

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 46D2306482	<b>(X3) Date Survey Completed</b> 08/21/2025
<b>Name of Provider or Supplier</b> Intermountain Memorial Instacare	<b>Street Address, City, State</b> 2000 S 900 E 1st Floor, Salt Lake City, UT	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D5209</b>	<p><b>PERSONNEL COMPETENCY ASSESSMENT POLICIES</b> 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: Based on record review, review of procedure and interview with the Technical Consultant, the laboratory failed to follow written policies and procedures to assess semi-annual competency for 2 of 27 testing personnel performing microscopic moderate complexity testing. The laboratory performs approximately 100 microscopic moderate complexity tests per year. Findings include: 1. Record review of competency documentation revealed the laboratory failed to document semi-annual competency for 2 out of 27 testing personnel for microscopic moderate complexity testing. 2. Review of "MG0099 Medical Group Testing Education, Training, and Competency Requirements" procedure states: " Each provider performing microscopic moderate complexity testing will need to complete a competency assessment upon hire, a semi-annual competency assessment and an annual competency assessment as well as biannual proficiency tests thereafter for compliance with CLIA regulations". 3. An interview with the Technical Consultant on 8/21/2025, at approximately 12:45 p.m. confirmed failure to follow written policies and procedures to assess semi-annual competency for 2 of 27 testing personnel performing microscopic moderate complexity testing.</p>
<b>D6029</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1407(e)(11)</p> <p>(e)(11) Ensure that prior to testing patients specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and</p>

complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results;

This STANDARD is not met as evidenced by:

Based on lack of documentation and interview with the Technical Consultant, the Laboratory Director failed to ensure 7 of 27 testing personnel received the appropriate training prior to testing patient samples for microscopic moderate complexity testing. The laboratory performs approximately 100 microscopic moderate complexity tests per year. Findings include: 1. Review of Testing Personnel training and competency documentation revealed the Laboratory Director failed to ensure initial training for 7 out of 27 Testing Personnel for microscopic moderate complexity testing since the lab began testing in July 2024. 2. Interview with the Technical Consultant on 08/21/2025 at approximately 12:45 P.M., confirmed the Laboratory Director failed to ensure initial training for 7 out of 27 Testing Personnel for microscopic moderate complexity testing.