

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  04D1052897	<b>(X3) Date Survey Completed</b>  11/27/2018
<b>Name of Provider or Supplier</b>  Johnson Dermatology Clinic, PLLC	<b>Street Address, City, State</b>  5921 Riley Park Drive, Fort Smith, AR	
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>D5293</b>	<p><b>GENERAL LABORATORY SYSTEMS QUALITY ASSESSMENT</b> CFR(s): 493.1239(b)(c)</p> <p>(b) The general laboratory systems quality assessment must include a review of the effectiveness of corrective actions taken to resolve problems, revision of policies and procedures necessary to prevent recurrence of problems, and discussion of general laboratory systems quality assessment reviews with appropriate staff. (c) The laboratory must document all general laboratory systems quality assessment activities.</p> <p>This STANDARD is not met as evidenced by: Through a review of proficiency test scores for 2017 and 2018, a review of quality assurance meeting minutes for 2017 and 2018. and through interviews with laboratory staff, it was determined the laboratory quality assessment failed to prevent recurrence of proficiency test failures in four of six successive proficiency events. Survey findings include: A. Through a review of the proficiency test scores for the three Microbiology proficiency test events in 2017 it was determined the laboratory scored 50% on KOH examinations in the 1st and 2nd Events of 2017. The laboratory failed two of three proficiency test events in 2017. B. Quality assurance meeting minutes dated 9/8/2017 included the only documentation of corrective actions for the failures. The notes stated that there was a discussion of the failures with the director / pathologist. C. Through a review of the proficiency test scores for the three Microbiology proficiency test events in 2018 it was determined the laboratory scored 50% on KOH examinations in the 2nd and 3rd Events of 2018. D. In an interview at 3: 12 p.m. on 11/27/2018, laboratory employees #1 and #5 (as listed on the form CMS-209 confirmed the actions taken for the failures in 2017 failed to prevent the recurrence of failures in two out of three testing events in 2018.</p>