

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 01D0301897	(X3) Date Survey Completed 05/30/2024
Name of Provider or Supplier Greene County Health System	Street Address, City, State 509 Wilson Avenue, Eutaw, AL	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

(X4) ID Prefix Tag	Summary Statement of Deficiencies
D5555	<p>IMMUNOHEMATOLOGY CFR(s): 493.1271(c)(f)</p> <p>(c) Blood and blood products storage. Blood and Blood products must be stored under appropriate conditions that include an adequate temperature alarm system that is regularly inspected. (c)(1) An audible alarm system must monitor proper blood and blood product storage temperature over a 24-hour period. (c)(2) Inspections of the alarm system must be documented. (f) Documentation. The laboratory must document all control procedures performed, as specified in this section.</p> <p>This STANDARD is not met as evidenced by: Based on a review of maintenance records and an interview with Testing Personnel #1, the laboratory failed to document inspections of the audible alarm system of the Blood Bank refrigerator. This was noted from the date of the last survey, 8/9/2022, to the date of the current survey, 5/29/2024. The findings include: 1. A review of Blood Bank maintenance records revealed a lack of documented alarm checks for the Blood Bank refrigerator. 2. During an interview on 5/30/2024 at 11:45 AM, Testing Personnel #1 explained that the laboratory was monitoring the refrigerator routinely for acceptable temperatures, however, no maintenance check has been performed and documented for the alarm system.</p>
D6054	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(9)</p> <p>The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least annually, after the first year.</p> <p>This STANDARD is not met as evidenced by:</p>

Based on a review of Personnel records and an interview with the Technical Consultant, the Technical Consultant failed to assess competency on an annual basis for all non waived testing systems for Testing Personnel #1. This was noted for one of two opportunities for competency assessment from 2023 to 2024. The findings include: 1. A review of Personnel records revealed Testing Personnel #1 to have a complete annual competency assessment dated 5/29/2024. No evidence of an annual competency assessment for 2023 was available for review at the time of survey. 2. During an interview on 5/30/2024 at 12:00 PM, the Technical Consultant confirmed the above findings.