

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D2073703	(X3) Date Survey Completed 06/04/2024
Name of Provider or Supplier Pennsylvania Dermatology Partners - Douglassville	Street Address, City, State 258-260 E Ben Franklin Highway, Birdsboro, 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
D6125	<p>TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(8)(v)</p> <p>The procedures for evaluation of the competency of the staff must include, but are not limited to assessment of test performance through testing previously analyzed specimens, internal blind testing samples or external proficiency testing samples.</p> <p>This STANDARD is not met as evidenced by: Based on review of competency assessment records and interview with the Director of Lab Services (DLS) and the Laboratory Manager (LM), the Technical Supervisor (TS) failed to assess the competency for 1 of 5 testing personnel (TP) (CMS 209 personnel # 4) through external proficiency testing samples or internal blind testing samples for histopathology macroscopic examinations performed in 2022. Findings include: 1. On the day of the survey 06/04/2024 at 11:28 am, review of Laboratory Personnel Competency Assessment Tracking form revealed the TS did not include assessment of test performance through previously analyzed specimens, internal blind testing samples or external proficiency testing samples for 1 of 5 TP (CMS 209 personnel #4) who performed gross examinations and specimen inking of frozen sections in histopathology in 2022. 2. DLS and LM confirmed the above findings on 06/04/2024 around 11:28 am.</p>
D6128	<p>TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(9)</p> <p>The technical supervisor is responsible for evaluating and documenting the performance of individuals responsible for high complexity testing at least annually after the first year, unless test methodology or instrumentation changes, in which case, prior to reporting patient test results, the individual's performance must be reevaluated to include the use of the new test methodology or instrumentation.</p>

This STANDARD is not met as evidenced by:
Based on a lack of documentation and interview with the Director of Lab Services (DLS) and the Laboratory Manager (LM), the Technical Supervisor (TS) failed to evaluate the annual competency assessment for 2 of 5 Testing Personnel (TP) who performed macroscopic and microscopic examinations in histopathology laboratory in 2023. Findings include: 1. On the day of survey, 06/04/2024 at 11:30 am, the laboratory could not provide competency assessment records for 2 of 5 TP (CMS 209 TP #2 and #4) for their testing responsibilities of macroscopic and microscopic examinations performed in histopathology laboratory in 2023. 2. The DLS and LM confirmed the findings above on 06/04/2024 at 11:30 am.