

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  21D1093911	<b>(X3) Date Survey Completed</b>  04/17/2025
<b>Name of Provider or Supplier</b>  Georgetown Dermpath	<b>Street Address, City, State</b>  723 Goldsborough Street, Easton, MD	
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>D5209</b>	<p>PERSONNEL COMPETENCY ASSESSMENT POLICIES 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 review of personnel records, review of the standard operating procedure manual (SOPM), and interview with the laboratory director (LD), the laboratory failed to establish procedures for performing personnel competency assessment and failed to assess personnel competency. Findings: 1. The Laboratory Personnel Report (form CMS-209) included testing person (TP) #4 who grossed tissue specimens and performed tissue processing and histopathology slide preparation procedures. 2. Personnel files did not include annual competency assessments for TP #4. 3. The SOPM did not include procedures for performing competency assessments for personnel performing grossing, tissue processing, and slide preparation. 4. During the exit interview on 04/17/2025 at 12:30 PM, the LD confirmed that the SOPM did not include procedures for competency assessment and there was no competency assessment performed for TP #4.</p>