Dashboard Redesign Report

Patient Complaints and Service Quality Dashboard

1. Introduction: Why I Chose This Dashboard

I selected the original "Complaints Dashboard" from the *Big Book of Dashboards* because it presents a realistic and meaningful business context—user complaints—which can be easily adapted to a healthcare setting. The structure is relatively complete, but it leaves substantial room for optimization in clarity, interactivity, and analytical depth. My redesign transforms it into a Patient Complaints and Service Quality Dashboard, aiming to support better decision-making in a healthcare environment.

2. Evaluation of the Original Dashboard

The original dashboard provides a comprehensive overview of user complaints, with clear segmentation by time (complaints by month), geography (open complaints by state), cause (complaints by reason), and source (complaints by party). However, while structurally sound, the original design leaves substantial room for improvement in terms of effectiveness, clarity, and analytical depth.

From a visual design perspective, the color scheme is relatively muted and lacks emphasis, making it difficult to distinguish key values. For instance, both the header and the complaint status counts use the same light blue and red without establishing a clear visual hierarchy.

In terms of data-ink ratio, some charts use excessive labeling or redundant elements. The hex map, for example, uses filled colors that lack enough contrast and doesn't convey numerical insights directly without hovering. The bar charts for complaints by reason and party are effective in general layout but could benefit from clearer labels and value annotations.

Another important shortcoming is interactivity and contextual guidance. Although filter options are available at the top, none of the charts clearly indicate whether they are interactive or static. Moreover, certain charts lack axis titles or contextual cues, making it harder for users to interpret trends.

Lastly, from the perspective of analytical usefulness, the dashboard lacks a visual that supports prioritization. Users cannot easily identify which complaint types dominate the dataset or which should be addressed first. This limits its strategic value for decision-making.

3. Redesign Decisions and Justifications

A. Overall Theme and Structure

- Original Issue: The title was generic and the charts felt disconnected.
- Redesign: Rebranded the title as "Patient Complaints and Service Quality Dashboard" and grouped charts by analytical function (time, geography, cause, party).
- Reasoning: Emphasizes medical context and improves user navigation.

B. Added a Pareto Chart

- Original Issue: Lacked prioritization tools for complaint types.
- Redesign: Added a Pareto chart to identify top contributing reasons.
- Reasoning: Supports the 80/20 principle, enabling stakeholders to focus on the most impactful categories.

C. Added a Scatter Plot for Open Rate Trends

- Original Issue: Monthly complaint trends were shown, but without insight into open rates.
- Redesign: Added a scatter plot comparing monthly open rate vs. volume.
- Reasoning: Helps identify months with unusual resolution delays or workload imbalance.

D. Improved Color Palette

- Original Issue: Cyan and red were too intense and lacked consistency.
- Redesign: Adopted softer but distinct shades for closed/open cases and used consistent highlights for interactivity.
- Reasoning: Improves readability, visual aesthetics, and brand consistency.

E. Refined Hex Map

- Original Issue: Color scale was unclear and not intuitive.
- Redesign: Adjusted color gradient to reflect only open complaints and added a dynamic tooltip.
- Reasoning: Highlights regional problem areas without overwhelming with total volume noise.

F. Enhanced Interactivity

- Original Issue: Limited interactive elements.
- Redesign: Enabled click-to-filter on party and state maps, tooltips, and open rate labels.
- Reasoning: Supports exploration and deeper user engagement.

4. Why My Version is Better

- Better Contextualization: The new dashboard aligns with a healthcare context, clearly naming "patient complaints" and redesigning titles and labels accordingly.
- Improved Analytical Power: With the Pareto and scatter plot, the dashboard goes beyond descriptive statistics and supports diagnostic insights.
- More Effective Visualization: Layout is more balanced, color contrast is improved, and chart alignment ensures readability.
- User Experience & Interactivity: Filters and clickable regions enable dynamic exploration of key issues.
- Scalability: The layout is modular, and future enhancements (e.g., predictive modeling or ML-driven alerts) can be easily integrated.

5. Conclusion

Through this redesign process, I learned to critique dashboards not just based on appearance, but in terms of decision support and task efficiency. Every redesign decision I made was rooted in visualization best practices—clarity, context, contrast, and interactivity. The updated dashboard offers a more actionable, user-friendly, and insightful analytical tool for stakeholders managing patient service quality.