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Mar 23 20,01:13p

Approved: 3/25/2020  
Jenny Stooksberry

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PRINTED: 03/16/2020  
FORM APPROVED

**Texas Health and Human Services Commission**

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|--|---|---|--|-----------------------|---|
| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION          |   | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br>140812               | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____   |                       | (X3) DATE SURVEY<br>COMPLETED<br><br>03/16/2020 |
| NAME OF PROVIDER OR SUPPLIER<br><br>NORTH PARK MEDICAL GROUP |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><br>8363 MEADOW ROAD<br>DALLAS, TX 75231 |  |                       |   |
| (X4) ID<br>PREFIX<br>TAG                                     | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)  | ID<br>PREFIX<br>TAG   | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5) COMPLETE<br>DATE |   |
| 8 000  | <p><b>TAC 139.1 Initial Comments</b></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 246, 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> | 8 000   |  |                       |   |

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LABORATORY DIRECTOR'S SIGNATURE

\_\_\_\_\_  
DIRECTOR'S SIGNATURE

TITLE

Med Director

(X6) DATE

3-23-20

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If correction sheet 1 of 4

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## Texas Health and Human Services Commission

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|--|---|---|--|---|
| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION          |   | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br>140012           | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____   | (X3) DATE SURVEY<br>COMPLETED<br><br>03/10/2020 |
| NAME OF PROVIDER OR SUPPLIER<br><br>NORTH PARK MEDICAL GROUP |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br>8363 MEADOW ROAD<br>DALLAS, TX 75231 |  |   |
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| 6 000  | Continued From page 1<br><br>under Health and Safety Code, Chapter 243; or<br><br>(iii) the office of a physician licensed by the<br>Texas Medical Board and authorized to practice<br>medicine in the State of Texas, unless the office<br>is used for the purpose of performing more than<br>50 abortions in any 12-month period.<br><br>(2) Reporting requirements. All licensed abortion<br>facilities and facilities and persons exempt from<br>licensing shall comply with §139.4 of this title<br>(relating to Annual Reporting Requirements for All<br>Abortions Performed).<br>An unannounced entrance conference was held<br>with the facility Assistant Administrator on the<br>morning of 03/09/20. The purpose and process of<br>the relicensure survey were discussed, and an<br>opportunity given for questions.<br><br>Continued licensure is recommended with an<br>approved plan of correction.<br><br>An exit conference was held with the facility<br>Assistant Administrator on the afternoon of<br>03/10/20. Preliminary findings of the survey were<br>discussed, and an opportunity given for<br>questions. | 6 000   |  |   |
| 6 041  | TAC 139.56 Emergency Services<br><br>(a) A licensed abortion facility shall have a readily<br>accessible written protocol for managing medical<br>emergencies and the transfer of patients<br>requiring further emergency care to a hospital.<br>The facility shall ensure that the physicians who<br>practice at the facility:<br><br>(1) have active admitting privileges at a hospital<br>that provides obstetrical or gynecological health  | 6 041   |  |   |

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

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| 6 041  | Continued From page 3<br><br>certified in basic life support by the American Heart Association, the American Red Cross, or the American Safety and Health Institute.<br><br>Findings included:<br><br>The facility failed to ensure that all direct care staff were competent in cardio-pulmonary resuscitation (CPR). The documentation for Staff #1, the facility's Medical Director and patient physician, revealed their basic life support (BLS) and advanced cardiovascular life support (ACLS) expired on February 2020. Staff #1 provided patient care on 3/2/2020, 3/3/2020 and 3/4/2020 with expired cardiopulmonary resuscitation training.<br><br>The above findings were confirmed in an interview with Staff #4 on the afternoon of 3/9/2020. | 6 041   | The Medical Director will ensure all personnel providing direct patient care has currently been certified in Basic Life Support by the American Heart Association, the American Red Cross, or the American Safety and Health Institute. The Medical Director and the ACLS/BLS Instructor originally had the recertification class scheduled for Wednesday February 26, 2020. Unfortunately, the Medical Director had a Family Emergency, therefore that class was rescheduled to Wednesday March 04, 2020. The ACLS/BLS Instructor had to reschedule class to the following week Monday, March 09, 2020. At which time the Medical Director was able to obtain current ACLS/BLS. Ongoing compliance will be monitored by the Medical Director and by the Assistant Administrator by scheduling the ACLS/BLS class a month prior to expiration as to avoid any lapse of coverage. | 03/10/2020                                      |

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