

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D2085618	(X3) Date Survey Completed 11/13/2019
Name of Provider or Supplier Tlc Complete Care	Street Address, City, State 7330 South Staples Street, Corpus Christi, 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	Noted deficiencies and plans of correction were discussed with the laboratory representative at the entrance and exit conferences. The facility representative was given an opportunity to provide evidence of compliance with the noted deficiencies, and no such evidence was provided prior to survey exit. The facility was found to be in compliance with applicable Conditions of Participation in the CLIA program, and recertification is recommended. Note: The CMS-2567 (Statement of Deficiencies) is an official, legal document. All information must remain unchanged except for entering the plan of correction, correction dates, and the signature space. Any discrepancy in the original deficiency citation(s) will be reported to the Dallas Regional Office (RO) for referral to the Office of the Inspector General (OIG) for possible fraud. If information is inadvertently changed by the provider/supplier, the State Survey Agency (SA) should be notified immediately.
D6054	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(9)</p> <p>The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least annually, after the first year.</p> <p>This STANDARD is not met as evidenced by: Based on review of laboratory policy, review of personnel records, and confirmed in interview of facility personnel, the technical consultant failed to perform annual competency assessments for 7 of 30 testing persons who required one. The findings were: 1. Review of laboratory policy "Laboratory Procedure Training for Technical Personnel", it states under C. Review "Annual Assessments: unless there is a reason for remedial training, the Skills Competency Checklists are completed annually for every lab testing personnel who has completed their first year. There must be a documented checklist for every test or test methodology (analyzer) performed in the laboratory". 2. Review of laboratory personnel records for Testing Personnel #6,</p>

Testing Personnel #13, Testing Personnel #19, Testing Personnel #21, Testing Personnel #22, Testing Personnel #27 and Testing Personnel #29 (listed on the CMS Form-209) revealed that annual competency was not performed. Testing Personnel #6 Date of Hire: 1/14/2016 Last Competency Assessment Date: 03/01/2018 Testing Personnel #13 Date of Hire: 08/17/2017 Last Competency Assessment Date: 08/25/2018 Testing Personnel #21 Date of Hire: 10/17/2016 Last Competency Assessment Date: 10/19/2018 Testing Personnel #22 Date of Hire: 03/03/2015 Last Competency Assessment Date: 08/01/2018 Testing Personnel #27 Date of Hire: 01/27/2016 Last Competency Assessment Date: 06/01/2018 Testing Personnel #29 Date of Hire: 09/23/2017 Last Competency Assessment Date: 09/28/2018 3. The findings were confirmed in interview of the technical consultant on November 13, 2019 at 10:10 hours in the office. Key: CMS - Centers for Medicare and Medicaid Services