

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 14D0668298	<b>(X3) Date Survey Completed</b> 08/23/2019
<b>Name of Provider or Supplier</b> Family Planning Associates Medical Group Ltd	<b>Street Address, City, State</b> 659 W Washington St, Chicago, IL	
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>D2007</b>	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>The samples must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory, using the laboratory's routine methods</p> <p>This STANDARD is not met as evidenced by: Based on record review, manuals, the Laboratory Personnel Report (CMS 209), and an interview with the testing personnel (TP1), the laboratory failed to ensure proficiency testing (PT) samples are tested by the laboratory's regular personnel who routinely perform testing in the laboratory, using the laboratory's routine methods, during the years of 2017 through 2019 Findings include: 1. The CMS 209, personnel records, procedures manual, and PT documents were reviewed. 2. The laboratory failed to ensure all TP performing the Rhesus Factor (Rh) D slide test participates in PT sample testing. 3. TP1, TP2, TP3, TP4, TP5, and TP6 were listed on the CMS 209 for performing Rh testing. 4. The personnel records and PT documents revealed the following: *TP1, TP2, TP3, TP4, TP5, and TP6 were assessed as competent to perform Rh factor testing. *The laboratory participated in 6 PT events during the years of 2017 through 2019. *TP2, TP5 and TP6 participated in 0 out of 6 PT events during the above time period. 5. On a Recertification survey conducted on 07/30/2018 at 12:45PM, the TP1 confirmed the above findings.</p>
<b>D5211</b>	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(a)</p> <p>The laboratory must review and evaluate the results obtained on proficiency testing performed as specified in subpart H of this part.</p>

This STANDARD is not met as evidenced by:

Based on record review and an interview with the testing personnel (TP1), the laboratory failed to review and evaluate the results obtained on proficiency testing performed during the years of 2017 through 2019. Findings: 1. The proficiency testing (PT) result summaries and procedure manual were reviewed. 2. The laboratory's PT policy and procedure failed to include the review of PT results (scores) received from the PT program. 3. The laboratory participated in 6 PT events during the years of 2017 through 2019. The PT summaries revealed the laboratory failed to review 6 out of 6 PT results from the events the laboratory participated during the above time period. 4. On a Recertification survey conducted on 07/30/2018 at 12:45PM, the TP1 confirmed the above findings.