

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 25D0317488	(X3) Date Survey Completed 02/13/2023
Name of Provider or Supplier Jefferson County Hospital	Street Address, City, State 870 Main Street, Fayette, MS	
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
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Based on surveyor desk review of the laboratory proficiency testing (PT) records (graded copies from the American Proficiency Institute and the CASPER reports 0153D/0155D from the Centers for Medicare and Medicaid Services data system) on 2 /13/2023, the laboratory failed to maintain satisfactory performance in two of two testing events (2022 - Events 2 & 3) resulting in unsuccessful performance in Immunohematology for Compatibility Testing. Refer to D2181.
D2181	COMPATIBILITY TESTING CFR(s): 493.863(e)

Failure to achieve an overall testing event score of satisfactory for two consecutive testing events or two out of three consecutive testing events is unsuccessful performance.

This STANDARD is not met as evidenced by:

Based on surveyor desk review of the laboratory proficiency testing (PT) records (graded copies from the American Proficiency Institute and CASPER reports 0153D/0155D from the Centers for Medicare and Medicaid Services data system) on 2/13/2023, the laboratory has not successfully performed proficiency testing for Compatibility Testing in two of two testing events. Findings include: A review of the laboratory records from the American Proficiency Institute and the CMS CASPER reports 0153D/0155D revealed the laboratory scored the following for Compatibility Testing: Year 2022 - 2nd Event: 80% Year 2022 - 3rd Event: 80%