 7/12/11 a Life Safety Survey was done. Multiple violations were found

Violations include a nonfunctional sprinkler head in the storage room (a hazardous area), lack of maintenance of the fire alarm system, improperly stored oxygen tanks, sprinkler system improperly installed, electrical outlets near sinks were not GFI protected, multiprong adaptors were being used in clinical and patient areas, and the sink faucet handles were not hands-free in the exam rooms. An acceptable plan of correction was submitted, and a recheck on 1/13/12 showed all deficiencies corrected.

Again, this clinic shows that regular inspections are not burdensome and help insure the safety of patients and employees.

Michigan Ave Center for Health, Chicago



On 6/23/11 a nursing survey was done. Multiple violations were found, some I would rate as serious.

Unsanitary conditions were found in both ORs and 1 recovery room. There was rust and residue and dust on the anesthesia machine. The suction tubing (designated as "clean") was found hanging over the biohazard container. When opened, the lid of the container touched the tubing (YUCK).

The crash cart contained expired IV bags.

Transferred patients lacked proper documentation accompanying them to the hospital.

There were no post counseling notes.

There was an acceptable plan of correction, which included trying a new betadine remover, moving the biohazard box, in service on terminal cleaning, making a new and better checklist for the crash cart, a memo to MDs and RNs that transferred patients must have complete records, and a form for post counseling. There has not been a resurvey yet, that I am aware of.

On 8/12/11 a Life Safety survey was done. Multiple violations were found.

Fire Drills were being held, but not at varying times.

The fire alarm system maintenance log was not complete.

The electrical panels were in a closet crowded with other stuff. The area needed to be clear for emergencies.

The plan of correction was accepted- mostly memos and contacting their fire alarm company. There was a resurvey on 11/4/11 that found all in compliance, except for lack of documentation of the location of the sprinklers in the sprinkler system. That documentation was submitted and the facility was declared compliant on 1/24/12.

This is another example of the importance of regular inspection and that it need not be burdensome. I do have concerns about the nursing inspection. The biohazard box location shows a lack of thinking/noticing a dangerous situation. That worries me. The transfer of patients with complications is a very important part of outpatient surgery. Getting it wrong is one of the major arguments against out-patient surgery in the first place. Out patient surgery is a relatively new endeavor. There are still doctors who insist that abortion is safe only in the hospital setting. This is an example of why.

More tomorrow.

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