

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  39D2149361	<b>(X3) Date Survey Completed</b>  06/10/2020
<b>Name of Provider or Supplier</b>  Center For Interventional Pain & Spine Llc	<b>Street Address, City, State</b>  300 Welsh Road, Building 2, Suite 104, Horsham, 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 competency assessment records and policy &amp; interview with the Laboratory Director, Technical Supervisor, and General Supervisor, the Technical Supervisor failed to establish written policies and procedures to assess competency for 1 of 1 Technical Supervisor, and 1of 1 General Supervisor from (09/12/2018) through the date of the survey (06/12/2020). Findings: 1. At the time of the survey, the Laboratory could not provide written policies and procedures to assess the Technical Supervisor &amp; General Supervisor competency assessment. 2. A review of the competency assessment records revealed there was no documentation of supervisor competency assessment from (09/12/2018) through the date of the survey (06/10/2020). 3. From (09/12/2018) through the date of the survey (06/10/2020), 40,927 toxicology specimens were run. 4. During the survey (11:00 06/10/2020), the General Supervisor confirmed, the above findings.</p>