

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 36D2190231	(X3) Date Survey Completed 01/08/2026
Name of Provider or Supplier Quest Recovery Center, Llc	Street Address, City, State 112 Harcourt Rd Suite 2, Mount Vernon, OH	
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
D5793	<p>ANALYTIC SYSTEMS QUALITY ASSESSMENT CFR(s): 493.1289(b)(c)</p> <p>(b) The analytic systems quality assessment must include a review of the effectiveness of corrective actions taken to resolve problems, revision of policies and procedures necessary to prevent recurrence of problems, and discussion of analytic systems quality assessment reviews with appropriate staff. (c) The laboratory must document all analytic systems assessment activities.</p> <p>This STANDARD is not met as evidenced by: Based on record review and an interview with the Technical Consultant (TC) the laboratory failed to review the effectiveness of the Analytic System's Quality Assessment program. This deficient practice had the potential to affect three out of seven days of testing in the subspecialty of Toxicology from 03/01/2025 through 03/31/2025. Findings Include: 1. Review of the laboratory's March 2025 "EasyRA Maintenance Log" revealed instrument maintenance and Quality Control (QC) run on the following days: 03/01/2025 03/05/2025 03/07/2025 03/08/2025 03/12/2025 03/15/2025 03/18/2025 2. Review of the laboratory's March 2025 QC data revealed QC data printed from the instrument for the following days: 03/01/2025 03/05/2025 03/07/2025 03/08/2025 03/15/2025 03/18/2025 03/21/2025 03/25/2025 3. Review of the laboratory's Quality Assessment data from March of 2025 revealed the following: March 2025 Analytic Data reviewed by TC: "...Monthly QC Review Signature Sheet... March 2025... ..Toxicology Monthly Quality Assurance... ..Daily Logs Reviewed: All logs are current with proper documentation..." March 2025 TC sign off indicating proper documentation: 03/26/2025 4. A phone call interview with the TC on 01/14/2026 at 9:43 AM confirmed that the "EasyRA Maintenance Log" was filled out for the wrong day on 03/12/2025, not filled out for 03/21/2025, 03/25/2025 and that the Analytic Systems QA program was ineffective. 5. This deficient practice had the potential to affect 64 out of 64 patients tested in the subspecialty of Toxicology from 03/01/2025 through 03/31/2025.</p>

D6032

LABORATORY DIRECTOR RESPONSIBILITIES

CFR(s): 493.1407(e)(14)

(e)(14) Specify, in writing, the responsibilities and duties of each consultant and each person, engaged in the performance of the preanalytic, analytic, and postanalytic phases of testing, that identifies which examinations and procedures each individual is authorized to perform, whether supervision is required for specimen processing, test performance or results reporting, and whether consultant or director review is required prior to reporting patient test results.

This STANDARD is not met as evidenced by:

Based on record reviews and an interview with the Technical Consultant (TC), the Laboratory Director (LD) failed to define the duties and responsibilities of one out of one TC listed on the Form CMS-209. Findings include: 1. Review of the Form CMS-209, signed and dated by the Practice Owner on 01/08/2026, revealed one individual listed as performing the duties of the Technical Consultant (TC). 2. Review of delegation records provided on the date of inspection failed to find evidence that training and Competency Assessment activities were delegated to the TC in writing by the LD. 3. Review of the Testing Personnel (TP) training and Competency Assessment activities revealed the following performed by the TC: TP #1 Training: 09/11/2024 Competency Assessment: "2025" [day and month not specified] TP #2 Training: 04/04/2024 4. An interview via phone call with the TC on 01/14/2026 at 9:43 AM confirmed there was no documentation of the LD defining the duties and responsibilities of the TC to complete training and Competency Assessments.

D6053

TECHNICAL CONSULTANT RESPONSIBILITIES

CFR(s): 493.1413(b)(9)

(b)(9) Evaluating and documenting the performance of individuals responsible for moderate complexity testing at least semiannually during the first year the individual tests patient specimens.

This STANDARD is not met as evidenced by:

Based on record review and interview with the Technical Consultant (TC), the laboratory failed to evaluate and document the competency of one out of one newly listed Testing Personnel (TP), at least semiannually during the first year they tested patient specimens in the subspecialty of Toxicology. This deficient practice had the potential to affect one out of two TP. Findings Include: 1. Review of the laboratory's Form CMS-209 on the day of the inspection found one new TP listed. TP #1 was hired on 08/28/24. 2. Review of the training and Competency Assessment documentation for TP #1 in 2024 and 2025 found the following: Initial Training: 09/11/2024 Competency Assessment: "2025" [No other Competency Assessment found] 3. Review of laboratory records revealed TP #1 tested 540 patients in the subspecialty of Toxicology from 09/11/2024 to 01/08/2026. 4. A phone call interview with the TC on 01/14/2026 at 9:43 AM confirmed that the laboratory failed to evaluate and document the competency of TP #1 at least semiannually for the first year of testing patient specimens.