

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 38D0627047	(X3) Date Survey Completed 02/20/2019
Name of Provider or Supplier North Bend Medical Center	Street Address, City, State 1900 Woodland Dr, Coos Bay, 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
D6102	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(12)</p> <p>The laboratory director must ensure that prior to testing patients' specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results.</p> <p>This STANDARD is not met as evidenced by: Based on review of personnel records and discussions with the staff the laboratory failed to provide the necessary documentation of education of the testing personnel . Findings include: 1. The surveyor requested and the laboratory failed to provide copies of diplomas or transcript of records of 4 out of 5 new testing personnel (TP) that were hired on 05/23/2017, 08/14/2017, 11/20/2017 and 04/02/2018 at the time of survey. 2. The Laboratory Manager and the Quality Assurance and Compliance Officer concurred with these findings on 02/20/2019 at 11:30.</p>