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**TAC 139.1 Initial Comments**

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.

(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.

(b) Scope and applicability.

1. Licensing requirements.

   (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.

   (B) The following need not be licensed under this chapter:

   
   1. a hospital licensed under Health and Safety Code, Chapter 241;

   2. an ambulatory surgical center licensed
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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 Director of Clinical Services on the afternoon of 02/24/20. 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 Director of Clinical Services and Clinical manager on the afternoon of 02/25/20. Preliminary findings of the survey were discussed, and an opportunity given for questions.

6 033 TAC 139.48 Physical and Environmental Requirements

The physical and environmental requirements for a licensed abortion facility are as follows.

(1) A facility shall:

(A) have a safe and sanitary environment, properly constructed, equipped, and maintained to protect the health and safety of patients and
Continued from page 2

staff at all times;

(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;

(C) have a separate recovery room if moderate sedation/analgesia, deep sedation/analgesia, or general anesthesia are administered at the facility;

(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;

(E) store hazardous cleaning solutions and compounds in a secure manner and label substances;

(F) have the capacity to provide patients with liquids. The facility may provide commercially packaged food to patients in individual servings. 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);

(G) provide clean hand washing facilities for patients and staff including running water, and soap;

(H) have two functioning sinks and a functioning toilet; and
Continued From page 3

(i) have equipment available to sterile instruments, equipment, and supplies in accordance with §139.49(d) of this title (relating to Infection Control Standards) before use in the facility.

(ii) The equipment for vacuum aspiration shall be electrically safe and designed to prevent reverse pump action in facilities that provide vacuum aspiration.

(iii) 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.

This Requirement is not met as evidenced by:
Based on a tour of the facility and a review of documentation, the facility failed to maintain a safe and sanitary environment, properly constructed, equipped, and maintained to protect the health and safety of patients and staff at all times.

Findings were:

During a tour of the facility on 02/25/20 the following observation was made:
* External shipping boxes were found stored in the laundry room.

Cardboard boxes are usually delivered to hospital receiving docks from other shipping dock locations on carts or pallets, prior to arriving into a health care facility. Mice, insects, vermin, dirt
Continued From page 4

with pathogenic organisms can be carried into a hospital within the cardboard boxes used as external shipping cartons. Also, corrugated cardboard boxes can and do shed particles that contribute to dust in hospital environments. whereby microorganisms can hitch a ride. If corrugated cardboard becomes wet, it becomes a source for bacterial growth. External shipping containers have been exposed to unknown and potentially high microbial contamination. Also, shipping cartons, especially those made of a corrugated material, serve as generators of and reservoirs for dust.

The above findings were confirmed on 02/25/20 with staff member #1.

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 care services and is located not further than 30 miles from the abortion facility;

(2) provide the pregnant woman with:

(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
### 6.041

Continued From page 5

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

(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.

(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).

(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.

This Requirement is not met as evidenced by:

Based on a review of medical records and interview, the facility failed to provide the patient with name and telephone number of the nearest hospital to the home of the patient at which an emergency arising from the abortion would be treated.

Findings included:

Patient #1’s medical record revealed the patient’s home address was listed as in Illinois on her medical history this was confirmed on the driver’s license provided. However the facility provided
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<td>6 041</td>
<td>The name and phone number of a hospital located in Forth Worth. This is not the the name and phone number of nearest hospital to the home of the patient at which an emergency arising from the abortion would be treated. In an interview on 02/25/20 staff member #1 verified the above findings.</td>
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<td>The Clinic Manager is responsible for ensuring compliance with all policies regarding medical and clinical services. Whole Woman's Health of Fort Worth complies with requirements set forth by HB2 by providing patients with the written name and phone number of the hospital nearest to them at the time of their discharge. A staff in-service will be facilitated on March 16, 2020, to re-train staff to document two hospital locations if patients will not be returning to their home address following their discharge. In order to monitor compliance, patient charts will be audited at the end of every clinic day, as well as a random monthly chart audit conducted by clinic staff under the supervision of the Clinic Manager.</td>
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