

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  44D0311863	<b>(X3) Date Survey Completed</b>  02/18/2025
<b>Name of Provider or Supplier</b>  Newport Pediatrics Pc	<b>Street Address, City, State</b>  1829 Crowe Lane, Newport, TN	
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 a review of the Centers for Medicare and Medicaid Services Laboratory Personnel Report (Form CMS-209), laboratory policy, personnel records, and staff interviews, the laboratory failed to follow the Quality Assurance policy for training and competency assessment of testing personnel that performed complete blood count (CBC) patient testing in 2024. The findings include: 1. A review of Form CMS-209 provided by the laboratory on 02.18.2025 revealed seven testing personnel (TP) that performed CBC patient testing. 2. A review of the laboratory policy titled "Quality Assurance Plan" revealed the following statements: "Assure that laboratory personnel are adequately trained" and "annually, the laboratory director and/or technical consultant will review the performance of each employee working in the laboratory to assure employee competency." 3. A review of the laboratory's personnel records revealed no documentation of initial training for TP1 prior to CBC patient testing and no documentation of annual competency assessment for TP5 in 2024. 4. Interview on 02.18.2025 at approximately 11:30 a.m. with the Practice Administrator and TP1 confirmed the above survey findings.</p>