

Please be advised that the Department's Bureau of Health Facilities Licensing is requiring the facility to submit corrective action plans in response to the Licensing reports of visit. Information on the resolution of the corrective action is expected to be available upon written request within fifteen days of the date the corrective action plans are due.




Location Information	Audit Information
License Number: AB-0001	Audit Form: Abortion Clinic ROV 20150827
Mail Stop: HL- Abortion Clinic	Audit Type: L01 Routine
Location Name: GREENVILLE WOMEN'S CLINIC	Start Date: Wednesday, September 02, 2015
Address 1: 1142 GROVE RD	Stop Date: Wednesday, September 02, 2015
City/State/Postal Code: GREENVILLE , SC , 29605-4692 , Greenville	Auditor: Michell Hatcher
Phone 1: 864-232-1584	Contact Name:
Email: KATHY.ADAMS99@YAHOO.COM	

<p>Bureau of Health Facilities Licensing 2600 Bull St Columbia SC 29201-1708</p> <p>REPORT NOTICE: If applicable, this Report of Visit includes a detailed description of the conditions, conduct or practices that were found to be in violation of requirements. This inspection or investigation is not to be construed as a check of every condition that may exist, nor does it relieve the licensee (owner) from the need to meet all applicable standards, regulations and laws. The South Carolina Code of Laws requires this Department to establish and enforce basic standards for the licensure (permitting), maintenance, and operation of health facilities and services to ensure the safe and adequate treatment of persons served in this State. It also empowers the Department to require reports and make inspections and investigations as considered necessary. Furthermore, the Code authorizes the Department to deny, suspend, or revoke licenses (permits) or to assess a monetary penalty against a person or facility for (among other reasons), violating a provision of law or departmental regulations or conduct or practices detrimental to the health or safety of patients, residents, clients, or employees of a facility or service. If applicable to the type of report being made, the signature of the activity representative indicates that all of the items cited were reviewed during the exit discussion. If this Report of Visit is required by regulation to be made available in a conspicuous place in a public area within the facility, redaction of the names of those individuals in the report is required as provided by Sections 44-7-310 and 44-7-315 of the S.C. Code of Laws, 1976, as amended.</p>	<p>Report Notice</p>
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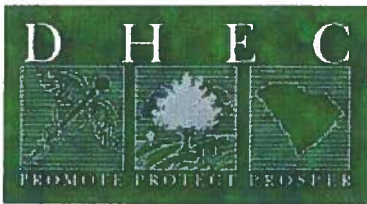
ADMINISTRATOR'S SIGNATURE - PLAN OF CORRECTION	
<p>PLAN OF CORRECTION - Administrators Certification: I certify that the attached plan of correction describes:</p> <p>(1) the actions taken to correct each cited deficiency, (2) the actions taken to prevent similar recurrences, and (3) the actual or expected completion dates of those actions.</p> <p>PRINT NAME: _____</p> <p>TITLE: _____</p> <p>SIGNATURE: _____</p> <p>DATE: _____</p> <p>Any violations cited in this report of visit were observed at the time of the inspection.</p> <p>Administrator returns a copy of this report (original signature required) with description of corrective actions to: SCDHEC, Bureau of Health Facilities Licensing, 2600 Bull St, Columbia, SC, 29201</p> <p>Your response to this report must be received in our office by close of business (5:00 p.m.) no later than the date listed below:</p>	<p>POC REQUIRED</p>

<i>Plan of Correction is due 15 days from receipt of this report.</i>	
INSPECTION INFORMATION	
Inspection Includes Licensing:	YES
Inspection Includes Fire & Life Safety:	NO
Is this an On-Site Visit?	YES
Select the Type of Inspection to be Performed:	Abortion Clinic Inspection (Licensing and/or FLS)
What Date Did the Auditor Arrive at the Facility?	2 Sep 2015
What Time Did the Auditor Arrive at the Facility?	9:00:18 AM
Facility Administrator:	Kathy Adams
Enter the name and title of the Facility/Activity Representative for this Report of Visit.	Kathy Adams, Administrator
Is the Current Facility/Activity Administrator the same as the Administrator of Record?	YES
Are there any other individuals accompanying the auditor for this visit? <i>Janice McFaddin, Charlene Bell, Leslie Yasinsac, Crispulo Isiminger</i>	YES
AC REGULATION PARTS I-VII 61-12	
208. Clinics must comply with the Woman's Right to Know Act, Section 44-41-310 et seq., of the S.C. Code of Laws, 1976, as amended, and maintain an adequate supply of current printed material from the Department which has not been altered in content. (Class I Violation) <i>In 1 of 25 medical records reviewed, the record documented that an abortion was performed sooner than 60 minutes following completion of the ultrasound. See section 44-41-330 (A)(1). A The ultrasound was conducted at 1:16 pm and the procedure was conducted 1:50 pm.</i>	OUT
303.A.1. Emergency Kit or Emergency Drugs. Each facility shall maintain an emergency kit or stock supply of drugs and medicines for the use of the physician in treating the emergency needs of patients. This kit or medicine shall be stored in such a manner as to prohibit its access by unauthorized personnel. A listing of contents by drawer or shelf shall be placed on the cabinet or emergency cart to allow quick retrieval. Contents shall correspond with the inventory list. Drugs and equipment must be available within the facility to treat, as a minimum, the following conditions: a. Cardiac arrest; b. Seizure; c. Asthmatic attack; d. Allergic reaction; e. Narcotic toxicity; f. Hypovolemic shock; g. Vasovagal shock. (Class I Violation) <i>The contents of the emergency drug kit did not correspond with the kit's inventory list, as follows: A) One (1) Flumazenil available - Two (2) Flumazenil on list B) One (1) Venteline (Albuteral) available - Two (2) Venteline (Albuteral) on list C) Four (4) Epinephrine available - Five (5) Epinephrine on list D) Five (5) Benadryl Amp - No Benerdryl Amp on list</i>	OUT
304.H. Products of conception resulting from the abortion procedure must be managed in accordance with requirements for pathological waste pursuant to Department R.61-105, Infectious Waste Management Regulations. All	OUT

contaminated dressings and/or similar waste shall be properly disposed of in accordance with R.61-105. (Class II Violation) <i>Manifest for 2012, 2013, 2014, and 2015 were stamped " steam sterilized." The Facility did not ensure that infectious waste was managed according to the requirements of Regulation 61-105, South Carolina Waste Management.</i>	
401.A.1. The record shall include as a minimum the following information: A face sheet with patient identification data, to include but not be limited to: name, address, telephone number, social security number, date of birth, father's and mother's names when patient is a minor, husband's name, and name, address and telephone number of person to be notified in the event of an emergency; (Class II Violation) <i>In 8 of 12 medical records reviewed for minors, the name of the father was not documented in the record.</i>	OUT
403.A.1. The following shall be reported to Vital Records and Public Health Statistics of this Department: Any abortion performed, to be reported by the performing physician on the standard form for reporting abortions, within seven days after the abortion is performed; (Class II Violation) <i>In 1 of 25 patient medical records reviewed, the record documented that the abortion procedure was reported to the Department's Office of Vital Records 13 days after the abortion procedure was performed and not within 7 days of the procedure as required.</i>	OUT
605.D. All waste meeting the definition of "infectious waste" as defined in Regulation 61-105 must be managed according to the requirements of that regulation. (Class II Violation) <i>Manifest sheets for 2012, 2013, 2014, and 2015 were stamped " steam sterilized." The Facility did not ensure the infectious waste was managed according to the requirements of Regulation 61-105, South Carolina Waste Management.</i>	OUT
DHEC 0282 (05/2010) AUDIT - [Records Retention Schedule #SBH-F&S-17]	Retention
PROTECTED INFORMATION	
Is this information CONFIDENTIAL? This section names or identifies certain individuals related to cited violations. If you identify by name any patient, client, resident, participant, or staff you must check 'YES' by CONFIDENTIAL. Otherwise, check 'NO.' 	YES

Auditor Signature: Michell Hatcher
No Signature Available

Representative Signature:
No Signature Available



Location Information	Audit Information
License Number: AB-0001	Audit Form: Abortion Clinic ROV 20150827
Mail Stop: HL- Abortion Clinic	Audit Type: L07 Investigation
Location Name: GREENVILLE WOMEN'S CLINIC	Start Date: Wednesday, September 02, 2015
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City/State/Postal Code: GREENVILLE , SC , 29605-4692 , Greenville	Auditor: Michell Hatcher
Phone 1: 864-232-1584	Contact Name:
Email: KATHY.ADAMS99@YAHOO.COM	

<p>Bureau of Health Facilities Licensing 2600 Bull St Columbia SC 29201-1708</p> <p>REPORT NOTICE: If applicable, this Report of Visit includes a detailed description of the conditions, conduct or practices that were found to be in violation of requirements. This inspection or investigation is not to be construed as a check of every condition that may exist, nor does it relieve the licensee (owner) from the need to meet all applicable standards, regulations and laws. The South Carolina Code of Laws requires this Department to establish and enforce basic standards for the licensure (permitting), maintenance, and operation of health facilities and services to ensure the safe and adequate treatment of persons served in this State. It also empowers the Department to require reports and make inspections and investigations as considered necessary. Furthermore, the Code authorizes the Department to deny, suspend, or revoke licenses (permits) or to assess a monetary penalty against a person or facility for (among other reasons), violating a provision of law or departmental regulations or conduct or practices detrimental to the health or safety of patients, residents, clients, or employees of a facility or service. If applicable to the type of report being made, the signature of the activity representative indicates that all of the items cited were reviewed during the exit discussion. If this Report of Visit is required by regulation to be made available in a conspicuous place in a public area within the facility, redaction of the names of those individuals in the report is required as provided by Sections 44-7-310 and 44-7-315 of the S.C. Code of Laws, 1976, as amended.</p>	<p>Report Notice</p>
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ADMINISTRATOR'S SIGNATURE - PLAN OF CORRECTION	
<p>PLAN OF CORRECTION - Administrators Certification: I certify that the attached plan of correction describes:</p> <p>(1) the actions taken to correct each cited deficiency, (2) the actions taken to prevent similar recurrences, and (3) the actual or expected completion dates of those actions.</p> <p>PRINT NAME: _____</p> <p>TITLE: _____</p> <p>SIGNATURE: _____</p> <p>DATE: _____</p> <p>Any violations cited in this report of visit were observed at the time of the inspection.</p> <p>Administrator returns a copy of this report (original signature required) with description of corrective actions to: SCDHEC, Bureau of Health Facilities Licensing, 2600 Bull St, Columbia, SC, 29201</p> <p>Your response to this report must be received in our office by close of business (5:00 p.m.) no later than the date listed below:</p>	<p>POC REQUIRED</p>

Plan of Correction is due 15 days upon receipt of the Report of Visit.

INSPECTION INFORMATION

Inspection Includes Licensing:	YES
Inspection Includes Fire & Life Safety:	NO
Is this an On-Site Visit?	YES
Select the Type of Inspection to be Performed:	Abortion Clinic Investigation
Section Team Log Number: <i>M08053-15</i>	Section Team Log Number
Reason for Investigation: <i>The South Carolina Department of Health and Environmental Control conducted</i>	Reason for Investigation:
What is the Source:	Other
Date Agency (DHEC) Notified: <i>August 18, 2015</i>	Date Agency (DHEC) Notified:
Detailed Results of this Investigation: <i>The South Carolina Department of Health and Environmental Control's Bureau of Health Facilities Licensing and Bureau of Land and Waste Management conducted a joint investigation in accordance with the August 18, 2015 request by Governor Nikki Haley. The Department made an unannounced visit to Greenville Womens Center for Investigation M08053-15 to determine compliance with state laws and regulations. Department personnel interviewed facility staff regarding, but not limited to, facility operational and patient care policies and procedures, memoranda of agreement, agreement with a board certified OB-GYN physician with admitting privileges at a local hospital, and consultation agreements. Department personnel also reviewed staff personnel files relating to professional licensure, orientation, in-service training, infection control, patient confidentiality, job descriptions, and 25 patient medical records. A walk through of the facility was also conducted pertinent to the collection, processing, storage, and disposal of tissue. During the walk through with Bureau of Land and Waste Management inspectors observed a small plastic red biohazard container with biohazard markings on the outside of the container in the freezer portion of the refrigerator in the sterilization room. Facility staff reports the products of conception are collected in this red biohazard container and held until placed in storage for waste pick up. Violations of Health Facilities Licensing standards were cited as a result of this investigation.</i>	Detailed Results
Is this an Unlicensed Facility/Activity?	NO
Has the Initial QI Review Been Completed?	NO
What Date Did the Auditor Arrive at the Facility?	2 Sep 2015
What Time Did the Auditor Arrive at the Facility?	9:00:57 AM
Facility Administrator:	Kathy Adams
Enter the name and title of the Facility/Activity Representative for this Report of Visit.	Kathy Adams
Is the Current Facility/Activity Administrator the same as the Administrator of Record?	YES
Are there any other individuals accompanying the auditor for this visit? <i>Janice McFaddin, RN, DHEC, Charlene Bell, Field Manager, DHEC, Leslie Yasin, Leslie Yasinac, DHEC, Chrispilo Isiminger, DHEC</i>	YES

AC REGULATION PARTS I-VII 61-12

<p>304.H. Products of conception resulting from the abortion procedure must be managed in accordance with requirements for pathological waste pursuant to Department R.61-105, Infectious Waste Management Regulations. All contaminated dressings and/or similar waste shall be properly disposed of in accordance with R.61-105. (Class II Violation)</p> <p><i>Manifest sheets for the following dates: 2012, 2013, 2014, and ,2015 were reviewed and observed to be stamped as steam sterilized. Documentation reviewed does not ensure the waste was managed according to the requirements of Regulation 61-105, South Carolina Waste Management.</i></p>	OUT
<p>605.D. All waste meeting the definition of "infectious waste" as defined in Regulation 61-105 must be managed according to the requirements of that regulation. (Class II Violation)</p> <p><i>Manifest sheets for the following dates: 2012, 2013, 2014, and ,2015 were reviewed and observed to be stamped as steam sterilized. Documentation reviewed does not ensure the waste was managed according to the requirements of Regulation 61-105, South Carolina Waste Management.</i></p>	OUT
DHEC 0282 (05/2010) AUDIT - [Records Retention Schedule #SBH-F&S-17]	Retention
PROTECTED INFORMATION	
<p>Is this information CONFIDENTIAL? This section names or identifies certain individuals related to cited violations. If you identify by name any patient, client, resident, participant, or staff you must check 'YES' by CONFIDENTIAL. Otherwise, check 'NO.'</p>	NO

Auditor Signature: Michell Hatcher
No Signature Available

Representative Signature:
No Signature Available



Catherine E. Heigel, Director

Promoting and protecting the health of the public and the environment

September 11, 2015

Thomas W. Campbell, Jr., MD, President
Greenville Women's Clinic
1142 Grove Road
Greenville, S.C. 27605-4692

CERTIFIED MAIL
ELECTRONIC RECEIPT REQUESTED
91 7199 9991 7033 6612 9704

Dear Dr. Campbell:

Please find enclosed the Department's Administrative Order, executed September 11, 2015. This Administrative Order represents a final staff determination regarding the Department's enforcement action against Greenville Women's Clinic.

Also, enclosed are instructions regarding the process should you elect to submit a Request for Final Review (RFR) by the S.C. Board of Health and Environmental Control.

Should you have questions, please contact me at (803) 545-4370.

Sincerely,

A handwritten signature in black ink that reads 'Gwen C. Thompson'.

Gwen C. Thompson, Chief
Bureau of Health Facilities Licensing

Enclosures: Administrative Order, executed September 11, 2015
Appeal Guidelines

CC: Shelly Bezanson Kelly, DHEC
Eva C. Johnson, DHEC

Ashley C. Biggers, DHEC
Kathy B. Adams, Administrator

CERTIFICATE OF SERVICE

The undersigned for the South Carolina Department of Health and Environmental Control (DHEC) states that he/she has on September 11, 2015, served upon the necessary parties the Department's certified letter and contents (91 7199 9991 7033 6612 9704), dated September 11, 2015, to the facility listed below by depositing copies of same in the U.S. Mail, return address clearly stated with sufficient postage affixed thereto, addressed as follows:

Thomas W. Campbell, Jr. MD, President
Greenville Women's Clinic, P.A.
1142 Grove Road
Greenville, S.C. 29605-4692

Additional copies were mailed to the following address:

Kathy B. Adams, Administrator
Greenville Women's Clinic, P.A.
1142 Grove Road
Greenville, S.C. 29605-4692

(If applicable) Additional copies of this letter were sent to the facility's legal representative(s) at the following address:


DHEC Employee

Columbia, South Carolina

September 11, 2015
Date

Sworn to before me this 11
Day of September, 2015
Katrina S Davis
Katrina S Davis
NOTARY PUBLIC for S.C.
My Commission Expires: 3/23/19

Embossed Hereon is My
State of South Carolina Notary Public Seal
My Commission Expires March 23, 2019
Katrina S Davis

**STATE OF SOUTH CAROLINA
THE DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL**

IN RE:

Greenville Women's Clinic, P.A., Licensee
Greenville Women's Clinic
1142 Grove Road
Greenville, S.C. 29605-4692

ADMINISTRATIVE ORDER

Greenville Women's Clinic ("the Facility") is an abortion clinic licensed by the South Carolina Department of Health and Environmental Control ("DHEC" or "the Department") pursuant to the *State Certification of Need and Health Facility Licensure Act* ("the Act"), S.C. Code Ann. §§ 44-7-110, *et seq.* (2002 and Supp. 2014), *Abortions Generally*, S.C. Code Ann. §§ 44-41-10, *et seq.*, and *Standards for Licensing Abortion Clinics*, 3 S.C. Code Ann. Regs. 61-12 (2011). The Department visited Greenville Women's Clinic on September 2, 2015, to conduct a general inspection and complaint investigation. Based upon the violations cited and taking into consideration the severity of the violations, the Department has determined it appropriate to suspend the license of Greenville Women's Clinic and impose a civil monetary penalty.

FINDINGS OF FACT

1. Greenville Women's Clinic, P.A. is the licensee of Greenville Women's Clinic, an abortion clinic located in Greenville, South Carolina.
2. On September 2, 2015, Department representatives conducted a general inspection and a complaint investigation. As a result of the inspections, the Department representatives cited the following violations of Regulation 61-12:

	Section	Description of violation
1.	208	In 1 of 25 medical records reviewed, the record documented that an abortion was performed sooner than 60 minutes following completion of the ultrasound.
2.	303.A.1	The following drugs in the emergency kit did not correspond to the contents listed on the kit's inventory list: 1-Flumazenil available, 2-Flumazenil listed; 1- Ventekine (Albuterol) available, 2- Venteline (Albuterol) listed; 4-Epinephrine available, 5-Epinephrine listed; 5-Benadryl Ampules available, 0-Benadryl Ampules listed.
3.	304.H	Products of conception resulting from abortion procedures were not managed and properly disposed of by incineration in accordance with Regulation 61-105, <i>South Carolina Infectious Waste Management</i> . See 8 S.C. Code Ann. Regs. 61-105 § T.9 (2012) Manifest sheets for the years of 2012, 2013, 2014 and 2015 were documented, by stamp, "steam sterilized."
4.	401.A.1	For 25 records of clients reviewed during the general inspection, 12 of whom were minors, 8 of the minors' records did not include the names of the minor's father.
5.	403.A.1	In 1 of 25 records review, the record did not document that the abortion procedure was reported to the Department's Office of Vital Records.
6.	605.D	Waste meeting the definition of "infectious waste" as defined in Regulation 61-105, <i>South Carolina Infectious Waste Management</i> , was not managed and properly disposed of by incineration in accordance with the requirements of Regulation 61-105. Manifest

3. As a result of the above, the Department determined that suspension of the license of Greenville Women's Clinic and the imposition of a civil monetary penalty is appropriate at this time.

CONCLUSIONS OF LAW

1. The Department is the agency of the State of South Carolina responsible for licensing abortion facilities pursuant to the *State Certification of Need and Health Facility Licensure Act*, S.C. Code Ann. §§ 44-7-110, *et seq.* (2002 and Supp. 2014), *Abortions Generally*, S.C. Code Ann. §§ 44-41-10, *et seq.* (2002), and *Standards for Licensing Abortion Clinics*, 3 S.C. Code Ann. Regs. 61-12 (2011).

2. An abortion facility may not be operated in South Carolina without first obtaining a license from the Department. S.C. Code § 44-7-260(A)(4) (2002), S.C. Code Ann. § 44-41-75(A) (2002), and 3 S.C. Code Ann. Regs. 61-12 § 102.A (2011).

3. The Department is authorized to make inspections and investigations as considered necessary. S.C. Code Ann. § 44-7-150(1) (2002) and 3 S.C. Code Ann. Regs. 61-12 § 102.F.1 (2011).

4. The Department may deny, suspend, or revoke licenses or assess a monetary penalty, or both, against a person or facility for violation of the Act or departmental regulations. S.C. Code Ann. § 44-7-320(A)(1)(a) (Supp. 2014); *see also* 3 S.C. Code Ann. Regs. 61-12 § 103 (2011).

5. Abortion clinics shall comply with the Woman's Right to Know Act, S.C. Code Ann. §§ 44-41-310, *et seq.* *Id.* § 208.

6. Abortion clinics shall place a listing of contents by drawer or shelf on the cabinet or cart where emergency drugs are maintained. *Id.* § 303.A.1.

7. Abortion clinics shall ensure that products of conception resulting from abortion procedures are managed in accordance with requirements for pathological waste pursuant to Regulation 61-105, *South Carolina Infectious Waste Management*. *Id.* § 304.H.

8. Abortion clinics shall ensure that patients' records include the father's and mother's names when the patient is a minor. *Id.* § 401.A.1.

9. Abortion clinics shall ensure that any abortion performed is reported to the Office of Vital Records of the South Carolina Department of Health and Environmental Control within 7 days of the procedure. *Id.* § 403.A.1.

10. Abortion clinics shall ensure that waste meeting the definition of "infectious waste" as defined in Regulation 61-105, *South Carolina Infectious Waste Management*, is managed in accordance with Regulation 61-105. *Id.* § 605.D.

11. Based upon the foregoing findings of fact, the Department finds that the Facility violated Regulation 61-12 as follows:

a. The Facility violated Section 208 on September 2, 2015, by failing on one occasion to comply with Section 44-41-330(A)(1) of the Woman's Right to Know Act. Violation of Section 208 is a Class I penalty and carries a penalty range of \$200-1,000 for a first occurrence. The Department has determined to impose a \$1,000 monetary penalty for this violation.

b. The Facility violated Section 303.A.1 on September 2, by failing to have a listing of the contents by drawer or shelf on the cabinet or cart where emergency drugs are maintained. Violation of Section 303.A.1 is a Class I penalty and carries a penalty range of \$200-1,000 for a first occurrence. The Department has determined to impose a \$500 monetary penalty for this violation.

c. The Facility violated Section 304.H on September 2, 2015, by failing to ensure that products of conception resulting from abortion procedures were managed and properly disposed of by incineration in accordance with Section T.9 of Regulation 61-105, *South Carolina Infectious Waste Management*. Violation of Section 304.H is a Class II penalty and carries a penalty range of \$100-500 for a first occurrence. The Department has determined to impose a \$500 monetary penalty for this violation.

d. The Facility violated Section 401.A.1 on September 2, 2015, by failing to document both parent names in the medical record of minors. Violation of Section 401.A.1 is a Class II penalty and carries a penalty range of \$100-500 for a first occurrence. The Department has determined to impose a \$250 monetary penalty for this violation.

e. The Facility violated Section 403.A.1 on September 2, 2015, by failing to report abortion procedures performed to the Office of Vital Records of the South Carolina Department of Health and Environmental Control within 7 days of the procedure being performed. Violation of Section 403.A.1 is a Class II penalty and carries a penalty range of \$100-500 for a first occurrence. The Department has determined to impose a \$500 monetary penalty for this violation.

f. The Facility violated Section 605.D on September 2, 2015, by failing to ensure that waste meeting the definition of "infectious waste" as defined in Regulation 61-105, *South Carolina Infectious Waste Management*, was managed in accordance with Regulation 61-105. Violation of Section 605.D is a Class III penalty.

12. In consideration of the above, the Department determined that the following discipline is warranted at this time.

NOW, THEREFORE IT IS ORDERED THAT, pursuant to S.C. Code Ann. § 44-7-320(A)(1)(a) (Supp. 2014) and 3 S.C. Code Ann. Regs. 61-12 § 103 (2011):

1. The license of Greenville Women's Clinic is hereby suspended until further notice from the Department, which will be contingent upon the facility complying with the conditions set forth below.

2. The Department assesses a \$2,750 monetary penalty against Greenville Women's Clinic for the above noted violations. Payment of the \$2,750 assessed monetary penalty is due within 30 days of execution of this Administrative Order by certified check or money order payable to the S.C. Department of Health and Environmental Control. Payment shall be sent to the following address:

Attention: Gwen C. Thompson, Chief
Bureau of Health Facilities Licensing
S.C. Department of Health and Environmental Control
2600 Bull Street
Columbia, S.C. 29201

If payment is late for any reason not otherwise approved by the Department, the Department may assess additional monetary penalties and/or initiate additional enforcement action against Greenville Women's Clinic, up to and including revocation of the Facility's license to operate as an abortion clinic.

3. The Department will lift the suspension upon the following conditions:

a) Greenville Women's Clinic's payment of the imposed monetary penalty.

b) Greenville Women's Clinic's timely submission of a plan of correction ("POC") to the Department addressing the corrective actions taken, the preventive actions taken and the date of those action in regard to the violations contained in the Department's reports of visits for the September 2, 2015, general inspection and September 2, 2015 investigation.

c) Greenville Women's Clinic providing to the Department evidence of Greenville Women's Clinic's training of all employees and volunteers in the Facility's policies and procedures, the requirements of the Woman's Right To Know Act, S.C. Code Ann. §§ 44-41-310, *et seq.*, and all inservice/training requirements set forth in Section 204.F of Regulation 61-12.

4. Greenville Women's Clinic shall ensure that all files and records are maintained and preserved as required by Regulation 61-12.

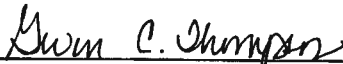
IT IS SO ORDERED.

THE SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL



Shelly Bezanson Kelly
Director of Health Regulation

9-11-15
Date



Gwen C. Thompson
Bureau Chief for Health Facilities Licensing

9/11/15
Date

Reviewed by:



Ashley Biggers, Esquire
Chief Counsel for Health Regulation

9-11-15
Date

South Carolina Board of Health and Environmental Control

Guide to Board Review

Pursuant to S.C. Code Ann. § 44-1-60

The decision of the South Carolina Department of Health and Environmental Control (Department) becomes the final agency decision fifteen (15) calendar days after notice of the decision has been mailed to the applicant, permittee, licensee and affected persons who have requested in writing to be notified, unless a written request for final review accompanied by a filing fee in the amount of \$100 is filed with Department by the applicant, permittee, licensee or affected person.

Applicants, permittees, licensees, and affected parties are encouraged to engage in mediation or settlement discussions during the final review process.

If the Board declines in writing to schedule a final review conference, the Department's decision becomes the final agency decision and an applicant, permittee, licensee, or affected person may request a contested case hearing before the Administrative Law Court within thirty (30) calendar days after notice is mailed that the Board declined to hold a final review conference. In matters pertaining to decisions under the South Carolina Mining Act, appeals should be made to the South Carolina Mining Council.

I. Filing of Request for Final Review

1. A written Request for Final Review (RFR) and the required filing fee of one hundred dollars (\$100) must be received by Clerk of the Board within fifteen (15) calendar days after notice of the staff decision has been mailed to the applicant, permittee, licensee, or affected persons. If the 15th day occurs on a weekend or State holiday, the RFR must be received by the Clerk on the next working day. RFRs will not be accepted after 5:00 p.m.
2. RFRs shall be in writing and should include, at a minimum, the following information:
 - The grounds for amending, modifying, or rescinding the staff decision;
 - a statement of any significant issues or factors the Board should consider in deciding how to handle the matter;
 - the relief requested;
 - a copy of the decision for which review is requested; and
 - mailing address, email address, if applicable, and phone number(s) at which the requestor can be contacted.
3. RFRs should be filed in person or by mail at the following address:
South Carolina Board of Health and Environmental Control
Attention: Clerk of the Board
2600 Bull Street
Columbia, South Carolina 29201
Alternatively, RFR's may be filed with the Clerk by facsimile (803-898-3393) or by electronic mail (boardclerk@dhec.sc.gov).
4. The filing fee may be paid by cash, check or credit card and must be received by the 15th day.
5. If there is any perceived discrepancy in compliance with this RFR filing procedure, the Clerk should consult with the Chairman or, if the Chairman is unavailable, the Vice-Chairman. The Chairman or the Vice-Chairman will determine whether the RFR is timely and properly filed and direct the Clerk to (1) process the RFR for consideration by the Board or (2) return the RFR and filing fee to the requestor with a cover letter explaining why the RFR was not timely or properly filed. Processing an RFR for consideration by the Board shall not be interpreted as a waiver of any claim or defense by the agency in subsequent proceedings concerning the RFR.
6. If the RFR will be processed for Board consideration, the Clerk will send an Acknowledgement of RFR to the Requestor and the applicant, permittee, or licensee, if other than the Requestor. All personal and financial identifying information will be redacted from the RFR and accompanying documentation before the RFR is released to the Board, Department staff or the public.
7. If an RFR pertains to an emergency order, the Clerk will, upon receipt, immediately provide a copy of the RFR to all Board members. The Chairman, or in his or her absence, the Vice-Chairman shall based on the circumstances, decide whether to refer the RFR to the RFR Committee for expedited review or to decline in writing to schedule a Final Review Conference. If the Chairman or Vice-Chairman determines review by the RFR Committee is appropriate, the Clerk will forward a copy of the RFR to Department staff and Office of General Counsel. A Department response and RFR Committee review will be provided on an expedited schedule defined by the Chairman or Vice-Chairman.
8. The Clerk will email the RFR to staff and Office of General Counsel and request a Department Response within eight (8) working days. Upon receipt of the Department Response, the Clerk will forward the RFR and Department Response to all Board members for review, and all Board members will confirm receipt of the RFR to the Clerk by email. If a Board member does not confirm receipt of the RFR within a twenty-four (24) hour period, the Clerk will contact the Board member and confirm receipt. If a Board member believes the RFR should be considered by the RFR Committee, he or she will

respond to the Clerk's email within forty-eight (48) hours and will request further review. If no Board member requests further review of the RFR within the forty-eight (48) hour period, the Clerk will send a letter by certified mail to the Requestor, with copy by regular mail to the applicant, permittee, or licensee, if not the Requestor, stating the Board will not hold a Final Review Conference. Contested case guidance will be included within the letter.

NOTE: If the time periods described above end on a weekend or State holiday, the time is automatically extended to 5:00 p.m. on the next business day.

9. If the RFR is to be considered by the RFR Committee, the Clerk will notify the Presiding Member of the RFR Committee and the Chairman that further review is requested by the Board. RFR Committee meetings are open to the public and will be public noticed at least 24 hours in advance.
10. Following RFR Committee or Board consideration of the RFR, if it is determined no Conference will be held, the Clerk will send a letter by certified mail to the Requestor, with copy by regular mail to the applicant, permittee, or licensee, if not the Requestor, stating the Board will not hold a Conference. Contested case guidance will be included within the letter.

II. Final Review Conference Scheduling

1. If a Conference will be held, the Clerk will send a letter by certified mail to the Requestor, with copy by regular mail to the applicant, permittee, or licensee, if not the Requestor, informing the Requestor of the determination.
2. The Clerk will request Department staff provide the Administrative Record.
3. The Clerk will send Notice of Final Review Conference to the parties at least ten (10) days before the Conference. The Conference will be publically noticed and should:
 - include the place, date and time of the Conference;
 - state the presentation times allowed in the Conference;
 - state evidence may be presented at the Conference;
 - if the conference will be held by committee, include a copy of the Chairman's order appointing the committee; and
 - inform the Requestor of his or her right to request a transcript of the proceedings of the Conference prepared at Requestor's expense.
4. If a party requests a transcript of the proceedings of the Conference and agrees to pay all related costs in writing, including costs for the transcript, the Clerk will schedule a court reporter for the Conference.

III. Final Review Conference and Decision

1. The order of presentation in the Conference will, subject to the presiding officer's discretion, be as follows:
 - Department staff will provide an overview of the staff decision and the applicable law to include [10 minutes]:
 - Type of decision (permit, enforcement, etc.) and description of the program.
 - Parties
 - Description of facility/site
 - Applicable statutes and regulations
 - Decision and materials relied upon in the administrative record to support the staff decision.
 - Requestor(s) will state the reasons for protesting the staff decision and may provide evidence to support amending, modifying, or rescinding the staff decision. [15 minutes] *NOTE: The burden of proof is on the Requestor(s)*
 - Rebuttal by Department staff [15 minutes]
 - Rebuttal by Requestor(s) [10 minutes]

Note: Times noted in brackets are for information only and are superseded by times stated in the Notice of Final Review Conference or by the presiding officer.
2. Parties may present evidence during the conference; however, the rules of evidence do not apply.
3. At any time during the conference, the officers conducting the Conference may request additional information and may question the Requestor, the staff, and anyone else providing information at the Conference.
4. The presiding officer, in his or her sole discretion, may allow additional time for presentations and may impose time limits on the Conference.
5. All Conferences are open to the public.
6. The officers may deliberate in closed session.
7. The officers may announce the decision at the conclusion of the Conference or it may be reserved for consideration.
8. The Clerk will mail the written final agency decision (FAD) to parties within 30 days after the Conference. The written decision must explain the basis for the decision and inform the parties of their right to request a contested case hearing before the Administrative Law Court or in matters pertaining to decisions under the South Carolina Mining Act, to request a hearing before the South Carolina Mining Council.. The FAD will be sent by certified mail, return receipt requested.
9. Communications may also be sent by electronic mail, in addition to the forms stated herein, when electronic mail addresses are provided to the Clerk.

The above information is provided as a courtesy; parties are responsible for complying with all applicable legal requirements.