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| <b>Statement of Deficiencies</b>   | <b>(X1) Provider/Supplier/CLIA Identification Number</b><br><br>10D0970932               | <b>(X3) Date Survey Completed</b><br><br>11/10/2021 |
| <b>Name of Provider or Supplier</b><br><br>Lori McAuliffe Md Pa  | <b>Street Address, City, State</b><br><br>405 S Pasadena Ave South, Saint Petersburg, 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>  |
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| <b>D0000</b>              | An announced CLIA recertification survey was conducted at Lori McAuliffe MD PA on 11/10/21. 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>D6053</b>              | <p><b>TECHNICAL CONSULTANT RESPONSIBILITIES</b><br/>CFR(s): 493.1413(b)(9)</p> <p>The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least semiannually during the first year the individual tests patient specimens.</p> <p>This STANDARD is not met as evidenced by:<br/>Based on record review of the procedure manual and competency records, and interview with Testing Personnel (TP) #A, the Technical Consultant failed to perform semi-annual personnel competency for 1 (#D) TP out of 4 (#A-#D) TP for the specialty of hematology for two out of two years reviewed (2019-2021). Findings included: Review of the "Laboratory Staff Orientation, Training, and Assessment" procedure revealed that, "Each employee will be given an evaluation for competency at 6 months from hire and annually thereafter." Review of the Laboratory Personnel Report (Form CMS-209) signed by the Laboratory Director on 11/08/21 revealed the laboratory had four TP (#A-#D). Review of competency records revealed TP #D's personnel file had a "Job Description and Competency Evaluation" which indicated a date of hire of 10/12/20, date of present position as 10/19/20 and a 90 day review date of 01/05/21. No additional competency reviews were present for TP #D. On 11/10/21 at 10:15 am, TP #A, also listed as the "Trainer" on TP #D's 01/05/21 competency evaluation, stated she did not know that personnel competency needed to be performed semi-annually the first year.</p> |