

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 37D2145906	(X3) Date Survey Completed 02/09/2023
Name of Provider or Supplier Classen Urgent Care Moore	Street Address, City, State 1015 Sw 4th Street, Moore, OK	
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
D0000	The recertification survey was performed on 02/09/2023. The laboratory was found in compliance with a standard-level deficiency cited. The findings were reviewed with the technical consultant at the conclusion of the survey.
D6053	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(9)</p> <p>The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least semiannually during the first year the individual tests patient specimens.</p> <p>This STANDARD is not met as evidenced by: Based on a review of records and interview with the technical consultant, the technical consultant failed to ensure competency evaluations had been performed semiannually during the first year of testing for one of four testing persons. Findings include: (1) On 02/09/2023 at 10:30 am, the technical consultant stated the laboratory performed CBC (Complete Blood Count) testing using the Sysmex XN-330; (2) A review of personnel records for four persons hired to perform moderate complexity testing after the previous recertification survey identified the following for one of four persons: (a) Testing Person #4 - The initial training was completed on 02/28/2022. There was no evidence a competency evaluation had been performed to date. (2) The records were reviewed with the technical consultant who stated on 02/09/2023 at 12:45 pm, a semiannual competency evaluation had not been performed as stated above.</p>
D6054	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(9)</p> <p>The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least annually, after the first year.</p>

This STANDARD is not met as evidenced by:

Based on a review of records and interview with the technical consultant, the technical consultant failed to ensure competency evaluations had been performed at least annually for two of three testing persons. Findings include: (1) On 02/09/2023 at 10:30 am, the technical consultant stated the laboratory performed CBC (Complete Blood Count) testing using the Sysmex XN-330; (2) A review of personnel records for three persons performing testing during 2021, 2022, and to date in 2023 identified the following for two of three persons: (a) Testing Person #6 - Initial training had been completed on 12/19/2021. There was no documentation an annual competency evaluation had been performed (due December 2022); (b) Testing Person #7 - Initial training had been completed on 12/21/2021. There was no documentation an annual competency evaluation had been performed (due December 2022). (3) The records were reviewed with the technical consultant who stated on 02/09/2023 at 12:45 pm, annual competency evaluations had not been performed as stated above.