

Presenting Findings to Stakeholders

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- Were there any limitations that prevented you from conducting an analysis? Think of these in terms of a future project or wish list (i.e., “If I had x, I would have been able to do y.”).
One limitation was due to suppressed data. Flu death counts under 10 were suppressed due to privacy reasons, as well as all death counts for children under 5. Therefore we do not have accurate findings on the death rates of children under 5.
- Did your data have any limitations that may have affected your results? Consider this in terms of data quality and data bias.
Due to the data cleaning method, where I replaced all suppressed values with a random number between 0 and 9, the counts in low population areas will have been inaccurate. Also the count of deaths under the age of 5 are not only inaccurate, but likely are understated, as young children and babies do tend to be quite vulnerable populations with regards to other viruses.
- How might you monitor the impact of the staffing changes you recommended?
Surveys and questionnaires for the staff and patients can monitor in almost real-time how these changes are impacting working conditions and patient care quality.
- Is there a metric that could be used for monitoring this impact?
If we get as much up to date data as possible on flu deaths from the Hospitals, then we can compare the deaths, or at least a sample size, to our records. If the death rates are significantly lower (with a confidence interval of over 95%), then the implementation can be determined a success.