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| <b>Statement of Deficiencies</b>   | <b>(X1) Provider/Supplier/CLIA Identification Number</b><br>51D0233778 | <b>(X3) Date Survey Completed</b><br>09/14/2022 |
| <b>Name of Provider or Supplier</b><br>Pocahontas Memorial Hospital  | <b>Street Address, City, State</b><br>150 Duncan Road, Buckeye, WV     |   |
| 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>   |
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| <b>D6096</b>              | <p>LABORATORY DIRECTOR RESPONSIBILITIES<br/>CFR(s): 493.1445(e)(7)</p> <p>The laboratory director must ensure that all necessary remedial actions are taken and documented whenever significant deviations from the laboratory's established performance characteristics are identified.</p> <p>This STANDARD is not met as evidenced by:<br/>Based on record review, lack of documentation, and interview the laboratory director failed to establish an effective process to monitor and maintain the quality of laboratory services in the specialty of Microbiology to ensure accurate and reliable patient results. Findings: Refer to D5791</p>  |
| <b>D6102</b>              | <p>LABORATORY DIRECTOR RESPONSIBILITIES<br/>CFR(s): 493.1445(e)(12)</p> <p>The laboratory director must ensure that prior to testing patients' specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results.</p> <p>This STANDARD is not met as evidenced by:<br/>Based on review of testing personnel (TP) competencies, lack of documentation, and interview the laboratory director failed to ensure TP received the appropriate training to establish and maintain competency to perform Microbiology testing proficiently. Refer to D5209</p> |