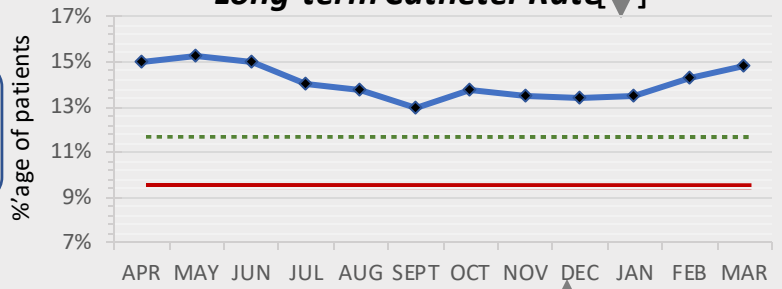


# March 2023 Quality and Safety Dashboard (FY2023)



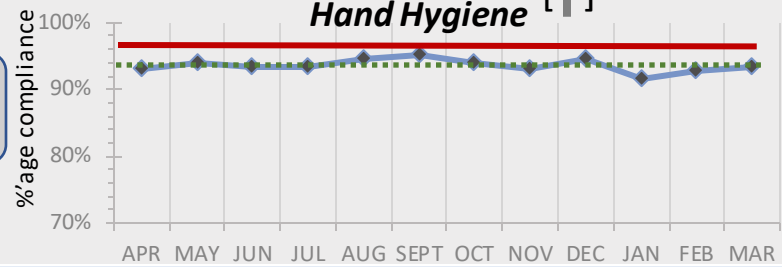
### Long-term Catheter Rate [↓]

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



### Hand Hygiene [↑]

percentage of successful HH moments observed during unit audits

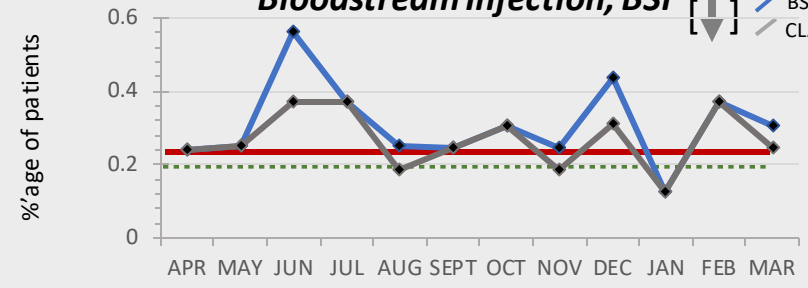


## IN-CENTER SAFETY

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

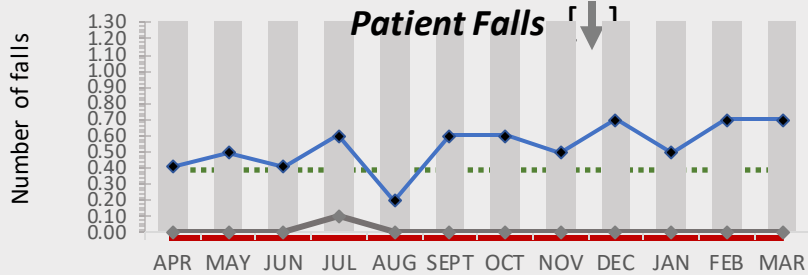
### Bloodstream Infection, BSI [↓]

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



### Patient Falls [↓]

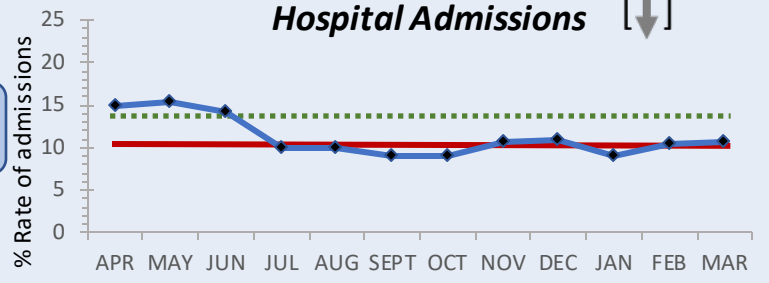
Rate of falls among in-center pts while on NKC premises



## CARE COORDINATION

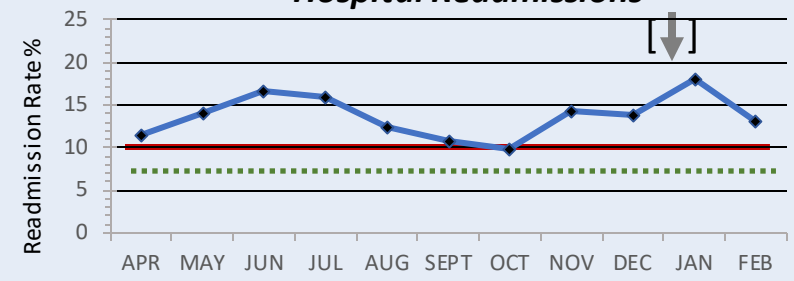
### Hospital Admissions [↓]

rate of in-patient admissions among all NKC pts



### Hospital Readmissions

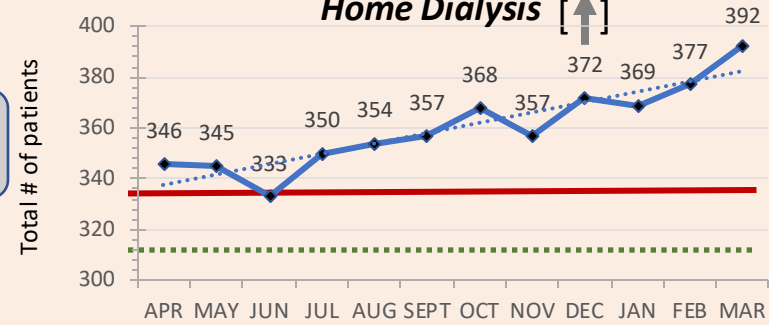
Rate of in-patient Readmissions among all NKC patients



## PATIENT EMPOWERMENT

### Home Dialysis [↑]

Total number of Home Dialysis Patients



### Home Program Race & Ethnicity

Rate of Home Patients self-identifying by race/ethnicity

