

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 53D0681667	<b>(X3) Date Survey Completed</b> 08/29/2020
<b>Name of Provider or Supplier</b> Powell Valley Healthcare	<b>Street Address, City, State</b> 777 Avenue H, Powell, WY	
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>D5407</b>	<p><b>PROCEDURE MANUAL</b> CFR(s): 493.1251(d)</p> <p>Procedures and changes in procedures must be approved, signed, and dated by the current laboratory director before use.</p> <p>This STANDARD is not met as evidenced by: Based on direct observation, procedure manual review, and interview with staff, the laboratory failed to ensure the change to the blood bank specimen and unit labeling process was approved, signed and dated by the director. The laboratory performed approximately 3-6 compatibility tests per week. Findings include: 1. The laboratory changed the procedure for positive identification of blood recipient's specimens and tagging of crossmatched donor specimens in 2020. 2. The laboratory failed to change the established procedure and failed to have the director's signature and date of approval on the revised procedure. 3. In an interview conducted on 08/29/2020 at approximately 1:10 P.M., the laboratory manager confirmed the laboratory had not revised the procedure with the approval of the director by signature and date of approval.</p>
<b>D6128</b>	<p><b>TECHNICAL SUPERVISOR RESPONSIBILITIES</b> CFR(s): 493.1451(b)(9)</p> <p>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.</p> <p>This STANDARD is not met as evidenced by:</p>

Based on testing personnel competency evaluations reviewed, lack of documentation and confirmation by the laboratory manager, the technical supervisor failed to ensure seven of seven high complexity testing personnel were evaluated for competency in 4 of 5 specialties at least annually for 1 of 2 years of testing reviewed, 2019. Findings include: 1. The laboratory failed to document competency evaluations for Hematology, Chemistry, Microbiology, and General Immunology for the seven high complexity testing personnel in 2019. 2. In an interview conducted on 08/29/2020 at approximately 1:00 P.M., the laboratory manager confirmed competency was not documented for 2019 for specialties other than immunohematology.