

Santa Barbara County Behavioral Wellness Department Psychiatric Health Facility Governing Board QAPI Indicator Report (6/28/17)

Indicator	Measures	Description	Target	May 2017			Previous Quarter January 2017-March 2017
				On Target	Off Target	Data	
Complaints and Grievances	Total grievances	# of patient grievances / Total Bed days per month	10%	X		1/473; <1%	On Target
	Clinical care/skill-related grievances	# of grievances related to clinical care/skill / # of grievances	5%	X		0/1; 0%	Off Target: 33% in March; none were Clinical Care in Jan or Feb
Infection Prevention and Control	Hand hygiene according to guidelines	# of observations when the care giver performed hand hygiene per CDC guidelines / # of observations/opportunities (10 observations per month)	80%				On Target
	Cleaning/disinfecting product usage	# of cleaning products EPA approved for hospital use / All cleaning products (4 observations per month)	100%				On Target
	Infection rates (athlete foot)	# of athlete foot infections / Total Bed days per month	0%				On Target
Patient Services, Care and Safety	Patient injuries	# of patient injuries w or w/o treatment / Total Bed days per month	0%	X		0/473; 0%	On target
	Medical emergency transfers	# of patients transferred emergently to an acute hospital / Total bed days per month	2%				On Target
	Adverse outcomes	# of inpatient adverse outcomes / Total Bed days per month	2%	X		0/473; 0%	On Target
	Readmissions within 30 days	# of inpatient readmissions within 30 days of discharge / # of inpatient admissions per month	10%				On Target
	Mortality	# of inpatient deaths / Total Bed days per month	0%				On target
	Elopement	# of elopements / Total Bed days per month	0%				On target
	Suicide management	# of attempted suicides / # of inpatient admissions per month	0%				On Target
	Patient falls	# of inpatient falls reported during the month / Total Bed days per month	.5%				On target
Restraint/ Seclusion (Violent/Self Destructive Behavior)	Restraint usage	Hours of restraint use / 720 patient hours (16 pts x 30days x 24hrs per day)	N/A	X		5.35 hours; <1%	On target
	Seclusion usage	# of "seclusion episodes" / Total Bed days per month	N/A	X		2/473; <1%	On Target
	Evidence of less restrictive options	# of restraint/seclusion records reviewed with evidence of alternative & less restrictive measures attempted or considered and rejected prior to restraint use / Total # of restraint/seclusion episodes reviewed	100%	X		4/4; 100%	On target
	Face-to-face evaluation w/in 1hr	# of new restraint / seclusion episodes with face-to face evaluation within 1 hour of restraint / seclusion application by Qualified RN or PA or LIP / Total number of new episodes of restraint / seclusion	100%	X		4/4; 100%	Off Target: March; 0%
	Patient injuries during restraint	# of injuries while restrained or secluded / # of restraint/seclusion episodes	0%	X		0/4; 0%	On Target
	Inclusion in Treatment	# of records of restrained and/or secluded patients with inclusion of	100%	X		4/4; 100%	On Target

Santa Barbara County Behavioral Wellness Department Psychiatric Health Facility Governing Board QAPI Indicator Report (6/28/17)

Plan	restraint/seclusion in treatment plan / # patient records with restraint/seclusion					
------	--	--	--	--	--	--

Note: Items in grey font are reported quarterly. No data is required for current month. *Displayed as numerator divided by denominator

Indicator	Measures	Description	Target	May 2017			Previous Quarter
				On Target	Not on Target	Data	January 2017-March 2017
Medication Use/Pharmacy Services	Medication error rates/unavailability	# of medication errors occurring in patient care areas as a result of medication unavailability / Total medications dispensed (PRN + Main + Ekit)	0%	X		0/505; 0%	On Target
	Medication error rates	# of medication errors occurring in patient care areas / Total medications dispensed (PRN + Main + Ekit)	2%				On Target
	Adverse drug reactions	# of adverse drug reactions / # of medications administered (PRN + Main)	2%				On Target
	Medication order fill adequacy	# of medications orders filled (delivered) per contract (times per week) / # of medication orders reviewed for fill adequacy (PRN + Main)	100%				On Target
	Medication & controlled substance labeling	# of patient medications, including controlled substances labeled and stored according to hospital policy / # of patient stored medications reviewed	100%				Off Target: 98% labeled/stored properly
	Controlled substance destruction	# of controlled substances properly destroyed including all documentation requirements and destruction time frames (for medications considered abandoned – 7 days or post discharge) / # of medication destruction log entries identified (denominator)	100%				On Target
	Proper licensure for controlled substance receipt from pharmacy	# of correct processes followed by staff / # of deliveries reviewed	100%				Off Target: 99% of dual licensed signatures on deliveries
	E-Kit usage for emergencies	# of times the E-Kit was accessed for emergent psychological or physiological need for the patient to address life-threatening situations or in instances where failure to administer the medication has the potential to cause significant negative impact to the patient's psychological or physiological condition / # of times E kits are accessed	100%				On Target
	E-Kit content and security	Night Audit # of E-Kits with correct content and that are secured / # of E kits x 7 nights	100%				Off Target: 99% of E-kits with correct content & security
Significant Adverse Outcomes	Sentinel events	Event leading to death or significant impairment (per Significant Event Policy) includes Near Misses and State Reportable Events	N/A			0	None
	Event reporting	Number of events reported of the following types: Medication-Related; Other significant/Mandated Reporting	N/A			0	None

Santa Barbara County Behavioral Wellness Department Psychiatric Health Facility Governing Board QAPI Indicator Report (6/28/17)

Note: Items in grey font are reported quarterly. No data is required for current month.

***Displayed as numerator divided by denominator**

Indicator	Measures	Description*	Target	May 2017			Previous Quarter
				On Target	Not on Target	Data	January 2017-March 2017
Food and Nutrition Issues	Appropriate diets	# of nutritional diets accurate and appropriate for patient's carbohydrate, caloric and protein needs / # of diets reviewed	100%	X		15/15; 100%	On Target
	Correct meal preparation	#of meals served that match PHF's Daily Spreadsheet with appropriate portion/size / # of meals reviewed	100%	X		14/14; 100%	Off Target: 93% of meals prepared correctly
	Nutritional assessments	# of RD assessments performed within 72 hours for patients at high nutritional risk / # high risk nutritional patients reviewed	100%		X	13/15; 87%	Off Target: 86% of assessments done within 72 hours
	Food storage/expired food items	# of expired/unlabeled items in refrigerators/freezers / # of food items observed	0%		X	4/140; 3%	Off Target: 5% were unlabeled/expired food items
	Food temperature	# of food temperatures within range / # of temperatures checks performed	100%	X		84/84; 100%	Off Target: 99% of food temperatures within range
Physician and AHP Related Issues	Telephone medication orders	Number of telephone orders signed and dated within 24 hours	100%				Off Target: 94% orders signed/dated within 24 hours
	MD-related incidents	Number of incidents regarding MDs	0				On Target
	Change of clinician request	Number of change of clinician requests	0				On Target
Environmental Services	Correct staff reply when queried on disinfectant dwell times	# of correct responses from staff when queried on disinfectant dwell (wet/kill) times / # of queries (2 queries per week)	>95%				On Target
Environment of Care	Staff knowledge: Unsafe environment or hazard reporting	# of staff able to articulate how to report unsafe environment or hazard / # of staff interviewed	>95%				On Target
	Role in internal/external disaster	# of employees correctly describing their role in the event of an internal/external disaster # of employees interviewed	>90%				On Target
	Articulation of fire plan components	# of staff articulating fire plan components correctly / # of staff queried	>90%				On Target
	Work order completion w/in 30 days	# of work orders completed within 30 days of creation / # of work orders created	95%				Off Target: 96% of work orders completed within 30 days
Laboratory Services	Critical values reporting	Mean time from resulting availability to notification of the responsible practitioner (physician or other practitioner who may initiate appropriate intervention)	30 min			0	None Reported

Note: Items in grey font are reported quarterly. No data is required for current month. *Displayed as numerator divided by denominator