

QAPI/PGB REPORT FEBRUARY 2020 (Month of January & Quarter of October, November, December 2019)

Indicator	Measures	Description	Target	January			Previous Quarter
				On Target	Off Target	Data	October-December
Complaints and Grievances	Total grievances (monthly)	# of patient grievances / Total Bed days per month	10%	X		3/475 <1%	On Target
	Clinical care/skill-related grievances (monthly)	# of grievances related to clinical care/skill / # of grievances	5%	X		0/475 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
Patient Services, Care and Safety	Patient injuries (monthly)	# of patient injuries w or w/o treatment / Total Bed days per month	0%	X		0/475 0%	On Target
	Medical emergency transfers (quarterly)	# of patients transferred emergently to an acute hospital / Total bed days per month	2%	n/a			On Target
	Readmissions within 30 days (quarterly)	# of inpatient readmissions within 30 days of discharge / # of inpatient admissions per month	10%	n/a			On Target
	Mortality (quarterly)	# of inpatient deaths / Total Bed days per month	0%	n/a			On Target
	Elopement (quarterly)	# of elopements / Total Bed days per month	0%	n/a			On Target
	Suicide management (quarterly)	# of attempted suicides / # of inpatient admissions per month	0%	n/a			On Target
	Patient falls (quarterly)	# of inpatient falls reported during the month / Total Bed days per month	0.50%	n/a			On Target
	Incident Reports (monthly)	# and type of incidents reported	volume	X		3	Monthly Report
Indicator	Measures	Description	Target	January			Previous Quarter
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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
	Recreation Therapy Assessment Completion	# of completed assessments / # of assessments audited	100%				
	Social Services Documentation Monitoring	# of charts that include admission note, acute note status and administrative status note / # of charts of audited	100%				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				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

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Medication Use/Pharmacy	Medication error rates (monthly)	# of medication errors occurring in patient care areas / Total medications dispensed	2%		X	2/2,500 < 0%	(Monthly Report)
	Medication & controlled substance labeling (quarterly)	# of patient medications, including controlled substances labeled and stored according to hospital policy / # of patient stored medications reviewed	100%	n/a			On Target
	Controlled substance discrepancy (quarterly)	# of resolved controlled substance discrepancies/ total # of controlled substance discrepancies	100%	n/a			On Target
	Adverse drug reactions (quarterly)	# of adverse drug reactions / # of medications administered (PRN + Main)	2%	n/a			On Target
	Controlled substance destruction (quarterly)	# of controlled substances properly destroyed including all documentation requirements and destruction time frames	100%	n/a			On Target
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Significant Adverse Outcomes	Adverse patient events (monthly)	# of inpatient adverse events (any harm to patient regardless of cause)	volume	X		0	On Target
	Sentinel Events (monthly)	# of 24-hour state reportable events	volume	X		0	On Target
Food and Nutritional Services	Appropriate diets	# of nutritional diets accurate and appropriate for patient's carbohydrate, caloric and protein needs / # of diets	100%				On Target
	Nutritional assessments	# of RD assessments performed within 72 hours for patients at high nutritional risk / # high risk nutritional	100%				On Target
	Ice Policy	Numerator: # of correct responses to Ice Policy query Denominator: Number of staff interviewed	100%				On Target
	Handwashing	Numerator: # of correct staff responses to Handwashing policy / Denominator: # of staff interviewed	0%				On Target
	Request for Additional Food	# of correct responses to Requests for Additional Food Policy query Denominator: # of staff interviewed	100%				On Target
Physician and AHP Related Issues	Telephone medication orders (quarterly)	Number of telephone orders signed and dated within 24 hours	100%	n/a			Off Target 88%
	MD-related incidents (quarterly)	Number of incidents regarding MDs	0	n/a			On Target
	Change of clinician request (quarterly)	Number of change of clinician requests	0	n/a			On Target
	Cranial Nerve Exams	# of Medical Records with Cranial Nerve Exam completed / # of Medical Records reviewed	100%				On Target
	Informed Consent	Numerator: # of Medical Records reviewed with Presence of Psychotropic Medication Consents with all required elements / Denominator: # of Psychotropic Medication Consents Required	100%				Off 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%				On Target
Environment of Care	Staff knowledge: Unsafe environment or hazard reporting (quarterly)	# of staff able to articulate how to report unsafe environment or hazard / # of staff interviewed	>95%	n/a			On Target
	Role in internal/external disaster (quarterly)	# of employees correctly describing their role in the event of an internal/external disaster # of employees	>90%	n/a			On Target
	Articulation of fire plan components (quarterly)	# of staff articulating fire plan components correctly / # of staff queried	>90%	n/a			On Target
	Work order completion w/in 30 days (quarterly)	# of work orders completed within 30 days of creation / # of work orders created	95%	n/a			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%				Off Target
	*Pain Assessments	# of charts with evidence of pain assessment / # of charts audited	100%				Off Target
	*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%				Off Target
	*Physician Notification of meds refused	# of charts with evidence of physician notification of meds refused / # of charts with medications refused	100%				Off Target
Indicator	Measures	Description	Target	January			Previous Quarter
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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%				Off Target
	Long Term Goals	# of long term goals w/ all required elements complete / # of long term goals	100%				On Target
	MD Interventions	# of MD interventions with all required elements complete / # of MD interventions	100%				Off Target
	Nursing Interventions	# of nursing interventions with all required elements complete / # of nursing interventions	100%				Off Target
	Social Services (SS) Interventions	# of SS interventions with all required elements complete / # of SS interventions	100%				Off Target
	Recreation Therapist (RT) Interventions	# of RT interventions with all required elements complete / # Number of RT interventions	100%				Off Target

CORRECTIVE ACTION SUMMARY

Indicator	Measure off target	Description of issue(s)	Corrective Action Summary	Previous Corrective Action (if any)
Medication Use /Pharmacy	Medication errors*	In the month of January there were two (2) medication errors. One error was a nurse giving a patient the wrong medication because the patient had the same first letter of last name. The other error was an extra tablet of clozapine 25 mg was found when refilling the Pyxis, so a patient may not have received enough medication one time. *2 errors out of an average of 2500 medications dispensed per month = < 1%.	The first error would have been caught by an EHR. The 2nd error would not have been caught. Pharmacist reminded the nurses to use the patient pictures at the beginning of each section of the MAR to verify they are under the right patient. Pharmacist also looked at 2 patients that had the same first name and same first letter of last name, both at PHF at the end of January. No further patient identification errors were found. The extra tablet is linked to human error. The Pharmacist tracks all errors for trends to see if errors are occurring more frequently with any given staff or any given shift. No new trends or patterns have been identified.	All staff involved in medication errors have been counseled. All staff are now required to print out an activity report from Pyxis at the end of the shift to cross reference for possible errors. No patterns or trends yet identified at this time by PHF Pharmacist of Nursing Supervisor.
Physician and AHP Related Issues	Telephone medication orders signed within 24 hours	For the quarter 88% of telephone orders were signed and dated by physicians within 24 hours. The majority of the telephone orders out of compliance were internist orders.	The Medical Director communicated with the internists, all covering internists, and all PHF physicians that they are responsible for signing all unsigned telephone orders within 24 hours. The Medical Director has further reminded all physicians that they are required to sign telephone orders within 24 hours, even those of another ordering physician, appropriate to their licensure. Nurses are now making notification on the internist's board regarding unsigned orders in addition to flagging the orders for signature in the chart as a large volume of the unsigned orders have been internist orders.	Nurses continue to flag orders for MD signature, and request Medical Director signature if one is close to the 24 hour deadline. Nurses are now making notification on the internist's board regarding unsigned orders and flagging the orders for signature in the chart as a large volume of the unsigned orders have been internist orders.

INCIDENT REPORT SUMMARY

Indicator	Description of issue(s)	Type of Incident and Action Summary	Previous Actions (if any)
Incident Reports	See 2 Medication Errors above. 1 incident report filed for unobserved fall with no injury resulting, no further medical care indicated.	See Corrective Action Summary for Medication Errors. For patient with unobserved fall, MD was notified, saw patient and determined no further medical concerns. Nursing team continued monitoring vitals, blood glucose and food/water intake. All patients are assessed for fall risk at intake and as needed.	