



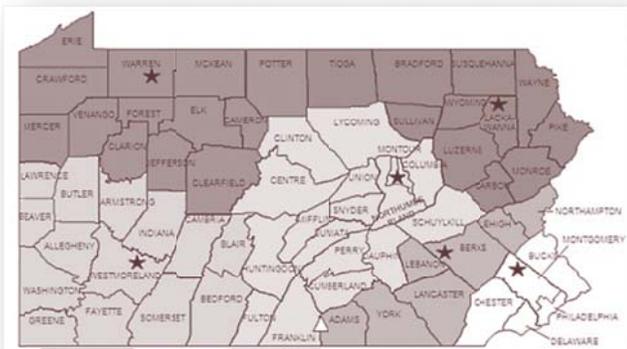
pennsylvania

DEPARTMENT OF PUBLIC WELFARE

OFFICE OF MENTAL HEALTH AND
SUBSTANCE ABUSE SERVICES

Pennsylvania State Hospital System Risk Management Summary Report

June 2013



State Hospital Mental Health Facilities



South Mountain Restoration Center

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On the Internet:



<http://www.dpw.state.pa.us/publications/forproviders/statehospitalriskmanagementsummaryreports/index.htm>

Introduction

The State Hospital Risk Management System defines an incident as any patient-related event that has the potential for, or which results in, a negative impact upon the quality of patient care or services, including injury or death of a person served in the state hospital system.

The data dictionary for the measurement system was updated on October 1, 2008, and is available for review as attachments to OMHSAS Bulletin titled Management of Incidents: SI-815 Incident Reporting and Risk Management Policy and Procedural Change. (Available via bulletin search at <http://www.dpw.state.pa.us> .)

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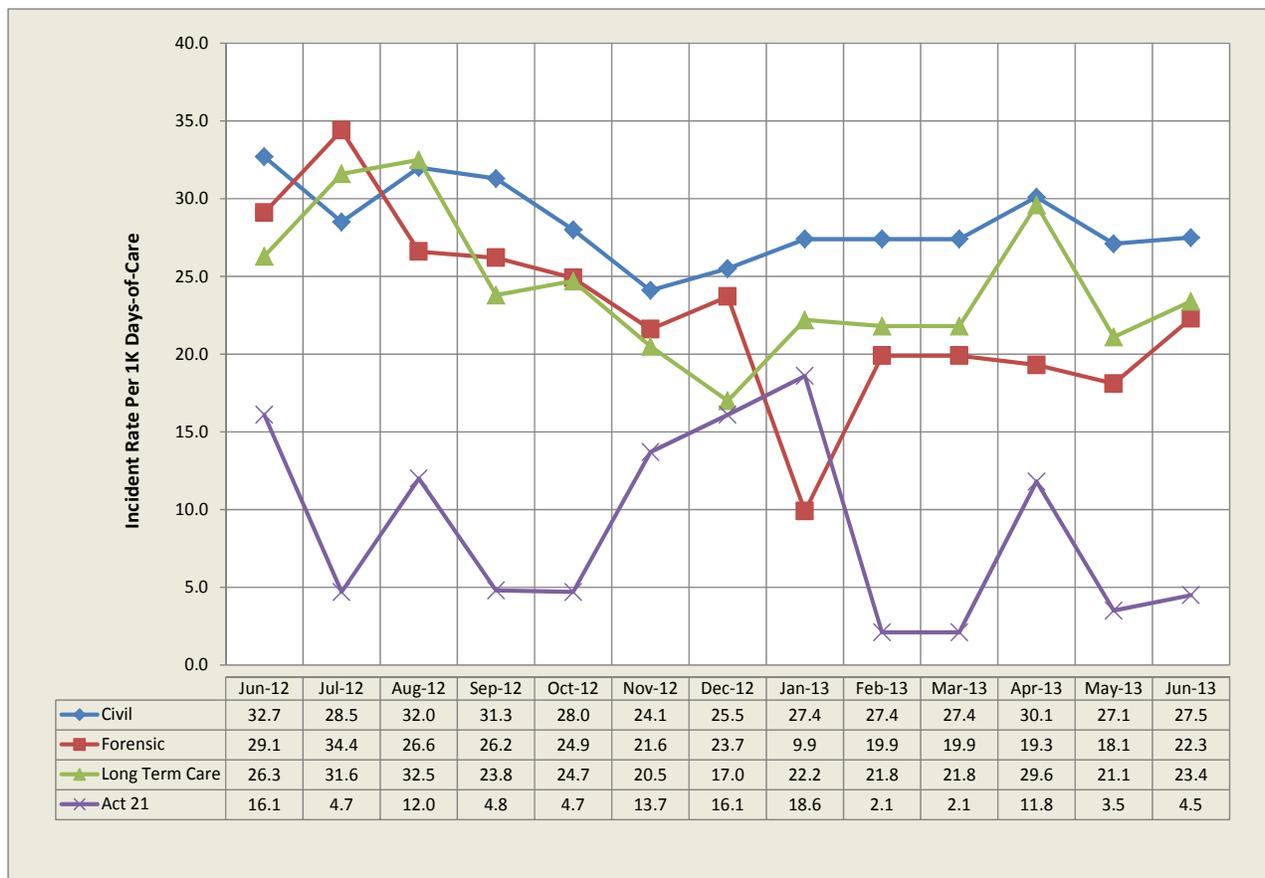
During **June 2013** a total of 1194 incident reports were completed by the state hospital system. Additional records addressing specific categories from the previous month were included on page 4 of this report.

The following is a breakdown of incidents by individual facility and type of care:

Table 1 - Number of Incident Reports

Civil	Census 6/30/13	Days Provided	Incidents	Per 1000 Days-of-Care
Clarks Summit	216	6520	134	20.6
Danville	166	4939	162	32.8
Norristown	134	4044	95	23.5
Torrance	196	5698	181	31.8
Warren	182	5396	110	20.4
Wernersville	258	7695	260	33.8
Total Civil	1152	34292	942	27.5
Forensic				
Norristown	128	3877	101	26.1
Torrance	97	2774	47	16.9
Total Forensic	225	6651	148	22.3
Act 21				
Act 21	37	1110	5	4.5
Total Act 21	37	1110	5	4.5
Long Term Care				
South Mountain	143	4227	99	23.4
Total L. T. C.	143	4227	99	23.4
Total	1557	46280	1194	25.8

Thirteen-Month Trend of Incidents by Type of Care per 1,000 Days of Care



*Note: Rules regarding the reporting of incidents involving patient-to-patient assaults require a separate incident report form on each person involved in an altercation. This includes both the aggressor, when known and any other person involved. The numbers reported above reflect the monthly, total number of SI-815 reports coded as Patient-to-Patient Assaults and not the actual number of altercations.

The following table is refreshed each month from the most recent data (recent 6 month period) available from the State Hospital System RM database.

CATEGORY	Count	Jan_13	Feb_13	Mar_13	Apr_13	May_13	Jun_13
Accident-Injury	262	34	42	37	43	54	52
Adverse Drug Reaction	23	2	6	6	3	5	1
Aggression	848	132	140	136	177	123	140
Airway Obstruction type 1 Intervention	16	3	2	4	4	3	
Airway Obstruction type 2 No Intervention	9	2	2		3		2
Alleged Nonconsensual Sexual Activity	10					10	
Alleged Pt. Abuse	54	16	6	4	7	7	14
Assault, Pt./Pt	1741	268	352	291	298	269	263
Assault, Pt./Staff	548	101	99	90	93	81	84
Assault: Patient/Other	3			1		2	
AWOL/UA	61	7	8	12	12	12	10
AWOL-Attempt	37	11	6	7	3	5	5
AWOL-Late	38	5		2	5	13	13
Change in Medical Status-Stabilized	97	23	14	11	11	24	14
Change in Medical Status-Transferred	308	54	47	63	63	43	38
Charged post admit/crime committed prior to admit	1				1		
Communications Sys. Misuse	14	2	1	3	1	6	1
Community Incident	17	3	2	2	1	7	2
Contraband Possession	153	34	27	24	22	24	22
Fall Type 1-Injury with treatment	403	64	48	71	80	76	64
Fall Type 2-No treatment needed	727	131	122	121	119	110	124
Family Concern	18	4	4	2	2	2	4
Fire Setting	2	2					
Illicit Substance Use/Possession	10		1	6		1	2
Indeterminate/Unconfirmed Cause of Injury	133	20	15	16	21	36	25
Medication Error	139	22	21	33	37	10	16
Missing Property	78	12	16	17	13	7	13
Other	557	89	81	89	94	105	99
Procedural Treatment Error	16	3	6	4	1	1	1
Property Damage	82	10	12	12	24	9	15
Seizure	45	6	10	5	4	8	12
Self-Injurious behavior	725	155	96	98	128	117	131
Sexual Behavior	93	23	13	18	13	18	8
Smoking Violation	129	27	26	30	19	13	14
Substantiated Patient Abuse	3			1	2		
Suicide Attempt	18	5	1	1	3	5	3
Suicide threat/plan	32	7	2	8	3	7	5
Theft	52	7	10	10	8	6	11
Unknown	17	3	4	6	3	1	
Unsubstantiated Nonconsensual Sexual Activity	2	2					
Unsubstantiated Patient Abuse	16	3	2	3	1	3	4

Table 2 - Category or Cause of Incidents in the Civil Hospitals

Primary Cat #	CLA	DAN	NOR	TOR	WAR	WER	Count
Accident-Injury	8	7	3	5		6	29
Adverse Drug Reaction				1			1
Aggression	29	5	4	30	15	25	108
Airway Obstruction type 2 No Intervention		2					2
Alleged Pt. Abuse	4	2	1	1		3	11
Assault, Pt./Pt	24	19	32	18	17	65	175
Assault, Pt./Staff	9	11	7	5	11	21	64
AWOL/UA	2		3	3	2		10
AWOL-Attempt		4				1	5
AWOL-Late		4		1	7	1	13
Change in Medical Status-Stabilized			5	2			7
Change in Medical Status-Transferred	9	5	6	3	3	3	29
Communications Sys. Misuse	1						1
Community Incident		1					1
Contraband Possession	2	5	5	5	5		22
Fall Type 1-Injury with treatment	12	17	4	5	4	4	46
Fall Type 2-No treatment needed	18	14	4	27	7	39	109
Family Concern				3		1	4
Illicit Substance Use/Possession					2		2
Indeterminate/Unconfirmed Cause of Injury	6	10	2	2		5	25
Medication Error		3	5		1		9
Missing Property	1	3	2	2	1	4	13
Other	8	16	3	15	5	39	86
Procedural Treatment Error						1	1
Property Damage	1	1		2		3	7
Seizure				2	1	1	4
Self-Injurious behavior		28	2	37	23	29	119
Sexual Behavior		3		2	1		6
Smoking Violation			5	5	4		14
Suicide Attempt				1			1
Suicide threat/plan		1	1	2		1	5
Theft			1	2	1	7	11
Unsubstantiated Patient Abuse		1				1	2
Totals	134	162	95	181	110	260	942

Table 3 - Primary Effect of Incidents in the Civil Hospitals

Primary Effect	CLA	DAN	NOR	TOR	WAR	WER	Count
Not Described		1					1
Abrasion/scrape/scratch/hematoma	9	33	8	13	7	12	82
Allergic reaction				1			1
Asphyxiation				1			1
Bite-Animal						1	1
Bite-Human			1	1	1		3
Body System Illness	5		1				6
Bruise/contusion/discoloration	12	9	1	7	2	13	44
Burn/Scald		1					1
Cellulitis		2					2
Constipation		1		1			2
Damaged or lost tooth		1					1
Death	1						1
Edema/swelling	5	2	2	1	1		11
Emesis				1			1
Epistaxis	4	1	1				6
Erythema/redness	4	7		7		2	20
Fever				1			1
Fracture			1	2			3
Ingestion of foreign body				9	2	13	24
Laceration: NO sutures/staples/steri-strips	1	1	3	4	2		11
Laceration: with steristrips/glue			1	1			2
Laceration: with sutures/staples		1		1	1	1	4
Lethargy				1			1
Muscle pull/strain/sprain			1				1
No Injury/NA	88	96	63	120	90	206	663
Other		4	2	5	1	3	15
Pain, Specified	2	2	8	2	2	8	24
Respiratory Distress	3						3
Seizure				2			2
Skin Irritation/Rash			1				1
Unconscious/Unresponsive			1			1	2
Visual changes					1		1
Totals	134	162	95	181	110	260	942

Table 4 - Cause of Incidents in the Forensic Units Category or Cause of Incidents in the Forensic Service by Unit

Primary Cat #	NSH							TSH					Sys.
	51A1	51A2	51B1	51B2	51C1	51C2	Tot.	FB3	FB4	FC1	FC2	Tot.	Count
Accident-Injury					1	1	2					0	2
Aggression	4	3	2	2	1		12		5	1	3	9	21
Alleged Pt. Abuse				1			1					0	1
Assault, Pt./Pt		24	5	5	6	13	53	2	6	2	2	12	65
Assault, Pt./Staff	1	3	1		3		8		4	1	3	8	16
Change in Medical Status-Stabilized	1	2				1	4					0	4
Change in Medical Status-Transferred				2		1	3				3	3	6
Community Incident							0				1	1	1
Fall Type 1-Injury with treatment							0	1	1			2	2
Fall Type 2-No treatment needed		1		2			3	1	2	1		4	7
Other							0			1		1	1
Property Damage	2	2			1		5					0	5
Seizure	5						5			1		1	6
Self-Injurious behavior		1		3			4		2			2	6
Sexual Behavior							0			1	1	2	2
Suicide Attempt				1			1					0	1
Unsubstantiated Patient Abuse							0		1	1		2	2
Totals	13	36	8	16	12	16	101	4	21	9	13	47	148

Table 5 - Effect of Incidents in the Forensic Service by Unit

Primary Effect	NSH							TSH					Sys.
	51A1	51A2	51B1	51B2	51C1	51C2	Tot.	FB3	FB4	FC1	FC2	Tot.	Count
Abrasion/scrape/scratch/hematoma	3	5	1	2	2	0	13		3	2	1	6	19
Bite-Human	0	0	0	0	0	1	1					0	1
Body System Illness	0	0	0	0	0	0	0				2	2	2
Bruise/contusion/dyscoloration	0	0	0	0	0	0	0		3			3	3
Edema/swelling	1	2	1	1	2	0	7			1		1	8
Emesis	0	0	0	0	1	0	1					0	1
Epistaxis	0	2	1	0	0	0	3	1				1	4
Erythema/redness	0	0	0	0	0	1	1					0	1
Fracture	0	0	0	0	0	0	0			1		1	1
Laceration: NO sutures/staples/steri-strip	0	0	0	0	0	0	0	1	1			2	2
Laceration: with sutures/staples	0	1	0	0	0	0	1				1	1	2
Lethargy	0	1	0	0	0	0	1					0	1
No Injury/NA	9	20	5	9	9	12	64	2	14	5	7	28	92
Other	0	1	0	0	1	0	2				1	1	3
Pain, Specified	0	4	0	0	1	2	7				1	1	8
Totals	13	36	8	12	16	16	101	4	21	9	13	47	148

Table 6 -Cause of Incidents in the Long Term Care Facility

Cause	3A	3B	5A	6A	6B	Count
Accident-Injury	2	5	8	1	3	19
Aggression	6			1		7
Alleged Pt. Abuse		1	1			2
Assault, Pt./Pt	3	2	7	9	1	22
Assault, Pt./Staff	1	2		1		4
Change in Medical Status-Stabilized			3			3
Change in Medical Status-Transferred			1	1		2
Fall Type 1-Injury with treatment		2	6	2	2	12
Fall Type 2-No treatment needed			5	1	1	7
Medication Error	3			4		7
Other	3		2	3	1	9
Property Damage			2	1		3
Self-Injurious behavior		1	1			2
Totals	18	13	36	24	8	99

Table 7 - Effect of Incidents in the Long Term Care Facility

EFFECT	3A	3B	5A	6A	6B	Count
Abrasion/scrape/scratch/hematoma	2	2	11	2	4	21
Bruise/contusion/discoloration	1	2	6		1	10
Edema/swelling			1			1
Epistaxis		1				1
Erythema/redness		2				2
Laceration: NO sutures/staples/steri-strips		1		1		2
Laceration: with steristrips/glue					1	1
No Injury/NA	15	4	15	20	2	56
Pain, Specified		1	3			4
Unconscious/Unresponsive				1		1
Totals	18	13	36	24	8	99

Act-21-Sexual Responsibility & Treatment Program at Torrance State Hospital

In July 2003, the Pennsylvania Legislature enacted Act 21 for adjudicated youth, aging out of the juvenile justice system who have a "mental abnormality" that renders them unable to control their violent sexual impulses. The Act mandates the state to provide mental health and sex-offense specific treatment to an identified population that had been adjudicated of certain sex crimes, received treatment in a juvenile program, yet remains a significant risk to sexually re-offend after reaching the age of 21, an age when oversight by the juvenile justice system typically ends. The Act requires the referral of such individuals who have committed these specific crimes to the Pennsylvania Sexual Offenders Assessment Board (SOAB) ninety days prior to their 20th birthday for purposes of determining if the individual has "serious difficulty in controlling sexually violent behavior." If so determined, a petition for a mental health hearing will be made for determination of civil commitment to the Sexual Responsibility and Treatment Program (SRTP) on the grounds of Torrance State Hospital. On July 1, 2006 the operation of this program transferred from an independent contractor to the Torrance State Hospital.

Table 8 - Cause of Incidents in the Sexual Responsibility and Treatment Program

Cause	TOR	Count
Accident-Injury	1	1
Aggression	2	2
Seizure	1	1
Self-Injurious behavior	1	1
Totals	5	5

Table 9 - Effect of Incidents in the Sexual Responsibility and Treatment Program

Primary Effect	TOR	Count
Abrasion/scrape/scratch/hematoma	1	1
Erythema/redness	1	1
Fracture	1	1
No Injury/NA	1	1
Pain, Specified	1	1
Totals	5	5

Physical Health Measures

The National Association of State Mental Health Program Directors (NASMHPD) issued a report in October 2006 about mortality and morbidity in people with serious mental illness (SMI). According to Mental Health America's *Survey of People with Schizophrenia and Providers* (www.mentalhealthamerica.net), the NASMHPD report revealed that people with SMI die on average 25 years earlier than the general population. The major natural causes of death for people with SMI are heart disease, diabetes, respiratory disease and infectious disease. Many of the risk factors for these diseases are modifiable. Beginning June 2008, the state began compiling and comparing data on the number of tobacco users (Table 10) in our state hospitals. Beginning July 2008, the state began compiling and comparing data on the number of consumers who have a diagnosis of diabetes (Table 11).

Table 10 - Tobacco Users on Last Day of Month Civil and Long Term Care

Month	Tobacco Users	CLA	DAN	NOR	TOR	WAR	WER	Civil Total	LTC	System Total
Aug-12	Total Users	124	68	98	99	86	122	597	22	619
	% of Census	57%	40%	60%	50%	52%	47%	51%	16%	40%
Nov-12	Total Users	130	70	95	96	94	131	616	22	638
	% of Census	60%	41%	61%	46%	55%	50%	52%	16%	40%
Feb-13	Total Users	136	59	85	106	88	123	597	22	619
	% of Census	62%	36%	61%	53%	51%	47%	52%	16%	40%
Jun-13	Total Users	127	66	93	96	103	119	604	22	626
	% of Census	59%	40%	69%	49%	57%	46%	52%	15%	40%

Table 11 - Diabetes

Jun-13	Civil Hospitals							Forensic Centers			A21	LTC	Sys
	Cla	Dan	Nor	Tor	War	Wer	Ttl	Nor	Tor	Total	A21	SMRC	
Patient Census	216	166	134	196	182	258	1152	128	97	225	37	143	1557
Count	33	32	21	43	40	70	239	14	9	23	0	47	309
% w/ Diabetes	15%	19%	16%	22%	22%	27%	21%	11%	9%	10%	0%	33%	20%

Table 12 - Reasons for Hospitalizations as the Result of an Incident, All Levels of Care

The Risk Management System requires that an incident report form be completed anytime a person is transported from a state hospital to an acute care hospital. This includes if the person was only seen in the emergency room, received diagnostic tests and/or was actually admitted. It does **not** include hospitalizations for a preplanned procedure, test or surgery.

Primary Effect	CLA	DAN	NOR	SMO	TOR	WAR	WER	Count
Abrasion/scrape/scratch/hematoma						1		1
Asphyxiation					1			1
Body System Illness	4		1		2	1		8
Bruise/contusion/dicoloration						1		1
Cellulitis		2						2
Edema/swelling			1					1
Emesis					1			1
Fracture					1	1		2
Ingestion of foreign body					2	2	4	8
Laceration: NO sutures/staples/steri-strips			1					1
Laceration: with steristrips/glue			1					1
Laceration: with sutures/staples		1	1		1		1	4
No Injury/NA						1	2	3
Other			1		1	1	2	5
Pain, Specified		1	3	1	1	1	2	9
Respiratory Distress	3							3
Unconscious/Unresponsive			1	1			1	3
Totals	7	4	10	2	10	9	12	54

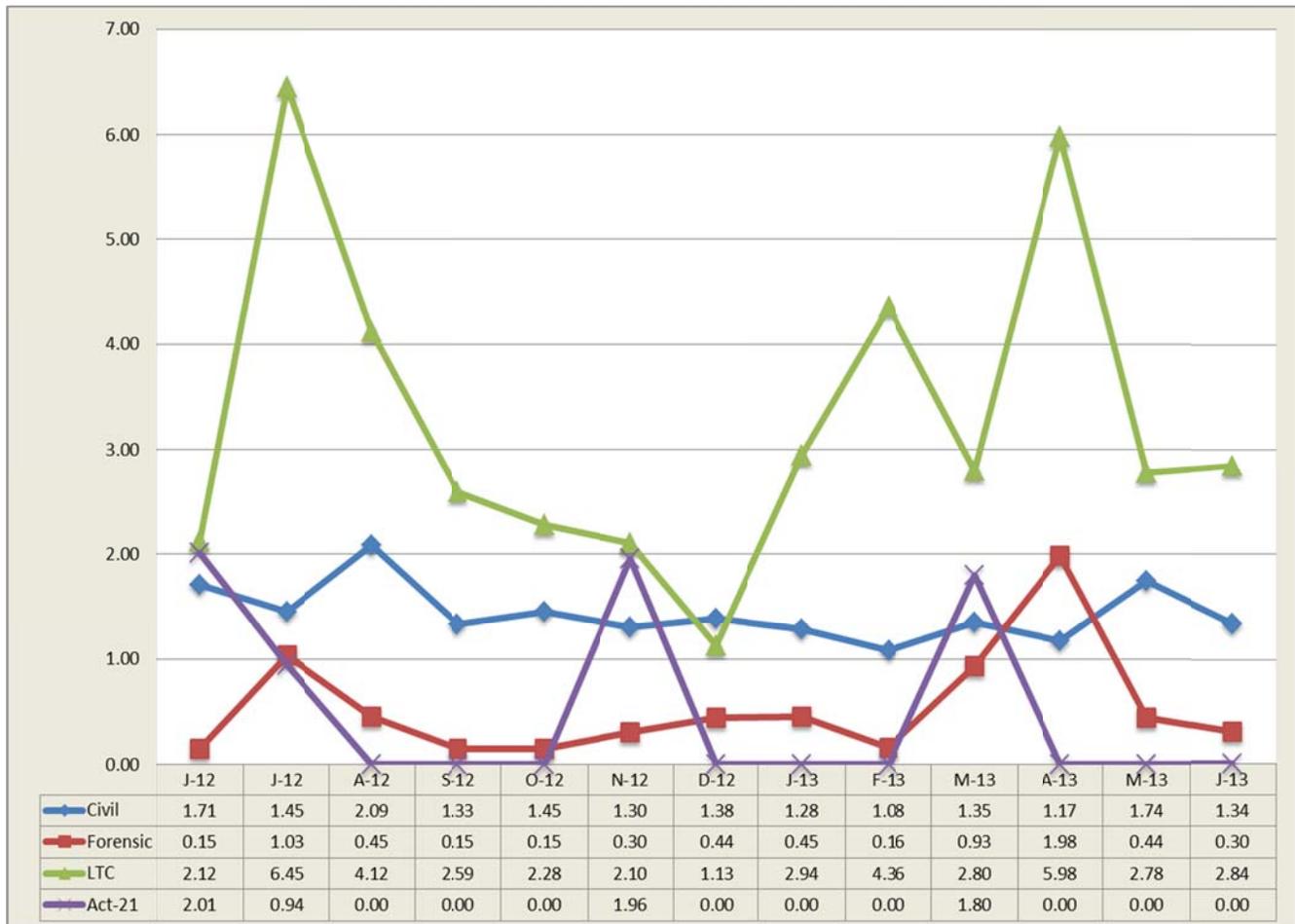
Falls

Falls within the state hospital risk management system are divided into two categories, type 1 and type 2, with the need for medical intervention or lack thereof defining the difference. The following data relates to falls, type 1 which are defined as an involuntary descent to a lower position, excluding seizures, that is witnessed or reported and requires medical intervention.

Table 13 - 13-Month Rate of Type 1 Falls Per 1,000 Days-of-Care

M/Year	Civil Hospital							Forensic			A21	LTC	Sys Avg
	Cla	Dan	Nor	Tor	War	Wer	Ttl	Nor	Tor	Total	A21	SMRC	
Jun-12	1.69	1.36	0.89	1.92	2.30	2.01	1.71	0.00	0.36	0.15	2.01	2.12	1.54
Jul-12	1.04	0.76	1.33	2.21	1.51	1.70	1.45	1.23	0.73	1.03	0.94	6.45	1.82
Aug-12	1.78	2.46	1.93	3.37	1.15	1.89	2.09	0.25	0.74	0.45	0.00	4.12	1.82
Sep-12	1.07	0.97	2.30	1.20	1.60	1.14	1.33	0.00	0.39	0.15	0.00	2.59	1.26
Oct-12	1.32	2.82	1.44	1.65	1.14	0.73	1.45	0.25	0.00	0.15	0.00	2.28	1.32
Nov-12	1.22	1.79	2.56	1.01	1.35	0.38	1.30	0.51	0.00	0.30	1.96	2.10	1.23
Dec-12	0.89	2.30	2.94	1.33	1.11	0.50	1.38	0.25	0.73	0.44	0.00	1.13	1.20
Jan-13	1.91	2.51	0.64	1.01	0.92	0.75	1.28	0.77	0.00	0.45	0.00	2.94	1.29
Feb-13	0.82	2.85	0.25	1.11	0.61	0.96	1.08	0.28	0.00	0.16	0.00	4.36	1.22
Mar-13	0.73	2.60	0.50	1.66	0.72	1.74	1.35	1.10	0.70	0.93	1.80	2.80	1.44
Apr-13	1.52	1.25	0.00	1.04	1.33	1.44	1.17	2.77	0.77	1.98	0.00	5.98	1.69
May-13	2.36	2.74	1.89	1.35	1.08	1.26	1.74	0.74	0.00	0.44	0.00	2.78	1.61
Jun-13	1.84	3.44	0.99	0.88	0.74	0.52	1.34	0.00	0.72	0.30	0.00	2.84	1.61

13-Month Trend of Type 1 Falls by Type of Care per 1,000 Days-of-Care



State Hospital Use of Seclusion

Civil and Forensic

Data on seclusion use for psychiatric reasons includes the civil and forensic populations and is reported for both monthly and yearly totals.

Table 14 - Hours of Seclusion Use, Monthly Totals for Past Year

No use in past 12 month period.

Table 15 - Number of Seclusion Events, Monthly Totals for Past Year

No use in past 12 month period.

State Hospital Use of Mechanical Restraint

Civil and Forensic

Data on mechanical restraint use for psychiatric reasons includes the forensic and civil populations and is reported for both monthly and yearly totals.

Table 16 - Total Hours of Mechanical Restraint Use by Hospital and Unit In Month

ABV	WARD	Total Hrs
NOR	51A2	1.50

Table 17 - Hours of Mechanical Restraint Use, Monthly Totals for Past Year

ABV	Total	Jul_12	Aug_12	Sep_12	Oct_12	Nov_12	Dec_12	Jan_13	Feb_13	Mar_13	Apr_13	May_13	Jun_13
NOR	5.25	0.00	0.50	0.00	2.50	0.00	0.00	0.00	0.00	0.75	0.00	0.00	1.50
WER	29.15	1.67	12.10	0.42	0.00	3.50	2.87	3.23	5.37	0.00	0.00	0.00	0.00

Table 18 - Number of Mechanical Restraint Events, Monthly Totals for Past Year

ABV	Total	Jul_12	Aug_12	Sep_12	Oct_12	Nov_12	Dec_12	Jan_13	Feb_13	Mar_13	Apr_13	May_13	Jun_13
NOR	6	0	1	0	3	0	0	0	0	1	0	0	1
WER	15	1	6	1	0	1	2	2	2	0	0	0	0

State Hospital Use of Physical Holds

Civil and Forensic

Data on physical holds use for psychiatric reasons includes the civil and forensic populations and is reported for both monthly and yearly totals. Physical hold events lasting less than 60 seconds are reflected as 0.00 hours.

Table 19 - Hours of Physical Holds (Restraint) Used by Hospital & Unit

ABV	WARD	Total	ABV	WARD	Total	ABV	WARD	Total
WAR	3SW	2.33	WAR	3NM	0.25	NOR	10C1	0.04
TOR	FC2	1.43	CLA	3	0.22	NOR	51C1	0.03
CLA	6	1.28	WER	35-2	0.20	DAN	210	0.02
WER	34-4	1.15	NOR	51B2	0.18	WER	37-4	0.02
TOR	FB4	1.02	TOR	FC1	0.17	DAN	311	0.02
TOR	012	1.00	CLA	9	0.17	WAR	IBE	0.02
WER	34-2	0.85	NOR	51A2	0.13	WER	35-3	0.01
WER	37-3	0.69	WER	37-1	0.12	DAN	310	0.01
TOR	023	0.55	CLA	2	0.08	CLA	4	0.01
DAN	312	0.38	NOR	51B1	0.08	WER	35-4	0.00
NOR	10A1	0.31	NOR	01A1	0.08			
NOR	01C1	0.07	DAN	212	0.05			

Table 20 - Hours of Physical Holds (Restraint) Use, Monthly Totals for Past Year

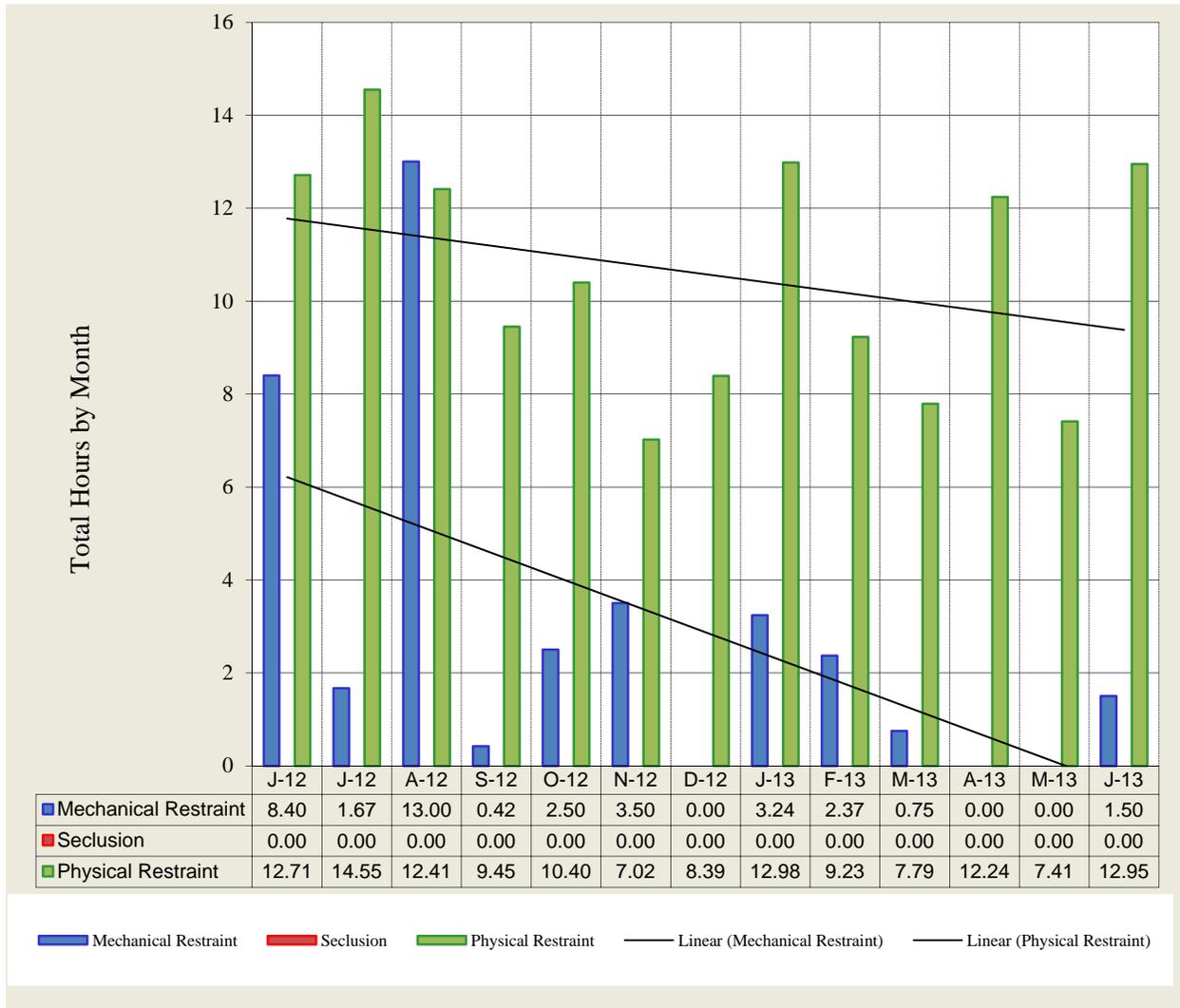
ABV	Total	Jul_12	Aug_12	Sep_12	Oct_12	Nov_12	Dec_12	Jan_13	Feb_13	Mar_13	Apr_13	May_13	Jun_13
CLA	12.00	0.43	0.70	1.33	1.88	1.25	0.48	1.23	1.48	0.45	0.21	0.80	1.75
DAN	14.62	3.92	1.47	0.50	1.08	0.91	1.13	0.82	1.85	0.78	0.55	1.12	0.49
NOR	10.88	0.89	1.11	0.59	1.25	0.77	0.86	0.55	0.83	1.26	1.37	0.49	0.91
TOR	34.74	1.05	2.74	3.97	3.21	2.33	1.97	2.97	2.47	2.82	5.17	1.88	4.17
WAR	19.62	2.33	0.33	0.57	2.15	0.52	2.03	1.53	0.77	2.08	3.15	1.57	2.60
WER	36.43	6.52	6.09	2.64	1.89	1.26	2.92	5.92	1.87	0.52	2.16	1.63	3.03

Table 21 - Number of Physical Holds (Restraint) Events, Monthly Totals for Past Year

ABV	Total	Jul_12	Aug_12	Sep_12	Oct_12	Nov_12	Dec_12	Jan_13	Feb_13	Mar_13	Apr_13	May_13	Jun_13
CLA	196	7	10	20	22	20	11	16	35	12	6	14	23
DAN	252	27	17	12	25	15	19	10	22	16	28	44	17
NOR	352	41	26	17	33	27	29	31	40	27	35	19	27
TOR	218	9	21	16	30	12	11	19	12	23	29	15	21
WAR	88	12	6	4	7	5	11	12	6	2	10	9	4
WER	248	38	27	16	12	21	22	24	24	8	22	15	19

13-Month Trend of Mechanical Restraint, Physical Restraint and Seclusion Use

The following table represents the total hours of mechanical restraint use, physical restraint use and seclusion use for last 12 month period. This data includes the forensic and civil populations with the data being reported to the second and expressed below as a percentage of an hour.



Medication Measures

Beginning in September 2008 the OMHSAS Bureau of Community and Hospital Operations identified the following three medication measures for inclusion in this monthly report. The table information is compiled from the QS1 pharmacy software and reflects the unique count of the number of people served at each hospital on the last day of the month for each measure.

Table 22 - Benzodiazepines

Measure Definition: *Benzodiazepines refers to the number of unique patients served at each hospital, by level-of-care, who have an active, straight order for any benzodiazepine medication on the last day of each month.*

BZD								Forensic			SRTP	Sys
M/Y	Cl	Dan	Nor	Tor	War	Wer	Total	Nor	Tor	Cnt	Tor	Total
Aug-12	153	97	97	89	102	151	689	48	16	64	5	758
Nov-12	150	87	92	91	99	151	670	48	13	61	5	736
Feb-13	145	90	80	93	105	147	660	39	14	53	6	719
Jun-13	139	85	77	84	101	142	628	44	16	60	7	695

Table 23 - Multiple Atypicals

Measure Definition: *Multiple Atypicals refers to the number of unique patients served at each hospital, by level-of-care, who have an active, straight order for two or more atypical antipsychotic medications on the last day of each month.*

Multiple Atypicals								Forensic			SRTP	Sys
M/Y	Cl	Dan	Nor	Tor	War	Wer	Total	Nor	Tor	Cnt	Tor	Total
Aug-12	14	39	15	55	30	25	178	7	7	14	0	192
Nov-12	10	37	14	49	40	23	173	3	3	6	0	179
Feb-13	13	33	11	53	36	26	172	3	9	12	0	184
Jun-13	17	38	9	40	30	26	160	5	6	11	0	171

Table 24 - Typical-Atypical

Measure Definition: *Typical-Atypicals refers to the number of unique patients served at each hospital, by level-of-care, who have an active, straight order for a typical and an atypical antipsychotic medication on the last day of each month.*

Typical - Atypical								Forensic			SRTP	Sys
M/Y	Cl	Dan	Nor	Tor	War	Wer	Total	Nor	Tor	Cnt	Tor	Total
Aug-12	56	46	88	73	45	119	427	28	14	42	0	469
Nov-12	63	68	88	63	43	120	445	28	18	46	0	491
Feb-13	60	62	88	72	45	121	448	28	12	40	0	488
Jun-13	65	58	67	79	51	112	432	40	14	54	0	486

Assaults

Assaults within the state hospital system are defined as any aggressive act by a patient, involving physical contact that may or may not result in injury. Assaults can be directed at a peer, staff or any other individual. The system was designed to require an incident report (form SI-815) on any patient involved in a physical altercation regardless of who may have started the assault. Therefore, every patient-to-patient altercation will result in at least two incident reports.

Table 25 - Patient-to-Patient Assaults by Unit, All Levels of Care

ABV	WARD	Cnt									
NOR	51A2	24	WER	35-2	8	WER	37-3	4	TOR	FC1	2
WER	37-2	17	SMO	5A	7	WER	35-4	4	TOR	FC2	2
NOR	51C2	13	WAR	3NM	7	WER	34-4	4	NOR	10C1	2
WER	35-3	11	TOR	FB4	6	TOR	012	4	SMO	3B	2
WER	34-2	11	DAN	312	6	TOR	011	4	WAR	IBE	1
NOR	10A1	11	TOR	023	6	DAN	212	3	CLA	9	1
DAN	210	10	WAR	3SW	6	WAR	3IM	3	WAR	2SW	1
NOR	01C1	10	NOR	51C1	6	SMO	3A	3	SMO	6B	1
SMO	6A	9	WER	37-4	6	CLA	3	2			
NOR	01A1	9	NOR	51B2	5	CLA	6	2			
CLA	2	9	NOR	51B1	5	CLA	8	2			
CLA	7	8	TOR	013	4	TOR	FB3	2			

Table 26 - Rate of Patient-to-Patient Assaults Events with Patient Injury per 1,000 Days-of-Care

Pt.-to-Pt. Assault w/ any Injury	Civil							Forensic			SRTP
	Cla	Dan	Nor	Tor	War	Wer	Tot.	Nor	Tor	Tot.	
Jun-12	1.38	2.13	2.85	1.40	0.77	1.75	1.71	7.93	1.81	5.39	2.04
Jul-12	0.30	1.52	0.57	1.19	0.94	0.85	0.87	8.58	0.36	5.28	0.00
Aug-12	1.04	1.52	2.89	1.18	0.58	1.01	1.32	7.44	2.61	5.51	0.92
Sep-12	1.07	2.52	2.71	1.88	0.60	1.77	1.73	5.89	1.18	4.02	0.00
Oct-12	1.17	1.69	1.85	0.49	0.38	1.46	1.18	7.85	0.39	4.95	0.00
Nov-12	2.90	1.59	2.56	0.67	1.35	1.14	1.67	6.09	0.75	3.93	0.98
Dec-12	0.74	1.92	3.15	1.00	0.55	1.49	1.41	4.68	0.73	3.09	1.48
Jan-13	0.88	0.77	1.71	0.51	1.66	1.99	1.28	4.35	1.10	3.02	0.00
Feb-13	0.98	2.63	1.99	1.66	0.61	1.37	1.48	6.06	1.91	4.32	0.00
Mar-13	1.32	1.40	4.23	0.83	0.36	1.74	1.52	3.58	1.40	2.62	1.80
Apr-13	0.76	2.50	2.17	1.90	0.76	1.57	1.55	5.04	0.38	3.19	0.91
May-13	1.03	1.37	4.25	0.84	0.54	1.13	1.38	4.43	1.44	3.22	0.00
Jun-13	1.23	0.81	2.72	0.35	0.37	0.91	0.99	5.93	1.44	4.06	0.00

Table 27 - Patient-to-Staff Assault Events by Unit, All Levels of Care

ABV	WARD	Cnt									
WER	34-2	6	TOR	FC2	3	WER	34-4	2	SMO	6A	1
WER	35-2	5	DAN	212	3	WER	35-4	2	TOR	012	1
WAR	3SW	5	NOR	01C1	2	CLA	4	2	TOR	014	1
CLA	6	5	NOR	01A1	2	DAN	310	1	TOR	022	1
TOR	FB4	4	WER	37-4	2	DAN	311	1	TOR	FC1	1
DAN	312	4	DAN	210	2	CLA	9	1	WAR	2NM	1
WER	37-2	3	NOR	10C1	2	NOR	10A1	1	WER	37-3	1
NOR	51A2	3	TOR	023	2	NOR	51A1	1	SMO	3A	1
WAR	3NM	3	SMO	3B	2	NOR	51B1	1			
NOR	51C1	3	WAR	3IM	2	CLA	3	1			

Table 28 - Rate of Patient-to-Staff Assault Events with Injury to Staff per 1,000 Days-of-Care

Pt/Staff Assault w/ Staff Inj per 1K days	Civil							Forensic			S RTP
	Cl a	Dan	Nor	Tor	War	Wer	Tot.	Nor	Tor	Tot.	S RTP
Jun-12	0.77	0.19	0.36	1.40	0.19	1.63	0.83	0.51	0.36	0.45	0.00
Jul-12	0.59	0.76	0.57	0.51	0.00	1.95	0.82	1.47	0.36	1.03	0.00
Aug-12	0.44	1.14	0.58	1.35	0.96	2.27	1.18	0.50	0.00	0.30	0.00
Sep-12	0.46	0.97	2.09	1.20	1.60	0.88	1.13	1.02	0.00	0.62	0.95
Oct-12	0.15	0.38	1.65	0.16	0.00	0.85	0.52	2.21	0.77	1.65	0.00
Nov-12	0.31	1.39	1.28	0.51	0.19	0.51	0.68	1.27	0.37	0.91	0.98
Dec-12	0.15	0.96	1.05	0.33	0.37	0.99	0.63	0.99	0.36	0.73	0.00
Jan-13	0.15	0.58	0.21	0.17	1.29	0.75	0.75	2.05	0.37	1.36	0.00
Feb-13	0.33	0.88	0.50	0.18	0.81	0.82	0.59	0.55	0.00	0.32	1.02
Mar-13	0.29	1.20	1.49	0.50	1.08	0.87	0.85	0.83	0.70	0.77	0.00
Apr-13	0.00	0.63	0.97	0.69	1.14	1.18	0.76	0.25	0.38	0.30	0.00
May-13	0.15	0.59	1.18	0.00	1.08	1.13	0.67	0.49	0.36	0.44	0.00
Jun-13	0.15	0.40	1.24	0.18	0.93	0.91	0.61	1.29	1.08	1.20	0.00