Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	01D0303966	02/03/2020
Name of Provider or Supplier	**Street Address, City, State**	
Bullock County Hospital	102 Conecuh Avenue, Union Springs, 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
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Based on a review of the CASPER reports (#153/#155), a review of API (American Proficiency Institute) proficiency testing records, and a telephone interview with the laboratory manager on January 31, 2020, the surveyor determined the laboratory failed to successfully participate in proficiency testing for the White Blood Cell Differential (WBC differential) for two consecutive testing events, Event #2 and #3 of 2019. These failures resulted in the laboratory's initial unsuccessful proficiency testing occurrence for the WBC differential. The findings include: 1. A review of the CASPER reports revealed the laboratory scored zero percent (0 %) for the WBC differential (Hematology testing) for Events #2 and #3 of 2019. These two

	consecutive failures resulted in the laboratory's initial unsuccessful proficiency testing participation for the WBC differential. 2. A review of the API proficiency testing records confirmed the above noted consecutive failures for the WBC differential. 3. In a telephone interview on January 31, 2020 at 3:22 PM, the laboratory manager stated the failures were due to clerical errors with data entry.
D2130	HEMATOLOGY CFR(s): 493.851(f) Failure to achieve satisfactory performance for the same analyte in two consecutive events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on a review of the CASPER reports (#153/#155), a review of API (American Proficiency Institute) proficiency testing records, and a telephone interview with the laboratory manager on January 31, 2020, the surveyor determined the laboratory failed to satisfactorily perform in proficiency testing for the White Blood Cell Differential (WBC differential) for two consecutive testing events, Event #2 and #3 of 2019. These failures resulted in the laboratory's initial unsuccessful proficiency testing occurrence for the WBC differential. The findings include: 1. Refer to D2016.