Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number** 39D0195109	**(X3) Date Survey Completed** 10/26/2020
Name of Provider or Supplier Bryn Mawr Skin And Cancer Institute	**Street Address, City, State** 919 Conestoga Road Suite 106 Bldg 2, Bryn Mawr, PA	
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**
D5209	PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235 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. This STANDARD is not met as evidenced by: Based on laboratory personnel interview with the Practice Administor and the MOHS Technician review of the competency records, the Laboratory failed to establish written policies to assess employee competency for 1 of 2 Technical Supervisors, from (06/15/2018) through the date of the survey (10/26/2020). Findings: 1. Laboratory policies and procedures reviewed at the time of the survey, revealed that the laboratory had no policy to assess consultant competency. 2. Review of the competency records revealed no documentation of competency for Technical Supervisor-2 from (06/15/2018) through the date of the survey. 3. The Laboratory Director acted as Technical Supervisor #2 at the time of the survey. 4. During the survey (09:54 10/26/2020), the Laboratory Supervisor confirmed, the above findings.