

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  39D2074190	<b>(X3) Date Survey Completed</b>  03/07/2024
<b>Name of Provider or Supplier</b>  South Hills Gastroenterology	<b>Street Address, City, State</b>  1200 Brooks Lane, Suite 220, Clairton, 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><b>PERSONNEL COMPETENCY ASSESSMENT POLICIES</b> 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 lack of documentation and interview with the Laboratory Director (LD), the laboratory failed to follow a competency assessment procedure established to assess the competency of 1 of 1 Clinical Consultant (CC) for their supervisory responsibilities in 2022 and 2023. Findings Include: 1. The laboratory's Competency Policy states, "Staff who hold CLIA Supervisor positions: (General Supervisor, Technical Consultant, Technical Supervisor, or Clinical Consultant), will be assessed annually, for their supervisory competence in addition to laboratory testing competence, if performing lab testing." 2. On the day of the survey, 3/7/24 at 1:41 pm, the laboratory could not provide competency assessment documents for 1 of 1 CC (CMS 209 personnel #2) for their supervisory responsibilities in 2022 and 2023. 3. The LD confirmed the findings above on 03/07/2024 at 1:54 pm</p>