Unit Based Dashboard

The Problem

Measuring quality and safety at the unit level helps to drive improvement. While we collect a high volume of data on performance outcomes, we needed to find a way to display these result down to the microsystem level to help to drive improvements and celebrate success.

Aim/Goal

By developing unit-based dashboard, we hoped to display process and outcome measures down to the unit level. Our aim was to create greater transparency and to involve staff on every unit in collecting and understanding quality metrics.

The Team

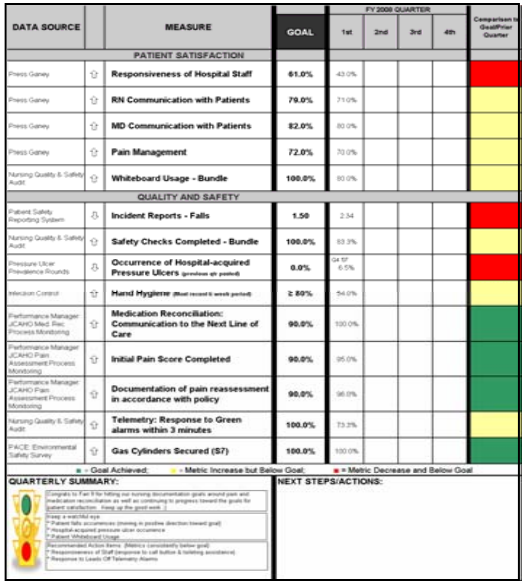
- Nursing leadership
- Nursing Quality and Safety Staff Council
- Health Care Quality
- Media Services

The Interventions

Using input from the Nursing Quality and Safety Council and based on the BIDMC AOP (annual operating plan) goals we:

- Developed a list of quality and safety measures for each unit
- Developed auditing tools for process audits
- Identified the Key Drivers for Patient Satisfaction for each unit
- Piloted an organic “Poster board” approach for display
- Developed an electronic display for each unit
- Year 2 we are using both an electronic AND poster board display

Sample FY08 Dashboard



DATA SOURCE		MEASURE	GOAL	FY 2008 QUARTER 1st	2nd	3rd	4th	Comparison to Goal/Prior Quarter
PATIENT SATISFACTION								
Press Ganey	⇧	Responsiveness of Hospital Staff	61.0%	43.0%				
Press Ganey	⇧	RN Communication with Patients	79.0%	71.0%				
Press Ganey	⇧	MD Communication with Patients	82.0%	80.0%				
Press Ganey	⇧	Pain Management	72.0%	72.0%				
Nursing Quality & Safety Audit	⇧	Whiteboard Usage - Bundle	100.0%	90.0%				
QUALITY AND SAFETY								
Patient Safety Reporting System	⇩	Incident Reports - Falls	1.50	2.34				
Nursing Quality & Safety Audit	⇧	Safety Checks Completed - Bundle	100.0%	83.3%				
Pressure Ulcer Prevalence Rounds	⇩	Occurrence of Hospital-acquired Pressure Ulcers (previous qtr points)	0.0%	Q4 5/7 6.5%				
Infection Control	⇧	Hand Hygiene (Must record 5 week period)	≥ 80%	74.0%				
Performance Manager JCAHO Med. Rec. Process Monitoring	⇧	Medication Reconciliation: Communication to the Next Line of Care	90.0%	100.0%				
Performance Manager JCAHO Pain Assessment Process Monitoring	⇧	Initial Pain Score Completed	90.0%	95.0%				
Performance Manager JCAHO Pain Assessment Process Monitoring	⇧	Documentation of pain reassessment in accordance with policy	90.0%	96.0%				
Nursing Quality & Safety Audit	⇧	Telemetry: Response to Green alarms within 3 minutes	100.0%	73.3%				
PACE: Environmental Safety Survey	⇧	Gas Cylinders Secured (S7)	100.0%	100.0%				

■ = Goal Achieved; ■ = Metric Increase but Below Goal; ■ = Metric Decrease and Below Goal

QUARTERLY SUMMARY:

NEXT STEPS/ACTIONS:

Lessons Learned

We underestimated the time that it would take to populate 30+ unit based dashboards. We also were ambitious in terms of the sheer number of indicators that we displayed. We feel as is we lost some of the “organic“ unit-based nature of the work once we started the electronic dashboard vs. the simple poster board display. We didn’t get enough traction around unit-based performance improvements that bubbled up as a result of the data.

Next Steps/What Should Happen Next:

Year 2 we are simplifying the dashboards (as you will see in the above display), limiting the number of items displayed and lessening the audit burden on the units. We are going to have both a simple electronic one-page dashboard as well as the larger poster for each unit to increase visibility. We have added an “action planning” section so that each unit develops an improvement plan for the areas identified and this plan will be shared on the dashboard display for all staff to see!

For More Information Contact:

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