

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  39D2051540	<b>(X3) Date Survey Completed</b>  03/15/2021
<b>Name of Provider or Supplier</b>  Forefront Dermatology, Sc	<b>Street Address, City, State</b>  2790 Mosside Blvd, Suite 720, Monroeville, PA	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D5209</b>	<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 review of the laboratory's procedure manuals and interview with the regional clinical manager, clinical team lead #1 and #2, the laboratory failed to establish a competency assessment procedure to assess 1 of 2 clinical consultants, 1 of 2 technical consultants and 1 of 2 technical supervisors for their delegated duties in 2020 and 2021. Findings include: 1. On the day of survey, 03/15/2021, the laboratory could not provide a competency assessment procedure that assess 1 of 2 Clinical consultants, 1 of 2 technical consultants and 1 of 2 technical supervisors for there delegated duties in 2020 and 2021. 2. On the Laboratory Personnel Report (CMS 209 form) testing personnel (TP) #2 was listed as a clinical consultant, a technical consultant for potassium hydroxide microscopic examinations, scabies microscopic examinations and a technical supervisor for Histopathology. 3. The laboratory was unable to provide consultant and supervisory competency assessment records for TP #2 in 2020 and 2021. 4. The clinical manager, clinical team lead #1 and #2 confirmed the findings above on 03/15/2021 around 12:40 pm.</p>