

Indicator	Measures	Description	Target	Aug-18			Previous Quarter
				On Target	Off Target	Data	April 2018-June 2018
Complaints and Grievances	Total grievances	# of patient grievances / Total Bed days per month	10%	X		1/480; 0%	On Target
	Clinical care/skill-related grievances	# of grievances related to clinical care/skill / # of grievances	5%	X		1/480; 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%				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%				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		0/480; 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		0/480; 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	0.50%				On Target
Social Work Services	Psychosocial Assessment Completion	# of completed assessments / # of assessments audited	100%	X		5/5; 100%	On Target
	Social Services Discharge & Aftercare Monitoring	# of discharge and aftercare forms with all elements completed / # of charts audited	100%	X		5/5; 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%	X		5/5; 100%	On Target
Indicator	Measures	Description	Target	Aug-18			Previous Quarter
				On Target	Off Target	Data	April 2018-June 2018
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		0/720; 0%	On Target
	Seclusion usage	# of "seclusion episodes" / Total Bed days per month	N/A	X		1/480; .2%	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		1/1; 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		1/1; 100%	On Target
	Patient injuries during restraint	# of injuries while restrained or secluded / # of restraint/seclusion episodes	0%	X		0/1; 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%	X		1/1; 100%	On Target
<b>Medication Use/Pharmacy Services</b>	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%	N/A	N/A	N/A	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%				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%				On Target
	Proper licensure for controlled substance receipt from pharmacy	# of correct processes followed by staff / # of deliveries reviewed	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	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%				On Target
<b>Indicator</b>	<b>Measures</b>	<b>Description</b>	<b>Target</b>	<b>Aug-18</b>			<b>Previous Quarter</b>
				<b>On Target</b>	<b>Off Target</b>	<b>Data</b>	<b>April 2018-June 2018</b>
<b>Significant Adverse Outcomes</b>	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
<b>Food and Nutrition Issues</b>	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
	Nutritional assessments	# of RD assessments performed within 72 hours for patients at high nutritional risk / # high risk nutritional patients reviewed	100%	X		18/18; 100%	On Target
	Food storage/expired food items	# of expired/unlabeled items in refrigerators/freezers / # of food items observed	0%	X		0/150; 100%	On Target
<b>Physician and AHP Related Issues</b>	Telephone medication orders	Number of telephone orders signed and dated within 24 hours	100%				On Target
	MD-related incidents	Number of incidents regarding MDs	0				On Target

	Change of clinician request	Number of change of clinician requests	0				<b>On Target</b>
<b>Environmental Services</b>	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%				<b>On Target</b>
<b>Environment of Care</b>	Staff knowledge:	# of staff able to articulate how to report unsafe environment or hazard / # of staff interviewed	>95%				<b>On Target</b>
	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%				<b>On Target</b>
	Articulation of fire plan components	# of staff articulating fire plan components correctly / # of staff queried	>90%				<b>On Target</b>
	Work order completion w/in 30 days	# of work orders completed within 30 days of creation / # of work orders created	95%				<b>On Target</b>

**Summary & actions taken to address any "Off Target" Indicators**

Indicator	Measure off target	Description of issue(s)	Corrective Action Summary	Previous Corrective Action (if any)
<b>Medication Use/Pharmacy Services</b>	Medication error rates/unavailability	Hometown Pharmacy is experiencing issues with their data reporting program. Due to this issue we were not able to obtain numbers for August.	Hometown Pharmacy is actively working on resolving their system issues.	N/A
<b>Social Work Services</b>	Social Services Discharge & Aftercare Monitoring	In May review one of the charts had a discharge appointment scheduled 8 days after discharge. It was confirmed that this was the first available appointment to schedule.	Clinics have a PHF hospital discharge slot available on a weekly basis to ensure clients are able to be seen in a timely manner.	N/A