Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 52D0979989	(X3) Date Survey Completed 04/25/2023
Name of Provider or Supplier Aurora Health Care Metro Inc - Kenosha South	**Street Address, City, State** 6811 118th Ave, Kenosha, WI	
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
D2009	TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1) The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods. This STANDARD is not met as evidenced by: Based on surveyor review of proficiency testing (PT) records from 2022 and interview with the technical supervisor, the laboratory director or designee did not attest to the routine integration of the PT samples into the patient workload. The director did not sign the attestation statements for two of three hematology, three of three chemistry, and two of two miscellaneous point of care (POC) events. Findings include: 1. Review of PT records from 2022 showed no evidence the director or designee attested to the routine integration of the samples into the patient workload using the laboratory's routine methods for seven of eight events. Review of the attestation statement forms showed the director or designee did not sign the forms for the following events: Hematology 2022, Events two and three Chemistry 2022, Events one, two and three Miscellaneous POC 2022, Events one and two 2. Interview with the technical supervisor on April 25, 2023 at 10:30 AM confirmed director or designee signatures were missing from the attestation statements for seven of eight events during 2022 and confirmed the director or designee did not attest to the routine integration of the samples into the patient workload using the laboratory's routine methods.
D6128	TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(9) The technical supervisor is responsible for evaluating and documenting the performance of individuals responsible for high complexity testing at least annually

	after the first year, unless test methodology or instrumentation changes, in which case, prior to reporting patient test results, the individual's performance must be reevaluated to include the use of the new test methodology or instrumentation. This STANDARD is not met as evidenced by: Based on surveyor review of competence evaluation records and interview with the technical consultant, the technical supervisor did not evaluate and document the performance of one of three testing personnel at this laboratory in 2021 or 2022. Findings include: 1. Review of competence evaluation records for the three testing personnel showed staff A had no documented competence evaluation at this laboratory in 2021 or 2022. 2. Interview with the technical consultant on April 25, 2023 at 12:45 PM confirmed the laboratory did not have records available to show the technical supervisor had evaluated competence of testing personnel staff A in 2021 or 2022 at this laboratory.