

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 53D0520036	(X3) Date Survey Completed 08/07/2024
Name of Provider or Supplier Weston County Health Services	Street Address, City, State 1124 Washington Blvd, Newcastle, WY	
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
D5209	<p>PERSONNEL COMPETENCY ASSESSMENT POLICIES 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 review of personnel files, review of the CMS (Centers for Medicare and Medicaid Services) 209 Laboratory Personnel Report, policy and procedure review, and staff interview, the laboratory failed to ensure an annual competency assessment had been completed for 1 of 6 testing personnel (TP #1) for 2 of 2 years (2022, 2023) and failed to ensure a competency assessment for the responsibilities of the general supervisor and technical supervisor (TS/GS #1) were completed for 1 of 2 years (2023) reviewed. The findings were: 1. Review of the CMS 209 Laboratory Personnel Report showed the laboratory employed one staff member (TS/GS #1) which performed the duties of both the general supervisor and the technical supervisor. TS /GS #1 also acted as testing personnel. Review of the personnel file for TS/GS/TP #1 showed no evidence a competency assessment had been completed in 2023 for his TS /GS responsibilities and no competency assessments and been completed to evaluate his testing personnel responsibilities in 2022 or 2023. 2. Interview with TS/GS/TP #1 on 8/6/24 at 1:52 PM confirmed the competency assessments for his testing personnel responsibilities had not been completed and was unable to locate the 2023 TS/GS competency assessment. 3. Review of the Competency Assessment policy and procedure, last approved by the laboratory director 11/2023, showed "...Established employees are to have competency evaluated on an annual basis...The Laboratory Manager that performs non-waived testing must also display proficiency and competency annually. A staff technologist with a minimum of 6 years of experience can observe the managers techniques in all non-waived testing duties. This observation will be documented. The Laboratory Director, Technical Supervisor, or</p>

Technical Consultant can then review the observation documentation, proficiency testing, quality control results, worksheets, educational supplements or problem solving exemplars to determine competency of testing. The Laboratory Director or Technical Supervisor will also evaluate competency in managerial duties..."