

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 16D0384033	(X3) Date Survey Completed 12/18/2020
Name of Provider or Supplier Hancock County Health System	Street Address, City, State 532 First Street Nw, Britt, IA	
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
D3037	<p>RETENTION REQUIREMENTS CFR(s): 493.1105(a)(4)</p> <p>Proficiency testing records. Retain all proficiency testing records for at least 2 years.</p> <p>This STANDARD is not met as evidenced by: Based on review of proficiency testing records and confirmed by laboratory personnel identifier #1 (refer to the Laboratory Personnel Report) at approximately 8:30am on 12/18/2020, the laboratory failed to retain proficiency testing attestation statements for three out of six testing events (2020 events 1, 2 and 3) from 1/1/2019 - 12/18/2020. The findings include: 1. For 2020 event 1, the laboratory did not have attestation statements for core chemistry, microbiology, and immunology/immunohematology. 2. For 2020 event 2, the laboratory did not have attestation statements for core chemistry and hematology/coagulation. 3. For 2020 event 3, the laboratory did not have attestation statements for core chemistry and hematology/coagulation.</p>
D6092	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(4)(iv)</p> <p>The laboratory director must ensure an approved corrective action plan is followed when any proficiency testing result is found to be unacceptable or unsatisfactory.</p> <p>This STANDARD is not met as evidenced by: Based on review of proficiency testing (PT) records and confirmed by laboratory personnel identifier #1 (refer to Laboratory Personnel Report) at approximately 8:30am on 12/18/2020, the laboratory director failed to ensure the laboratory documented corrective action for unacceptable PT scores for three out of six events (2019 event 3, 2020 event 1 and 3) from 1/1/2019 - 12/18/2020. The findings include: 1. For 2019 event 3, the laboratory received an unacceptable score of 40% for the</p>

analyte, thyroid stimulating hormone. 2. For 2020 event 1, the laboratory received an unacceptable score of 80% for the analyte, prothrombin time. 3. For 2020 event 3, the laboratory received an unacceptable score of 80% for the analyte, blood urea nitrogen. 4. At the time of the survey, the laboratory did not take corrective action for the above unacceptable PT scores.