Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 13D2100790	(X3) Date Survey Completed 04/22/2025
Name of Provider or Supplier Upper Valley Community Health Services	**Street Address, City, State** 72 S 1st E, Rexburg, ID	
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	During an offsite paper revisit the laboratory was found to be in compliance with CLIA regulations (42 CFR Part 493 effective April 24, 2003.), all previous deficiencies found were corrected.
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 a review of the Centers for Medicare and Medicaid Services (CMS) 209 personnel form, laboratory policies, training and competency assessment records and an interview with the laboratory supervisor on 4/22/2025, the laboratory failed to follow written policies and procedures to assess testing personnel in 2024. The findings include: 1. A review of the CMS 209 form identified seven testing personnel. 2. The laboratory policy states that there will be an initial training, six month competency then annual competency each year after. 3. A review of training and competency assessment records identified the laboratory failed to have initial training for one testing personnel in 2024. 4. A review of competency assessment records identified the laboratory failed to have six month competency assessments for two testing personnel in 2024. 5. An interview with the laboratory supervisor on 4/22/2025 at 12:25 pm confirmed the above findings. 6. The laboratory reports performing 3,459 tests annually.