Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 04D1081363	(X3) Date Survey Completed 01/31/2025
Name of Provider or Supplier Ozarks Community Hospital At Gravette	**Street Address, City, State** 1101 Sw Jackson Street, Gravette, 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
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Based on review of the 2024 CMS Casper Reports 096D, 0153D, and the American Proficiency Institute (API) proficiency testing results, showed the laboratory failed to have initial successful participation in proficiency testing for the analyte ABO/RH and D(Rho) type testing). Failure to achieve satisfactory performance for the same analyte or test in two consecutive testing events or two out of three consecutive testing events is unsuccessful performance as cited at D2153.
D2153	ABO GROUP AND D(RHO) TYPING CFR(s): 493.859(a)

	(a) Failure to attain a score of at least 100 percent of acceptable responses for each analyte or test in each testing event is unsatisfactory analyte performance for the testing event. This STANDARD is not met as evidenced by: . Based on review of 2024 CMS Casper Reports 96D, 153D and the American Proficiency Institute(API) proficiency testing results, it was determined the laboratory failed to have successful participation in proficiency testing for ABO/RH and D(Rho) type testing as evidenced by: A. A review of the proficiency testing results revealed the laboratory received a score of 80% for the test of D(Rho) type testing in the first proficiency testing event of 2024. B. A review of the proficiency testing results revealed the laboratory received a score of 80% for the test of ABO/RH type testing in the third proficiency testing event of 2024.
D6076	LABORATORY DIRECTOR CFR(s): 493.1441 The laboratory must have a director who meets the qualification requirements of 493. 1443 of this subpart and provides overall management and direction in accordance with 493.1445 of this subpart. This CONDITION is not met as evidenced by: Based on review of CMS 96D, 153D reports and API performance evaluation for 2024 the laboratory director failed to provide overall management and direction to the lab for successful participation in proficiency testing. Refer to D6089.
D6089	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(4)(i) (e)(4)(i) The proficiency testing samples are tested as required under subpart H of this part; This STANDARD is not met as evidenced by: Based on record review of CMS 96D, 153D, and API performance evaluation from 2024, the laboratory director failed to ensure successful participation in an HHS approved proficiency testing program for compatibility testing. Refer to D2153.