

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  03D0885959	<b>(X3) Date Survey Completed</b>  07/24/2019
<b>Name of Provider or Supplier</b>  Encompass Health Rehabilitation Hospital Of	<b>Street Address, City, State</b>  9630 E Shea Blvd, Scottsdale, AZ	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D2009</b>	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods.</p> <p>This STANDARD is not met as evidenced by: Based on review of proficiency testing (PT) records from 2018 and 2019 and interview with the facility personnel, the laboratory director and testing personnel failed to sign the PT attestation statement for the 2nd event of 2019 for Chemistry for Blood Gas testing. Findings include: 1. The PT attestation statement presented for review for the second event of 2019 for Chemistry lacked the director's signature and the signature of the testing personnel. 5. The facility personnel confirmed that the PT attestation statement indicated above was not signed by the laboratory director or the testing personnel.</p>
<b>D5787</b>	<p>TEST RECORDS CFR(s): 493.1283(a)</p> <p>The laboratory must maintain an information or record system that includes the following: (a)(1) The positive identification of the specimen. (a)(2) The date and time of specimen receipt into the laboratory. (a)(3) The condition and disposition of specimens that do not meet the laboratory's criteria for specimen acceptability. (a)(4) The records and dates of all specimen testing, including the identity of the personnel who performed the test(s).</p> <p>This STANDARD is not met as evidenced by: Based on review of i-Stat Blood Gas test records and interview with the facility</p>

personnel, the laboratory failed to have a system in place to positively identify the individual that was associated with the specific operator ID indicated on each test result strip. Findings include: 1. The i-Stat Blood Gas test result strips indicate different operator ID numbers depending on which testing personnel performed the test. 2. There was no reference sheet or key that indicated each individual testing personnel's name and their specific operator ID that was associated with their name. 3. Each test result sheet had a signature of the testing personnel, but there was no way to verify that the operator ID indicated on the test result strip belonged to the individual that signed the test result sheet. 4. The facility personnel acknowledged that a operator ID reference sheet or key did not exist.

**D6054**

**TECHNICAL CONSULTANT RESPONSIBILITIES**  
CFR(s): 493.1413(b)(9)

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.

This STANDARD is not met as evidenced by:

Based on lack of competency evaluation documentation for review and interview with the facility personnel, the technical consultant failed to provide verification documentation of the performance of individuals responsible for moderate complexity testing at least annually. Findings include: 1. No annual competency evaluation verification documentation for Blood Gas testing was presented for 2 out of 4 testing personnel for 2018. 2. The facility personnel acknowledged that the annual competency evaluations for two testing personnel were not provided for review at the time of the survey.

**D6065**

**TESTING PERSONNEL QUALIFICATIONS**  
CFR(s): 493.1423(b)(1)(2)(3)(4)(i)

(b) Meet one of the following requirements: (b)(1) Be a doctor of medicine or doctor of osteopathy licensed to practice medicine or osteopathy in the State in which the laboratory is located or have earned a doctoral, master's, or bachelor's degree in a chemical, physical, biological or clinical laboratory science, or medical technology from an accredited institution; or (b)(2) Have earned an associate degree in a chemical, physical or biological science or medical laboratory technology from an accredited institution; or (b)(3) Be a high school graduate or equivalent and have successfully completed an official military medical laboratory procedures course of at least 50 weeks duration and have held the military enlisted occupational specialty of Medical Laboratory Specialist (Laboratory Technician); or (b)(4)(i) Have earned a high school diploma or equivalent; and

This STANDARD is not met as evidenced by:

Based on lack of verification of educational requirements and interview with the laboratory personnel, the laboratory failed to provide required documentation of testing personnel qualifications for one out of four testing personnel. Findings include: 1. No documentation of education qualifications were presented for review for one out of four testing personnel who performs moderate complexity patient

testing under the sub-specialty of Routine Chemistry. 2. The facility personnel confirmed that the education documentation for the testing personnel indicated above was not available at the time of the survey.