

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  36D0329872	<b>(X3) Date Survey Completed</b>  01/16/2020
<b>Name of Provider or Supplier</b>  Urban Pediatrics	<b>Street Address, City, State</b>  3433 Agler Road Suite 1300, Columbus, OH	
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><b>PERSONNEL COMPETENCY ASSESSMENT POLICIES</b> 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 record review and an interview with the Laboratory Director (LD), the laboratory failed to follow their written policies and procedures for annual competency assessment for five out of five Testing Personnel (TP) performing moderately complex hematology procedures. This deficient practice had the potential to affect all patients tested in the specialty of hematology. Findings include: 1. Review of the laboratory's 'Lab Manual' policies and procedures found the following statement: "...Employees will be reviewed semiannually for the first year, then annually thereafter..." 2. Review of the laboratory's competency assessment documentation found the lab failed to complete a 2019 annual competency assessment for TP #1, TP #2, TP #3, TP #4 and TP#5 as stated in the approved policy. 3. An interview with the LD, on 1/16/20 at 10:33 am, confirmed that the lab failed to complete a 2019 annual competency assessment for TP #1, TP #2, TP #3, TP #4 and TP#5 as stated in the approved policy.</p>