Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	10D0270354	08/26/2020
Name of Provider or Supplier	**Street Address, City, State**	
Doctors Memorial Hospital Clinical Laboratory	333 N Byron Butler Pkwy, Perry, FL	

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
D0000	An announced CLIA recertification survey was conducted at Doctors Memorial Hospital Clinical Laboratory on August 24 -26, 2020. The laboratory is not in compliance with 42 CFR Part 493, Requirements for Laboratories. The following is a description of the standard level deficiencies:
D2154	ABO GROUP AND D(RHO) TYPING CFR(s): 493.859(b) Failure to attain an overall testing event score of at least 100 percent is unsatisfactory performance. This STANDARD is not met as evidenced by: Based on record review and staff interview, the laboratory failed to achieve a score of 100 percent for 1 of 3 American Proficiency Institute (API) proficiency testing events of 2019 out of 4 events reviewed from 2019-2020. Findings Included: The record review of the API proficiency testing scores for the third event in 2019 showed a score of 80% for ABO typing. The interview with the Laboratory Manager on 08/26 /20 at 11:00 AM confirmed the proficiency testing event failure and score of 80%.
D2173	COMPATIBILITY TESTING CFR(s): 493.863(a) Failure to attain an overall testing event score of at least 100 percent is unsatisfactory performance. This STANDARD is not met as evidenced by: Based on review of American Proficiency Institute (API) proficiency testing results and interview with the Laboratory Manager, the laboratory failed to score 100% on Compatibility Testing for 3rd event of 2019 out of 4 testing events from 2019-2020

	reviewed. Findings Included: Review of API proficiency testing results for the 3rd testing event in 2019 revealed a score of 80% for Compatibility Testing. Interview on 08/26/20 at 11:00 AM, the Laboratory Manager confirmed the API proficiency testing event failure.
D5209	PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235 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. This STANDARD is not met as evidenced by: Based on review of employee competencies and interview with the Laboratory Manager, the laboratory failed to perform competency evaluations on 1of 1 clinical consultant (#B) and 1 of 3 technical supervisors (# C) listed on the CMS 209 for 2 of 2 (2019-2020) years reviewed. Findings Included: Review of the employee competencies revealed no competencies performed on the clinical consultant and technical supervisor. During an interview on 08/26/20 at 11:30 AM, the Laboratory Manager confirmed that there were no competencies performed on the clinical consultant and technical supervisor.