Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	45D0660728	11/01/2023
Name of Provider or Supplier	**Street Address, City, State**	
City Of Lubbock Health Dept Laboratory	2015 50th Street, Lubbock, 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
D0000	The laboratory was surveyed and found to be in compliance with the Conditions of the CLIA regulations found at 42 CFR 493.1 through 493.1780, and recertification is recommended.
D2009	TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1) The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods. This STANDARD is not met as evidenced by: Based on review of the laboratory's policy and procedure, proficiency testing and interview, the laboratory failed to ensure the attestation statement was signed by testing personnel for two of 12 testing events reviewed in 2023. Findings follow. A. Review of the laboratory's policy and procedure titled Proficiency Testing Test Procedure, updated 10/20/2023, under "4. Clinical Laboratory PT Testing - External" at 4.2 stated, "PT Survey samples are performed using the same testing methods as patient specimens" and at 4.3.1 stated, "...Supervisor and analyst will sign and date original paperwork". The attestation statement was not explicitly stated. B. Review of the American Association of Bioanalysts (AAB) for the M2 and M3 events in 2023 for the Genital Gram Stain revealed the attestation statements were not signed by the testing personnel. The attestation stated "The undersigned analyst attests that samples were tested in the same manner as patient samples." C. Interview with the technical consultant on November 1, 2023 at 1100 hours confirmed the attestation statements for AAB were not signed.
D5209	PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235

	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. This STANDARD is not met as evidenced by: Based on review of competency evaluations and interview, the laboratory failed to assess competency for one of one clinical consultant, one of one technical supervisor, one of one general supervisor, and one of one technical consultant. Findings follow. A. Review of competency evaluations showed none for the positions of clinical consultant, technical supervisor, general supervisor, and technical consultant. Competency evaluations were requested on November 1, 2023 at 0955 but not provided. B. Interview with the Technical Supervisor/Technical Consultant on November 1, 2023 at 0955 hours in the break room confirmed they had not been performed.