

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 31D2043828	(X3) Date Survey Completed 05/22/2018
Name of Provider or Supplier Nj Certified Dermatology Pc	Street Address, City, State 668-670 Broadway, Bayonne, NJ	
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
D5209	<p>PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235</p> <p>As specified in the personnel requirements in subpart M, the laboratory must establish and follow written policies and procedures to assess employee and, if applicable, consultant competency.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the Competency Assessment (CA) records and interview with the Testing Personnel (TP), the laboratory failed to perform CA correctly on the Testing Personnel from November 2017 to the date of the survey. The findings include: 1. The laboratory did not document when TP was observed. 2. The CA stated "follows Bi-Annual assessment procedures as outlined in the procedure manual" but this tool is not applicable for TP. 3. The TP confirmed on 5/22/18 at 1:20 pm that CA was not performed correctly.</p>