

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  19D0955389	<b>(X3) Date Survey Completed</b>  12/10/2019
<b>Name of Provider or Supplier</b>  Baton Rouge General Bluebonnet Lab	<b>Street Address, City, State</b>  8585 Picardy Avenue, 1st Floor, Baton Rouge, LA	
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>	A recertification survey was conducted at Baton Rouge General Bluebonnet - CLIA ID # 19D0955389 on December 10, 2019. The laboratory was found in compliance with 42 CFR 493 Requirement for Laboratories; however, standard level deficiencies were identified.
<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 personnel, the laboratory failed to follow their established competency assessment policy for testing personnel. Findings: 1. Review of the laboratory's personnel competency policy revealed all testing personnel competency to be evaluated prior to patient testing. 2. Review of the laboratory's CMS 209 (Laboratory Personnel Report) revealed the Personnel 13 was listed as testing personnel. 3. Review of personnel records revealed competency assessment for Personnel 13 was not documented prior to patient testing. 4. In interview on December 10, 2019, the Personnel 15 confirmed an initial competency assessment was not documented for Personnel 13.</p>
<b>D6102</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1445(e)(12)</p> <p>The laboratory director must ensure that prior to testing patients' specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate</p>

results.

This STANDARD is not met as evidenced by:

Based on record review and interview with personnel, the Laboratory Director failed to ensure Testing Personnel met training requirements prior to patient testing. Refer to D5209.