

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D0942535	(X3) Date Survey Completed 01/27/2022
Name of Provider or Supplier Chester County Rheumatology Pc	Street Address, City, State 795 E Marshall Street Ste 101, West Chester, 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
D6103	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(13)</p> <p>The laboratory director must ensure that policies and procedures are established for monitoring individuals who conduct preanalytical, analytical, and postanalytical phases of testing to assure that they are competent and maintain their competency to process specimens, perform test procedures and report test results promptly and proficiently, and whenever necessary, identify needs for remedial training or continuing education to improve skills.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory personnel records and personnel interview with the office manager and Testing Personnel 2 (TP), the Laboratory Director failed to ensure competency was maintained for 1 of 2 TP, performing synovial fluid examination. Findings Include: 1. On the day of survey, 01/27/2022, the laboratory failed provide documentation of competency assessment performed on TP2 from 08/09/2019 to 01/27/2022. 2. 61 synovial fluid examinations were performed from January 2021 through the date of the survey. 3. During the survey the Office Manager confirmed the findings above.</p>