

Indicator	Measures	Description	Target	Apr-18			Previous Quarter
				On Target	Off Target	Data	January 2018-March 2018
Complaints and Grievances	Total grievances	# of patient grievances / Total Bed days per month	10%	X		0/471; 0%	On Target
	Clinical care/skill-related grievances	# of grievances related to clinical care/skill / # of grievances	5%	X		0/0; 0%	On Target
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%		X	5/9; 56%	On Target
	Cleaning/disinfecting product usage	# of cleaning products EPA approved for hospital use / All cleaning products (4 observations per month)	100%	X		4/4; 100%	On Target
	Infection rates (athlete foot)	# of athlete foot infections / Total Bed days per month	0%	X		0/471; 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		1/471; 0%	On Target
	Medical emergency transfers	# of patients transferred emergently to an acute hospital / Total bed days per month	2%	X		2/471; 0.4%	On Target
	Adverse outcomes	# of inpatient adverse outcomes / Total Bed days per month	2%	X		1/471; 0.2%	On Target
	Readmissions within 30 days	# of inpatient readmissions within 30 days of discharge / # of inpatient admissions per month	10%	X		2/33; 6.1%	On Target
	Mortality	# of inpatient deaths / Total Bed days per month	0%	X		0/471; 0%	On Target
	Elopement	# of elopements / Total Bed days per month	0%	X		1/471; 0%	Off Target: 0.1% for Qtr 3
	Suicide management	# of attempted suicides / # of inpatient admissions per month	0%	X		0/33; 0%	On Target
	Patient falls	# of inpatient falls reported during the month / Total Bed days per month	0.50%	X		2/471; 0.4%	On Target
Social Work Services	Psychosocial Assessment Completion	# of completed assessments / # of assessments audited	100%				On Target
	Social Services Discharge & Aftercare Monitoring	# of discharge and aftercare forms with all elements completed / # of charts audited	100%				On Target
	Social Services Documentation Monitoring	# of charts that include admission note, acute note status and administrative status note / # of charts of audited	100%				Off Target: 93% for Qtr 3

Indicator	Measures	Description	Target	Apr-18			Previous Quarter
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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				On Target
	Seclusion usage	# of "seclusion episodes" / Total Bed days per month	N/A				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%				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%				Off Target: 78% for Qtr 4
	Patient injuries during restraint	# of injuries while restrained or secluded / # of restraint/seclusion episodes	0%				On Target
	Inclusion in Treatment Plan	# of records of restrained and/or secluded patients with inclusion of restraint/seclusion in treatment plan / # patient records with restraint/seclusion	100%				On Target
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		0/459; 0%	On Target
	Medication error rates	# of medication errors occurring in patient care areas / Total medications dispensed (PRN + Main + Ekit)	2%	X		2/459; 0%	On Target
	Adverse drug reactions	# of adverse drug reactions / # of medications administered (PRN + Main)	2%	X		1/425; 0%	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%	X		425/425; 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%	X		18/18; 100%	On Target
	Controlled substance destruction	# of controlled substances properly destroyed including all documentation requirements and destruction time frames (for medications considered abandoned – 7 days or post	100%	X		36/36; 100%	On Target
	Proper licensure for controlled substance receipt from pharmacy	# of shifts / # of deliveries reviewed	100%	X		81/81; 100%	On Target
	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%		X	17/19; 89%	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%	X		112/112; 100%	On Target

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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	0
	Event reporting	Number of events reported of the following types: Medication-Related; Other significant/Mandated Reporting	N/A			0	1
Food and Nutritional Services	Appropriate diets	# of nutritional diets accurate and appropriate for patient's carbohydrate, caloric and protein needs / # of diets reviewed	100%				On Target
	Nutritional assessments	# of RD assessments performed within 72 hours for patients at high nutritional risk / # high risk nutritional patients reviewed	100%				Off Target: 0.7% for Qtr 3
	Food storage/expired food items	# of expired/unlabeled items in refrigerators/freezers / # of food items observed	0%				Off Target: 94% for Qtr 3
Physician and AHP Related Issues	Telephone medication orders	Number of telephone orders signed and dated within 24 hours	100%	X		55/55; 100%	Off Target: 94% for Qtr 3
	MD-related incidents	Number of incidents regarding MDs	0	X		0	On Target
	Change of clinician request	Number of change of clinician requests	0	X		0	Off Target: 1 for Qtr 3
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%	X		8/8; 100%	On Target
Environment of Care	Staff knowledge:	# of staff able to articulate how to report unsafe environment or hazard / # of staff interviewed	>95%	X		10/10; 100%	On Target
	Unsafe environment or hazard reporting						
	Role in internal/external disaster	# of employees correctly describing their role in the event of an internal/external disaster # of employees interviewed	>90%	X		10/10; 100%	On Target
	Articulation of fire plan components	# of staff articulating fire plan components correctly / # of staff queried	>90%	X		10/10; 100%	On Target
	Work order completion w/in 30 days	# of work orders completed within 30 days of creation / # of work orders created	95%	X		8/8; 100%	On Target

Indicator	Measure off target	Description of issue(s)	Corrective Action Summary	Previous Corrective Action (if any)
Patient Services, Care and Safety	Elopement	In March, one patient eloped two separate times. The first incident occurred while staff were doing rounds and were unable to locate patient. Patient was found within an hour by law enforcement. The second incident occurred while the patient was off the unit with staff for an x-ray. The patient was scheduled for discharge to Anka that day and needed the x-ray before going.	Since the two elopements, the badge access to the unit has been disabled and it is only accessible with a key.	
Physician & AHP Related Issues	Telephone medication orders	In the third quarter, there were a total of 5 telephone orders that were signed outside of the 24 hour mark.	The PHF is attempting to identify specific doctors who have been out of compliance in this indicator. The PHF is also determining what the regulatory requirements are for signing telephone orders and if it is acceptable for a different doctor to sign a telephone order.	One specific doctor was counseled on this requirement. The nursing supervisor also discussed this with the team leaders again to ensure that they are contacting the medical director when telephone orders are not signed and it is approaching the 24 hour timeline.
	Change of Clinician Requests	There was one request for a change of clinician. The patients stated reason for request was "bullying and stalking", however no clinician was identified.	This request was accommodated.	