

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 27D0652481	(X3) Date Survey Completed 12/28/2020
Name of Provider or Supplier Poplar Community Hospital Nemhs	Street Address, City, State 211 H Street, Poplar, MT	
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	Based on an off-site proficiency testing desk review conducted on 12/21/2020, deficiencies were cited for Poplar Community Hospital in Poplar, MT.
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 routine desk audit of CMS-153 and 155 reports of proficiency testing performance and interview, the laboratory failed to achieve satisfactory performance for compatibility testing for 2 out of 3 events (2020 Event 1 and Event 2), resulting in unsuccessful proficiency testing performance. See 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 review of proficiency testing scores and interview, the laboratory failed to achieve a score of 100% for Compatibility Testing for two of three events (2020 Event 1 and Event 2). The findings include: 1. Review of CMS-153 Unsuccessful Proficiency Testing Report on 12/21/2020 at 5:31pm which included Poplar Community Hospital with unsuccessful proficiency testing scores for Compatibility Testing. 2. Review of the CMS-155 Individual Laboratory Profile on 12/22/2020 at 11:02 am revealed Compatibility Testing scores for 2020 Event 1 was 80% and Event 2 was 20%. 3. Interview with laboratory director on 01/04/2021 @ 9:55 am, confirmed unsuccessful proficiency scores for Compatibility Testing due to clerical errors by testing personnel.