



# Milestone 1: Problem Framework Foundation

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## Feedback for Sydney Audlin

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**Final Score: 34.00/40 (85.0%) - B**

Completion (40% = 16 pts)	<b>16.0/16</b>
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Quality (45% = 18 pts)	<b>14.0/18</b>
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Presentation (15% = 6 pts)	<b>4.0/6</b>
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## Overall Assessment

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**Purpose of Your Problem & Solution Framework Page:** This Problem & Solution Framework page is the foundation of your dashboard and the first thing visitors encounter. It should provide a clear, compelling introduction to your problem space—answering the fundamental question: "What management problem am I looking at and why does it matter?" Think of it as guiding readers through understanding: establishing WHAT the problem is, WHY it matters, WHO is affected, and HOW you'll measure success. Strong information architecture here helps both readers grasp your problem AND guides your own evidence collection in Module 2.

**Organizing Your Dashboard Content:** Your framework addresses nursing shared governance implementation at a 210-bed critical access hospital with exceptional healthcare domain expertise (EBP, Magnet recognition terminology) and class-leading SMART criteria (30% participation increase, quarterly meetings, 2-3 year turnover measurement). You have well-developed building blocks across 2,648 words. Now focus on organizing them on this dashboard page to guide readers through your shared governance solution. There are two approaches:

**1. Problem Architecture Approach** (organize by components):

Create clear sections: **WHAT** (Top-down communication culture in 210-bed hospital limiting critical thinking and problem-solving) → **WHY** (Lack of shared governance delays decisions, reduces nurse engagement, impacts patient care quality and turnover) → **WHO** (Internal: nursing staff, nurse leaders, managers with varying control concerns; External: patients, Joint Commission) → **SUCCESS** (30% suggestion box participation increase, quarterly meetings, 2-3 year turnover improvement with SMART framework).

*Content mapping:*

- Pull your problem statement about top-down communication limiting critical thinking from ask-problem-definition.txt → opening WHAT section with hospital context (210-bed critical access)
- Pull your PICOC framework (shared governance model as intervention, measurable outcomes) from ask-problem-definition.txt → WHY section showing evidence-based practice (EBP) connection to Magnet recognition
- Pull your stakeholder categorization (nursing staff, nurse leaders, managers, patients, Joint Commission) from ask-stakeholder-analysis.txt → WHO section with engagement strategies
- Pull your SMART criteria (30% increase, quarterly timelines, suggestion box metrics) from ask-success-criteria.txt → SUCCESS section

## **2. Reader Journey Approach** (tell as flowing story):

Open with the hospital context (210-bed critical access facility with top-down communication culture), explain why this matters (limits nurse development of critical thinking, delays problem-solving), show which groups are affected and their varying motivations (nursing staff eager for voice, managers concerned about control over budgets/scheduling/policy), then demonstrate how shared governance with measurable participation targets will improve outcomes.

**Visual aids strengthen both approaches:** Consider organizational chart showing current top-down vs. proposed shared governance structure, stakeholder matrix diagram, or SMART criteria table matching each criterion to specific metrics.

*See detailed sections below for specific feedback on each file's content.*

## **Detailed Feedback by File**



### **Problem Definition File**

*File: [ask-problem-definition.txt](#)*

**Purpose:** This file should establish **WHAT** the problem is and **WHY** it matters to your organization. It creates the foundation for your dashboard's narrative by helping readers understand the current situation, its causes, and its consequences.

#### **Content Mapping for Dashboard**

**From this file → To your dashboard page:**

- **WHAT Section (Problem with Context):** Pull your problem statement about top-down communication limiting critical

thinking and problem-solving + 210-bed critical access hospital context → place at top establishing both what the problem is and where it's occurring.

- **WHY Section (EBP & Magnet Connection):** Pull your discussion of shared governance as evidence-based practice and connection to Magnet recognition → explain why this intervention matters professionally (links to quality standards and nursing excellence frameworks recognized nationally).
- **PICOC Framework Detail:** Pull your well-developed PICOC framework → present as structured background showing intervention (shared governance model), outcomes (engagement, turnover, decision quality), and context (critical access hospital constraints and opportunities).



## Stakeholder Analysis File

File: [ask-stakeholder-analysis.txt](#)

**Purpose:** This file identifies **WHO** is affected by and involved in the problem. It provides the "people dimension" that makes your problem concrete and helps readers understand competing interests, influence levels, and engagement strategies.

### Content Mapping for Dashboard

From this file → To your dashboard page:

- **WHO Section (Internal/External Structure):** Pull your stakeholder categorization (Internal: nursing staff, nurse leaders, managers; External: patients, Joint Commission) → organize as clear sections showing which groups are directly involved vs. indirectly affected, making stakeholder landscape comprehensible.

- **Manager Resistance Analysis:** Pull your insight about manager resistance to losing control → elaborate on what specific controls are at stake (budget, scheduling, policy) and how shared governance addresses these concerns rather than simply removing manager authority.
- **Engagement Strategy Mapping:** Pull your engagement strategies for different stakeholder groups → explain how you'll manage nursing staff participation (high interest/medium influence), manager buy-in (high interest/high influence), and external accountability (Joint Commission, patients) throughout implementation.



## Success Criteria File

File: [ask-success-criteria.txt](#)

**Purpose:** This file defines **WHAT SUCCESS** looks like and **HOW** you'll measure it. It connects your problem definition to evidence-based outcomes by establishing specific, measurable criteria with baselines and targets.

### Content Mapping for Dashboard

From this file → To your dashboard page:

- **SUCCESS Criteria Display:** Pull your SMART criteria (30% participation increase, quarterly meeting cadence, 2-3 year turnover measurement) → organize as baseline→target comparison once you add current baselines, showing clear before/after expectations.
- **Measurable Indicators:** Pull your specific metrics (suggestion box participation rate, quarterly meeting attendance, turnover percentage) → explain how each will be tracked (data sources,

measurement frequency, responsible parties), making measurement plan concrete and feasible.

- **Timeline Framework:** Pull your time-bound elements (quarterly meetings immediate, turnover measured over 2-3 years) → present as timeline showing which metrics change quickly (participation) vs. which require patience (turnover impact), managing reader expectations about when results appear.

## 🔗 How These Three Files Work Together on Your Dashboard

Your **Problem Definition** provides the WHAT and WHY that sets the stage—helping readers understand the issue and why it matters. Your **Stakeholder Analysis** adds the WHO that makes it concrete—showing which groups are affected and how they'll be engaged. Your **Success Criteria** establishes WHAT SUCCESS looks like and HOW you'll measure progress—connecting the problem to evidence-based outcomes.

Together, these three pieces create a complete picture that guides your reader from *understanding the problem* → *seeing who's involved* → *knowing how you'll measure success*. This information flow is what makes your dashboard effective as a decision-making tool.

**Files Reviewed:** [ask-problem-definition.txt](#) ,  
[ask-stakeholder-analysis.txt](#) , [ask-success-criteria.txt](#)

**Graded by:** Dr. Peterson | **Date:** October 16, 2025