Patient Safety Indicator Example Form

Patient Safety Indicator	
Use this form to document an approved quality indicator. Complete all parts necessary prior to indicator implementation.	
Part 1: Indicator Selection, Purpose, Scope	
Indicator Unique Identifier:	ED001
Descriptive Name:	Delayed Test Results Due to Specimen Rejection
Effective Dates:	Start Date: 11/1/20 End Date: 5/31/21 or ☐ Ongoing
Purpose/Desired Improvement:	Decrease number of rejected blood specimens to <2% to improve result turn-around-times
Literature Reference (if applicable):	NA
Published Standards/Benchmarks:	NA
Indicator Scope:	
Laboratory Phase(s) Involved:	☒ Pre-analytical ☐ Analytical ☐ Post-analytical ☐ Other: _____
Quality Aim:	☐ Safe ☐ Effective ☐ Patient-Centered ☒ Timely ☐ Efficient ☐ Equitable
Departments Involved:	☐ Laboratory Only ☒ Laboratory and non-laboratory
Laboratory Department(s) (list):	All departments utilizing blood specimens for testing
Non-Laboratory Dept(s) (list):	Emergency Department
Team Members (list all):	Laboratory: M Smith, S Jones, L Scientist Sci, J Johnson, J Path MD ED: S Carter, D Cutter, P Carrol, S Trauma MD
Study Type:	☒ Trial ☒ Initial /Baseline ☒ Continuous ☐ Maintain Gain ☐ Pro-active Risk Assessment Other: _____

Part 2: Data Collection, Responsibility	
Person(s) Responsible for Collection:	M Smith (primary), Lab Scientist (secondary)
Data Time Frame:	☐ Retrospective Start: ___/___/_____ End: ___/___/_____ ☒ Concurrent Start: 11/1/20 End: 5/31/21 Frequency of Collection: ☐ Daily ☐ Weekly ☒ Monthly ☐ Other If other (specify): _____
Data Collection Method:	☒ Manual ☐ Electronic Manual or Electronic Collection Instructions: LIS: total specimen count and redraw documentation Manual: Specimen rejection log in specimen processing
Method to Record Data:	☒ Manual Tally ☒ Electronic (e.g., LIS, HIS, EHR) Manual Specifics: Manual specimen rejection log in specimen processing Electronic Specifics: LIS (specimen count report) LIS (specimen redraw report)
Data Elements to Collect (list all):	name, accession #, phlebotomist, date/time of service, specimen rejected, specimen rejection reason, time redraw specimen collection
Data Calculations (if applicable)	NA
Data Sources (list all):	Specimen rejection log, LIS (specimen count and redraw report)
Numerator Description:	Total # of rejected blood specimens requiring redraw in one calendar month
Numerator Instructions:	Compare manual specimen rejection log to LIS redraw report to verify total # rejected; do not include non-blood specimens
Denominator Description:	Total # of received blood specimens in one calendar month
Denominator Instructions:	Do not include non-blood specimens
Data Expression & Calculation: Expression Description (e.g., frequency, rate, raw number, range, mean, median, Sigma value)	Rejection Rate
Expression Calculation:	(total # rejected specimens/total # specimens received) x 100 = Rejection Rate %
Instructions (if required)	Report to one decimal (e.g., 5.0%); include total days in a calendar month

Part 3: Reporting & Interpretation	
Person(s) Responsible for Reporting:	M Smith (primary), Lab Scientist (secondary)
Person(s) Responsible for Interpretation:	M Smith, J Path MD (primary) All team to review and approve interpretation
Frequency of Reporting:	☐ Daily ☐ Weekly ☒ Monthly ☐ Quarterly ☐ Other _____
Deadline for Submitting Report:	15th of the month
Report Content Specifics:	Monthly reports will include actions and responsibilities for change as needed
Indicator Target (expected value) & Source:	<2% Internally set
Indicator Threshold Requiring Action:	2-3%
Data Display Method:	☐ Bar Chart ☒ Line Chart ☐ Histogram ☐ Pie Chart ☐ Parento Chart ☐ Run Chart ☐ Other _____

Approval Signatures:	Date:
Joe Path, MD	10/15/2020
Sally Trauma, MD	10/17/2020
Mary Smith, Laboratory Director	10/14/2020