

ADHB LabPLUS Community Anatomic Pathology Service KPI Reporting

KPI definition - Template version 4

Colour coding of cells

| | |
|--|--|
| | yellow cells have conditional formatting and a target |
| | green cells contain values that do meet target |
| | orange cells contain a value that does not meet target |
| | blue cells indicate contracted KPIs |

| Item | Indicator | Definition | Target | Unit | Mon 2/08/21 | Tue 3/08/21 | Wed 4/08/21 | Thu 5/08/21 | Fri 6/08/21 | Mon 9/08/21 | Tue 10/08/21 | Wed 11/08/21 | Thu 12/08/21 | Fri 13/08/21 | Mon 16/08/21 | Tue 17/08/21 | Wed 18/08/21 | Thu 19/08/21 | Fri 20/08/21 | Mon 23/08/21 | Tue 24/08/21 | Wed 25/08/21 | Thu 26/08/21 | Fri 27/08/21 |
|---|--|---|--------------|---------|----------------|----------------|----------------|----------------|----------------|----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| 4. LAB | | | | | | | | | | | | | | | | | | | | | | | | |
| 4.1 | Patient episodes | Total number of patient episodes | | number | 431 | 412 | 430 | 470 | 396 | 400 | 403 | 441 | 455 | 379 | 372 | 410 | 123 | 54 | 32 | 60 | 72 | 58 | 93 | 50 |
| 4.2 | Patient tests | Total number of patient tests performed | | number | 386 | 518 | 492 | 524 | 417 | 363 | 406 | 495 | 590 | 516 | 495 | 469 | 462 | 326 | 213 | 192 | 188 | 283 | 440 | 392 |
| 4.3 | Urgent tests | Total number of urgent tests | | number | | | | | | | | | | | | | | | | | | | | |
| 4.4 | % urgent tests | 4.3 divided by 4.2 | | percent | | | | | | | | | | | | | | | | | | | | |
| 4.12 | % Amended Results | Percentage of results changed after original result was reported to referrer. 4.11 divided by 4.2 | less than | 1% | | | | | | | | | | | | | | | | | | | | |
| 4.14 | Timely attendance frozen sections and booked cytology for FNAs | % of timely attendance for booked frozen sections and booked cytology for FNAs for the private referrers/hospitals (assumes mutually agreed and clinically appropriate booking) | greater than | 95% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| 5. TURNAROUND TIME NON-URGENT | | | | | | | | | | | | | | | | | | | | | | | | |
| 5.6a | Total TAT Histology - Biopsies | Turnaround time for 80th centile from collection to report, expressed in working days | less than | 3.0 | | | | | | | | | | | | | | | | | | | | |
| 5.6b | Total TAT Histology - major resections | Turnaround time for 80th centile from collection to report, expressed in working days | less than | 5.0 | 8.8 | 11.8 | 11.8 | 12.7 | 11.9 | 8.9 | 10.1 | 11.8 | 11.9 | 11.9 | 8.9 | 10.7 | 10.1 | 10.9 | 7.7 | 6.8 | 7.9 | 11.7 | 12.9 | 12.7 |
| 5.6c | Total TAT Histology 98% percentile | Turnaround time for 98th centile from collection to report, expressed in working days | less than | 10.0 | 11.8 | 12.0 | 12.0 | 13.2 | 14.0 | 11.9 | 11.7 | 12.1 | 12.9 | 13.9 | 11.9 | 11.9 | 12.0 | 12.7 | 12.7 | 11.7 | 11.8 | 12.0 | 13.2 | 14.0 |
| 7. QUALITY IMPROVEMENT | | | | | | | | | | | | | | | | | | | | | | | | |
| note - only needs to be reported weekly (not daily) - so whole weeks data can be filled in against "Friday" | | | | | | | | | | | | | | | | | | | | | | | | |
| 7.1 | Total issues / events | Number of issues / events / corrective actions year to date, entered into Riskman | | number | | | | | | | | | | | | | | | | | | | | |
| 7.4 | Total Complaints | Number of complaints received year to date | | number | | | | | | | | | | | | | | | | | | | | |
| 7.6 | New complaints | Number of new complaints received this week | | number | | | | | | | | | | | | | | | | | | | | |
| 7.7 | Complaints acknowledgement | Number of new complaints that have received acknowledgement (letter or phone call within 48 hours) this week | | number | | | | | | | | | | | | | | | | | | | | |