

Health system quality dashboard frequently asked questions (December 2020)

What is the dashboard?

The dashboard is a tool that brings together information about different indicators of quality for local health care systems. It allows users to easily understand how parts of the health care system are performing and to identify areas for future improvement.

What is new about this dashboard?

- A new 'Home' tab gives simple one-click links to each domain of quality.
- A summary page at national level lists priorities for results that need to be understood better. This replaces the overview dashboard tab.
- Each domain has been expanded so 'pattern', 'measure', 'change' and 'variation' are shown in one tab:
 - 'Pattern' shown on the left-hand side of the screen brings together related indicators in the dashboard presentation
 - 'Measure' provides values of the indicator selected from the dashboard of the group of interest, the reference group and the time period of these values
 - 'Change' shows how individual indicators have changed over time
 - 'Variation' shows how individual indicators vary across the country.
- A new 'Equity' tab for each domain directly compares each indicator for Māori and Pacific populations against non-Māori non-Pacific populations, shows not only the rate, but the number of people affected.
- A new 'Māori Health Equity Report' tab, developed in partnership with Te Tumu Whakarae shows variation in outcome and experience for Māori compared with non-Māori, non-Pacific for a range of specifically identified indicators.
- A range of new functionality includes the ability to select a reference group for comparison throughout the dashboard.

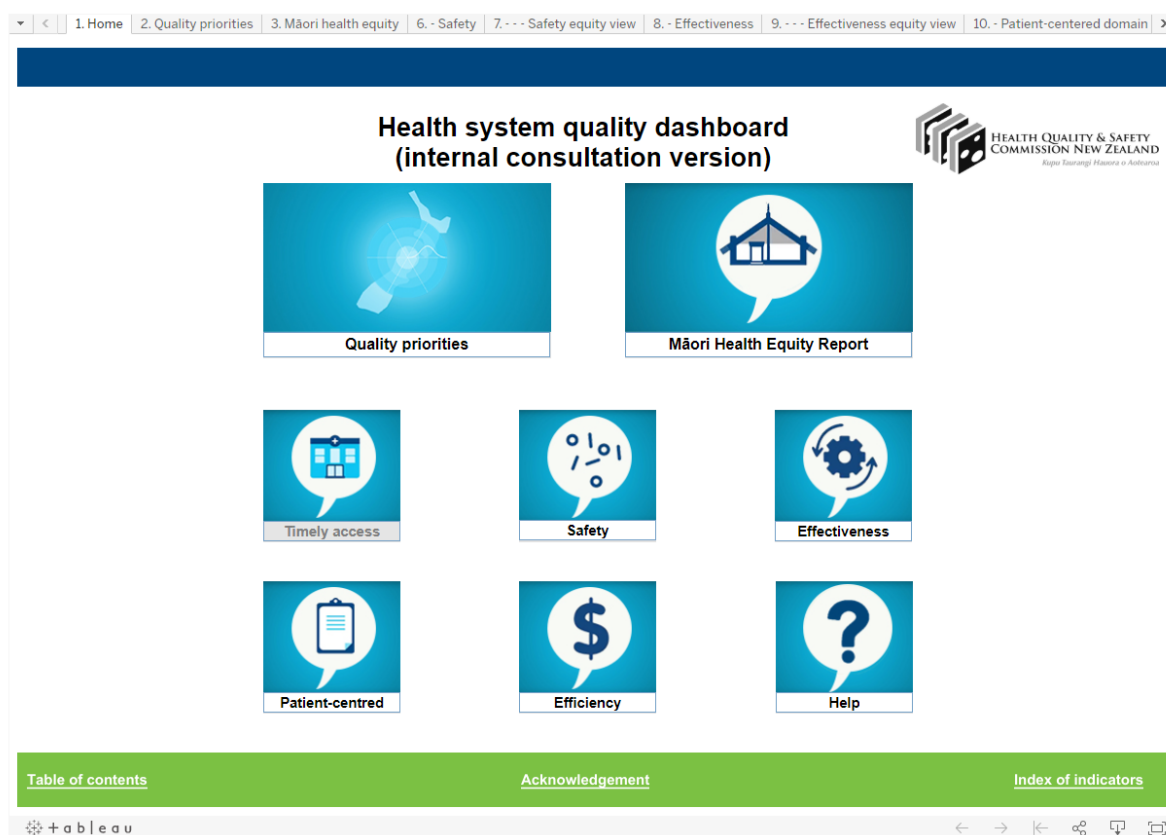
Why can the dashboard NOT be used as a ranking system?

Each individual dashboard indicator is presented in a relative position on a consistent scale to allow comparison. However, the indicators **are not designed to be combined into an overall score**. To try to do so would make assumptions about the weighting of the indicators selected, which their design did not allow for and the construction of this tool did not intend.

Any such attempt would almost certainly create misleading conclusions that the Health Quality & Safety Commission would not support. Please read more in our document Health system quality dashboard do's and don'ts, available on the [dashboard landing page](#).

How can I navigate the dashboard? It looks complex.

There are different ways you can navigate the dashboard. You can use the Home tab (see image below) and click on the tiles to go to the associated tab.



There is a navigation bar at the bottom of each tab. For example, on the Home tab, the links to Table of contents, Acknowledgement and Index of indicators will lead you to that content.

On the top left corner, there is a drop-down arrow. Clicking on it will bring up an index of all tabs, or you can click the tab names across the top to get to the tab you need.

How do I use the domain tabs?

On a domain tab, first select district health board (DHB), Reference and Report year. The dashboard on the left-hand side will show the results of the indicators for the group of interest relative to the reference group. Clicking on a dot/square on the dashboard displays multiple dimensions of information on the right-hand side of the page.

In the **measure** section, we provide the definition, value and time period for the group of interest and the reference group. This changes when a new DHB or comparator group is selected.

The **change** section shows a time series graph for the group of interest and the reference group. For the domain tabs, the DHB time series will be shown as blue or green depending on whether higher or lower is better and the reference group of New Zealand will be shown as black.

Finally, the **variation** section provides a ranked bar chart of each DHB using both the NZ baseline (red line) and current (black line) averages as a reference level. The thickness of the bar in each case represents the size of the population we are interested in.

What is each dot on the dashboard of the domain tab?

Each dot tells us how a DHB's indicator, for example infection rate after knee and hip surgeries under the safety category, is performing in relation to the national average at a certain time point. In other words, how close or far it is from the baseline or the current national average. Each dot is calculated through a method specified in the terminology into a normal distribution scale. The terminology document is available on the [dashboard landing page](#). Therefore, all indicators (dots) are placed on the one dashboard to give users an overview.

How do I read the dashboard?

The closer a dot is to the centre, the better the DHB is performing in this particular indicator, relative to the reference group.

Why did the Commission create an equity tab for each domain instead of a separate equity domain?

Each domain tab shows each indicator as a relative measure by calculating the number of standard deviations between the DHB value and national average (see the terminology for further details). This method works less well for presenting equity as the national average is often inequitable with, for example, some mortality rates being 2–3 times higher for Māori and Pacific populations than others. It is possible for a DHB to be less inequitable than average while still being highly inequitable. Simply presenting comparisons of the DHB value and national average is misleading and hides the inequity. Therefore, an equity tab is specially designed to demonstrate the inequity of each domain in the health care system at both local and national level.

How do I use the domain equity tabs?

The equity tab is designed for each domain of health care quality. On the top left of the page are filters for users to select the group of interest and reference group from a DHB. The text below the filters for the effectiveness equity tab (beside the filter for the Patient-centred equity tab) gives the count of relevant indicators displaying inequity. The impact table below the text presents all indicators in this domain and the impact due to inequity, with statistical test results to indicate the statistical significance. Clicking on a measure from the table will change the right-hand side of the tab to show details of the indicator, changes over time and variation between DHBs.

How do I use the Māori Health Equity Report?

The Māori Health Equity Report is structured similarly to the domain tabs, with filters available to select a group of interest and a reference group from a DHB. The filters can also be set up to change the sides of the comparison. The dashboard shows **patterns** across measures. By clicking on a maunga on the dashboard, the right-hand side contents of measure and impact, change and variation will be displayed for this measure.

How should I use the DHB comparison section?

The DHB comparison tab shows what is going comparatively well in a DHB and the areas where DHBs can learn from each other. But it is not a target or a ranking system. Health care is big and complex and cannot be summarised by a single number – neither can the dashboard. The dashboard is a way to start thinking about what questions need to be asked, and how we can answer them, so New Zealanders get better care.

How can I find more information on the methodology used in the dashboard?

Information on methodology can be found in the terminology document, available on the [dashboard landing page](#).

How can I find more information on an indicator in the dashboard?

All the indicators used are documented in the data dictionary, The data dictionary document is available on the [dashboard landing page](#).

Where can I find help to understand the dashboard?

The help button on the bottom right of the Home tab provides additional information.

How can I see change over time for all indicators in one domain?

There is a sliding bar called Report year on the filter section of each domain tab, which allows you to see the movement of the dots over time.

Who was consulted in the development of the dashboard?

When developing the dashboard, we consulted widely with: DHB chief executives, quality and risk managers and Te Tumu Whakarae (pillars of Māori health leadership within DHBs), Ministry of Health colleagues, Te Rōpū Māori advisory group, the Commission's board, equity action group and consumer advisory group; the clinical leads group; the chief medical officers group of the DHBs, the patient experience survey governance group and director of Te Rōpū Rangahau Hauora a Eru Pōmare at the University of Otago, Wellington
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