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| <b>Statement of Deficiencies</b>   | <b>(X1) Provider/Supplier/CLIA Identification Number</b><br><br>06D2030726 | <b>(X3) Date Survey Completed</b><br><br>01/14/2022 |
| <b>Name of Provider or Supplier</b><br><br>Afc Urgent Care - Englewood   | <b>Street Address, City, State</b><br><br>901 W Hampden Ave, Englewood, CO |   |
| 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>  |
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| <b>D5209</b>              | <p><b>PERSONNEL COMPETENCY ASSESSMENT POLICIES</b><br/>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:<br/>Based on a review of the quality assessment (QA) plan, personnel competency assessment records, and staff interview, the laboratory from 2018 to 2021 failed to establish and follow written policies for assessing the competency of 1 of 13 testing personnel for the complete blood count (CBC) testing using the Medonic M Series hematology analyzer. Findings include: a. The QA Plan states employees must be initially trained and competency assessed biannually their first year of hire and annually thereafter. Documentation in previous years show annual and biannual competencies for other testing personnel. b. No competency assessment records existed to show testing personnel 1 (TP1) was evaluated for competency after their initial training in 2017. c. Staff confirmed during the onsite survey on 1/14/2022, that no annual competencies have been performed for TP1 since their initial training.</p> |