

# Reading the Outcomes Analytics Dashboard

## WHO THIS IS FOR

Clinical leaders, quality teams, and program managers who need an aggregated view of Patient-Reported Outcome (PRO) performance across Home Exercise Program (HEP) episodes. Where the clinician job aid stays in the individual *patient record*, this guide covers the org-level dashboard: completion rates, improvement-threshold achievement, and month-over-month trends across every clinic, clinician, and treatment category in one place.

## WHERE TO FIND IT

From the main navigation, open **My Practice** → **Org Analytics** → **Outcomes Analytics**.

**NEED FIELD-BY-FIELD DETAIL?** This job aid covers how to read the dashboard and act on what it shows. [For step-by-step instructions on every filter, chart, and column, see the Outcomes Analytics Dashboard help center article.](#)

## WHAT THE DASHBOARD ANSWERS

- Which clinics and clinicians help the highest share of patients reach a clinically meaningful improvement?
- How are assessment completion rates trending across the patient journey, from baseline through follow-ups?
- How does outcome performance compare across treatment categories, regions, clinics, and individual clinicians?
- How are completion and improvement rates trending month over month?
- What does the row-level assessment data look like for a quality audit or compliance review?

## QUICK REFERENCE

|                      |  |
|----------------------|--|
| <b>Who uses it</b>   | Clinical leadership, quality and compliance teams, program managers        |
| <b>What it shows</b> | Aggregated PRO performance across episodes — not individual patient review |
| <b>Navigation</b>    | My Practice → Org Analytics → Outcomes Analytics                           |
| <b>Four tabs</b>     | Overview, Clinics, Treatment, Data export — with a shared filter bar       |
| <b>Refresh</b>       | Data refreshes nightly   |

## Understanding the assessment journey

Every chart and metric on the dashboard is built on the same assessment sequence. Each episode can include a baseline plus one or more follow-ups:

1. **Assessment 1 — Baseline.** Completed at the start of the episode.
2. **Assessment 2 — First follow-up.** Completed at least 14 days after baseline.
3. **Assessment 3, 4, ...** Any subsequent follow-ups, numbered in the order they are completed (not tied to a fixed interval).

**THE ASSESSMENT # SELECTOR** Several charts on the Clinics and Treatment tabs have an Assessment # dropdown that controls which follow-up is plotted against baseline. It defaults to 2 (the first follow-up). Set it to 3 or 4 to look further out into the patient journey.

## Key terms

These terms drive how completion and improvement are calculated across the dashboard.

| Term                             | What it means  |
|----------------------------------|--|
| <b>Met improvement threshold</b> | The share of completed episodes where the change from baseline to follow-up crossed the MCID for that measure. Often the headline outcome metric.                |
| <b>MCID</b>                      | Minimal Clinically Important Difference — the smallest score change considered clinically meaningful. Each measure has its own MCID, based on clinical research. |
| <b>Most recent follow-up</b>     | The last assessment completed after baseline, regardless of how many follow-ups the patient had.   |
| <b>Eligible follow-up</b>        | A follow-up completed at least 14 days after baseline. Completion rates for the second assessment are calculated against eligible episodes only.                 |

## Filtering your data

The filter bar sits under the tab navigation and applies across all tabs. Most filters are multi-select dropdowns with an **(All)** option; choose values and click **Apply**. The available filters:

| Filter                          | What it scopes  |
|---------------------------------|---|
| <b>Date range</b>               | The reporting window; drives every date-based view on the dashboard             |
| <b>Month(s)</b>                 | Specific months within the selected date range                                  |
| <b>Episode region</b>           | Higher-level grouping of locations (for example, organization or parent region) |
| <b>Episode location</b>         | The individual clinic or site   |
| <b>Clinician</b>                | The provider associated with the episode  |
| <b>Treatment category group</b> | Body region or condition (for example, Knee, Shoulder, Chronic Pain)            |
| <b>Outcome measure</b>          | The PRO instrument used (for example, PROMIS Physical Function)                 |

[ Screenshot placeholder — filter bar under the tab navigation ]

## Reading the four tabs

Each tab answers a different question. Scope all of them with the same filters before comparing.

| Tab                | Answers                                       | What to look at   |
|--------------------|---|---|
| <b>Overview</b>    | How is PRO performance overall? (Start here.) | Four headline metrics, the completion funnel, the improvement-threshold trend, and a performance table by category and measure  |
| <b>Clinics</b>     | Who is completing assessments, and where?     | Completion-rate trend (baseline vs. follow-up), plus performance tables by clinic and by individual clinician   |
| <b>Treatment</b>   | How is one category + measure performing?     | Summary metrics, MCID trend, and baseline-vs-follow-up scores.<br><b>Requires one value selected in both Treatment category group and Outcome measure, or it stays empty.</b> |
| <b>Data export</b> | What is the row-level source data?            | Patient-level assessment data for audits and compliance. Use <b>Export</b> → <b>Download Crosstab</b> .   |

## Acting on what the data shows

Once you can read the dashboard, the question is what to *do* about a pattern. Each cue below pairs a signal with its likely cause and a first action — starting points for a conversation, not verdicts. Always confirm against the detail tables first.

| What you see  | Most likely cause   | First action  |
|---|---|---|
| Low baseline completion rate  | Setup or workflow gap — PROs not assigned at episode creation, or patients not prompted | Review episode-setup workflow with the clinic; reinforce assigning the PRO at episode creation        |
| Baseline strong, low 2nd-assessment completion  | Engagement drop-off after the first survey  | Check reminder cadence and patient communication at setup; identify clinics with the steepest drop    |
| High completion, flat improvement rate  | Measure-fit or genuine clinical question, not a data problem                            | Confirm the right measure is assigned for the condition; review with clinical leads before concluding |
| Wide variance between clinics or clinicians   | Practice variation in setup, follow-up, or coaching                                     | Use Clinics-tab tables to find high and low performers; share what top performers do differently      |
| A treatment category lags others  | Category-specific workflow or expectation-setting gap                                   | Open the Treatment tab for that category and measure; compare against a strong-performing category    |
| Month-over-month decline in any metric  | A recent process, staffing, or system change  | Align the dip to the calendar; check whether one region or clinic is driving the org-level trend      |
| <b>A NOTE ON THE NUMBERS</b> Completion and improvement rates depend on enough completed assessments to be meaningful. For small clinics or narrow filters, a single patient can swing a percentage — check the episode counts alongside any rate before drawing conclusions. |   |   |