

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  44D0963636	<b>(X3) Date Survey Completed</b>  06/06/2018
<b>Name of Provider or Supplier</b>  Pediatric Specialists Of Marion County	<b>Street Address, City, State</b>  325 South Cedar Ave Ste 1, South Pittsburg, 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>D2007</b>	<p><b>TESTING OF PROFICIENCY TESTING SAMPLES</b> CFR(s): 493.801(b)(1)</p> <p>The samples must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory, using the laboratory's routine methods</p> <p>This STANDARD is not met as evidenced by: Based on a review of 2016 and 2017 Proficiency Testing (PT) attestation records and an interview with the primary testing person, it was determined the laboratory did not involve one of two testing personnel in rotating PT samples for complete blood counts during the 2 year period. Findings include: 1. A review of PT records from 2016 and 2017 disclosed the primary lab person did all testing of PT samples. 2. An interview with the primary testing person at 11 AM on June 6, 2018 confirmed she was the only person running PT samples for the 2 year period.</p>
<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 procedure manual, employee training records for 2016-2017, and an interview with the lead testing person, the laboratory failed to document all competencies and training procedures performed initially for the new hire personnel using the six minimum required competency areas. Findings include: 1. Review of the procedure manual revealed competencies and training was required for new hire lab</p>

personnel initially and at six months intervals during the first year. 2. Review of the employee training records for 2016-17 revealed no competencies and training were documented for one new hire lab testing person #2. 3. In an interview, June 6, 2018, at approximately 11:00 AM, the lead testing person confirmed the employee training records for 2016-17 were incomplete by missing the competencies and training for the new lab personnel initially upon hire.