

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 25D1075648	<b>(X3) Date Survey Completed</b> 07/28/2021
<b>Name of Provider or Supplier</b> Memphis Childrens Clinic	<b>Street Address, City, State</b> 9860 East Old Goodman Road, Olive Branch, MS	
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>	
<b>D6049</b>	<p><b>TECHNICAL CONSULTANT RESPONSIBILITIES</b> CFR(s): 493.1413(b)(8)(iii)</p> <p>The procedures for evaluation of the competency of the staff must include, but are not limited to review of intermediate test results or worksheets, quality control records, proficiency testing results, and preventive maintenance records.</p> <p>This STANDARD is not met as evidenced by: Based on review of laboratory testing records from 12/1/18 through 7/28/21 and interview with testing personnel (TP) #1 as listed on the Centers of Medicare &amp; Medicaid Services 209 form and Nurse Manager for Memphis Children's Clinics at 1:00 p.m. on 7/28/21, the following records had not been documented as reviewed by the technical consultant: Findings Include: 1. Review of the laboratory records from 12/1/18 through 7/28/21 revealed the following records were not documented as reviewed by the technical consultant: a. AcT Diff hematology quality control (QC) from 12/1/18 through 7/28/21 b. AcT Diff hematology calibration records from 12/7/18 through 6/11/21 c. Temperature records (room, refrigerators, freezers) from 1/2/19 through 7/28/21 d. Proficiency Testing result records for 3rd event of 2018, all events of 2019 and 2020, and 1st event of 2021 2. Interview with the TP #1 and the Nurse Manager at 1:00 p.m. on 7/28/21 confirmed there was no documented review of these records by the technical consultant.</p>
<b>D6053</b>	<p><b>TECHNICAL CONSULTANT RESPONSIBILITIES</b> CFR(s): 493.1413(b)(9)</p> <p>The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least semiannually during the first year the individual tests patient specimens.</p>

This STANDARD is not met as evidenced by:  
Based on review of laboratory personnel records from 11/29/18 through 7/28/21, the Centers of Medicare and Medicaid Services (CMS) 209 personnel form, and interview with the Nurse Manager, the technical consultant (TC) failed to evaluate and document the performance of TP #3 responsible for performing complete blood count (CBC) testing at least semiannually during the first year of employment. Findings include: 1. Review of the personnel records for TP #3 revealed the 6 month evaluation /competency was available but not documented as performed by the technical consultant during the first year of hire. TP #3 began employment in August 2020 as testing personnel. 2. Interview with the Nurse Manager at 1:30 p.m. on 7/28/21 confirmed the 6 month evaluation/competency was not performed by the Technical consultant on TP #3 during the first year of hire.

**D6054**

**TECHNICAL CONSULTANT RESPONSIBILITIES**  
CFR(s): 493.1413(b)(9)

The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least annually, after the first year.

This STANDARD is not met as evidenced by:  
Based on review of laboratory testing personnel (TP) records including the Centers of Medicare and Medicaid Services (CMS) 209 personnel form, lack of documentation, and interview with the Nurse Manager for Memphis Children's Clinics, the technical consultant (TC) failed to evaluate annually and document the performance of TP #1, #2 and #3 who are responsible for performing complete blood counts (CBC). Findings include: 1. Based on personnel records available for review on the day of survey, the annual evaluations/competencies performed on the TP #1 through TP #3 were performed by staff other than the TC since the last survey on 11/29/18: TP # 1 - Annual evaluation not performed by TC for 2019, 2020 or 2021 TP # 2 - Annual evaluation not performed by TC for 2019, 2020 or 2021 TP # 3 - Annual evaluation not performed by TC for 2021 2. Interview with the Nurse Manager confirmed the annual evaluation/competencies for TP #1 through #3 available the day of survey had not been documented as performed by the technical consultant.