

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  10D0692984	<b>(X3) Date Survey Completed</b>  03/18/2020
<b>Name of Provider or Supplier</b>  Umhc Dermatology Mohs Chemosurgery	<b>Street Address, City, State</b>  1150 Nw 14th St Suite 503j, Miami, 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>	An announced CLIA recertification survey was conducted at UMDC Dermatology MOHS Chemotherapy on 03/18/2020. The laboratory is not in compliance with 42 CFR Part 493, Requirements for Laboratories. The following is a description of the standard level deficiencies:
<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 interview with Testing Person #D, the laboratory failed to perform competency evaluations on 2 (#B and #C) out of 3 Clinical Consultants and 3 (#B, #C, and #D) out of 4 Testing Personnel for 2 (2018-2020) out of 2 years reviewed. Findings Included: Review of the CMS 209 signed by the Laboratory Director on 03/12/20 revealed 3 Clinical Consultants and 4 Testing Personnel. The Laboratory Director was 1 of 3 Clinical Consultants and 1 of 4 Testing Personnel. Review of employee files revealed no competency evaluations on all 2 of the Clinical Consultants and all 3 of the Testing Personnel. Interview on 03/18/2020 at 11:00 AM the Testing Person #D confirmed that there were no competency assessments for the aforementioned staff.</p>