Dashboard Analysis and Nursing Plan

Student’s Name:

Institutional Affiliation:

Dashboard Analysis and Nursing Plan

**Introduction**

Presently the systems of health care are expected to meet a set standards and the fundamental measure to earn payment, recognition, and accreditation. Reports are needed to be filled to accomplish this plus what is required to be done for improvement of the areas which might not be meeting the set standards. One method of achieving this is through the use of dashboards (Harrington *et al.,* 2006). Dashboards have become a necessary tool for hospitals that raise concern in promoting quality improvement. The dashboard has four different areas compromising of the nurse sensitive service, patient satisfaction survey, general indicators, and the NDNQI data. This assignment aims to examine the information on the dashboard and generate a nursing plan for the improvement of the area that has low scoring.

**Analysis of the Data**

The NDNQI( National Database of Nursing Quality Indicators) was created by the ANA( American Nurses Association) in attempt to proceed the collection and building of info that is attained from the previous investigation and progress growing the body of nursing of knowledge linked with the elements that affect nursing care quality (Heslop & Lu, 2014). The nursing-sensitive quality indicator has been selected that needs improvement is the pressure ulcers percentage. The information in the dashboard for the pressure ulcers indicated just one of the four quarters of the aim value was attained. Pressure ulcers are the primary health issue globally in connection to the destructive of the result it has on the quality of life of the patient and the monetary drain to the health care centers as well.

CMS (The Centers for Medicaid and Medicare Services) has presently started requiring the hospitals to make the report to the public on the way they handle patient care. Harrington *et al.,* (2006) explained how the facilities could utilize the quartile dashboards for transforming large quantities of information into the right and accessible to read tool to be used for the reporting and also the establishment of the areas that need improvement. Through looking at the dashboard for the inpatient rehab unit, the panel has four different regions compromising of the nurse sensitive service, patient satisfaction survey, general pointers, and the NDNQI statistics. The public performance was established to progress in due time. The section patient satisfaction demonstrated steady progress in the first three quarters with the poorest numbers reported in the last quarter. The health facility took the information collected to develop a nursing plan. The facility then used the data collected to establish a nursing plan.

**Nursing Plan**

The pressure ulcer is the breakdown of the integrity of skin often forming on bony areas where the flow of the blood is decreased. The risk factors of the patients could increase the threat of building of the pressure ulcers (Mick, 2011). Pressure ulcers could develop in any individual across any age and who is immobilized or confined on the bed. When the circulation decreases, it inhibits blood carrying oxygen distribution and the other essential nutrients to the areas that produce the ischemia. Pressure ulcers are classified into various phases of injury: Stage I to IV and the unclassified whereby there is complete tissue loss or total thickness.

By concentrating on the general satisfaction and patient care, most sections patients are surveyed upon could be improved. After the performance standards have been selected the staff needs to develop the plan for improvement (Harrington *et al*., 2006). The initial step is to research the various sources likely to establish the best evidence-based applies which would work for the specific facility. It can be divided into two sections of indirect nursing and direct nursing care.

Direct nursing care compromise the implementation of SBAR communication, adequate nursing staff, and hourly rounding. Indirect nursing includes usage of technology like wireless communication, electronic medical records, broadcast monitoring, and time allocating technology — the following step compromise of educating the staff on what is to be implemented and the reason why (Mick, 2011). The goals of the implementation are essential from the nurses to overcome the hindrances which may be encountered. Whereas the nursing practice has improved based on the information collected, there are hindrances like limited time, difficulty in interpretation of the results and research misunderstanding and how to overcome the challenges. After completion of the stage, one and the two, health facility could move forward with the evaluation and implementation. The public performance was established to improve in due time. The section patient satisfaction demonstrated steady progress in the first three quarters with the poorest numbers reported in the last quarter.

**Conclusion**

In conclusion, dashboard analysis and the nursing plan were conducted on the inpatient rehab unit. Dashboards have become a necessary tool for hospitals that rise concern in promoting quality improvement. The systems of health care are expected to meet the set standards and the fundamental measure to earn payment, recognition, and accreditation. The NDNQ was created by the ANA in attempt to precede the collection and building of information that is gained from the previous research and progress growing the body of nursing of knowledge linked with the elements that affect nursing care quality. The nursing-sensitive quality indicator has been selected that needs improvement is the pressure ulcers percentage. The information in the sample dashboard for the pressure ulcers indicated just one of the four quarters of the target value was attained.

References

Harrington, L., Hoffman, E., Allard, P. M., Adams, B. J., Hamilton, P., Wright, K., & Cargo, V. (2006). Nursing research dashboard: A tool for managing your nursing research program. *Nurse Leader*, *4*(5), 54-57.

Heslop, L., & Lu, S. (2014). Nursing‐sensitive indicators: a concept analysis. *Journal of Advanced Nursing*, *70*(11), 2469-2482.

Mick, J. (2011). Data-driven decision making: a nursing research and evidence-based practice dashboard. *Journal of Nursing Administration*, *41*(10), 391-393.