

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 46D2171742	(X3) Date Survey Completed 04/19/2021
Name of Provider or Supplier Cbm Derm Llc DbA Providence Dermatology	Street Address, City, State 169 N Gateway Drive Suite 100, Providence, UT	
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
D5293	<p>GENERAL LABORATORY SYSTEMS QUALITY ASSESSMENT CFR(s): 493.1239(b)(c)</p> <p>(b) The general laboratory systems quality assessment must include a review of the effectiveness of corrective actions taken to resolve problems, revision of policies and procedures necessary to prevent recurrence of problems, and discussion of general laboratory systems quality assessment reviews with appropriate staff. (c) The laboratory must document all general laboratory systems quality assessment activities.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview with testing personnel, issues and/or corrective actions for slide processing and staining is not documented. Findings include: 1. Problem and corrective action log did not exist for the laboratory. 2. In an interview on 4/19/21 at approximately 11 am, testing personnel 1 confirmed that they have not created a problem log or documented any corrective actions.</p>
D6120	<p>TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(7)(8)</p> <p>(7) The technical supervisor is responsible for identifying training needs and assuring that each individual performing tests receives regular in-service training and education appropriate for the type and complexity of the laboratory services performed; (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> <p>This STANDARD is not met as evidenced by: Based on record review and interview with testing personnel, initial training for histotechs was not documented for 2 of 2 testing personnel. Findings include: 1.</p>

Personnel record review did not include documentation of initial training for 2 of 2 testing personnel. 2. Based on an interview with testing personnel 1, initial training was not documented for 2 of 2 testing personnel.