

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 53D2133127	(X3) Date Survey Completed 08/23/2023
Name of Provider or Supplier Banner Health Physicians West Llc	Street Address, City, State 625 Albany Ave, Torrington, 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-209 Laboratory Personnel Report, lack of documentation, policy and procedure review, and staff interview, the laboratory failed to ensure the competency assessments included the direct observation of routine patient testing, specimen handling processing and testing; monitoring the recording and reporting of test results; a review of test results or worksheets, proficiency testing results, and an assessment of problem solving skills for 5 of 5 testing personnel (MD #1, MD #2, MD #3, MD #4, RN #1). In addition, the laboratory failed to ensure an initial and a semi-annual competency assessment was completed for MD #2. The findings were: 1. Review of the CMS-209 Laboratory Personnel Report showed the laboratory listed 4 physicians and 1 registered nurse as testing personnel. The following concerns were identified: a. Review of the personnel files for MD #2 failed to include an initial and a semiannual competency assessment which included all of the required elements. b. Review of the personnel files for MD #1, MD #2, MD #3, MD #4, and RN #1 failed to include an annual competency assessment which included all the required elements. 2. Review of the "Duties and Responsibilities of Laboratory Director, Technical Consultant, Clinical Consultant, and General Supervisor", dated 10/7/22, showed it was the responsibility of the technical consultant to evaluate the competency of testing personnel as administered by the laboratory manager. The procedure outlined the required elements of the competency assessment; however, the policy and procedure failed to include the requirement for an initial and semiannual assessment. 3. Interview with the laboratory manager on 8/23/23 at 11:11 AM confirmed the competency assessments did not</p>

include all of the required elements and an initial and a semiannual competency assessment had not been completed for MD #2.