

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 04D0642122	(X3) Date Survey Completed 05/19/2021
Name of Provider or Supplier Howard Memorial Hospital	Street Address, City, State 130 Medical Circle, Nashville, AR	
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
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: Through a review of personnel records for seven of seven blood gas laboratory testing personnel, lack of documentation, an interviews with laboratory staff, it was determined the technical consultant failed to have documentation of annual competency assessments performed in 2020. A. During a review of blood gas lab personnel records, the surveyor reviewed competency assessment documentation for seven of seven blood gas laboratory employees. Seven of seven personnel records failed to have competency documented in 2020. B. In an interview, at 2:12 p.m. on 5 /19/2021, blood gas laboratory employee #1 confirmed the laboratory had no documentation of 2020 competency assessments and stated that 2020 competency assessments were done electronically but the system used for the competency documentation was not longer available to the laboratory.</p>
D6107	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(15)</p> <p>The laboratory director must specify, in writing, the responsibilities and duties of each consultant and each supervisor, as well as each person engaged in the performance of the preanalytic, analytic, and postanalytic phases of testing, that identifies which examinations and procedures each individual is authorized to perform, whether supervision is required for specimen processing, test performance or result reporting and whether supervisory or director review is required prior to reporting patient test results.</p>

This STANDARD is not met as evidenced by:
Through a review of personnel records for seven of seven blood gas laboratory testing personnel, a review of the blood gas authorization sheet, lack of documentation, an interviews with laboratory staff, it was determined the laboratory director failed to give written authorization for three of seven testing personnel to perform blood gas testing without direct supervision. Survey findings follow: A. A review of personnel records for seven of seven blood gas laboratory employees revealed that three of seven (#5, #6, and #7 as listed on the blood gas lab form CMS-209) failed to have the laboratory director's written authorization to perform testing in their records. B. A review of the blood gas authorization sheet revealed the authorization sheet signed by the director listed four of the seven current laboratory testing personnel but did not include employees #5, #6, and #7. C. In an interview, at 2:12 p.m. on 5/19/2021, laboratory employee #1 (as listed on the blood gas lab form CMS-209) confirmed the lack of written authorizations for employees #5, #6, and #7.

D6128

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 annually after the first year, unless test methodology or instrumentation changes, in which case, prior to reporting patient test results, the individual's performance must be reevaluated to include the use of the new test methodology or instrumentation.

This STANDARD is not met as evidenced by:
Through a review of personnel records for nine laboratory employees, lack of documentation, and interviews with laboratory staff, it was determined the technical supervisor failed document competency of laboratory personnel annually. Survey findings include: A. During a review of personnel records for nine laboratory employees, it was revealed that two of nine employee personnel records failed to include competency assessments for 2020. The last competency assessment in the personnel records for laboratory employee #2 (as listed on the form CMS-209) was dated 5/27/2019 and the last competency assessment documented in the personnel records for laboratory employee #4 was dated 6/25/2019. B. In an interview, at 15:04 on 5/18/2021, laboratory employee #2 confirmed the 2020 competency assessments for employees #2 and #4 were not available for review.