

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 03D1047448	(X3) Date Survey Completed 02/24/2021
Name of Provider or Supplier Honorhealth Cancer Care	Street Address, City, State 10460 N 92nd St, Lab First Floor, Scottsdale, AZ	
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
D2009	<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 for testing performed in the specialty of Hematology and interview with the facility personnel, the laboratory director failed to sign the PT attestation statement. Findings include: 1. The laboratory performs Complete Blood Count (CBC) testing in the specialty of Hematology, with an approximate annual test volume of 52,000. 2. The PT attestation statement presented for review for the third event of 2019 for Hematology lacked the director's signature. 3. The PT attestation statement presented for review for the third event of 2020 for Hematology lacked the director's signature. 4. The facility personnel confirmed that the PT attestation statements indicated above were not signed by the laboratory director.</p>
D5291	<p>GENERAL LABORATORY SYSTEMS QUALITY ASSESSMENT CFR(s): 493.1239(a)</p> <p>The laboratory must establish and follow written policies and procedures for an ongoing mechanism to monitor, assess, and, when indicated, correct problems identified in the general laboratory systems requirements specified at 493.1231 through 493.1236.</p> <p>This STANDARD is not met as evidenced by: Based on review of Quality Assessment (QA) records, Proficiency Testing (PT)</p>

records and interview with the facility personnel, the laboratory failed to document corrective action for issues found with participation in the first PT event of 2019. Findings include: 1. The laboratory performs Complete Blood Count (CBC) testing in the specialty of Hematology, with an approximate annual test volume of 52,000. The laboratory uses API as their Proficiency Testing organization. 2. No PT scores (from API or the CMS database) were provided for review to indicate the laboratory was enrolled and participated in the 1st PT event of 2019. Evidence received from API indicated the Hematology samples for the 1st event of 2019 were shipped on March 11-12, 2019 and the PT result due date was March 29, 2019. 3. The laboratory performed a self-evaluation of PT samples on 3/29/19 and stated, "self-grade due to shipping error" on the PT worksheet utilized by the laboratory, but failed to document corrective action explaining why the lab failed to participate in the 1st PT event of 2019. It is the practice of the laboratory to perform and document a PT investigation form for any unacceptable PT scores, however no PT investigation form was completed for the error. 4. The facility personnel confirmed that the laboratory failed to document corrective action per laboratory policy for the error identified with the PT samples referenced above.