Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 19D1094011	(X3) Date Survey Completed 01/26/2021
Name of Provider or Supplier North Caddo Medical Center	**Street Address, City, State** 815 South Pine St, Vivian, LA	
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	A Certification Survey was performed on January 25, 2021 through January 26, 2021 at North Caddo Medical Center, CLIA ID # 19D1094011. The laboratory was found in compliance with 42 CFR 493 Requirements for Laboratories; however, standard level deficiencies were cited.
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 review of the laboratory's CMS form, personnel records and interview with personnel, the laboratory failed to ensure the Laboratory Director assessed competency for one (1) of ten (10) testing personnel. Findings: 1. Review of the laboratory's CMS-209 (Laboratory Personnel Report) revealed the laboratory listed Personnel 3 as a testing personnel. 2. Review of the personnel records for Personnel 3 revealed the laboratory did have a 2020 competency assessment signed by the Laboratory Director on July 3, 2020; however, the competency assessment did not have completed documentation for the duties assigned for Personnel 3. 3. In interview on January 25, 2021 at 4:20 pm, the Laboratory Director stated he signed the competency assessment for Personnel 3 but did not complete the actual documentation.
D6030	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(12) The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform

	test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (e) The laboratory director must-- (e)(12) Ensure that policies and procedures are established for monitoring individuals who conduct preanalytical, analytical, and postanalytical phases of testing to assure that they are competent and maintain their competency to process specimens, perform test procedures and report test results promptly and proficiently, and whenever necessary, identify needs for remedial training or continuing education to improve skills; This STANDARD is not met as evidenced by: Based on record review and interview with personnel, the Laboratory Director failed to ensure policies and procedures for assessing personnel competency were established and maintained. Refer to D5209.