Nursing Division Dashboard 2015
DNA=Data Not Yet Available

Definition	Responsible Leadership (Data reporting in RED)	Definition	TREND	Goal	Jan	Feb	March	April	May	June	July	August	Sept.	October	Nov.	Dec.
HCAHPS-Nursing Communication	Steve Janet Lynn	Adjusted top box score from Press Ganey overall "Comm w/Nurses"		75% 70-74% <70%	69%	67%	72%	72%	69%	67%	73.1%	76%				
Core Measures-VTE	Anne Carol	# VTE OFI attributed to RN for care provided in month-Quality Core Measure Dashboard (Miranda by 20th next month)		0 1 2 or >2	6	1	1	4	2	3	2	5				
Pressure Ulcer-Acute	Lynn Kerrie Judy	# Hospital acquired pressure ulcers (From Carla-MIDAS)		0 1 to 4 >4	13	10	4	4	4	5	2	10	3			
Pressure Ulcer-Rehab	Lynn Kerrie Judy	# Hospital acquired pressure ulcers (From Carla-MIDAS)		0 1 >1	4	6	1	4	0	2	1	1	6			
CAUTI	Mary Sally Melany	Reduction in # from 2014 (24) (20%, 10%, 5%) (Louise-by 7th next month)		0 1 >1	1	0	2	2	4	0	2	0				
CLABSI (Total)	Janet Tracey Louise/Phill	Reduction in # from 2014 (20) (20%, 10%, 5%) (Louise-by 7th next month)		0 1 >1	2	2	1	2	3	1	0	2				
Sepsis-Alert Notification	Joanna Janet Pam/Sally	% documented Cerner Sepsis alert notifications (CERNER Report)		80-100% 60-79% <60%	10%	9%	41%	42%	53%	77%	74%	83%	87%			
Stroke	Steve Carol Sally	% compliance with vitals and neuro checks protocol (Carol)		100% 90-99% <90%	66%	75%	81%	86%	94%	100%	98%	96%				
Care Plans	Anne Nancy linda/Kathryn	% Patients with care plan within 24 hours of admission (CNO Report)		100% 90-99% <90%	89%	92	91%	91%	89	88			91.66%			
Colon SSI	Donna Louise	# Colon SSI (12=2014 DNH Baseline)		0 >0	0	1	2	0	0	0	1					
RN Turnover	Lynn Alicia	Monthly RN Turnover-HR T/O Report		<13% 13-16% >16%	12.6%	19.9%	27.0%	23.5%	16.0%	13.0%	12.4%	13.6%	15.1%			
Insulin Power Plan	Steve Jenna Cherilyn	% diabetes orders entered through Power Plan		>80% 60-80% <60%	11%	13%	31%	19%	27%	60%	95%	63%	69%			