

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  10D0267077	<b>(X3) Date Survey Completed</b>  05/26/2020
<b>Name of Provider or Supplier</b>  Northeast Florida State Hospital	<b>Street Address, City, State</b>  7487 South State Road 121, Macclenny, FL	
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>	At the time of the announced, onsite recertification survey, Northeast Florida State Hospital was found to NOT be in compliance with the CLIA laboratory requirements of 42 CFR 493. .
<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 record review and staff interview, the laboratory failed to document annual competency assessment for three (Testing Person A, B, &amp; C) of three testing personnel for two of two years reviewed (2018-2019). Findings include: The laboratory was unable to provide documentation of annual competency assessment at time of survey. The competency assessment provided did not indicate when the assessment was performed. The interview with Testing Person C on 5/26/20 at 12:45pm confirmed the date was not on the assessment forms.</p>