

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 04D2137781	(X3) Date Survey Completed 02/12/2026
Name of Provider or Supplier Dermatology Group Of Arkansas	Street Address, City, State 9601 Baptist Health Drive, Ste 690, Little Rock, 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
D5209	<p>PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235</p> <p>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.</p> <p>This STANDARD is not met as evidenced by: Based on the form CMS 209, laboratory policy and procedure, personnel records, lack of documentation, delegation of authority documents, and interview, the laboratory did not have competency of the Clinical Consultant (CC) on an annual basis. Findings follow: A) Review of the form CMS 209 provided by the laboratory on 2/12/26 revealed that staff members (CC-1 as listed on form CMS 209) was identified as Clinical Consultant. B) Review of Proficiency testing Competency and CLIA competency assessment procedure states, "After the first year, competency assessment must be performed at least annually". Personnel records revealed that no competency for CC was provided (CC-1 on the form CMS 209) for 2024, and 2025. C) Upon request, the laboratory was unable to provide any competency assessments for the position of CC for the laboratory staff member (CC-1 on form CMS 209) for 2024 and 2025. D) Upon request, the laboratory was unable to provide the delegation of authority documents for the position of CC listed on form CMS 209. E) In an interview, at 11:20 a.m. on 2/12/2026, the Laboratory Directory confirmed no delegation of authority and no competency for the CC listed on the CMS 209 form.</p>