Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 38D0622849	(X3) Date Survey Completed 05/31/2019
Name of Provider or Supplier West Hills Health Care Clinic	**Street Address, City, State** 2163 Nw 2nd St, Mcminnville, OR	
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
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Review of proficiency testing results from the Medical Laboratory Evaluation (MLE) revealed that the laboratory had subsequent failure in proficiency testing for Cell Identification or WBC Differential in the specialty Hematology . Refer to D2130..
D2130	HEMATOLOGY CFR(s): 493.851(f) Failure to achieve satisfactory performance for the same analyte in two consecutive events or two out of three consecutive testing events is unsuccessful performance.

	This STANDARD is not met as evidenced by: Review of the Medical Laboratory Evaluation Proficiency Testing reports revealed that the laboratory had subsequent failure in Cell Identification or WBC Differential. Findings include: 1. 1st event of 2018 - 0765 - Cell Identification or WBC Differential = 0% 2. 3rd event of 2018 - 0765 - Cell Identification or WBC Differential = 66% 3. 1st event of 2019 - 0765 - Cell Identification or WBC Differential = 20%
D6000	MODERATE COMPLEXITY LABORATORY DIRECTOR CFR(s): 493.1403 The laboratory must have a director who meets the qualification requirements of 493. 1405 of this subpart and provides overall management and direction in accordance with 493.1407 of this subpart. This CONDITION is not met as evidenced by: Review of the Medical Laboratory Evaluation (MLE) Proficiency Testing (PT) records revealed that the laboratory director (LD) failed to fulfill the laboratory director's responsibilities to make sure the laboratory achieved satisfactory performance of PT in each test events. Refer to D6018
D6018	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(4)(iii) The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (e) The laboratory director must-- (e)(4)(iii) Ensure that all proficiency testing reports received are reviewed by the appropriate staff to evaluate the laboratory's performance and to identify any problems that require corrective action; This STANDARD is not met as evidenced by: Review of Proficiency Test(PT) reports from the Medical Laboratory Evaluation Program revealed that the laboratory failed to evaluate and identify underlying problems with the Complete Blood Count (CBC) analyzer which resulted in subsequent PT failure. Findings Include: 1. 1st event 2018 - 0765 - Cell Identification or WBC Differential = 0%. 2. 3rd event 2018 - 0765 - Cell Identification or WBC Differential = 66%. 3. 1st event 2018 - 0765 - Cell Identification or WBC Differential = 20%