

Indicator	Measures	Description	Target	Jul-18			Previous Quarter April 2018-June 2018
				On Target	Off Target	Data	
Complaints and Grievances	Total grievances	# of patient grievances / Total Bed days per month	10%	X		0/480; 0%	On Target
	Clinical care/skill-related grievances	# of grievances related to clinical care/skill / # of grievances	5%	X		0/480; 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	13/20; 65%	Off Target: 63% for Qtr 4
	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		0/480; 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		0/480; 0%	On Target
	Medical emergency transfers	# of patients transferred emergently to an acute hospital / Total bed days per month	2%	X		0/480; 0%	On Target
	Adverse outcomes	# of inpatient adverse outcomes / Total Bed days per month	2%	X		0/480; 0%	On Target
	Readmissions within 30 days	# of inpatient readmissions within 30 days of discharge / # of inpatient admissions per month	10%	X		2/36; 5.6%	On Target
	Mortality	# of inpatient deaths / Total Bed days per month	0%	X		0/480; 0%	On Target
	Elopement	# of elopements / Total Bed days per month	0%	X		0/480; 0%	On Target
	Suicide management	# of attempted suicides / # of inpatient admissions per month	0%	X		0/480; 0%	On Target
	Patient falls	# of inpatient falls reported during the month / Total Bed days per month	0.50%	X		0/480; 0%	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%				Off Target: 93% for Qtr 4
	Social Services Documentation Monitoring	# of charts that include admission note, acute note status and administrative status note / # of charts of audited	100%				On Target
Indicator	Measures	Description	Target	Jul-18			Previous Quarter April 2018-June 2018
				On Target	Off Target	Data	
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%				On Target
	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%			
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%	X		25/25; 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 discharge) / # of medication destruction log entries identified (denominator)	100%	X		44/44; 100%	On Target
Proper licensure for controlled substance receipt from pharmacy		# of shifts / # of deliveries reviewed	100%	X		63/63; 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		14/14; 100%	Off Target: 96% for Qtr 4
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	X		0	0
	Event reporting	Number of events reported of the following types: Medication-Related; Other significant/Mandated Reporting	N/A	X		0	0
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%				On Target
	Food storage/expired food items	# of expired/unlabeled items in refrigerators/freezers / # of food items observed	0%				On Target
Physician and AHP Related Issues	Telephone medication orders	Number of telephone orders signed and dated within 24 hours	100%	X		22/22; 100%	On Target
	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	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%	X		8/8; 100%	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%	X		10/10; 100%	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%	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)
Infection Prevention and Control	Hand hygiene according to guidelines	Increased the number of observations of July month as planned; however, remain off target. 13 of 20 (65%) completed hand hygiene when required and for the correct length of time. The remaining 7 (secretly) observed did not perform the hygiene for one of the following reasons 1)not when indicated, 2)for the correct length of time, or 3)utilized the hand gel correctly.	In conjunction with our contracted Infection Preventionist PHF staff are actively looking in to their Hand Hygiene monitoring process. They are utilizing tools from the CDC and World Health Organization to revise their monitoring tool. The goal is to capture the moments when they may fall short of compliance so the highs and lows are captured. This will provide more specific information on where more work needs to be done. Our IP is actively planning an educational program to increase a heightened awareness through flyers, bulletins, and live in person education.	Staff were provided with in service training on Relias. Flyers and posters were posted around the unit as reminders to practice frequent, good quality hand hygiene.
Medication Use/Pharmacy Services	E-Kit usage for emergencies	Suboxone was taken out of the Ekit 3 times in April, but only 1 out of 3 of the orders had the words "emergent need".	We have educated the prescriber, Dr. Ole, the nurses, and the pharmacists that you cannot take a dose out of the Ekit unless it is for emergent need	none

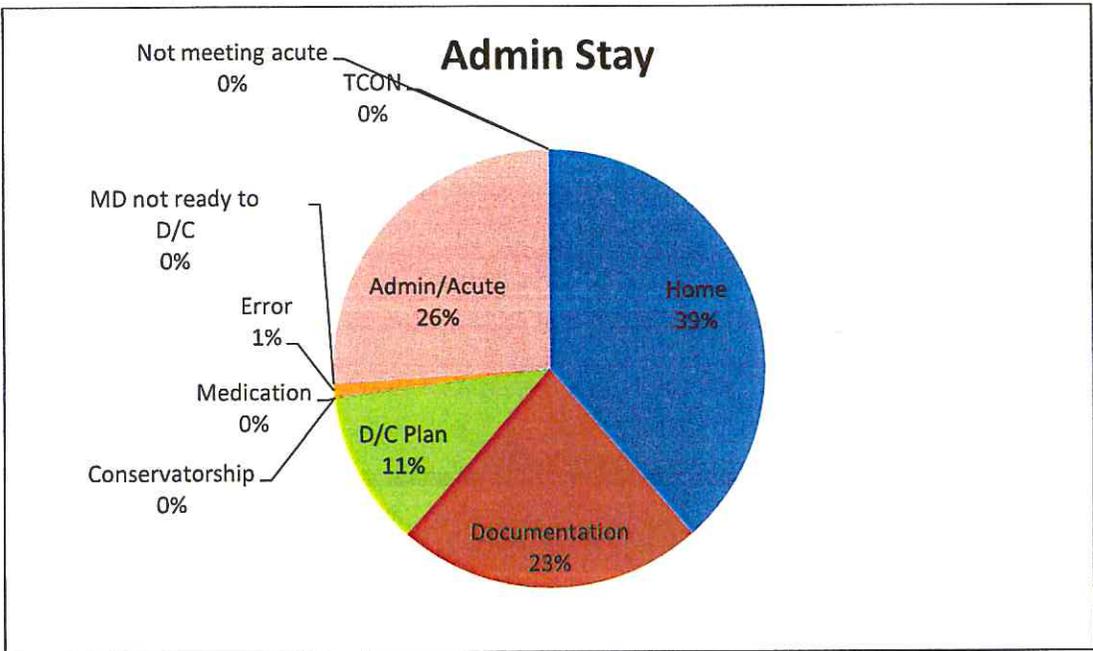
Admin Summary Breakdown July 2018

Billable:

82 days of Admin Billable

Non-bill:

Home	37%	23 days
Admin back to Acute	25%	16 days
No Documentation	22%	14 days
Discharge plan in progress	11%	7 days
Step down/NonBill	1%	1 days
Error	1%	1 days
TCON	0%	0 days
Conservatorship Hearing	0%	0 days
No longer meeting acute	0%	0 days
MD Not Ready	0%	0 days
Medication	0%	0 days



ADMIN SUMMARY

