

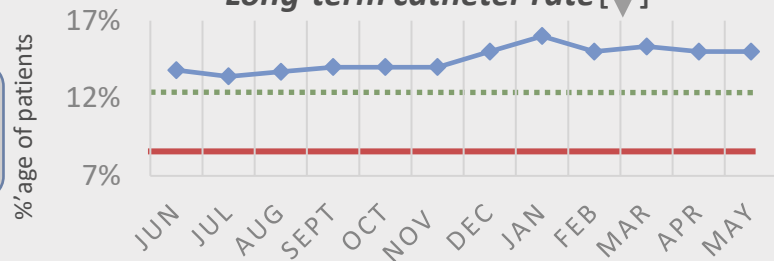
# MAY 2022 Quality and Safety Dashboard (FY2022)



## IN-CENTER SAFETY

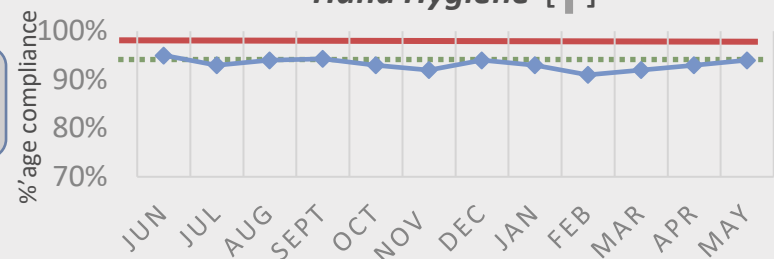
Long-term catheter rate [↓]

percentage of in-center patients with HD catheters for greater than 90 days



Hand Hygiene [↑]

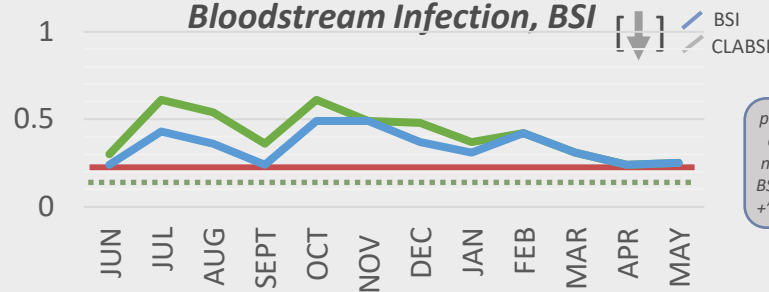
percentage of successful HH moments observed during unit audits



— Goal (FY23)  
 - - - baseline (FY22)  
 ↓ Lower is better  
 ↑ Higher is better

Bloodstream Infection, BSI [↓]

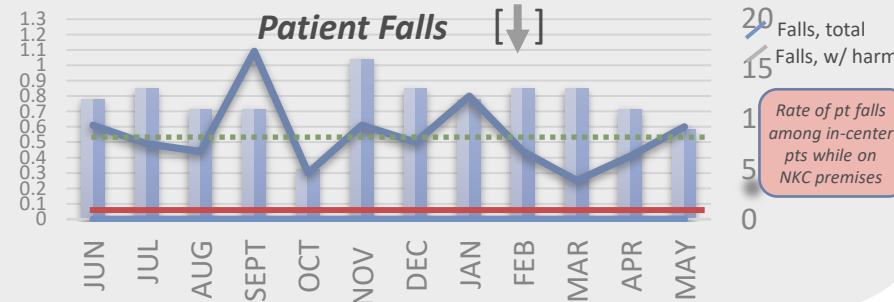
%age of patients



percentage of in-center pts with newly diagnosed BSI, as defined by +ve blood culture

Patient Falls [↓]

Number of falls

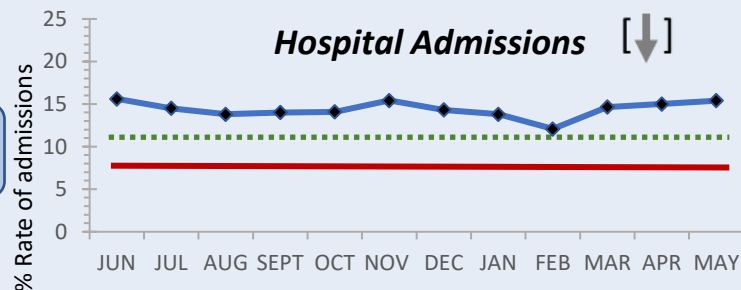


Rate of pt falls among in-center pts while on NKC premises

## CARE COORDINATION

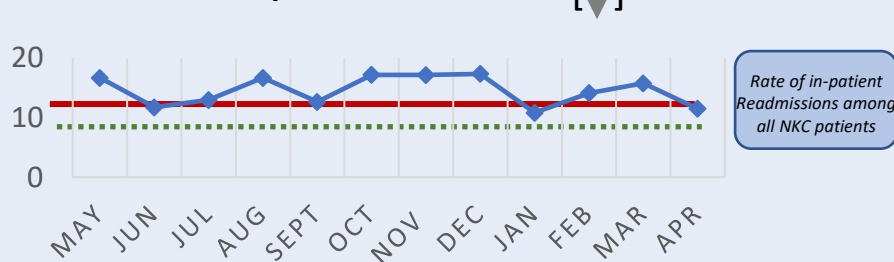
Hospital Admissions [↓]

rate of in-patient admissions among all NKC pts



Hospital Readmissions [↓]

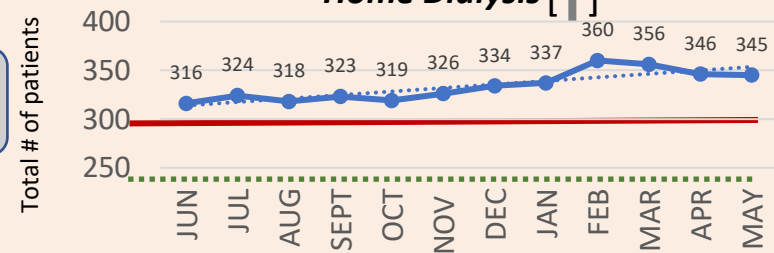
Readmission Rate %



Rate of in-patient Readmissions among all NKC patients

Home Dialysis [↑]

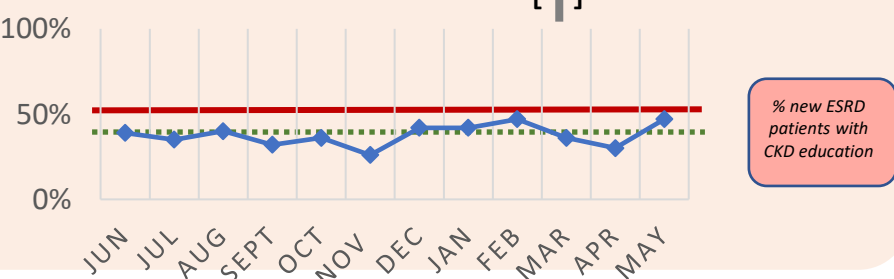
Total number of Home Dialysis Patients



## PATIENT EMPOWERMENT

CKD Education [↑]

% age of patients



% new ESRD patients with CKD education