

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D0674582	(X3) Date Survey Completed 10/21/2021
Name of Provider or Supplier Yoakum County Hospital	Street Address, City, State 412 Mustang Ave, Denver City, 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
D5441	<p>CONTROL PROCEDURES CFR(s): 493.1256(a)(b)(c)(g)</p> <p>(a) For each test system, the laboratory is responsible for having control procedures that monitor the accuracy and precision of the complete analytic process. (b) The laboratory must establish the number, type, and frequency of testing control materials using, if applicable, the performance specifications verified or established by the laboratory as specified in 493.1253(b)(3). (c) The control procedures must-- (c)(1) Detect immediate errors that occur due to test system failure, adverse environmental conditions, and operator performance. (c)(2) Monitor over time the accuracy and precision of test performance that may be influenced by changes in test system performance and environmental conditions, and variance in operator performance. (g) The laboratory must document all control procedures performed.</p> <p>This STANDARD is not met as evidenced by: Based on review of quality control results and interview, the laboratory failed to monitor over time the accuracy and precision of the test system for D-Dimer performed on the Triage Meter using the Triage Control Total 5 for 2 of 2 years reviewed. Findings follow. A. Review of monthly quality control showed mean and standard deviation (SD) were not calculated for the D-Dimer quality control results. B. Interview with the Technical Consultant on Oct 19, 2021 at 1645 in the laboratory confirmed statistical analysis was not performed on the D-Dimer quality control results.</p>
D6046	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(8)</p> <p>(b) The technical consultant is responsible for-- (b)(8) Evaluating the competency of all testing personnel and assuring that the staff maintain their competency to perform test procedures and report test results promptly, accurately and proficiently.</p>

This STANDARD is not met as evidenced by:

Based on review of competency evaluations and interview, the technical consultant failed to perform the competency evaluations for four out of five randomly selected competency evaluations from 2021. Findings follow. A. Review of competency evaluations from 2021 showed the following competency evaluations were performed by the following testing personnel in the laboratory as listed on the CMS form 209: 2021 Competency Evaluations: 1. Testing personnel #3 performed PT/APTT, CBC with retic, D-Dimer, sed rate competencies by testing personnel #2, 2. Testing personnel #4 performed PT/APTT, CBC with retic, RPR, and C diff competencies by testing personnel #7, 3. Testing personnel #5 performed Dimension EXL, PT/APTT, and RPR competencies by testing personnel #4, 4. Testing personnel #6 performed PT /APTT, Dimension EXL, and RPR competencies by testing personnel #4. B. Interview with the Technical Consultant on Oct 19, 2021 at 1145 in the office confirmed the competency evaluations were not always performed by her, and acknowledged when a tech was available, they would perform competencies.