

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  34D0246822	<b>(X3) Date Survey Completed</b>  07/20/2023
<b>Name of Provider or Supplier</b>  Boone Dermatology Clinic, Pa	<b>Street Address, City, State</b>  169 Birch Street, Boone, NC	
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>D5209</b>	<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 the review of personnel records and interview with the Laboratory Director on 7/20/23, the laboratory failed to perform and document competency assessments for 9 of 9 Testing Personnel (providers) who perform KOH (potassium hydroxide) prep, Tzanck prep and scabies microscopy during 2020, 2021, and 2022. Findings include: A review of personnel records revealed the absence of documentation of competency assessments for 9 of 9 providers who perform KOH prep, Tzanck prep and scabies microscopy. An interview with the Laboratory Director at approximately 11:10 a.m. confirmed that competency assessments are not performed and documented on providers who perform microscopy in the practice.</p>