



**pennsylvania**

DEPARTMENT OF HUMAN SERVICES  
OFFICE OF MENTAL HEALTH AND  
SUBSTANCE ABUSE SERVICES



*Pennsylvania State Hospital Risk Management Summary and Indicator Report  
December 2022*

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## 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. Past reports can be found on the DHS website using the following link.

<http://www.dhs.pa.gov/publications/forproviders/statehospitalriskmanagementsummaryreports/>

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.dhs.pa.gov/> .)

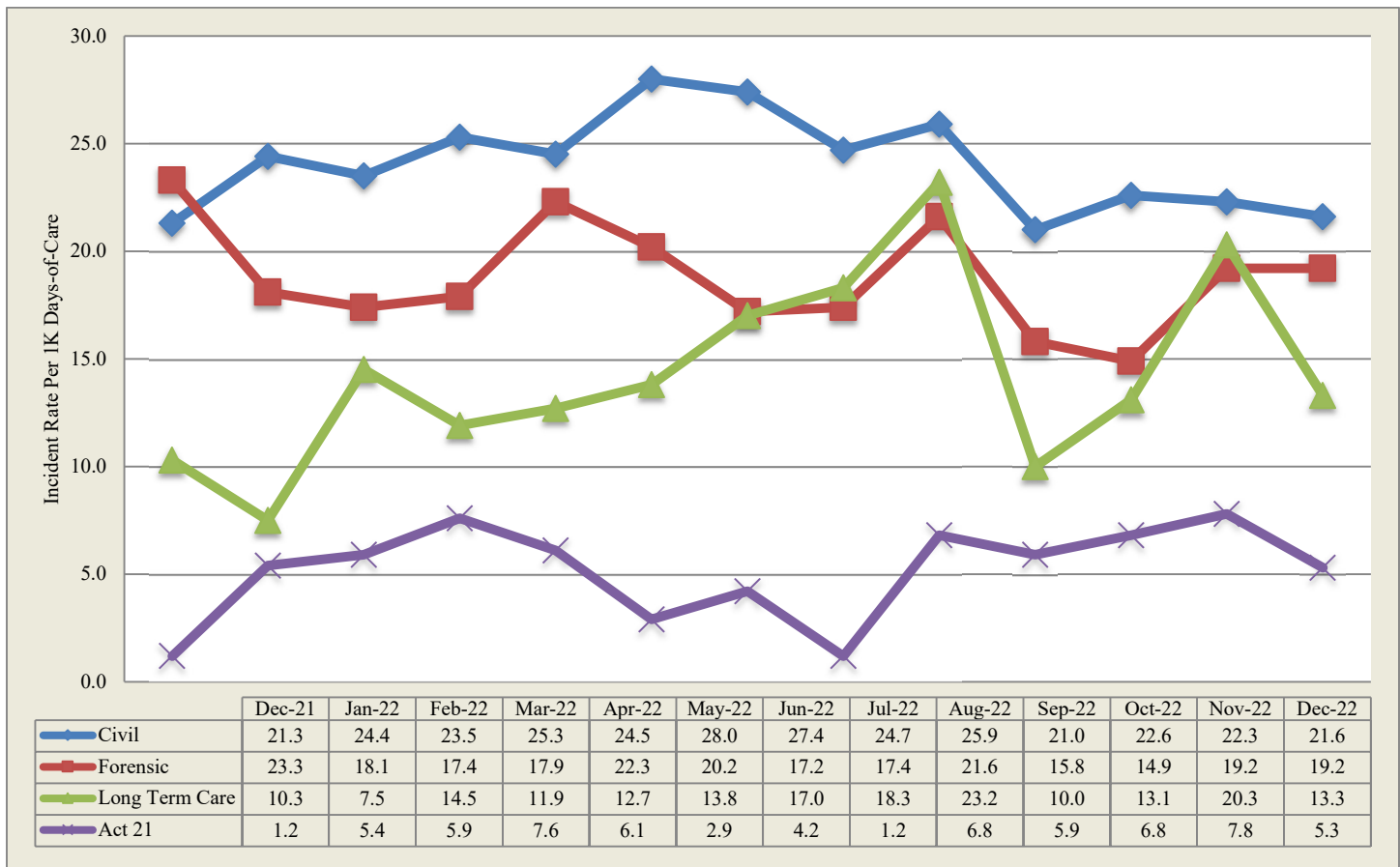
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During **December 2022**, a total of **890** incident reports were completed by the state hospital system. Additional records addressing specific categories from the previous month were included on page 4 of this report. The following is a breakdown of incidents by individual facility and type of care:

**Table 1 - Number of Incident Reports**

	Census 12/31/2022	Days Provided	Incidents	Per 1000 Days-of-Care
Clarks Summit	144	4513	55	12.2
Danville	156	4833	145	30.0
Norristown	118	3653	85	23.3
Torrance	145	4384	86	19.6
Warren	142	4367	132	30.2
Wernersville	261	8107	143	17.6
<b>Total Civil</b>	966	29857	646	21.6
<b>Forensic</b>				
Norristown	235	7068	143	20.2
Torrance	98	3128	53	16.9
<b>Total Forensic</b>	333	10196	196	19.2
<b>Act 21</b>				
Act 21	62	1701	9	5.3
<b>Total Act 21</b>	62	1701	9	5.3
<b>Long Term Care</b>				
South Mountain	95	2939	39	13.3
<b>Total L. T. C.</b>	95	2939	39	13.3
<b>Total</b>	1456	44693	890	19.9

**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	Jul_22	Aug_22	Sep_22	Oct_22	Nov_22	Dec_22
Accident-Injury	141	20	33	17	29	24	18
Adverse Drug Reaction	8	2	1		1	2	2
Aggression	913	166	164	118	172	144	149
Airway Obstruction type 1 Intervention	10	2		2		2	4
Airway Obstruction type 2 No Intervention	7	1	2			1	3
Alleged Nonconsensual Sexual Activity	7			2	2	2	1
Alleged Pt. Abuse	38	4	5	13	5	5	6
Assault, Pt./Pt	1398	255	239	207	199	248	250
Assault, Pt./Staff	305	58	47	47	39	44	70
AWOL/UA	27	9	3	4	4	3	4
AWOL-Attempt	28	3	4	4	9	5	3
AWOL-Late	15	1	5	3	1	4	1
Change in Medical Status-Stabilized	20	5	1	3	7	3	1
Change in Medical Status-Transferred	283	37	50	43	62	40	51
Communications Sys. Misuse	51	4	12	8	12	8	7
Community Incident	4			1	2		1
Contraband Possession	64	8	18	8	11	9	10
Fall Type 1-Injury with treatment	219	48	45	30	40	30	26
Fall Type 2-No treatment needed	631	110	113	114	116	87	91
Family Concern	3		1			1	1
Illicit Substance Use/Possession	1						1
Indeterminate/Unconfirmed Cause of Injury	47	4	5	9	10	10	9
Medication Error	94	16	23	10	12	16	17
Missing Property	6			2	1	1	2
Other	199	34	43	19	35	38	30
Procedural Treatment Error	19	6	2	4	4	2	1
Property Damage	82	13	15	7	14	12	21
Seizure	28	6	6	7	2	3	4
Self-Injurious behavior	642	123	157	93	67	115	87
Sexual Behavior	46	9	9	4	8	5	11
Smoking Violation	11	3	3	4	1		
Substantiated Patient Abuse	13	1	8	1	1	1	1
Suicide Attempt	8	4			2	2	
Suicide threat/plan	32	6	6	6	6	6	2
Theft	8		1	1	6		
Unknown	1	1					
Unsubstantiated Nonconsensual Sexual	6	1		1			4
Unsubstantiated Patient Abuse	10	2	1	1	2	3	1

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

Primary Cat #	CLA	DAN	NOR	TOR	WAR	WER	Count
Accident-Injury	1	3	0	2	2	2	10
Adverse Drug Reaction	0	0	0	1	0	0	1
Aggression	2	13	11	15	40	19	100
Airway Obstruction type 1 Intervention	2	2	0	0	0	0	4
Airway Obstruction type 2 No Intervention	0	0	0	0	3	0	3
Alleged Pt. Abuse	2	0	1	0	0	1	4
Assault, Pt./Pt	12	26	42	21	22	48	171
Assault, Pt./Staff	3	11	4	3	9	5	35
AWOL/UA	0	1	0	1	0	2	4
AWOL-Attempt	0	0	1	0	0	1	2
AWOL-Late	0	0	0	0	0	1	1
Change in Medical Status-Transferred	2	7	5	8	3	16	41
Communications Sys. Misuse	5	0	0	0	2	0	7
Community Incident	0	0	0	1	0	0	1
Contraband Possession	0	1	0	1	2	4	8
Fall Type 1-Injury with treatment	5	1	3	5	0	4	18
Fall Type 2-No treatment needed	6	27	4	9	21	13	80
Family Concern	1	0	0	0	0	0	1
Illicit Substance Use/Possession	0	0	0	1	0	0	1
Indeterminate/Unconfirmed Cause of Injury	0	1	0	3	1	0	5
Medication Error	0	12	0	0	0	0	12
Missing Property	1	1	0	0	0	0	2
Other	0	3	0	4	2	6	15
Property Damage	1	14	3	0	2	1	21
Seizure	0	0	1	0	2	1	4
Self-Injurious behavior	11	19	9	9	16	15	79
Sexual Behavior	1	1	0	2	2	2	8
Substantiated Patient Abuse	0	0	0	0	0	1	1
Suicide threat/plan	0	0	1	0	1	0	2
Unsubstantiated Nonconsensual Sexual Activity	0	2	0	0	2	0	4
Unsubstantiated Patient Abuse	0	0	0	0	0	1	1
Totals	55	145	85	86	132	143	646

**Table 3 - Primary Effect of Incidents in the Civil Hospitals**

Primary effect	CLA	DAN	NOR	TOR	WAR	WER	Count
Abrasion/scrape/scratch/hematoma	13	9	6	12	8	16	64
Allergic reaction	0	0	0	1	0	0	1
Asphyxiation	2	0	0	0	0	0	2
Bite-Human	1	1	0	1	0	0	3
Blister	0	0	0	0	0	1	1
Body System Illness	0	3	0	0	3	0	6
Bruise/contusion/discoloration	0	1	2	7	3	5	18
Death	0	1	0	0	0	0	1
Edema/swelling	1	0	3	1	5	3	13
Emesis	0	0	0	1	1	2	4
Epistaxis	2	0	0	0	0	0	2
Erythema/redness	0	6	1	3	2	2	14
Fever	0	3	0	1	0	1	5
Fracture	0	1	1	0	0	0	2
Ingestion of foreign body	1	0	1	0	0	6	8
Laceration: NO sutures/staples/steri-strips	2	1	2	3	1	3	12
Laceration: with steristrips/glue	0	0	0	0	0	1	1
Laceration: with sutures/staples	0	0	1	1	0	0	2
Lethargy	1	1	0	0	0	4	6
No Injury/NA	28	107	54	45	104	84	422
Other	0	1	2	8	1	2	14
Pain unspecified	0	0	2	0	0	0	2
Pain, Specified	4	8	9	1	4	10	36
Respiratory Distress	0	1	0	0	0	3	4
Seizure	0	0	1	0	0	0	1
Syncopal episode	0	0	0	1	0	0	1
Unconscious/Unresponsive	0	1	0	0	0	0	1
Totals	55	145	85	86	132	143	646

**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	10D1	10D2	10E1	10E2	Total	FB3	FB4	FC1	FC2	Total	Count
Accident-Injury											0				1	1	1
Aggression	2	6		3	2	3			6	8	30	4	1	3	4	12	42
Alleged Nonconsensual Sexual Activity		1									1					0	1
Alleged Pt. Abuse					1		1				2					0	2
Assault, Pt./Pt	5	6		4	4	4	4	6	18	12	63	5	1	7	1	14	77
Assault, Pt./Staff	2	8	1	1	1	2		1	1	14	31	1			3	4	35
AWOL-Attempt										1	1					0	1
Change in Medical Status-Stabilized				1							1					0	1
Change in Medical Status-Transferred									1		1	1	1	1		3	4
Fall Type 1-Injury with treatment										1	1	1				1	2
Fall Type 2-No treatment needed	1										1	2	1			3	4
Indeterminate/Unconfirmed Cause of Injury						1			1	1	3					0	3
Medication Error						1			1		2					0	2
Other				1	1	2				1	5		2		4	6	11
Procedural Treatment Error					1						1					0	1
Self-Injurious behavior											0		6		2	8	8
Sexual Behavior											0	1				1	1
Totals	10	21	1	10	10	13	5	7	28	38	143	15	12	11	15	53	196

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

EFFECT	NSH										TSH					Sys	
	51A1	51A2	51B1	51C1	51C2	51B2	10D1	10D2	10E1	10E2	Total	FB3	FB4	FC1	FC2	Total	Count
Abrasion/scrape/scratch/hematoma	1	2					2	1	5	5	16	1	2	3		6	22
Allergic reaction				1							1					0	1
Body System Illness											0			1		1	1
Bruise/contusion/discoloration				1					1		2	1			1	2	4
Burn/Scald											0				1	1	1
Edema/swelling	1				1		1		1	1	5	2			1	3	8
Emesis									1		1					0	1
Epistaxis	1	1				1					3					0	3
Erythema/redness											0		1	1		2	2
Ingestion of foreign body											0		4			4	4
Internal injury											0	1				1	1
Laceration: NO sutures/staples/steri-strips	1									1	2				1	1	3
No Injury/NA	6	18	1	4	12	7	2	5	20	30	105	10	4	6	10	30	135
Other				1	1						2				1	1	3
Pain unspecified										1	1					0	1
Pain, Specified				3	1			1			5					0	5
Skin Irritation/Rash											0		1			1	1
Totals	10	21	1	10	13	10	5	7	28	38	143	15	12	11	15	53	196

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

Cause	3A	3B	6B	Count
Accident-Injury	2	4		6
Aggression	5			5
Assault, Pt./Pt	2			2
Change in Medical Status-Transferred	2	1	2	5
Fall Type 1-Injury with treatment	3	1	2	6
Fall Type 2-No treatment needed	6		1	7
Medication Error			3	3
Other		2	1	3
Sexual Behavior			2	2
Totals	20	8	11	39

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

EFFECT	3A	3B	6B	Count
Abrasion/scrape/scratch/hematoma	4	2		6
Body System Illness	1			1
Bruise/contusion/discoloration	1	2	1	4
Death		2	1	3
Emesis			1	1
Fracture		1		1
No Injury/NA	13		6	19
Other	1			1
Pain, Specified			1	1
Respiratory Distress		1	1	2
Totals	20	8	11	39



**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
Adverse Drug Reaction	1	1
Aggression	2	2
Change in Medical Status-Transferred	1	1
Contraband Possession	2	2
Indeterminate/Unconfirmed Cause of Injury	1	1
Other	1	1
Totals	9	9

**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
No Injury/NA	5	5
Pain, Specified	1	1
Visual changes	1	1
Totals	9	9

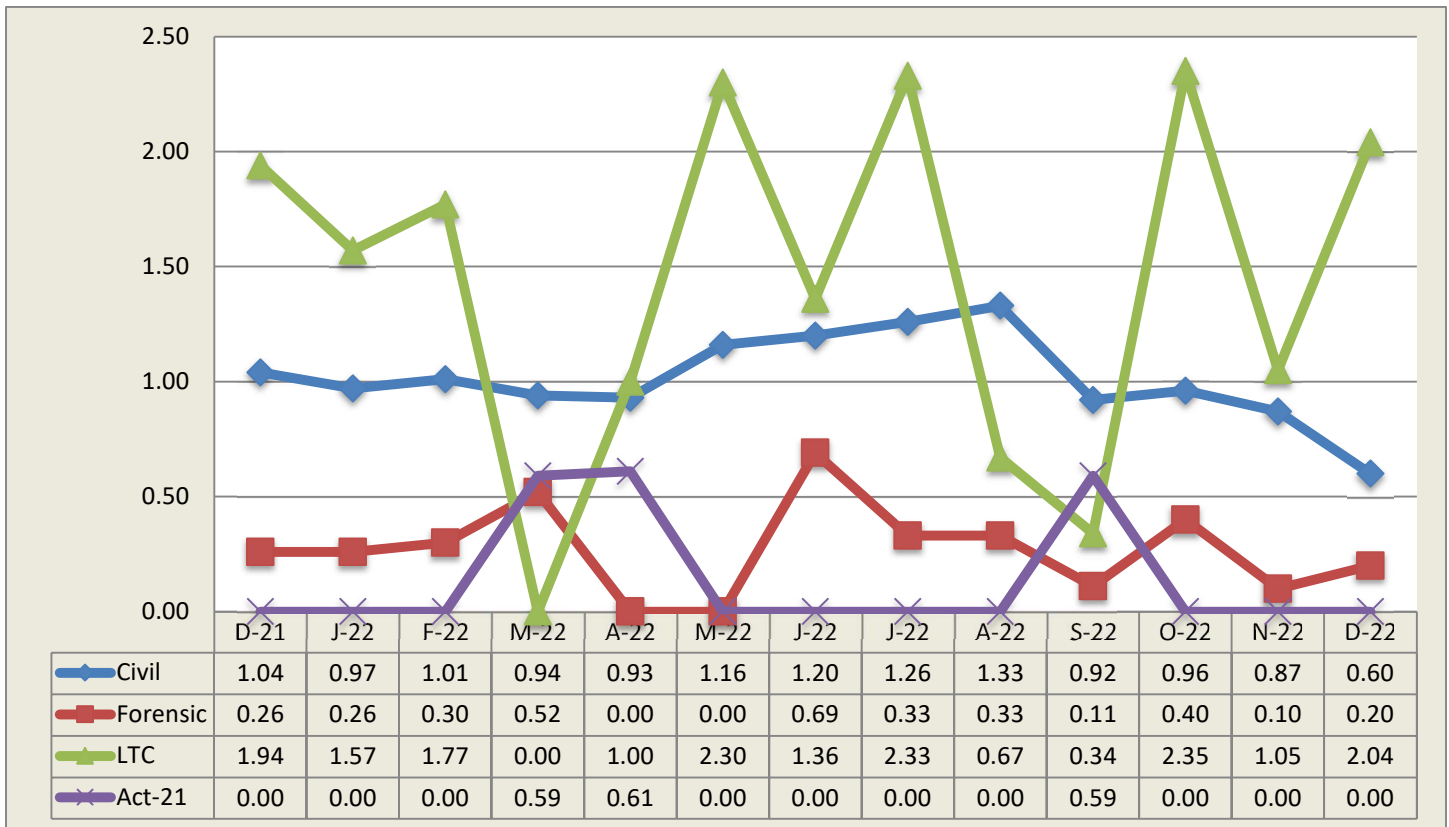
**Falls**

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 10 - 13-Month Rate of Type 1 Falls Per 1,000 Days-of-Care**

M/Year	Civil Hospital							Forensic			A21	LTC	Sys Avg
	Cl	Dan	Nor	Tor	War	Wer	Ttl	Nor	Tor	Total	A21	SMRC	
Dec-21	2.59	0.00	1.82	1.60	0.23	0.64	1.04	0.00	0.98	0.26	0.00	1.94	0.92
Jan-22	2.06	0.20	0.91	1.95	0.22	0.74	0.97	0.36	0.98	0.26	0.00	1.57	0.85
Feb-22	2.56	0.23	0.33	0.96	0.25	1.37	1.01	0.43	0.00	0.30	0.00	1.77	0.90
Mar-22	2.23	0.41	0.60	1.51	0.00	0.86	0.94	0.57	0.39	0.52	0.59	0.00	0.78
Apr-22	1.16	0.84	0.90	2.01	0.46	0.51	0.93	0.00	0.00	0.00	0.61	1.00	0.74
May-22	1.78	0.00	1.47	2.63	0.00	1.23	1.16	0.00	0.00	0.00	0.00	2.30	0.96
Jun-22	2.27	0.64	1.19	1.61	0.00	1.39	1.20	0.35	1.34	0.69	0.00	1.36	1.06
Jul-22	2.97	1.04	1.46	0.88	0.00	1.22	1.26	0.51	0.00	0.33	0.00	2.33	1.09
Aug-22	2.57	0.00	1.75	2.17	0.00	1.48	1.33	0.50	0.00	0.33	0.00	0.67	1.02
Sep-22	2.46	0.00	0.87	0.89	0.00	1.14	0.92	0.00	0.33	0.11	0.59	0.34	0.70
Oct-22	0.22	0.63	1.09	2.05	0.00	1.47	0.96	0.44	0.31	0.40	0.00	2.35	0.89
Nov-22	1.59	0.65	0.28	1.23	0.24	1.03	0.87	0.15	0.00	0.10	0.00	1.05	0.67
Dec-22	1.11	0.21	0.82	1.14	0.00	0.49	0.60	0.14	0.32	0.20	0.00	2.04	0.58

**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 11 - Hours of Seclusion Use, Monthly Totals for Past Year**

No Use of Seclusion in PA State Hospital system since July 2013

**Table 12 - Number of Seclusion Events, Monthly Totals for Past Year**

No Use of Seclusion in PA State Hospital system since July 2013

**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 13 - Total Hours of Mechanical Restraint Use by Hospital and Unit In Month**

No use of Mechanical Restraint in PA State Hospital system since September 2015

**Table 14 - Hours of Mechanical Restraint Use, Monthly Totals for Past Year**

No use of Mechanical Restraint in PA State Hospital system since September 2015

**Table 15 - Number of Mechanical Restraint Events, Monthly Totals for Past Year**

No use of Mechanical Restraint in PA State Hospital system since September 2015

**State Hospital Use of Physical Holds**

Data on physical holds use for psychiatric reasons includes all level of care 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 16 - Hours of Physical Holds (Restraint) Used by Hospital & Unit**

ABV	WARD	Total	ABV	WARD	Total	ABV	WARD	Total
NOR	10E2	0.89	CLA	4	0.05	WER	35-2	0.02
TOR	FC2	0.33	CLA	5	0.05	NOR	51B1	0.02
NOR	51A2	0.20	WER	37-2	0.05	NOR	51B2	0.01
NOR	51C2	0.17	NOR	10E1	0.04	NOR	10D2	0.01
CLA	3	0.15	WAR	3SW	0.03	CLA	6	0.01
WER	37-1	0.09	WAR	3IM	0.03	WER	35-3	0.01
WAR	3IF	0.08	NOR	51A1	0.03	WER	35-4	0.01
NOR	01C1	0.07	DAN	212	0.02	NOR	01C2	0.001
DAN	312	0.06	NOR	51C1	0.02			

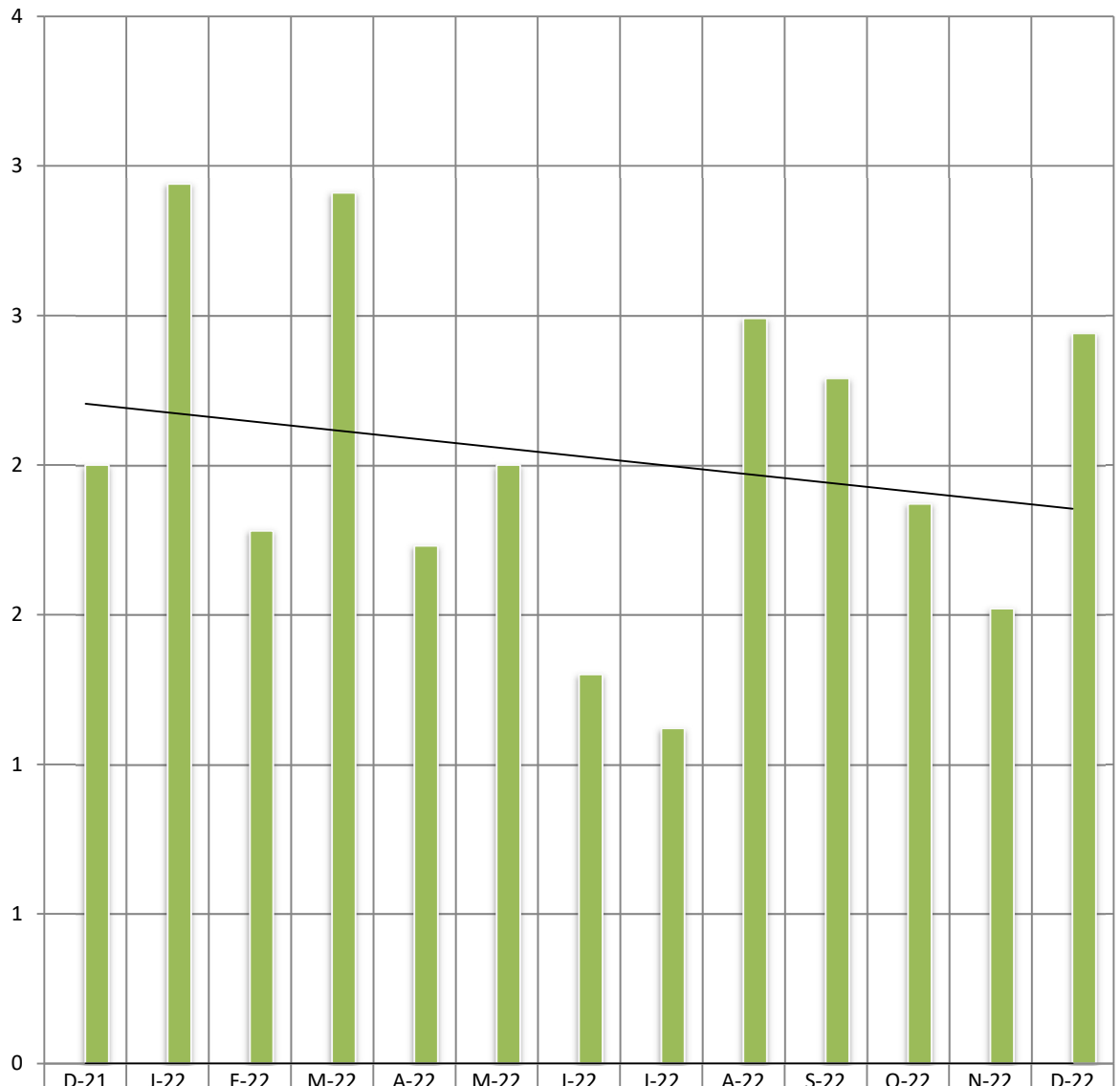
**Table 17 - Hours of Physical Holds (Restraint) Use, Monthly Totals for Past Year**

ABV	Total	Jan_22	Feb_22	Mar_22	Apr_22	May_22	Jun_22	Jul_22	Aug_22	Sep_22	Oct_22	Nov_22	Dec_22
CLA	3.38	1.02	0.00	0.00	0.06	0.21	0.04	0.40	0.35	0.25	0.26	0.53	0.26
DAN	0.79	0.02	0.01	0.04	0.08	0.07	0.00	0.35	0.00	0.05	0.00	0.08	0.08
NOR	9.15	1.59	0.78	1.11	0.52	0.42	0.83	0.42	0.69	0.60	0.33	0.41	1.44
TOR	7.05	0.43	0.18	1.18	0.42	0.65	0.20	0.23	1.23	1.12	0.90	0.17	0.33
WAR	8.31	0.84	0.52	1.78	0.57	0.77	0.63	0.63	0.72	1.09	0.30	0.30	0.15
WER	2.39	0.52	0.53	0.35	0.10	0.06	0.06	0.09	0.17	0.14	0.08	0.08	0.21
<b>Total</b>	<b>31.06</b>	<b>4.42</b>	<b>2.02</b>	<b>4.46</b>	<b>1.74</b>	<b>2.19</b>	<b>1.77</b>	<b>2.13</b>	<b>3.16</b>	<b>3.25</b>	<b>1.87</b>	<b>1.57</b>	<b>2.47</b>

**Table 18 - Number of Physical Holds (Restraint) Events, Monthly Totals for Past Year**

ABV	Total	Jan_22	Feb_22	Mar_22	Apr_22	May_22	Jun_22	Jul_22	Aug_22	Sep_22	Oct_22	Nov_22	Dec_22
CLA	42	3	0	0	2	3	2	2	4	1	6	13	6
DAN	30	2	1	2	4	5	1	3	2	2	0	3	5
NOR	339	37	21	20	34	26	24	24	29	16	20	25	63
TOR	72	4	3	8	5	8	2	4	10	9	15	2	2
WAR	111	9	8	16	12	16	4	4	11	11	8	8	4
WER	47	3	1	2	6	2	5	5	1	4	5	3	10
<b>Total</b>	<b>641</b>	<b>58</b>	<b>34</b>	<b>48</b>	<b>63</b>	<b>60</b>	<b>38</b>	<b>42</b>	<b>57</b>	<b>43</b>	<b>54</b>	<b>54</b>	<b>90</b>

Total Hours by Month



■ Mechanical Restraint	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
■ Physical Restraint	2	2.94	1.78	2.91	1.73	2.00	1.30	1.12	2.49	2.29	1.87	1.52	2.44

■ Mechanical Restraint    
 ■ Physical Restraint    
 — Linear (Mechanical Restraint)    
 — Linear (Physical Restraint)

## 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 19 - Patient-to-Patient Assaults by Unit, All Levels of Care**

ABV	WARD	Cnt	ABV	WARD	Cnt	ABV	WARD	Cnt
NOR	01C1	24	NOR	51A2	6	WER	37-2	4
NOR	10E1	18	WAR	2SW	6	TOR	012	4
WER	37-1	15	WER	34-4	6	WAR	3NM	4
NOR	10E2	12	WER	35-2	6	NOR	51B2	4
WAR	3IM	12	NOR	51A1	5	TOR	011	3
DAN	212	10	TOR	FB3	5	TOR	024	3
WER	35-4	9	NOR	10D1	4	SMO	3A	2
TOR	013	9	NOR	51C2	4	NOR	01A1	2
WER	35-3	8	DAN	210	4	TOR	014	2
NOR	01A2	8	CLA	6	4	DAN	211	2
NOR	01C2	8	CLA	4	4	TOR	FB4	1
TOR	FC1	7	DAN	310	4	TOR	FC2	1
DAN	312	6	CLA	3	4			
NOR	10D2	6	NOR	51C1	4			

**Table 20 - 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			S RTP
	Cl a	D an	N or	T or	W ar	W er	T ot.	N or	T or	T ot.	S RTP
Dec-21	0.68	0.41	3.29	1.53	1.09	0.62	1.10	4.03	1.66	3.46	0.00
Jan-22	1.15	2.23	2.73	1.08	0.88	1.98	1.68	2.33	1.02	1.99	0.00
Feb-22	1.02	2.03	3.64	1.68	2.25	1.78	1.98	4.28	0.00	3.02	0.65
Mar-22	1.34	1.22	2.38	1.94	2.47	0.99	1.60	2.87	0.39	2.06	0.00
Apr-22	0.70	1.04	1.20	1.12	1.84	1.15	1.17	4.71	1.09	3.47	0.00
May-22	0.89	2.22	1.17	2.41	1.54	1.10	1.53	3.26	0.00	2.14	0.00
Jun-22	0.91	2.33	1.79	1.61	1.39	0.88	1.41	2.11	1.67	1.96	0.00
Jul-22	0.42	1.04	1.75	2.65	1.10	2.20	1.59	2.71	1.58	2.31	0.00
Aug-22	0.21	0.42	1.75	1.74	1.74	1.24	1.16	3.19	0.97	2.43	0.00
Sep-22	0.67	0.22	1.73	2.01	1.15	1.65	1.27	3.24	1.64	2.69	0.00
Oct-22	0.65	0.42	1.91	0.91	1.77	0.86	1.03	2.06	0.31	1.50	0.00
Nov-22	0.91	0.86	1.99	0.98	1.65	1.29	1.26	3.36	1.34	2.75	0.00
Dec-22	1.11	1.24	4.11	1.82	0.69	1.36	1.61	3.68	2.56	3.33	0.00

**Table 21 - Patient-to-Staff Assault Events by Unit, All Levels of Care**

ABV	WARD	Cnt
NOR	10E2	14
NOR	51A2	8
WAR	3NM	7
DAN	310	6
DAN	312	3
TOR	FC2	3
CLA	6	2
NOR	01C2	2
NOR	51A1	2

ABV	WARD	Cnt
WER	37-1	2
WER	35-3	2
NOR	51C2	2
TOR	024	2
WAR	2SW	2
NOR	10D2	1
DAN	210	1
DAN	212	1
WER	34-4	1

ABV	WARD	Cnt
NOR	01A1	1
NOR	51B1	1
TOR	FB3	1
NOR	51C1	1
NOR	10E1	1
CLA	3	1
TOR	013	1
NOR	51B2	1
NOR	01C1	1

**Table 22 - 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
Dec-21	0.00	1.43	1.20	0.22	3.50	0.86	1.17	1.75	0.55	1.46	0.00
Jan-22	0.00	0.61	0.30	0.43	0.22	0.37	0.34	0.36	0.00	0.26	0.00
Feb-22	0.00	0.45	0.33	0.00	0.50	0.14	0.22	0.43	0.00	0.30	0.00
Mar-22	0.00	0.41	0.00	0.43	0.67	0.00	0.23	0.00	0.39	0.13	0.00
Apr-22	0.46	0.63	0.00	0.22	0.23	0.77	0.45	0.75	0.36	0.62	0.00
May-22	0.00	0.20	0.29	0.00	1.32	0.25	0.33	0.34	0.66	0.45	0.59
Jun-22	0.00	0.42	1.49	0.23	0.23	0.38	0.41	0.53	0.00	0.35	0.00
Jul-22	0.85	0.21	0.88	0.22	0.00	0.73	0.50	0.34	0.00	0.22	0.00
Aug-22	0.43	0.21	0.29	0.22	0.22	0.49	0.33	0.17	0.64	0.33	0.00
Sep-22	0.00	0.44	0.29	0.22	0.46	0.25	0.27	0.17	0.00	0.11	0.00
Oct-22	0.00	0.42	0.00	0.23	0.66	0.37	0.30	0.44	0.00	0.30	0.00
Nov-22	0.00	0.22	0.00	0.00	0.24	0.26	0.14	0.00	0.34	0.10	0.00
Dec-22	0.00	0.41	0.00	0.00	0.00	0.25	0.13	1.13	0.00	0.78	0.00

**Table 23 - Risk Adjusted Safety Indicators**

Dec-22	Civil							Forensic					
Month	Cl	Dan	Nor	Tor	War	Wer	C. Tota	Nor	Tor	F. Total	LTC	SRTP	System
Patient Days	4513	4833	3653	4384	4367	8107	29857	7068	3128	10196	2939	1701	44693
Census	144	156	118	145	142	261	966	235	98	333	95	62	1456
<b>Safety Indicators</b>													
Type 1 Falls (count)	5	1	3	5	0	4	18	1	1	2	6	0	26
Num Per 1,000 Pt Days	1.11	0.21	0.82	1.14	0.00	0.49	0.60	0.14	0.32	0.20	2.04	0.00	0.58
Total Falls (count)	11	28	7	14	21	17	98	2	4	6	13	0	117
Num Per 1,000 Pt Days	2.44	5.79	1.92	3.19	4.81	2.10	3.28	0.28	1.28	0.59	4.42	0.00	2.62
<b>PT:PT Assaults w/Injury(count)</b>													
PT:PT Assaults w/Injury(count)	5	6	15	8	3	11	48	26	8	34	0	0	82
Num Per 1,000 Pt Days	1.11	1.24	4.11	1.82	0.69	1.36	1.61	3.68	2.56	3.33	0.00	0.00	1.83
Total PT:PT Assault Events (count)	12	26	42	21	22	48	171	63	14	77	2	0	250
Num Per 1,000 Pt Days	2.66	5.38	11.50	4.79	5.04	5.92	5.73	8.91	4.48	7.55	0.68	0.00	5.59
<b>PT:Staff Assaults w/Injury(count)</b>													
PT:Staff Assaults w/Injury(count)	0	2	0	0	0	2	4	8	0	8	0	0	12
Num Per 1,000 Pt Days	0.00	0.41	0.00	0.00	0.00	0.25	0.13	1.13	0.00	0.78	0.00	0.00	0.27
Total PT:Staff Assault Events (count)	3	11	4	3	9	5	35	31	4	35	0	0	70
Num Per 1,000 Pt Days	0.66	2.28	1.09	0.68	2.06	0.62	1.17	4.39	1.28	3.43	0.00	0.00	1.57
<b>SIB Events (count)</b>													
SIB Events (count)	11	19	9	9	16	15	79	0	8	8	0	0	87
Num Per 1,000 Pt Days	2.44	3.93	2.46	2.05	3.66	1.85	2.65	0.00	2.56	0.78	0.00	0.00	1.95
<b>Total Physical Restraint Hours</b>													
Total Physical Restraint Hours	0.26	0.08	0.07	0	0.15	0.18	0.73	1.37	0.33	1.71		0.00	2.44
Num Per 1,000 Pt Days	0.06	0.02	0.02	0.00	0.03	0.02	0.02	0.19	0.11	0.17		0.00	0.05
<b>Medication Measures</b>													
Benzodiazepines	93	74	49	39	74	90	419	6	4	10		9	438
Percentage of Census	0.65	0.47	0.42	0.27	0.52	0.34	0.43	0.03	0.04	0.03		0.15	0.30
<b>Multiple Atypicals</b>													
Multiple Atypicals	35	59	7	57	49	74	281	17	15	32		0	313
Percentage of Census	0.24	0.38	0.06	0.39	0.35	0.28	0.29	0.07	0.15	0.10		0.00	0.21
<b>Typical- Atypical</b>													
Typical- Atypical	34	63	45	70	42	131	385	62	36	98		0	483
Percentage of Census	0.24	0.40	0.38	0.48	0.30	0.50	0.40	0.26	0.37	0.29		0.00	0.33



## Wellness Indicators

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](http://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.

**Table 24 - 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.

Cause	CLA	DAN	NOR	TOR	WAR	WER	Count
Accident-Injury				1		1	2
Aggression						1	1
Airway Obstruction type 1 Intervention		1					1
Assault, Pt./Pt		1	4				5
Change in Medical Status-Stabilized			1				1
Change in Medical Status-Transferred	2	7	5	6	3	16	39
Fall Type 1-Injury with treatment			1				1
Fall Type 2-No treatment needed		2			1		3
Other		2		1		1	4
Self-Injurious behavior			1			2	3
<b>Totals</b>	<b>2</b>	<b>13</b>	<b>12</b>	<b>8</b>	<b>4</b>	<b>21</b>	<b>60</b>

## 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 25 - 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 M/Y								Forensic			S RTP	Sys
	Cl a	D an	N or	T or	W ar	W er	Total	N or	T or	C nt	T or	Total
22-Feb	89	78	39	36	72	78	392	10	5	15	7	414
22-May	91	79	44	41	73	85	413	11	4	15	5	433
22-Aug	92	74	43	32	77	86	404	8	6	14	6	424
22-Dec	93	74	49	39	74	90	419	6	4	10	9	438

**Table 26 - 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 M/Y								Forensic			S RTP	Sys
	Cl a	D an	N or	T or	W ar	W er	Total	N or	T or	C nt	T or	Total
22-Feb	23	52	7	40	62	76	260	14	15	29	0	289
22-May	27	60	7	37	57	73	261	14	13	27	0	288
22-Aug	29	54	8	51	57	73	272	10	13	23	0	295
22-Dec	35	59	7	57	49	74	281	17	15	32	0	313

**Table 27 - 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 M/Y								Forensic			S RTP	Sys
	Cl a	D an	N or	T or	W ar	W er	Total	N or	T or	C nt	T or	Total
22-Feb	41	60	37	66	37	112	353	49	31	80	0	433
22-May	33	61	45	68	45	119	371	43	31	74	0	445
22-Aug	36	58	49	74	46	129	392	49	41	90	0	482
22-Dec	34	63	45	70	42	131	385	62	36	98	0	483

**Table 28 - STAT Medication Usage – Civil**

**Measure Definition:** STAT medication are counted as psychiatric medications that have been administered. If two STAT medications are administered, it is counted as one event. Each STAT medication event is documented by “Route of Administration” and “Requested by”. This measure includes all levels of care.

CLARKS SUMMIT (FY 2022-23)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	PEG Tube:	Indv	MD/DO	RN
Dec-22	53	50	3	0	25	22	6

DANVILLE (FY 2022-23)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/OD	RN
Dec-22	110	23	87	0	37	6	67

NORRISTOWN - CIVIL (FY 2022-23)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Dec-22	30	10	20	0	1	3	26

TORRANCE - CIVIL (FY 2022-23)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Dec-22	50	19	31	0	15	4	31

WARREN (FY 2022-23)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube	Indv	MD/DO	RN
Dec-22	99	47	52	0	28	23	48

WERNERSVILLE (FY 2022-23)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Dec-22	142	98	44	0	61	42	39

**Table 29 - STAT Medication Usage – Forensic**

NORRISTOWN - FORENSIC (FY 2022-23)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube/othe	Indv	MD/DO	RN
Dec-22	110	27	83	0	8	16	86

TORRANCE - FORENSIC (FY 2022-23)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Dec-22	81	42	39	0	34	18	29

**Table 30 - STAT Medication Usage – ACT 21 (SRTP)**

TORRANCE - ACT 21 (FY 2022-23)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Dec-22	0	0	0	0	0	0	0