

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 06D0516894	(X3) Date Survey Completed 01/12/2024
Name of Provider or Supplier Wray Community District Hospital	Street Address, City, State 1017 W 7th St, Wray, CO	
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
D3001	<p>FACILITIES CFR(s): 493.1101(a)(1)</p> <p>The laboratory must be constructed, arranged, and maintained to ensure the space, ventilation, and utilities necessary for conducting all phases of the testing process.</p> <p>This STANDARD is not met as evidenced by: Based upon direct observation, and interview with General Supervisor #1 (GS #1), revealed that the laboratory had not ensured its biological safety cabinet (BSC) was functioning properly since the last survey was conducted on 11/13/2020. The laboratory performs approximately 967 microbiology tests annually. Findings include: 1. Based upon direct observation of the laboratory's BSC maintenance record, at approximately 1:30 PM on January 12, 2024, the laboratory had not ensured the BSC was functioning properly since the facility last had it certified on 8/25/2016. 2. Based on an interview with GS #1, at approximately 2:00 PM on January 12, 2024, confirmed that the laboratory had not ensured the BSC was functioning properly since the facility last had it certified on 8/25/2016.</p>
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 review of the laboratory's policies and procedures manual, and interviews with General Supervisor #1 (GS #1) the laboratory failed to establish and follow written policies or procedures to assess the competency of personnel in the positions</p>

of Clinical Consultant (CC), Technical Supervisor (TS) and General Supervisor (GS) since the laboratory's last survey on 11/13/2020. The laboratory conducts a total of approximately 70,473 tests annually in the specialties of microbiology, diagnostic immunology, chemistry, hematology, and immunohematology. Findings include: 1. A review of the laboratory's policies and procedures manual revealed that the laboratory failed to establish and follow written policies or procedures to assess the competency of one out one of the clinical consultants (CC), one out of one of the technical supervisors (TS) and, two out of two of the general supervisors (GS) listed on the CMS-209 Form since the last survey was conducted on 11/13/2020. 2. Based on an interview with GS #1 at approximately 11:00 AM, on January 12, 2024, confirmed that the laboratory failed to establish and follow written policies or procedures to assess the competency of personnel in the positions of CC, TC, and GS since the last survey was conducted on 11/13/2020.