

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  44D1044372	<b>(X3) Date Survey Completed</b>  06/12/2023
<b>Name of Provider or Supplier</b>  Family Medicine Group Pllc (The)	<b>Street Address, City, State</b>  2996 Kate Bond Road Suite #405, Bartlett, 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 review of Department of Health and Human Services Centers for Medicare and Medicaid Services Laboratory Personnel Report (CLIA) (Form CMS-209), lack of records and policy, and staff interview, the laboratory failed to establish and follow a personnel competency policy for personnel that performed Provider Performed Microscopy (PPM) vaginal wet preparation patient testing in 2021, 2022, and 2023. The findings include 1. Review of Form CMS-209 revealed TP seven listed for PPM vaginal wet prep patient testing. 2. Review of laboratory personnel records revealed no documetation of competency assessments for TP seven for vaginal wet prep patient testing in 2021, 2022, or 2023. 3. Review of laboratory policy and procedure manual revealed the laboratory did not have a competency assessment policy or procedure for testing personnel that provided PPM patient testing. 4. Interview on 06/07/2023 at 1:00 pm with laboratory lead and laboratory director confirmed TP seven did not have competency assessments for PPM patient testing and further confirmed the laboratory did not have a policy and procedure for testing personnel that provided PPM patient testing in 2021, 2022, or 2023.</p>