Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	03D2054155	04/22/2021
Name of Provider or Supplier	**Street Address, City, State**	
Dermatology & Plastic Surgery Of Arizona	698 E Wetmore Ste 310, Tucson, 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
D5209	PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235 As specified in the personnel requirements in subpart M, the laboratory must establish and follow written policies and procedures to assess employee and, if applicable, consultant competency. This STANDARD is not met as evidenced by: Based on lack of competency policies and procedures for review and interview with the facility personnel, the laboratory failed to establish policies and procedures to assess employee competency. Findings include: 1. The laboratory performs the gross evaluation on patient specimens in the sub-specialty of Histopathology. 2. No documentation was presented for review to indicate the laboratory established policies and procedures to assess the competency of individuals who perform the gross evaluation on histopathology specimens. 3. The facility personnel confirmed that the laboratory did not have a policy established to assess the competency of testing personnel who perform the gross evaluation on histopathology specimens.
D6102	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(12) The laboratory director must ensure that prior to testing patients' specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results. This STANDARD is not met as evidenced by: Based on lack of training documentation for one testing personnel who performs

	testing in the sub-specialty of Histopathology and interview with the facility personnel, the laboratory director failed to ensure that all testing personnel receive the appropriate training and demonstrate that they can perform all testing operations reliably and accurately prior to testing patients' specimens. Findings include: 1. No initial training documentation was presented for review for one testing personnel hired in June 2020, who performs the gross evaluation on patient specimens in the sub-specialty of Histopathology. 2. The facility personnel confirmed that the laboratory failed to have documentation of initial training for the testing personnel indicated above.
D6127	TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(9) The technical supervisor is responsible for evaluating and documenting the performance of individuals responsible for high complexity testing at least semiannually during the first year the individual tests patient specimens. This STANDARD is not met as evidenced by: Based on lack of documentation of a semi-annual competency evaluation for one testing personnel and interview with the facility personnel, the technical supervisor failed to evaluate and document the performance of individuals responsible for high complexity testing at least semiannually during the first year the individuals tested patient specimens. Findings include: 1. No semi-annual competency evaluation documentation was presented for review for one testing personnel who began grossing patient specimens in June 2020. 2. The facility personnel confirmed that the technical supervisor failed to document a semi-annual competency evaluation for the testing personnel indicated above.