

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 28D0455707	(X3) Date Survey Completed 06/13/2019
Name of Provider or Supplier Providence Medical Center	Street Address, City, State 1200 Providence Road, Wayne, NE	
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
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on the list of tests performed, review of proficiency testing, and interview with general supervisor at 10:15 AM on 6/13/2019, the laboratory failed to verify the accuracy of wet preps for 2017 and 2018. Findings are: 1. Review of the list of tests performed and interview with general supervisor revealed wet preps performed at this laboratory with an annual volume of 24 tests. 2. Review of proficiency testing for all 3 events of 2017 and 2018 revealed a lack of participation for wet preps. 3. The general supervisor confirmed lack of participation and lack of comparison with another lab for 2017 and 2018 for wet preps.</p>
D6128	<p>TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(9)</p> <p>The technical supervisor is responsible for evaluating and documenting the performance of individuals responsible for high complexity testing at least annually after the first year, unless test methodology or instrumentation changes, in which case, prior to reporting patient test results, the individual's performance must be reevaluated to include the use of the new test methodology or instrumentation.</p> <p>This STANDARD is not met as evidenced by: Based on review of the CMS 209, competency evaluations for 2017 and 2018, and an interview with general supervisor at 11:00AM on 6/13/2019, the laboratory failed to perform competency evaluations on 1 of 6 high complexity testing personnel for both</p>

years. Findings are: 1. The CMS 209 form completed by the laboratory revealed 6 high complexity testing personnel performing patient testing. 2. Review of competency evaluations for 2017 and 2018 revealed 1 high complexity testing personnel had no annual competencies performed for 2017 and 2018 3. Interview with the general supervisor confirmed the competency evaluations for 1 high complexity testing personnel had not been performed for 2017 and 2018.