

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D2047171	(X3) Date Survey Completed 02/12/2024
Name of Provider or Supplier Comprehensive Pain Management	Street Address, City, State 1177 Highway 315 Blvd, Wilkes Barre, 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	<p>PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235</p> <p>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.</p> <p>This STANDARD is not met as evidenced by: Based on a lack of the laboratory's personnel competency assessment records and interview with the Technical Supervisor (TS), the laboratory failed to establish and follow a competency assessment procedure to assess the competency of 1 of 1 Clinical Consultant (CC) for their supervisory responsibilities in 2023. Findings Include: 1. On the day of the survey, 02/12/2024 at 10:20 am, the laboratory could not provide a competency assessment procedure to assess the competency of 1 of 1 CC (CMS 209 personnel #3) for their supervisory responsibilities in 2023. 2. The laboratory could not provide competency assessment documents for 1 of 1 CC for 2023. 3. The TS confirmed the findings above on 02/12/2024 at 11:01 am.</p>