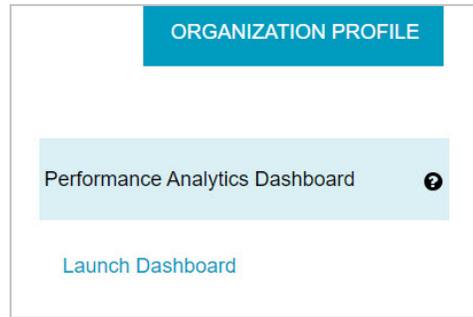# COLLEGE of AMERICAN PATHOLOGISTS

# Performance Analytics Dashboard Quick Start for Laboratory Systems

Now proactively monitor performance with daily alerts to identify and mitigate potential negative patient harm with the CAP's Performance Analytics Dashboard. This Web-based reporting tool provides reports at your convenience for the time period of interest to you.

## 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.

> **ORGANIZATION PROFILE**
>
> Performance Analytics Dashboard ❓
>
> **Launch Dashboard**

## Performance Analytics Dashboard

**A. Navigation Tabs**

**B. Collapsible Filter Options**
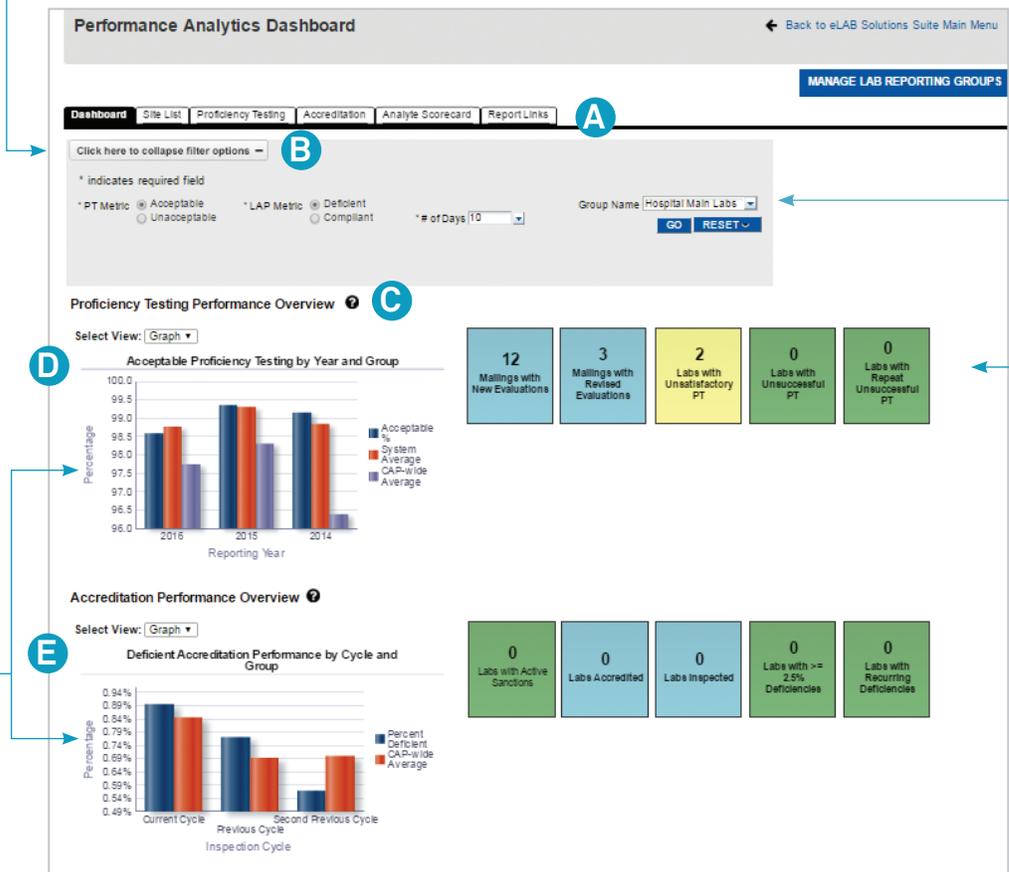
**C. Online Help**

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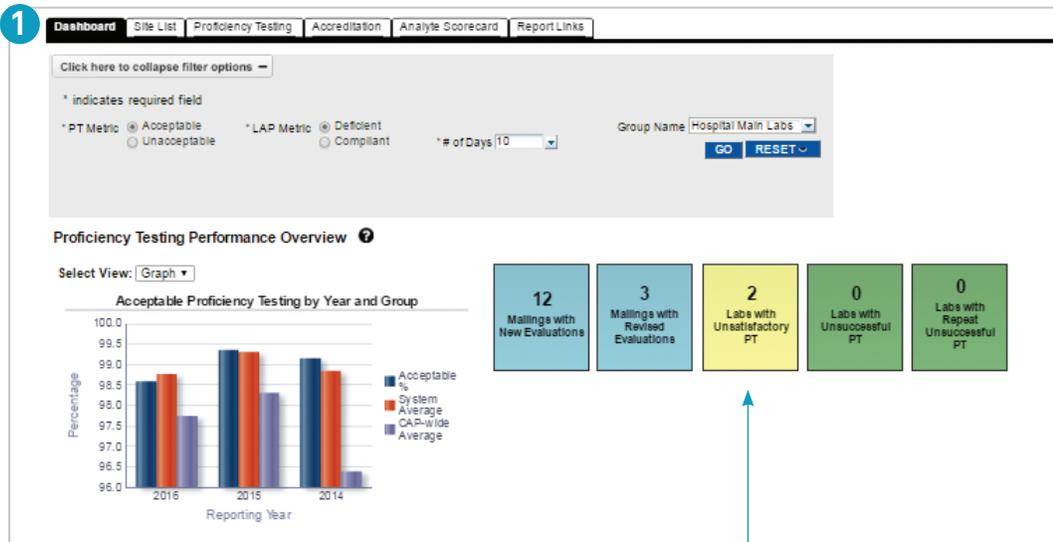
Look for trends in your laboratory and compare performance to the overall system and CAP-wide average.



**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

| 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 |

**Accreditation Performance Overview** ❓
Select View: Graph ▾

Deficient Accreditation Performance by Cycle and Group

| 0 Labs with Active Sanctions | 0 Labs Accredited | 0 Labs Inspected | 0 Labs with >= 2.5% Deficiencies | 0 Labs with Recurring Deficiencies |

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

**cap.org**

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

**1**

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



Legend:
- Acceptable %
- System Average
- CAP-wide Average

| 12 | 3 | 2 | 0 | 0 |
|----|----|----|----|----|
| Mailings with New Evaluations | Mailings with Revised Evaluations | Labs with Unsatisfactory PT | Labs with Unsuccessful PT | Labs with Repeat Unsuccessful PT |

**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** | | 2016 | 1 | 8/15/2016 | 29549433-1 | K-A 2016 | 0/5 | 0 | Unsatisfactory |
| **TSH** | | 2016 | 1 | 8/15/2016 | 29549433-1 | K-A 2016 | 0/5 | 0 | Unsatisfactory |
| **hCG, Serum** | | 2016 | 1 | 8/15/2016 | 29549433-1 | K-A 2016 | 0/5 | 0 | Unsatisfactory |
| **Amylase** | | 2016 | 1 | 8/9/2016 | 29107641-1 | C-A 2016 | 0/5 | 0 | Unsatisfactory |
| **Carbamazepine** | | 2016 | 1 | 8/9/2016 | 29107641-1 | C-A 2016 | 0/5 | 0 | Unsatisfactory |
| **Gentamicin** | | 2016 | 1 | 8/9/2016 | 29107641-1 | C-A 2016 | 0/5 | 0 | Unsatisfactory |
| **Phenobarbital** | | 2016 | 1 | 8/9/2016 | 29107641-1 | C-A 2016 | 0/5 | 0 | Unsatisfactory |
| **Phenytoin** | | 2016 | 1 | 8/9/2016 | 29107641-1 | C-A 2016 | 0/5 | 0 | Unsatisfactory |
| **Theophylline** | | 2016 | 1 | 8/9/2016 | 29107641-1 | C-A 2016 | 0/5 | 0 | Unsatisfactory |
| **Valproic Acid** | | 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%.**

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

Navigate to the proficiency testing tab.

**1**

Click to expand the Group Level Hierarchy.

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

Click here to expand filter options +

**Laboratory System -** ~~Lab Sciences 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 Sciences 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.

**2**

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

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

Click here to expand filter options +

**Laboratory System -** ~~Lab Sciences 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# ... Banner Heart Hospital Main Laboratory 6750 E Baywood Ave Mesa AZ 85206-1745 | 100.00% | 100.00% | 100.00% | 98.75% | 99.30% | 98.84% | 97.75% | 98.30% | 96.40% |
| CAP# 2999003 Sonora Quest Laboratories of Tucson-Alvernon Laboratory 610 N Alvernon Way Ste 120 Tucson AZ 85711-1585 | 98.50% | 99.55% | 99.74% | 98.75% | 99.30% | 98.84% | 97.75% | 98.30% | 96.40% |
| CAP# 3125101 Banner Del E Webb Medical Center Main Clinical Laboratory 14502 W Meeker Blvd Sun City West AZ 85375-5292 | 99.63% | 99.66% | 99.66% | 98.75% | 99.30% | 98.84% | 97.75% | 98.30% | 96.40% |
| CAP# 7155105 Banner Estrella Medical Center Nursing Point of Care Lab 9201 W Thomas Rd Phoenix AZ 85037-3332 | 100.00% | 98.37% | 89.00% | 98.75% | 99.30% | 98.84% | 97.75% | 98.30% | 96.40% |
| CAP# 7155105 Banner Estrella Medical Center Clinical Laboratory 9201 W Thomas Rd Phoenix AZ 85037-3332 | 94.31% | 99.76% | 99.45% | 98.75% | 99.30% | 98.84% | 97.75% | 98.30% | 96.40% |
| CAP# 7164342 Banner Thunderbird Med Ctr Point of Care 5555 W Thunderbird Rd Glendale AZ 85306-4622 | 98.68% | 99.89% | 99.58% | 98.75% | 99.30% | 98.84% | 97.75% | 98.30% | 96.40% |
| CAP# 7164395 Sonora Quest Laboratories of Tucson Centralized Rapid Response Lab 601 N Wilmot Rd Ste 141 Tucson AZ 85711-2701 | 100.00% | 100.00% | 100.00% | 98.75% | 99.30% | 98.84% | 97.75% | 98.30% | 96.40% |

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

Yellow highlights indicate acceptable <90%.

Red highlights indicate acceptable <80%.

Reports can be printed or exported.

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

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.**

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**Navigate back to Report Links.**

Click here to expand filter options ➕

Back To Report Links

**Inspection Result Summary -** ❓

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 |
|---|---|---|---|---|---|---|---|
| | | | | 3/15/2016 | Routine | 0.86 | 2 |
| | | | | 3/17/2016 | Routine | 0.92 | 1 |
| | | | | 3/16/2016 | Routine | 0.72 | 2 |
| | | | | 3/17/2016 | Routine | 0.81 | 2 |
| | | | | 3/15/2016 | Routine | 0.83 | 1 |
| | | | | 3/16/2016 | Routine | 1.01 | 1 |
| | | | | 3/14/2016 | Routine | 1.08 | 1 |
| | | | | 3/15/2016 | Routine | 0.55 | 1 |
| | | | | 3/14/2016 | Routine | 0.90 | 1 |

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**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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**cap.org**