

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  06D2124408	<b>(X3) Date Survey Completed</b>  04/30/2025
<b>Name of Provider or Supplier</b>  Commonspirit Emergency & Urgent Care - Lakewood	<b>Street Address, City, State</b>  3280 S Wadsworth Blvd, Lakewood, 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>
<b>D0000</b>	Based on an on-site recertification survey conducted on April 30, 2025, deficiencies were cited for Commonspirit Emergency & Urgent Care - Lakewood in Lakewood, Colorado.
<b>D5209</b>	<p><b>PERSONNEL COMPETENCY ASSESSMENT POLICIES</b> 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 a review of the laboratory's personnel records, policies and procedures manual, and an interview with the laboratory's technical consultant #7 (TC7), the laboratory failed to perform and document the initial semi-annual competency evaluation for six (6) out of twenty-two (22) testing personnel (TP) since the laboratory's last survey was conducted on 8/19/2021. The laboratory performs approximately 15,290 tests annually. Findings include: 1. A review of the laboratory's personnel records revealed the laboratory failed to perform and document the initial semi-annual competency evaluation for 6 out of 22 TP listed on the CMS-209 form. 2. A review of the laboratory's policies and procedures manual revealed the laboratory was required to assess the initial semi-annual competency for TP within six-months of their initial competency assessment being completed. 3. An interview with the laboratory's TC7, on April 30, 2025, at approximately 10:45 AM, confirmed that the laboratory failed to perform and document the initial semi-annual competency assessment for 6 out of 22 TP listed on the CMS-209 form, and failed to follow the laboratory's policies and procedures to assess and document TP competency within six-months of their initial competency being completed.</p>