

Patient Safety Indicator Tracking & Graph Example

ABC Laboratory
Anytown, USA

Delayed Test Results Due to Specimen Rejection

Reason for Indicator: Turn-around-time complaints received and validated; identified increase specimen rejection impacting on timely reporting

Indicator Expression: Specimen Rejection Rates

Responsible Department(s): Laboratory and Emergency Department

	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT
Result	11.3	10.5	10.9	7.0	6.5	4.0						
Target	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0
Outcome (Acceptable (A)/ Unacceptable(U))	U	U	U	U	U	U						
Threshold: 2-3% all results >3% require change actions be evaluated and implemented												

Month	SUMMARY: CORRECTIVE ACTION / FOLLOW UP / OUTCOME or N/A Acceptable
Oct	10-Day Snapshot data
Nov	1-Month Baseline: No change actions
Dec	2-Month Baseline: No change actions; specimen collection, handling and transport processes evaluated; education for 4 new employees, all staff education on line draws to decrease # of line draws
Jan	December education completed prior to 1/1/21; Actions: 1)specimen collection, handling, transporting training & competency assessed and revised 2) Laboratory staff to assume responsibilities for orientation, training and competency assessments Feb 2021; monthly competency assessments by observation started
Feb	Competency assessments identified specimen handling errors by multiple staff; Action: education on correct specimen handling provided for all specimen collection staff
Mar	Patient Care Tech float staff from inpatient floors identified; Action: implement orientation, training and competency for all staff that can float to ED for coverage during staff shortage
Apr	
May	
Jun	
Jul	
Aug	
Sept	

