JUNE 2022 **Quality and Safety Dashboard** (FY2022)

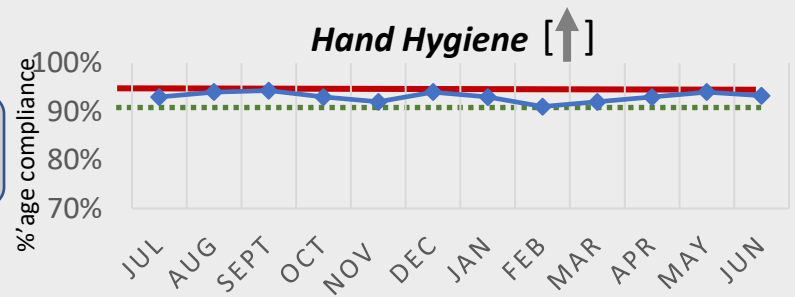## IN-CENTER SAFETY
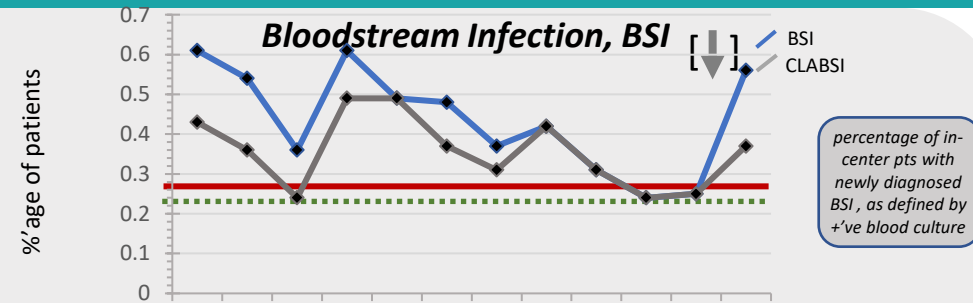
Long-term catheter rate [↓]

percentage of in-center patients with HD catheters for greater than 90 days
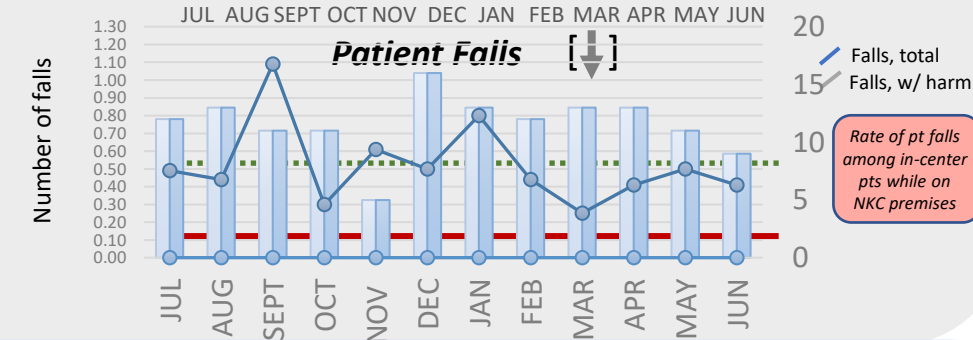
Hand Hygiene [↑]
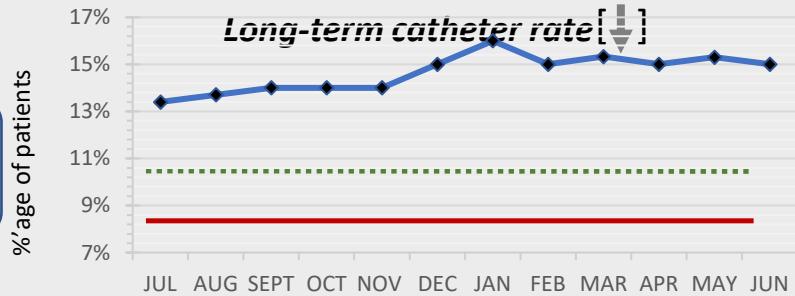
percentage of successful HH moments observed during unit audits

Legend:
— Goal (FY23)
···· baseline (FY22)
↓ Lower is better
↑ Higher is better

Bloodstream Infection, BSI [↓]

BSI
CLABSI

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

Patient Falls [↓]

Falls, total
Falls, w/ harm

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 [↓]
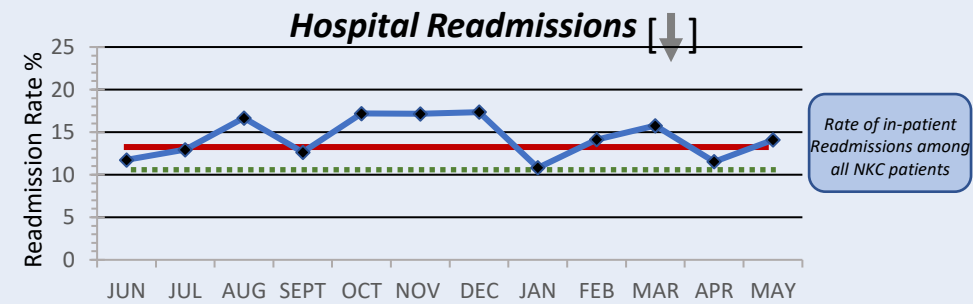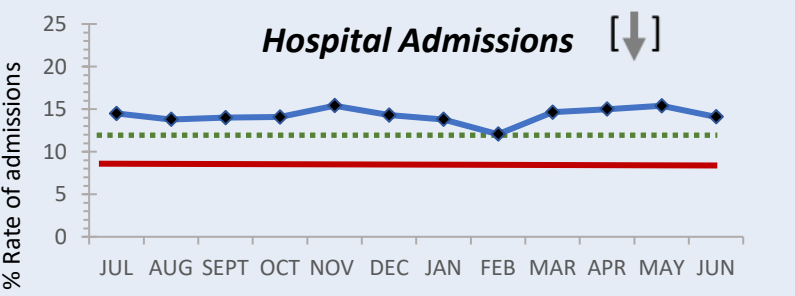
Rate of in-patient Readmissions among all NKC patients

PATIENT EMPOWERMENT

Home Dialysis [↑]

Total number of Home Dialysis Patients

Data points: 324, 318, 323, 319, 326, 334, 337, 360, 356, 346, 345, 333
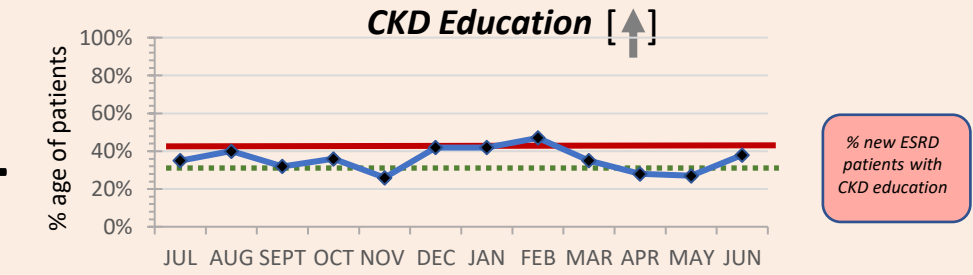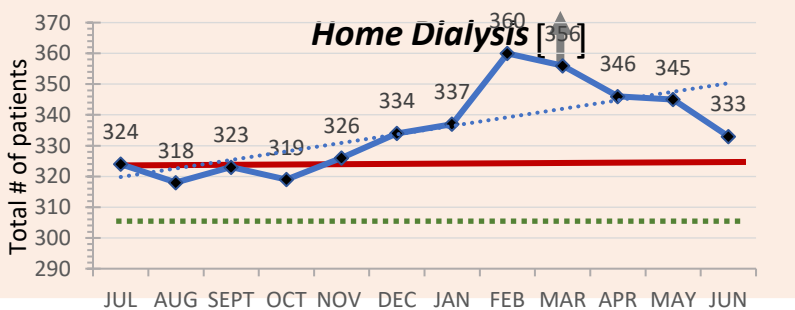
CKD Education [↑]

% new ESRD patients with CKD education