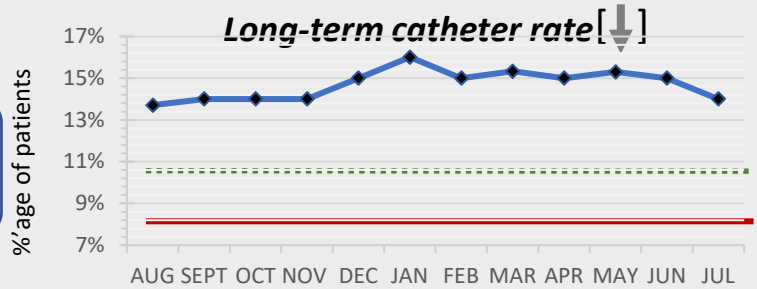


JULY 2022 Quality and Safety Dashboard (FY2023)

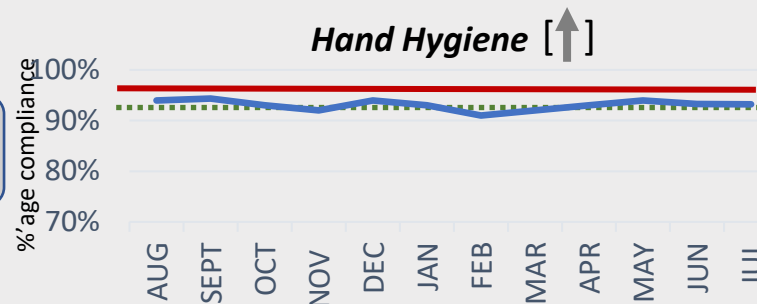


IN-CENTER SAFETY

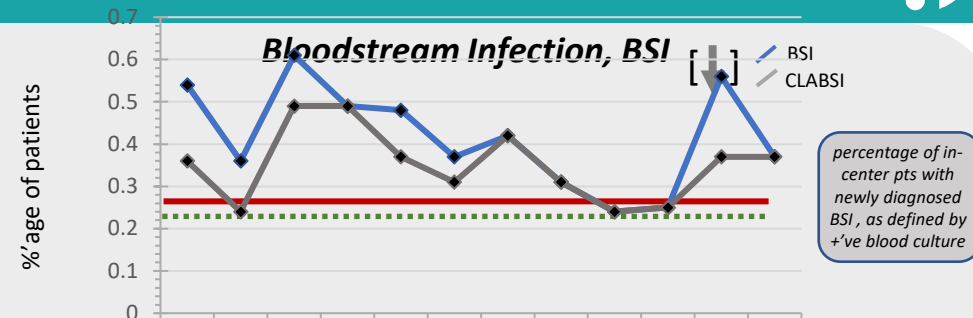
percentage of in-center patients with HD catheters for greater than 90 days



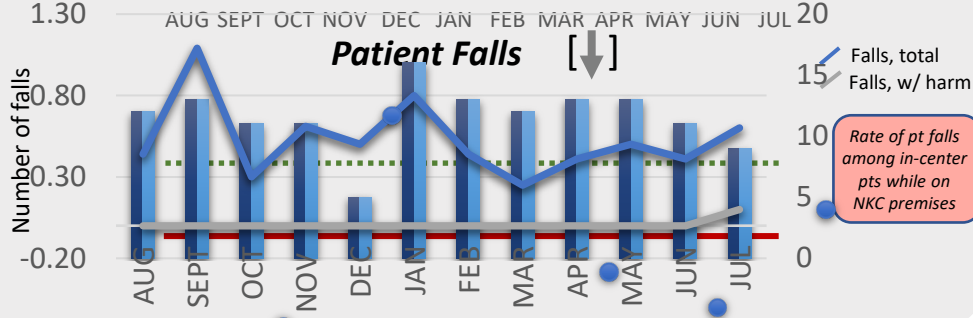
percentage of successful HH moments observed during unit audits



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



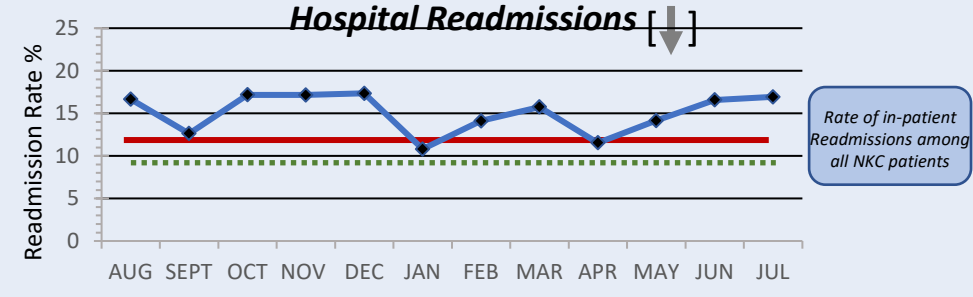
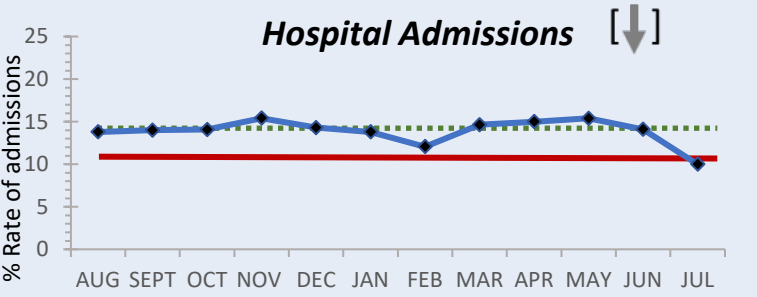
percentage of in-center pts with newly diagnosed BSI, as defined by +ve blood culture



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

CARE COORDINATION

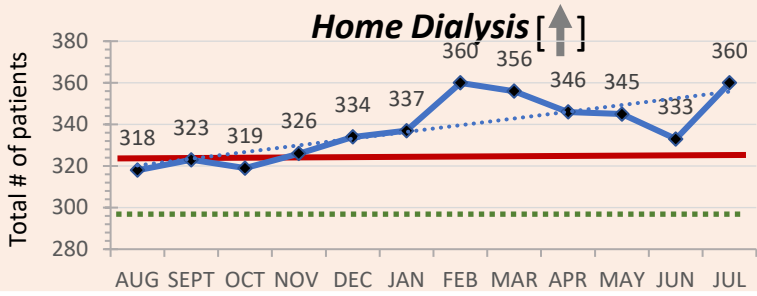
rate of in-patient admissions among all NKC pts



Rate of in-patient Readmissions among all NKC patients

PATIENT EMPOWERMENT

Total number of Home Dialysis Patients



Percent of each race/ethnicity in Home Program as compared to overall NKC population

