

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D0505556	(X3) Date Survey Completed 03/20/2019
Name of Provider or Supplier Central Texas Dermatology	Street Address, City, State 102 Westlake Drive # 100, Austin, TX	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

(X4) ID Prefix Tag	Summary Statement of Deficiencies
D5209	<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: Review of the CMS 209 Laboratory personnel Report, personnel records and interview of facility personnel found that the laboratory failed to have a procedure in place to evaluate the competency of all supervisors, consultants and testing personnel performing high complexity procedures in histopathology. Findings included: 1. Review of the CMS report 209 Laboratory Personnel Report found that the laboratory designated one general supervisor, one technical supervisor, and five testing personnel for high complexity testing. 2. Review of personnel files found no documentation of competency assessment for 2017 or 2018 for the general supervisor, technical supervisor, and five of five testing personnel. 3. Interview of testing person four on the CMS report 209 laboratory personnel report conducted on March 20, 2019 at 2:37 PM confirmed that the laboratory had not evaluated the competency of all supervisors, consultants and testing personnel.</p>
D6103	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(13)</p> <p>The laboratory director must ensure that policies and procedures are established for monitoring individuals who conduct preanalytical, analytical, and postanalytical phases of testing to assure that they are competent and maintain their competency to process specimens, perform test procedures and report test results promptly and proficiently, and whenever necessary, identify needs for remedial training or continuing education to improve skills.</p>

This STANDARD is not met as evidenced by:
Review of policies and procedures and interview of facility personnel found that the laboratory director failed to ensure that an approved procedure was available to assess the competency of all supervisors, consultants and testing personnel. (See D5209)