

Indicator	Measures	Description	Target	December			Previous Quarter
				On Target	Off Target	Data	October-December
Complaints and Grievances	Total grievances	# of patient grievances / Total Bed days per month	10%	X		0	On Target
	Clinical care/skill-related grievances	# of grievances related to clinical care/skill / # of grievances	5%	X		0	On Target
Infection Prevention and	Hand hygiene according to guidelines	# of observations when the care giver performed hand hygiene per CDC	80%		X	79%	On Target
Patient Services, Care and Safety	Patient injuries	# of patient injuries w or w/o treatment / Total Bed days per month	0%	X		1/456	On Target
	Medical emergency transfers	# of patients transferred emergently to an acute hospital / Total bed days	2%				On Target
	Readmissions within 30 days	# of inpatient readmissions within 30 days of discharge / # of inpatient	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
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Social Work Services	Psychosocial Assessment Completion	# of completed assessments / # of assessments audited	100%	X		10/10 100%	Off Target 93%
	Social Services Discharge & Aftercare Monitoring	# of discharge and aftercare forms with all elements completed / # of charts audited	100%				On Target
	Recreation Therapy Assessments	# of Recreation Therapy Assessments with all required elements/ # of charts audited	100%	X		10/10 100%	Off Target 92%
	Social Services Documentation Monitoring	# of charts that include admission note, acute note status and administrative status note / # of charts of audited	100%				On Target

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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	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	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
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Medication Use/Pharmacy Services	Medication error rates	# of medication errors occurring in patient care areas / Total medications	2%		X	5	Off Target 3.7
	Medication & controlled substance labeling	# of patient medications, including controlled substances labeled and stored according to hospital policy / #	100%				On Target
	Controlled substance discrepancy	# of resolved controlled substance discrepancies/ total # of controlled	100%				On Target
	Controlled substance destruction	# of controlled substances properly destroyed including all	100%				On Target

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Significant Adverse Outcomes	Sentinel events	Number of state reportable events (Unusual Occurrence 24 Hour	N/A	X		0	On Target
	Adverse Events	Event leading to harm to patient regardless of cause	N/A	X		1	On Target
	Incident Reporting	Number and type of incidents reported	N/A	X		8	On Target
Food and Nutritional Services	Ice Policy	Numerator: # of correct responses to Ice Policy query Denominator: Number of staff interviewed	100%	X		16/16 100%	On Target
	Nutritional assessments	# of RD assessments performed within 72 hours for patients at high	100%				On Target
	Handwashing	Numerator: # of staff observed washing hands per policy	0%	X		16/16 100%	On Target
	Rate of correct meal preparations	# of meals served that match PHFs Daily spreadsheet with appropriate portion/size / # of meals reviewed	100%				On Target
	Request for Additional Food	# of correct responses to Requests for Additional Food Policy query Denominator: # of staff interviewed	100%	X		16/16 100%	On Target
Physician and AHP Related Issues	Cranial Nerve Exams	# of Medical Records with Cranial Nerve Exam completed / # of Medical Records reviewed	100%	X		10/10 100%	On Target
	Informed Consent	Numerator: # of Medical Records reviewed with Presence of Psychotropic Medication Consents	100%	X		10/10 100%	Off Target 97%
	Telephone medication orders	Number of telephone orders signed and 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

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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%				On Target
	Role in internal/external disaster	# of employees correctly describing their role in the event of an	>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	95%				On Target
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Nursing Services	*Telephone Order Read Back	# of telephone order with documentation of read back / # of telephone orders audited	100%	X		4/4 100%	Off Target 93%
	*Pain Assessments	# of charts with evidence of pain assessment / # of charts audited	100%		X	9/10 90%	Off Target 70%
	*Physician Notification of meds not given	# of charts with documentation of physician notification of meds not given per MD-ordered parameters / # of charts with meds not given per MD-ordered parameters	100%		X	0/2 0%	Off Target 50%
	*Physician Notification of meds refused	# of charts with evidence of physician notification of meds refused / # of charts with medications refused	100%		X	0/5 0%	Off Target 0%

Indicator	Measures	Description	Target	December			Previous Quarter October-December
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Treatment Plans	Short Term Goals	# of treatment plans w/ short term goals with all required elements complete / # of short term goals	100%		X	9/10 90%	Off Target 90%
	Long Term Goals	# of long term goals w/ all required elements complete / # of long term goals	100%	X		10/10 100%	On Target
	MD Interventions	# of MD interventions with all required elements complete / # of MD interventions	100%		X	9/10 90%	Off Target 92%
	Nursing Interventions	# of nursing interventions with all required elements complete / # of nursing interventions	100%		X	6/10 60%	Off Target 84%
	Social Services (SS) Interventions	# of SS interventions with all required elements complete / # of SS interventions	100%		X	9/10 90%	Off Target 91%
	Recreation Therapist (RT) Interventions	# of RT interventions with all required elements complete / # of RT interventions	100%	X		10/10 %	Off Target 89%

CORRECTIVE ACTION SUMMARY

Indicator	Measure off target	Description of issue(s)	Corrective Action Summary	Previous Corrective Action (if any)
Social Services	Psychosocial Assessments	This quarter, 93% of Psychosocial Assessments had all required elements.	Director of Social Service is auditing charts and providing feedback to staff on assessments not in compliance, and offering technical support. She is also using the chart review process as a tool to orient new social services staff on the required elements of Psychosocial Assessments.	
Social Services	Recreation Therapy Assessments	This quarter, 92% of required Recreation Therapy Assessments were completed for the quarter.	Director of Social Service is auditing charts and providing feedback to staff on assessments not in compliance, and offering technical support. She is also using the chart review process as a tool to orient new social services staff on the recently implemented Recreation Therapy Assessment and required elements.	

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Medication Use and Pharmacy Services	Medication Errors	Nurse gave patient haloperidol 10 mg when patient was on 5 mg Nurse gave patient bedtime dose of mirtazapine in the morning 2 instances of missing medication so patient may have received too much 1 instance of extra medication so patient may not have received enough	Pharmacist counseled nursing staff involved or potentially involved in the medication errors. Staff are instructed to print out the shift activity report to cross check their work. The activity reports would not have caught the missing or extra medication. No specific staff or patterns identified at this time regarding these errors.	1) Nurse who completed IR explained it was an error on her part- she rarely works in the med room, knows how it happened and how to prevent it in the future. 2) Nurses involved have been consulted about this. This seems to be a communication error. Pharmacist and Nursing Supervisor communicated with all nurses about the importance of writing out each medication that was received, and not just writing how many bubble packs were received. Pharmacist and Nursing Supervisor continue to counsel staff and work on error reductions with nurses in the med room.
Physician and AHP Related Issues	Informed Consents	Informed consents completed with all required elements was at 97% for the quarter.	The Informed Consent form was updated to include all required elements to clearly guide prescribing staff while completing. The Medical Director has counseled prescribing staff on the elements required in the updated form, and the required elements for informed consent completion. The Pharmacist also reviews informed consents during treatment team meetings to further ensure forms are in compliance, and any changes or updates are reflected as required. Nursing Staff are also reviewing informed consents to ensure completion prior to administering medication.	

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Nursing Services	Telephone Order Read Back	Documentation of Telephone Order Read Back was at 93% for the quarter.	The Nursing Supervisor will continue communicating with nursing staff on the required elements for Telephone Order read back documentation.	
Nursing Services	Pain Assessment	Documentation of Pain Assessment was at 70% for the quarter.	The Nursing Supervisor will continue communicating with nursing staff on the required elements for Pain Assessment documentation.	
Nursing Services	Physician Notification of Meds Not Given	Documentation of Physician Notification of Meds Not Given was at 50% for the quarter.	The Pharmacist is providing on going communication to nursing staff regarding the requirement to document meds not given on the MAR and in the flow sheet. The Nursing Supervisor will continue communicating with nursing staff on the required elements for notification to physician of meds not given. In December, med room nursing staff were advised to document the meds not given on the flow sheet in addition to the MAR, instead of a floor nurse.	
Nursing Services	Physician Notification of Meds Refused	Documentation of Physician Notification of Meds Refused was at 0% for the quarter.	The Nursing Supervisor will continue communicating with nursing staff on the required elements for notification to physician of meds not given. In December, med room nursing staff were advised to document the meds refused on the flow sheet in addition to the MAR, instead of a floor nurse.	

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Treatment Plans	Short Term Goals	Short Term Goals were at 90% for the quarter.	The Medical Director, Clinical Director, Nursing Supervisor meet monthly with QCM Staff to discuss results of the chart reviews and discuss possible corrective action plans. There have been no identified trends or patterns with any specific staff or discipline, however, December's nursing interventions rate of compliance decreased. The Nursing Supervisor, Clinical Director and QCM staff will meet with licensed nursing staff in February to review and discuss the first quarters data and to provide technical assistance and support related to documentation of nursing interventions. The Clinical Director and or Nursing Supervisor continue to monitor the treatment team during the treatment planning process once a week to provide additional support and technical assistance on required elements for long term, short term goals and treatment plan interventions across disciplines.	PHF leadership held several treatment plan trainings for treatment planning staff to address CMS plan of correction findings and provide staff with technical assistance in documenting goals and intervention with all required elements.
Treatment Plans	MD Interventions	MD Interventions were at 92% for the quarter.	The Medical Director, Clinical Director, Nursing Supervisor meet monthly with QCM Staff to discuss results of the chart reviews and discuss possible corrective action plans. There have been no identified trends or patterns with any specific staff or discipline, however, December's nursing interventions rate of compliance decreased. The Nursing Supervisor, Clinical Director and QCM staff will meet with licensed nursing staff in February to review and discuss the first quarters data and to provide technical assistance and support related to documentation of nursing interventions. The Clinical Director and or Nursing Supervisor continue to monitor the treatment team during the treatment planning process once a week to provide additional support and technical assistance on required elements for long term, short term goals and treatment plan interventions across disciplines.	PHF leadership held several treatment plan trainings for treatment planning staff to address CMS plan of correction findings and provide staff with technical assistance in documenting goals and intervention with all required elements.
Treatment Plans	Nursing Interventions	Nursing Interventions were at 84% for the quarter.	The Medical Director, Clinical Director, Nursing Supervisor meet monthly with QCM Staff to discuss results of the chart reviews and discuss corrective action plans. There have been no identified trends or patterns with any specific staff or discipline, however, December's nursing interventions rate of compliance decreased. The Nursing Supervisor, Clinical Director and QCM staff will meet with licensed nursing staff in February to review and discuss the first quarters data and to provide technical assistance and support related to documentation of nursing interventions. The Clinical Director and or Nursing Supervisor continue to monitor the treatment team during the treatment planning process once a week to provide additional support and technical assistance on required elements for long term, short term goals and treatment plan interventions across disciplines.	PHF leadership held several treatment plan trainings for treatment planning staff to address CMS plan of correction findings and provide staff with technical assistance in documenting goals and intervention with all required elements.

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Treatment Plans	SS Interventions	Social Services Interventions were at 91% for the quarter.	The Medical Director, Clinical Director, Nursing Supervisor meet monthly with QCM Staff to discuss results of the chart reviews and discuss possible corrective action plans. There have been no identified trends or patterns with any specific staff or discipline, however, December's nursing interventions rate of compliance decreased. The Nursing Supervisor, Clinical Director and QCM staff will meet with licensed nursing staff in February to review and discuss the first quarters data and to provide technical assistance and support related to documentation of nursing interventions. The Clinical Director and or Nursing Supervisor continue to monitor the treatment team during the treatment planning process once a week to provide additional support and technical assistance on required elements for long term, short term goals and treatment plan interventions across disciplines.	PHF leadership held several treatment plan trainings for treatment planning staff to address CMS plan of correction findings and provide staff with technical assistance in documenting goals and intervention with all required elements.
Treatment Plans	RT Interventions	Recreation Therapist Interventions were at 89% for the quarter.	The Medical Director, Clinical Director, Nursing Supervisor meet monthly with QCM Staff to discuss results of the chart reviews and discuss possible corrective action plans. There have been no identified trends or patterns with any specific staff or discipline, however, December's nursing interventions rate of compliance decreased. The Nursing Supervisor, Clinical Director and QCM staff will meet with licensed nursing staff in February to review and discuss the first quarters data and to provide technical assistance and support related to documentation of nursing interventions. The Clinical Director and or Nursing Supervisor continue to monitor the treatment team during the treatment planning process once a week to provide additional support and technical assistance on required elements for long term, short term goals and treatment plan interventions across disciplines.	PHF leadership held several treatment plan trainings for treatment planning staff to address CMS plan of correction findings and provide staff with technical assistance in documenting goals and intervention with all required elements.