

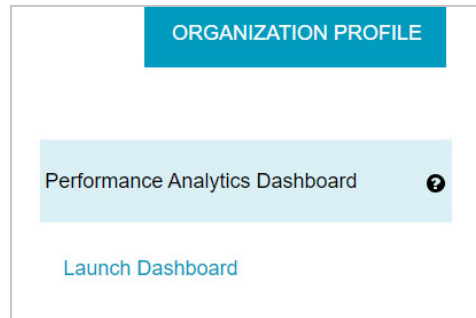


Performance Analytics Dashboard Quick Start for Laboratory Systems

Empower your laboratory system to make informed, data-driven decisions through insights and performance monitoring, driving efficiency, quality, and compliance. Bring it all together with the CAP's Performance Analytics Dashboard.

Access the dashboard

1. Log in to e-LAB Solutions Suite.
2. Click lab selector and choose your CAP system number (HU).
3. Click the Launch Dashboard link under the Performance Analytics Dashboard.
4. If your CAP system number (HU) has not been established, contact the CAP for assistance.



Performance Analytics Dashboard

- A. Navigation Tabs
- B. Collapsible Filter Options
- C. Online Help
- D. Proficiency Testing Performance
- E. Accreditation Performance

Apply filters to access only the data you need.

Customize reporting groups to segment your data. See "How to Manage Lab Reporting Groups" located in e-LAB Solutions Suite Help.

Performance Analytics Dashboard

← Back to eLAB Solutions Suite Main Menu

MANAGE LAB REPORTING GROUPS

Dashboard | Site List | Proficiency Testing | Accreditation | Analyte Scorecard | Report Links

Click here to collapse filter options

* indicates required field

PT Metric: Acceptable Unacceptable

LAP Metric: Deficient Compliant

of Days: [10]

Group Name: Hospital Main Labs

GO RESET

Proficiency Testing Performance Overview

Select View: Graph

Acceptable Proficiency Testing by Year and Group

Reporting Year	Acceptable %	System Average	CAP-wide Average
2016	98.5	98.0	97.5
2015	99.0	98.5	98.0
2014	98.5	98.0	97.5

Accreditation Performance Overview

Select View: Graph

Deficient Accreditation Performance by Cycle and Group

Inspection Cycle	Percent Deficient	CAP-wide Average
Current Cycle	0.84%	0.79%
Revised Cycle	0.74%	0.69%
Second Previous Cycle	0.64%	0.59%
Previous Cycle	0.54%	0.49%

Summary Tiles:

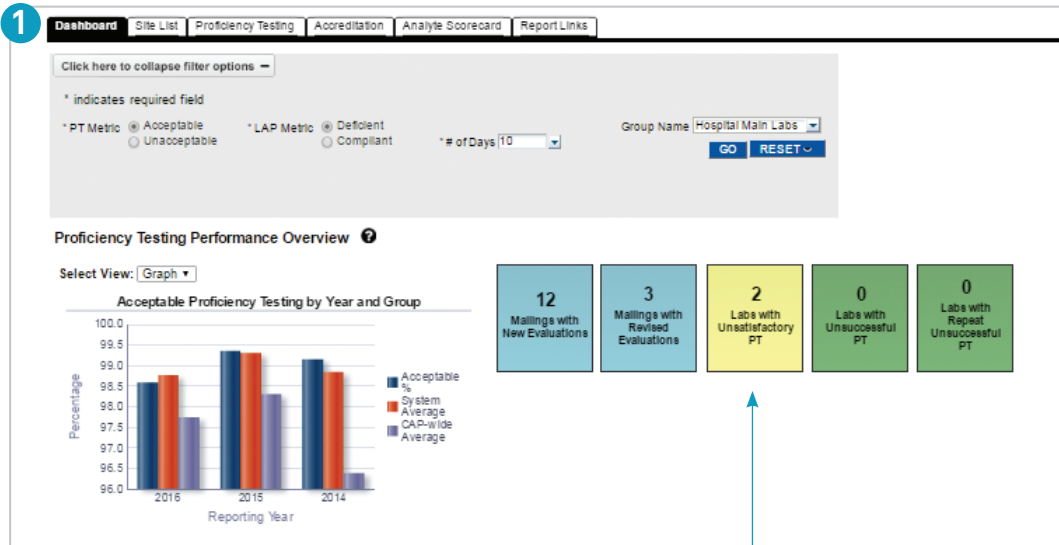
- 12 Mailings with New Evaluations
- 3 Mailings with Revised Evaluations
- 2 Labs with Unsatisfactory PT
- 0 Labs with Unsuccessful PT
- 0 Labs with Repeat Unsuccessful PT
- 0 Labs with Active Sanctions
- 0 Labs Accredited
- 0 Labs Inspected
- 0 Labs with >= 2.5% Deficiencies
- 0 Labs with Recurring Deficiencies

Look for trends in your laboratory and compare performance to the overall system and CAP-wide average.

Click on informational tiles to drill to recent or revised evaluations. Color-coded tiles prompt investigation—click to view the Analyte Scorecard report.

Typical Scenarios – Identifying Laboratories With Proficiency Testing (PT) Problems

OPTION A: Drill to specific analyte issues using color-coded tiles.



Drill down to the Analyte Scorecard by clicking on the yellow tile to view laboratories with unsatisfactory PT.

2 Analyte Scorecard - Hospital Main Labs

Bolded analytes are regulated analytes as defined in CLIA 88, Subpart I, Proficiency Testing Programs for Nonwaived Testing; Red highlight indicates unsatisfactory performance; Yellow highlight indicates satisfactory performance < 100%.

Select View: Condensed

Analyte	CAP #	Program Year	Event	Evaluation Date	Kit #	Mailing	Score	%	Performance
Cortisol	718888821	2016	1	8/15/2016	29549433-1	K-A 2016	0/5	0	Unsatisfactory
TSH	718888821	2016	1	8/15/2016	29549433-1	K-A 2016	0/5	0	Unsatisfactory
hCG, Serum	718888821	2016	1	8/15/2016	29549433-1	K-A 2016	0/5	0	Unsatisfactory
Amylase	29107641-1	2016	1	8/9/2016	29107641-1	C-A 2016	0/5	0	Unsatisfactory
Carbamazepine	29107641-1	2016	1	8/9/2016	29107641-1	C-A 2016	0/5	0	Unsatisfactory
Gentamicin	29107641-1	2016	1	8/9/2016	29107641-1	C-A 2016	0/5	0	Unsatisfactory
Phenobarbital	29107641-1	2016	1	8/9/2016	29107641-1	C-A 2016	0/5	0	Unsatisfactory
Phenytoin	29107641-1	2016	1	8/9/2016	29107641-1	C-A 2016	0/5	0	Unsatisfactory
Theophylline	29107641-1	2016	1	8/9/2016	29107641-1	C-A 2016	0/5	0	Unsatisfactory
Valproic Acid	29107641-1	2016	1	8/9/2016	29107641-1	C-A 2016	0/5	0	Unsatisfactory

Return

Navigate to the previous screen.

Sort by CAP # to identify laboratories with unsatisfactory proficiency tests.

Access an evaluation or result form by clicking on a kit #.

Access a Participant Summary Report by clicking on a mailing.

Color-coded performance indicates unsatisfactory performance and satisfactory performance < 100%.

Typical Scenarios – Identifying Laboratories With Proficiency Testing (PT) Problems

OPTION B: Compare individual laboratories' PT performance to your system.

Navigate to the proficiency testing tab.

Click to expand the Group Level Hierarchy.

1

Dashboard | Site List | **Proficiency Testing** | Accreditation | Analyte Scorecard | Report Links

Click here to expand filter options +

Laboratory System - Lab Services of Arizona (SYSTEM) ?

Yellow highlight indicates acceptable % less than 90; Red highlight indicates acceptable % less than 80.

Group Level Hierarchy	Acceptable %			System Average			CAP-Wide Average		
	2016	2015	2014	2016	2015	2014	2016	2015	2014
Lab Services of Arizona (SYSTEM)	98.75%	99.30%	98.84%	98.75%	99.30%	98.84%	97.75%	98.30%	96.40%

Expand the filter options to see the data of interest to you.

Compare a single laboratory's PT performance to the system average and CAP-wide average for up to three years.

2

Dashboard | Site List | **Proficiency Testing** | Accreditation | Analyte Scorecard | Report Links

Click here to expand filter options +

Laboratory System - Lab Services of Arizona (SYSTEM) ?

Yellow highlight indicates acceptable % less than 90; Red highlight indicates acceptable % less than 80.

Group Level Hierarchy	Acceptable %			System Average			CAP-Wide Average		
	2016	2015	2014	2016	2015	2014	2016	2015	2014
CAP# 2174008 Banner Heart Hospital Main Laboratory 6750 E. Broadway Ave Mesa, AZ 85208-1749	100.00%	100.00%	100.00%	98.75%	99.30%	98.84%	97.75%	98.30%	96.40%
CAP# 2188800 Banner Quest Laboratories of Tucson-Avondale Laboratory 633 N. Avondale Way Ste 120 Tucson, AZ 85710-1595	98.50%	99.55%	99.74%	98.75%	99.30%	98.84%	97.75%	98.30%	96.40%
CAP# 3128101 Banner Care & Health Medical Center West Clinical Laboratory 14500 N. Wenden Blvd Sun City West, AZ 85178-8282	99.63%	99.66%	99.66%	98.75%	99.30%	98.84%	97.75%	98.30%	96.40%
CAP# 7182104 Banner Estrella Medical Center Nursing Point of Care Lab 3231 W Thomas Rd Phoenix, AZ 85017-3332	100.00%	98.37%	89.00%	98.75%	99.30%	98.84%	97.75%	98.30%	96.40%
CAP# 7182105 Banner Estrella Medical Center Clinical Laboratory 3231 W Thomas Rd Phoenix, AZ 85017-3332	94.31%	99.76%	99.45%	98.75%	99.30%	98.84%	97.75%	98.30%	96.40%
CAP# 7184802 Banner Thunderbird Med Ctr Point of Care 5555 W Thunderbird Rd Glendale, AZ 85308-6522	98.88%	99.89%	99.58%	98.75%	99.30%	98.84%	97.75%	98.30%	96.40%
CAP# 7184803 Banner Quest Laboratories of Tucson Genetic/Rare Response Lab 633 N. Avondale Rd Ste 141 Tucson, AZ 85710-2710	100.00%	100.00%	100.00%	98.75%	99.30%	98.84%	97.75%	98.30%	96.40%

Reports can be printed or exported.

Click the site to view the PT performance by subspecialty and analyte.

Scroll through the list of laboratories to review color-coded performance indicators.

Yellow highlights indicate acceptable <90%.

Red highlights indicate acceptable <80%.

Log in to e-LAB Solutions Suite to view a tutorial or select the ? to access dashboard help.

Typical Scenarios – Identifying Laboratories With Recurring Deficiencies

Review and export a summary of PT performance by system and site.

Click to view Inspection Result Summary report.

Dashboard | Site List | Proficiency Testing | Accreditation | Analyte Scorecard | **Report Links**

Proficiency Testing Reports

- Laboratory System
- Laboratory System Subspecialty & Analyte Summary
- Analyte Performance Comparison Across Labs
- Subspecialty Performance Comparison Across Labs
- Recent Evaluations
- Laboratory Performance Summary

Laboratory Accreditation Reports

- Inspection Summary
- Inspection Summary by Section / Department
- Inspection Summary by Checklist Module
- Inspection Detail by Checklist Module
- Inspection Summary by Phase
- Deficiency Frequency Summary
- Laboratory Deficiency Distribution Summary
- Requirement Deficiency Detail
- Laboratory Deficiency Detail
- Inspection Result Summary
- Accreditation Decisions
- Sanctions

Navigate to the Report Links tab.

Click here to expand filter options +

Back To [Report Links](#)

Inspection Result Summary - Lab Database of Inspections (3/15/2016)

Yellow highlight indicates deficiency % higher than demographic group average; Red highlight indicates greater than 2.5% deficiencies or more than one recurring deficiency

CAP #	CLIA #	Name / Address	Director	Inspection Date	Inspection Type	Percent Deficient	Recurring Deficiencies
221205	02C012016	Banner QMC Third Center Phoenix West Laboratory Phoenix, AZ 85008-2612	Lisa J. Novak-Tobias, MD	3/15/2016	Routine	0.86	2
221202	02C012016	Banner Desert Medical Center West Laboratory Mesa, AZ 85205-4107	Suzanne M Cook, MD	3/17/2016	Routine	0.92	1
221203	02C012016	Banner Child Growth Medical Center CASA GRANDE, AZ 85122-6323	Jing-Hong Huang, MD	3/16/2016	Routine	0.72	2
221201	02C012016	Banner Thunderbolt Medical Center West Laboratory Glendale, AZ 85305-4922	Mark A. Reuter, MD	3/17/2016	Routine	0.81	2
221204	02C012016	Banner Phoenix T.C. Roper Hospital Laboratory Phoenix, AZ 85004	Gregory Dale Coats, MD	3/15/2016	Routine	0.83	1
221206	02C012016	Banner Desert Laboratories of Tucson Phoenix Tucson, AZ 85710-1226	Carl Kammhuber, MD, PhD	3/16/2016	Routine	1.01	1
7182106	02C101544	Banner Phoenix Medical Center Central Laboratory Phoenix, AZ 85007-0332	Willy L. McDonald, MD	3/14/2016	Routine	1.08	1
7182116	02C101528	Banner Gateway Third Dr Phoenix, AZ 85004-1828	Estelle Ferguson, MD, PhD	3/15/2016	Routine	0.55	1
7202108	02C104078	Banner Quest Laboratories - Yuma	Deanna M. Abbott, MD	3/14/2016	Routine	0.90	1

Print / Export

Navigate back to Report Links.

Scroll through the list of laboratories to review color-coded performance indicators.

Yellow highlights deficiency % higher than demographic group.

Red highlights greater than 2.5% deficiencies or a recurring deficiency.

Reports can be printed or exported.

Drill to see the Laboratory Deficiency Detail including recurring deficiencies.

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