

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 25D0898810	(X3) Date Survey Completed 05/22/2019
Name of Provider or Supplier Urgent Care Clinic Of Oxford	Street Address, City, State 1487 Belk Blvd, Oxford, 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
D6021	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(5)</p> <p>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)(5) Ensure that quality assessment programs are established and maintained to assure the quality of laboratory services provided.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of written quality assessment (QA) policies, monthly QA checklist, and interview with testing personnel #3 on the day of survey, 5/22/19 at 3:30 pm, the laboratory director failed to ensure that a comprehensive QA program designed to monitor and evaluate the overall quality of the total testing process (general laboratory, preanalytic, analytic and postanalytic systems) was maintained and followed to assure quality of the laboratory services was provided. Findings include: 1. Review of Monthly Quality Assurance Checklist revealed the laboratory director did not ensure the QA process was maintained and followed monthly as specified in the procedure. The checklist was not completed from 10/17 through 2/18 and then again from 1/19 until 4/19. 2. The "Monthly Quality Assurance Checklist" includes: a. Personnel Policies b. Proficiency Testing Policies c. Patient Test Management System d. Quality Control Policies e. Safety Policies f. Quality Assurance 3. Interview with staff at 3:30 pm on day of survey, confirmed the laboratory director failed to ensure the monthly QA checklist was completed and the previously mentioned systems and policies in #2 were addressed and completed each month.</p>