Texas Department of State Health Services

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 880072 | A. BUILDING: _____ B. WING _____ | 10/27/2015 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| WOMEN'S CENTER HOUSTON | 8200 WEDNESBURY LANE, SUITE 230 HOUSTON, TX 77074 |

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| A 000 | TAC 139 Initial Comments<br><br>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.<br>An unannounced visit was made to the above named facility on 10-27-15 to conduct an initial licensure survey to determine compliance with 25 TAC ( Texas Administrative Code) Chapter 139 State Licensing Rules for Abortion Facility.<br><br>An Entrance Conference was conducted on the morning of 10-27-15 with the facility's administrator. The purpose of the visit and procedure for the inspection was discussed. An opportunity for questions was provided.<br><br>An exit conference was conducted on the afternoon of 10-27-15 with the facility's administrator. Findings and determination of the inspection was discussed. An opportunity for questions was provided. | A 000 | REVIEW POC'S<br>11-20-15<br>REVIEWED<br><br>Recv'd<br>NOV 20 2015<br>HFC - Houston | |
| A 129 | [redacted] | A 129 | | |

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| A 129 | Continued From page 1 [redacted] | A 129 | [redacted] | 01-08-16 |
| | | | [redacted] | 01-08-16 |

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| A 129 | Continued From page 2 [redacted] | A 129 | | |
| A 130 | TAC 139.41(a)(2)(G)(H)(I) Policy Development and Review<br><br>(G) clinical records;<br>(H) reporting and filing requirements; and<br>(I) monitoring post-procedure infection(s).<br><br>This Requirement is not met as evidenced by:<br>Based on record review and interview, the facility failed to develop, implement, and monitor clinical policies regarding the following:<br><br>Clinical records, and<br>Monitoring post-procedure infections.<br><br>Findings include:<br><br>Record review on 10-27-15 of facility policy and procedure binder failed to reveal policies related to the following: | A 130 | The office administrator will provide a daily check list and policies guidelines for clinical records, reporting and filing requirements, and monitoring post-procedure infections. | 01-08-16 |

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| A 130 | Continued From page 3<br>Clinical records, and<br>Monitoring post-procedure infections.<br><br>Clinical records:<br><br>Review of 14 sampled patients' clinical records revealed appropriate documentation of clinical information.<br><br>Interview on 10-27-15 at 2:15 p.m. with facility Administrator # 3 : she was unable to locate a policy that addressed clinical records.<br><br>Monitoring of post-op infections:<br><br>Interview on 10-27-15 at 2:15 p.m. with facility Administrator # 3 she stated infections were monitored through post-op telephone calls and follow-up visits with the patients.<br><br>Facility Administrator # 3 was unable to locate a policy that addressed monitoring of post-procedure infections. | A 130 | | |
| A 240 | TAC 139.49(d)(5)(C)(i) Infection Control Standards<br><br>(C) Preparation for sterilization.<br>(i) All items to be sterilized shall be prepared to reduce the bioburden. All items shall be thoroughly cleaned, decontaminated and prepared in a clean, controlled environment. Cleaning is the removal of all adherent visible soil from the surfaces, crevices, joints, and lumens of instruments. Decontamination is the physical/chemical process that renders an inanimate object safe for further handling. | A 240 | | |

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| A 240 | Continued From page 4<br>This Requirement is not met as evidenced by:<br>Based on observation, interview and record review the facility failed to implement their infection control policy to ensure instruments were thoroughly cleaned prior to sterilization.<br>The facility failed to ensure ratcheted instruments requiring sterilization were sterilized in the opened position to ensure maximum sterility.<br>This failed practice had the potential for the spread of infection to all patients who come in contact with the instruments. Citing random observation in the sterilization area.<br><br>Observation on 10/27/2015 at 11:15 am in the clean sterilization area revealed there were nine (9) sealed sterilization pouches with instruments that were prepared for sterilization. The instruments in the pouch were visible through the cellophane wrapping.<br>The packages contained forceps and speculums that were in the closed position, preventing complete exposure of all areas of the instruments to the steam sterilization.<br>Further inspection revealed there was a visible speck of blood on the handle of one of the forceps in a prepared package.<br>During an interview on 10/27/2015 at 11:35 am with the Medical Director he stated the instruments were used during the surgical abortion procedure and staff would be retrained in proper cleaning and preparation of instruments for sterilization.<br>Review of the facility ' s policy/procedure titled Disinfection, Decontamination, & Sterilization revealed the following information:<br>" All instruments are washed and rinsed repeatedly until all are completely clean by careful individual visual inspection ".<br>Review of the facility ' s policy titled " Preparation before Sterilization " revealed the following | A 240 | The office administrator will provide a check list for the cleaning and preparation of instruments for sterilization that will be monitored by the medical director before going thru the sterilization process. | 01-08-16 |

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| A 240 | Continued From page 5<br>information:<br>" All instruments must be sterilized in an open position. Place instruments with ratchets opened and unlocked or clipped on the first ratchet position. Surfaces that are hidden because the item is in closed position will not be exposed to the steam and will not be sterilized ". | A 240 | | |