



# Pennsylvania State Hospital Risk Management Summary and Indicator Report December 2018

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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. <a href="http://www.dhs.pa.gov/publications/forproviders/statehospitalriskmanagementsummaryreports/">http://www.dhs.pa.gov/publications/forproviders/statehospitalriskmanagementsummaryreports/</a>

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

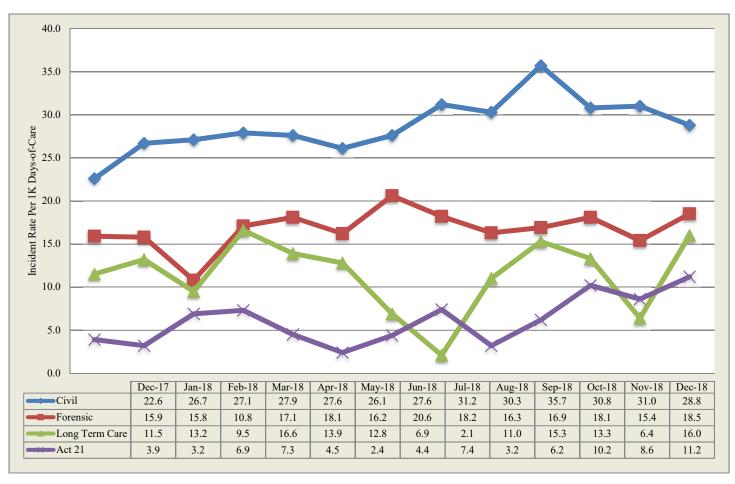
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During **December 2018**, a total of **1107** incident reports were completed by the state hospital system. Additional records addressing specific categories from the previous month were included on page 4 of this report. The following is a breakdown of incidents by individual facility and type of care:

**Table 1 - Number of Incident Reports** 

	Census 12/31/2018	Days Provided	Incidents	Per 1000 Days-of-Care
Clarks Summit	167	5204	63	12.1
Danville	158	4915	213	43.3
Norristown	102	3154	87	27.6
Torrance	158	4690	170	36.2
Warren	140	4333	135	31.2
Wernersville	247	7632	194	25.4
Total Civil	972	29928	862	28.8
Forensic				
Norristown	180	5582	135	24.2
Torrance	99	3017	24	8.0
Total Forensic	279	8599	159	18.5
Act 21				
Act 21	59	1693	19	11.2
Total Act 21	59	1693	19	11.2
Long Term Care				
South Mountain	136	4197	67	16.0
Total L. T. C.	136	4197	67	16.0
Total	1446	44417	1107	24.9

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 18	Aug 18	Sep 18	Oct 18	Nov_18	Dec 18
Accident-Injury	209	27		47	46	27	36
Adverse Drug Reaction	4		1	1	2		
Aggression	933	181	162	155	151	141	143
Airway Obstruction type 1 Intervention	25	2	3	8	7	4	1
Airway Obstruction type 2 No Intervention	11	2	2	2		3	2
Alcohol Use/Possession/Suspected or	1	1					_
Alleged Nonconsensual Sexual Activity	12	3		4	2		3
Alleged Pt. Abuse	67	8		8	13	7	21
Assault, Pt./Pt	1652	254		340	240	292	281
Assault, Pt./Staff	498	81	85	97	78	77	80
Assault: Patient/Other	3	1	1		1		
AWOL/UA	43	10	10	6	8	5	4
AWOL-Attempt	51	13		8	11	4	6
AWOL-Late	35	14	6	5	6	3	1
Change in Medical Status-Stabilized	53	5	8	7	10	9	14
Change in Medical Status-Transferred	291	64	45	36	60	41	45
Charged post admit/crime committed prior to	5	1	2	1		1	
Charged with alleged crime on hospital grounds	2						2
Communications Sys. Misuse	 54	13	14	13	8	4	2
Community Incident	16	1		1	3	2	9
Contraband Possession	95	19	9	18	15	18	16
Fall Type 1-Injury with treatment	316	39		61	67	43	49
Fall Type 2-No treatment needed	781	121	131	132	148	113	136
Family Concern	7	1			3	3	
Illicit Substance Use/Possession	3	_	1				2
Indeterminate/Unconfirmed Cause of Injury	71	10	8	15	7	16	15
Medication Error	90	9	17	20	16	13	15
Missing Property	31	5	4	6	3	3	10
Other	398	55	75	77	75	64	52
Patient Complaint	2					2	
Procedural Treatment Error	18	2	5	6	3	1	1
Property Damage	87	12	13	15	18	14	15
Seizure	50			8	9	3	15
Self-Injurious behavior	724			136	112	127	101
Sexual Behavior	75			8	8		11
Smoking Violation	45			9	6		
Substantiated Nonconsensual Sexual Activity	5			1			4
Substantiated Patient Abuse	1						1
Sudden Acute Illness	1			1			
Suicide Attempt	9	3	2			3	1
Suicide threat/plan	11			1	4		5
Theft	8			_	4		2
Unknown	2		_	1	1		_
Unsubstantiated Nonconsensual Sexual Activity	10		1	_	1		6
Unsubstantiated Patient Abuse	8		1		4	3	

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

Primary Cat #	CLA	DAN	NOR	TOR	WAR	WER	Count
Accident-Injury	1	1	1	4	6	2	15
Aggression	11	17	6	40	15	14	103
Airway Obstruction type 2 No Intervention	0	1	0	0	0	0	1
Alleged Nonconsensual Sexual Activity	0	0	0	3	0	0	3
Alleged Pt. Abuse	4	1	4	0	1	9	19
Assault, Pt./Pt	10	82	38	14	33	36	213
Assault, Pt./Staff	8	29	2	3	12	10	64
AWOL/UA	1	0	0	1	2	0	4
AWOL-Attempt	0	3	0	0	0	3	6
AWOL-Late	0	0	0	0	1	0	1
Change in Medical Status-Stabilized	0	0	2	5	2	1	10
Change in Medical Status-Transferred	6	2	1	7	5	13	34
Charged with alleged crime on hospital grounds	0	0	0	0	0	2	2
Communications Sys. Misuse	1	0	1	0	0	0	2
Community Incident	2	0	0	5	2	0	9
Contraband Possession	0	4	0	5	5	1	15
Fall Type 1-Injury with treatment	6	2	5	9	2	10	34
Fall Type 2-No treatment needed	5	28	8	9	29	36	115
Illicit Substance Use/Possession	0	2	0	0	0	0	2
Indeterminate/Unconfirmed Cause of Injury	1	0	5	6	1	0	13
Medication Error	1	4	1	3	0	0	9
Missing Property	2	2	0	0	2	3	9
Other	1	18	1	12	1	14	47
Property Damage	0	3	1	6	1	1	12
Seizure	0	1	0	0	2	7	10
Self-Injurious behavior	3	10	11	31	5	31	91
Sexual Behavior	0	0	0	3	0	1	4
Substantiated Nonconsensual Sexual Activity	0	0	0	2	2	0	4
Suicide Attempt	0	0	0	1	0	0	1
Suicide threat/plan	0	0	0	1	1	0	2
Theft	0	0	0	0	2	0	2
Unsubstantiated Nonconsensual Sexual Activity	0	3	0	0	3	0	6
Totals	63	213	87	170	135	194	862

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

Primary effect	CLA	DAN	NOR	TOR	WAR	WER	Count
Unknown	0	0	0	1	0	0	1
Abrasion/scrape/scratch/hematoma	7	6	8	23	7	22	73
Asphyxiation	0	0	0	2	0	0	2
Bite-Human	0	0	0	0	0	1	1
Body System Illness	2	1	0	2	1	3	9
Bruise/contusion/discoloration	3	3	1	8	2	4	21
Cellulitis	1	3	0	0	0	1	5
Death	0	0	0	1	0	0	1
Dislocation	0	0	0	0	0	1	1
Edema/swelling	0	0	1	4	1	2	8
Epistaxis	0	0	1	1	0	0	2
Erythema/redness	0	1	0	7	4	2	14
Fever	0	2	1	1	0	3	7
Ingestion of foreign body	0	1	0	0	0	2	3
Laceration: NO sutures/staples/steri-strips	1	2	4	2	0	4	13
Laceration: with steristrips/glue	0	1	0	0	0	1	2
Laceration: with sutures/staples	0	0	0	2	0	1	3
Lethargy	1	2	0	1	0	0	4
Muscle pull/strain/sprain	0	0	0	1	0	1	2
No Injury/NA	41	178	59	106	109	117	610
Other	0	6	4	3	0	7	20
Pain unspecified	1	1	0	0	0	0	2
Pain, Specified	4	4	8	0	8	12	36
Respiratory Distress	1	1	0	2	1	2	7
Seizure	0	1	0	0	0	5	6
Skin Irritation/Rash	1	0	0	2	2	0	5
Sunburn	0	0	0	1	0	0	1
Unconscious/Unresponsive	0	0	0	0	0	3	3
Totals	63	213	87	170	135	194	862

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

		NSH						TSH					Sys		
Primary Cat #	51A1	51A2	51B1	51B2	51C1	51C2	10D1	10E1	Total	FB3	FB4	FC1	FC2	Total	Count
Accident-Injury		1							1					0	1
Aggression	3			2	2	2	5	2	16		3	2	1	6	22
Airway Obstruction type 2 No Intervention									0				1	1	1
Alleged Pt. Abuse			1					1	2					0	2
Assault, Pt./Pt	12	6	2	18	10	10	2	4	64	2				2	66
Assault, Pt./Staff	1		5	5	2				13		1			1	14
Change in Medical Status-Stabilized					1	1		1	3					0	3
Change in Medical Status-Transferred							1	3	4	2	4			6	10
Fall Type 1-Injury with treatment			1	2				1	4					0	4
Fall Type 2-No treatment needed				2			1	3	6		2	1		3	9
Indeterminate/Unconfirmed Cause of Injury								1	1	1				1	2
Other	1				1	1		1	4					0	4
Property Damage	1					1			2					0	2
Seizure							2		2					0	2
Self-Injurious behavior						1	2	1	4		3			3	7
Sexual Behavior				5	1				6			1		1	7
Suicide threat/plan			1				2		3					0	3
Totals	18	7	10	34	17	16	15	18	135	5	13	4	2	24	159

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

	NSH							TSH					Sys		
EFFECT	51A1	51A2	51B1	51C1	51C2	10D1	10E1	51B2	Total	FB3	FB4	FC1	FC2	Total	Count
Abrasion/scrape/scratch/hematoma	1	1		2	2	1	1	2	10		2			2	12
Body System Illness							1		1	2	1			3	4
Bruise/contusion/discoloration			1	1		1	1	1	5		1			1	6
Dislocation									0		1			1	1
Edema/swelling		1			1				2					0	2
Emesis									0				1	1	1
Laceration: NO sutures/staples/steri-strips	1	2	1		1	1	2		8	1				1	9
No Injury/NA	16	3	7	13	11	9	10	30	99	2	4	4	1	11	110
Other						1	2		3		2			2	5
Pain, Specified			1		1			1	3		1			1	4
Seizure						2			2					0	2
Syncopal episode				1					1		1			1	2
Unconscious/Unresponsive							1		1					0	1
Totals	18	7	10	17	16	15	18	34	135	5	13	4	2	24	159

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

Cause	3A	3B	5A	6A	6B	Count
Accident-Injury	6	5		4	4	19
Aggression	4	1	6	1		12
Airway Obstruction type 1 Intervention					1	1
Assault, Pt./Pt		1	1			2
Assault, Pt./Staff		1				1
Change in Medical Status-Transferred	1					1
Fall Type 1-Injury with treatment	4	3		3		10
Fall Type 2-No treatment needed	4	3	1	2	1	11
Medication Error	3	2	1			6
Missing Property	1					1
Procedural Treatment Error		1				1
Property Damage	1					1
Substantiated Patient Abuse		1				1
Totals	24	18	9	10	6	67

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

EFFECT	3A	3B	5A	6A	6B	Count
Abrasion/scrape/scratch/hematoma	6	6		4	1	17
Asphyxiation					1	1
Bruise/contusion/discoloration	2	1		1	2	6
Edema/swelling		1			1	2
Fracture				2		2
No Injury/NA	15	10	9	3	1	38
Other	1					1
Totals	24	18	9	10	6	67

#### 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	6	6
Assault, Pt./Staff	1	1
Change in Medical Status-Stabilized	1	1
Contraband Possession	1	1
Fall Type 1-Injury with treatment	1	1
Fall Type 2-No treatment needed	1	1
Other	1	1
Seizure	3	3
Self-Injurious behavior	3	3
Totals	19	19

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

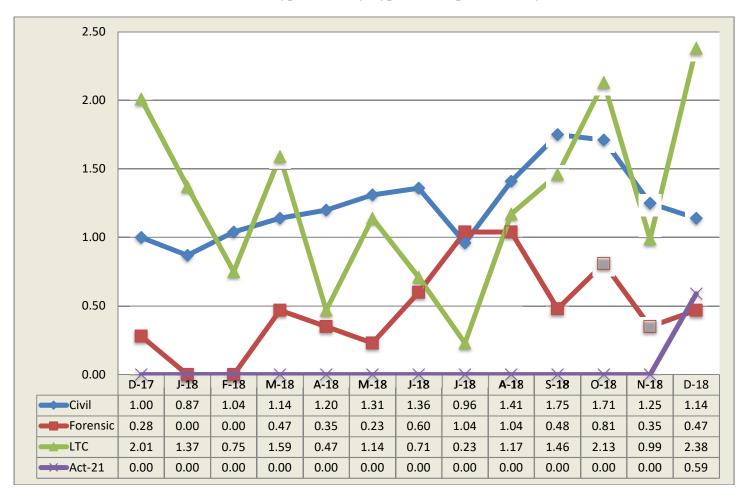
Primary effect	TOR	Count
Abrasion/scrape/scratch/hematoma	4	4
Bruise/contusion/discoloration	1	1
Emesis	1	1
Laceration: NO sutures/staples/steri-strips	1	1
Muscle pull/strain/sprain	1	1
No Injury/NA	11	11
Totals	19	19

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

		Civil	Hosp	ital				F	orensi	ic	A21	LTC	C A
M/Year	Cla	Dan	Nor	Tor	War	Wer	Tt1	Nor	Tor	Total	A21	SMRC	Sys Avg
Dec-17	0.91	0.63	0.30	0.41	1.31	1.74	1.00	0.48	0.00	0.28	0.00	2.01	0.95
Jan-18	1.10	0.20	0.93	0.63	0.65	1.36	0.87	0.00	0.00	0.00	0.00	1.37	0.75
Feb-18	1.62	0.68	0.35	0.00	1.59	1.40	1.04	0.64	0.00	0.00	0.00	0.75	0.86
Mar-18	1.47	0.81	1.27	0.43	0.87	1.64	1.14	0.54	0.33	0.47	0.00	1.59	1.01
Apr-18	1.72	0.63	0.98	0.42	1.59	1.56	1.20	0.18	0.68	0.35	0.00	0.47	0.93
May-18	1.13	0.63	1.27	0.82	1.99	1.76	1.31	0.18	0.33	0.23	0.00	1.14	1.04
Jun-18	1.15	0.84	1.31	0.65	1.42	2.25	1.36	0.92	0.00	0.60	0.00	0.71	1.10
Jul-18	0.37	1.22	1.27	0.84	0.69	1.29	0.96	1.59	0.00	1.04	0.00	0.23	0.87
Aug-18	1.11	0.61	2.21	2.06	1.14	1.56	1.41	1.41	0.33	1.04	0.00	1.17	1.26
Sep-18	1.55	0.64	1.62	3.30	0.94	2.17	1.75	0.55	0.34	0.48	0.00	1.46	1.41
Oct-18	1.14	1.84	0.00	3.02	0.93	2.36	1.71	0.54	1.32	0.81	0.00	2.13	1.51
Nov-18	1.39	0.42	1.31	2.02	1.46	1.09	1.25	0.55	0.00	0.35	0.00	0.99	1.00
Dec-18	1.15	0.41	1.59	1.92	0.46	1.31	1.14	0.72	0.00	0.47	0.59	2.38	1.10

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

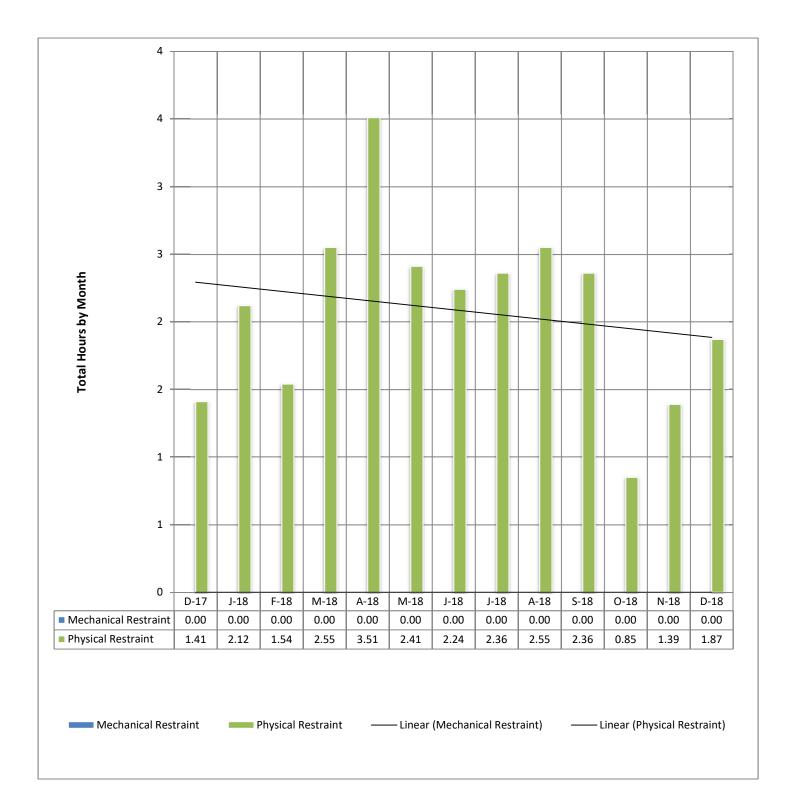
ABV	WARD	Total	ABV	WARD	Total	ABV	WARD	Total
NOR	51A1	0.27	WER	37-2	0.08	WER	34-3	0.02
TOR	063	0.20	NOR	51C1	0.06	WER	34-4	0.02
TOR	013	0.18	TOR	011	0.05	NOR	01C1	0.01
DAN	212	0.14	TOR	022	0.05	NOR	51A2	0.01
TOR	064	0.13	TOR	061	0.05	NOR	10D1	0.01
NOR	51B2	0.13	CLA	3	0.05	NOR	10E1	0.01
TOR	FC1	0.12	NOR	51C2	0.03	NOR	01A2	0.01
CLA	7	0.11	DAN	211	0.03	DAN	210	0.004
WER	34-2	0.10	WER	35-4	0.03			

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

ABV	Total	Jan_18	Feb_18	Mar_18	Apr_18	May_18	Jun_18	Jul_18	Aug_18	Sep_18	Oct_18	Nov_18	Dec_18
CLA	9.20	1.49	0.98	0.68	1.30	0.93	0.40	0.73	0.69	0.75	0.67	0.38	0.21
DAN	3.26	0.21	0.13	0.11	0.59	0.59	0.33	0.25	0.43	0.14	0.05	0.25	0.17
NOR	6.11	0.11	0.27	0.40	0.35	0.44	0.64	1.03	1.07	0.52	0.24	0.51	0.52
TOR	18.28	1.90	0.57	2.77	3.15	1.30	1.88	1.15	1.40	2.52	0.10	0.77	0.78
WAR	0.03	0.00	0.00	0.00	0.00	0.00	0.00	0.03	0.00	0.00	0.00	0.00	0.00
WER	1.91	0.04	0.48	0.03	0.16	0.09	0.01	0.50	0.10	0.02	0.13	0.05	0.30
Total	38.79	3.75	2.42	3.98	5.55	3.34	3.26	3.70	3.70	3.96	1.19	1.96	1.99

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

ABV	Total	Jan_18	Feb_18	Mar_18	Apr_18	May_18	Jun_18	Jul_18	Aug_18	Sep_18	Oct_18	Nov_18	Dec_18
CLA	104	7	9	8	12	10	3	7	14	7	11	12	4
DAN	85	3	2	4	9	5	7	4	10	7	3	13	18
NOR	302	17	14	21	24	24	22	27	29	34	23	29	38
TOR	111	14	5	17	10	7	15	8	6	8	2	11	8
WAR	1	0	0	0	0	0	0	1	0	0	0	0	0
WER	58	2	7	2	3	2	1	14	4	3	9	3	8
Total	661	43	37	52	58	48	48	61	63	59	48	68	76



#### **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
DAN	212	54	DAN	310	6	WAR	3IF	2
NOR	01C1	24	NOR	01A1	6	NOR	51B1	2
WAR	3SW	20	NOR	01C2	6	TOR	022	2
NOR	51B2	18	WER	34-4	5	WER	37-1	2
DAN	211	15	WAR	3IM	5	NOR	01A2	2
NOR	51A1	12	NOR	10E1	4	CLA	2	2
WER	35-3	12	CLA	3	4	TOR	FB3	2
WER	35-2	10	CLA	7	4	NOR	10D1	2
NOR	51C1	10	TOR	024	3	SMO	5A	1
NOR	51C2	10	WER	35-4	3	WER	37-3	1
TOR	013	8	WAR	2NM	3	TOR	011	1
DAN	210	7	WER	34-3	3	WAR	3NM	1
NOR	51A2	6	WAR	2SW	2	SMO	3B	1

Table 20 - Rate of Patient-to-Patient Assaults Events with Patient Injury per 1,000 Days-of-Care

	Civil							Forer	nsic		SRTP
Ptto-Pt. Assault w/ any Injury	Cla	Dan	Nor	Tor	War	Wer	Tot.	Nor	Tor	Tot.	SRTP
Dec-17	0.36	0.00	2.43	2.07	0.44	0.62	0.87	4.06	0.98	2.76	0.66
Jan-18	1.28	0.61	5.27	0.85	1.09	0.62	1.32	2.86	0.66	1.94	1.25
Feb-18	1.22	0.23	4.87	2.90	2.04	0.84	1.72	1.72	2.19	1.89	0.00
Mar-18	0.73	1.22	4.43	1.72	0.43	0.75	1.30	3.05	1.65	2.56	0.00
Apr-18	0.57	1.05	3.26	0.42	2.94	0.52	1.24	3.62	4.77	4.02	0.00
May-18	0.19	2.74	2.53	1.02	1.77	0.00	1.14	2.30	0.99	1.84	0.00
Jun-18	0.19	1.47	2.94	1.08	0.94	1.33	1.22	3.31	0.69	2.40	0.00
Jul-18	0.74	0.20	3.82	1.05	0.69	0.90	1.05	3.53	0.34	2.44	0.00
Aug-18	0.19	0.61	0.95	0.83	2.05	1.69	1.08	2.12	1.00	1.73	0.00
Sep-18	0.77	1.48	3.88	1.98	1.65	1.36	1.68	2.94	0.34	2.03	0.00
Oct-18	0.57	0.82	2.54	1.51	0.23	0.66	0.94	0.54	0.33	0.46	0.00
Nov-18	0.99	2.10	1.64	2.92	0.97	0.82	1.50	2.01	1.34	1.77	0.00
Dec-18	0.38	1.22	2.54	1.07	0.92	1.70	1.27	2.69	0.00	1.74	0.00

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

ABV	WARD	Cnt	ABV	WARD	Cnt	ABV	WARD	Cnt
DAN	212	17	NOR	01A2	2	SMO	3B	1
CLA	6	7	NOR	51C1	2	DAN	312	1
DAN	211	5	WAR	3IM	2	TOR	064	1
WAR	3SW	5	WAR	2NM	2	NOR	51A1	1
NOR	51B1	5	WER	34-4	1	WAR	2SW	1
NOR	51B2	5	DAN	210	1	CLA	3	1
WER	34-3	4	WER	34-2	1	TOR	FB4	1
DAN	310	4	WAR	IBE	1	WER	35-4	1
TOR	022	3	WAR	3NM	1	DAN	311	1
WER	35-2	3						

Table 22 - Rate of Patient-to-Staff Assault Events with Injury to Staff per 1,000 Days-of-Care

	Civil							Forens	sic		SRTP
Pt/Staff Assault w/ Staff Inj per 1K days	Cla	Dan	Nor	Tor	War	Wer	Tot.	Nor	Tor	Tot.	SRTP
Dec-17	0.73	0.21	0.30	0.41	0.65	0.50	0.48	0.00	0.00	0.00	0.00
Jan-18	0.92	0.00	0.31	1.06	2.83	0.25	0.84	1.43	0.66	1.11	0.00
Feb-18	0.00	0.00	0.35	0.00	0.45	0.42	0.21	0.64	0.00	0.41	0.00
Mar-18	0.18	0.20	0.00	0.21	0.87	1.01	0.49	0.36	0.66	0.47	0.00
Apr-18	0.57	0.42	0.98	0.42	1.36	0.52	0.67	0.91	0.34	0.71	0.64
May-18	0.56	0.63	1.58	0.61	0.22	0.25	0.55	0.35	0.99	0.57	0.00
Jun-18	0.19	0.84	1.31	0.65	0.71	0.40	0.61	0.55	1.04	0.72	0.00
Jul-18	0.00	0.41	0.64	1.26	1.15	1.16	0.79	0.71	0.00	0.46	0.00
Aug-18	0.56	1.41	1.58	0.62	1.82	1.01	1.12	0.53	0.00	0.35	0.00
Sep-18	0.19	0.21	0.32	0.22	2.36	0.68	0.65	0.55	1.02	0.72	0.00
Oct-18	0.38	0.61	0.32	1.73	0.93	0.66	0.77	0.54	0.33	0.46	0.00
Nov-18	0.40	0.42	0.33	0.00	3.65	0.82	0.90	0.55	0.33	0.47	0.00
Dec-18	0.96	0.61	0.32	0.21	1.38	0.79	0.74	1.25	0.33	0.93	0.59

Table 23 - Risk Adjusted Safety Indicators

Dec-18	Civil							Forens	ic				
Month	Cla	Dan	Nor	Tor	War	Wer	C. Tota	Nor	Tor	F. Total	LTC	SRTP	System
Patient Days	5204	4915	3154	4690	4333	7632	29928	5582	3017	8599	4197	1693	44417
Census	167	158	102	158	140	247	972	180	99	279	136	59	1446
Safety Indicators		•											
Type 1 Falls (count)	6	2	5	9	2	10	34	4	0	4	10	1	49
Num Per 1,000 Pt Days	1.15	0.41	1.59	1.92	0.46	1.31	1.14	0.72	0.00	0.47	2.38	0.59	1.10
Total Falls (count)	11	30	13	18	31	46	149	10	3	13	21	2	185
Num Per 1,000 Pt Days	2.11	6.10	4.12	3.84	7.15	6.03	4.98	1.79	0.99	1.51	5.00	1.18	4.17
PT:PT Assaults w/Injury(count)	2	6	8	5	4	13	38	15	0	15	0	0	
Num Per 1,000 Pt Days	0.38	1.22	2.54	1.07	0.92	1.70	1.27	2.69	0.00	1.74	0.00	0.00	1.19
otal PT:PT Assault Events (count)	10	82	38	14	33	36	213	64	2	66	2	0	281
Num Per 1,000 Pt Days	1.92	16.68	12.05	2.99	7.62	4.72	7.12	11.47	0.66	7.68	0.48	0.00	6.33
PT:Staff Assaults w/Injury(count)	5	3	1	1	6	6	22	7	1	8	0	1	31
Num Per 1,000 Pt Days	0.96	0.61	0.32	0.21	1.38	0.79	0.74	1.25	0.33	0.93	0.00	0.59	0.70
al PT:Staff Assault Events (count)	8	29	2	3	12	10	64	13	1	14	1	1	80
Num Per 1,000 Pt Days	1.54	5.90	0.63	0.64	2.77	1.31	2.14	2.33	0.33	1.63	0.24	0.59	1.80
SIB Events (count)	3	10	11	31	5	31	91	4	3	7	0	3	101
Num Per 1,000 Pt Days	0.58	2.03	3.49	6.61	1.15	4.06	3.04	0.72	0.99	0.81	0.00	1.77	2.27
Total Physical Restraint Hours	0.16	0.17	0.02	0.28	0	0.23	0.86	0.51	0.12	0.63		0.38	1.87
Num Per 1,000 Pt Days	0.03	0.03	0.01	0.06	0.00	0.03	0.03	0.09	0.04	0.07		0.22	0.04
Medication Measures													
Benzodiazepines	103	63	68	62	82	79	457	19	10	29		10	496
Percentage of Census	0.62	0.40	0.67	0.39	0.59	0.32	0.47	0.11	0.10	0.10		0.17	0.34
Ü													
Multiple Atypicals	9	39	6	52	43	52	201	16	9	25		0	226
Percentage of Census	0.05	0.25	0.06	0.33	0.31	0.21	0.21	0.09	0.09	0.09		0.00	
Ü													
Typical- Atypical	13	62	39	50	31	123	318	57	29	86		0	404
Percentage of Census	0.08	0.39	0.38	0.32	0.22	0.50	0.33	0.32	0.29	0.31		0.00	0.28

#### **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), 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 24) in our state hospitals.

Table 24 - 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
Jan-18	Total Users	100	51	14	58	77	82	382	12	394
	% of Census	57%	32%	14%	37%	52%	32%	38%	9%	27%
May-18	Total Users	94	44	21	54	74	72	359	10	369
	% of Census	54%	28%	21%	34%	50%	29%	36%	7%	25%
Sep-18	Total Users	0	41	23	38	67	0	169	10	179
	% of Census	0%	26%	23%	25%	49%	0%	17%	7%	12%
Dec-18	Total Users	0	0	0	0	0	0	0	10	10
	% of Census	0%	0%	0%	0%	0%	0%	0%	7%	1%

Between July 2018 and December 2018 all six State Mental Hospitals became tobacco free campuses.

#### Table 25 - 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	Count
Airway Obstruction type 2 No Intervention				1		1
Assault, Pt./Pt			2			2
AWOL/UA	1					1
Change in Medical Status-Transferred	5		2	12	5	24
Community Incident	1					1
Fall Type 1-Injury with treatment				1		1
Indeterminate/Unconfirmed Cause of Injury				1		1
Other		7		1		8
Seizure		1				1
Self-Injurious behavior		1	1	3		5
Totals	7	9	5	19	5	45

#### **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 26 - 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								Fo	rensi	c	SRTP	Sys
M/Y	Cla	Dan	Nor	Tor	or War Wer Tota		Total	Nor	Tor	Cnt	Tor	Total
Feb-18	89	72	58	58	86	81	444	17	10	27	12	483
May-18	91	75	53	60	85	77	441	20	11	31	9	481
Aug-18	93	73	61	59	86	76	448	21	11	32	10	490
Dec-18	103	63	68	62	82	79	457	19	10	29	10	496

#### **Table 27 - 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								Fo	rensi	c	SRTP	Sys
M/Y	Cla	Dan	Nor	Tor	War	Wer	Total	Nor	Tor	Cnt	Tor	Total
Feb-18	23	23	8	48	42	58	202	8	14	22	0	224
May-18	21	38	6	47	42	50	204	9	8	17	0	221
Aug-18	8	33	4	52	45	51	193	10	11	21	0	214
Dec-18	9	39	6	52	43	52	201	16	9	25	0	226

#### **Table 28 - 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								Fo	orensi	c	SRTP	Sys
M/Y	Cla	Dan	Nor	Tor	War	Wer	Total	Nor	Tor	Cnt	Tor	Total
Feb-18	38	58	55	57	27	122	357	50	36	86	0	443
May-18	32	62	52	67	32	128	373	54	35	89	0	462
Aug-18	19	67	57	56	26	119	344	61	25	86	0	430
Dec-18	13	62	39	50	31	123	318	57	29	86	0	404

## **Table 29 - 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 2018-19)											
Month	Total Number of STATs	Ro	ute of Adı	min	Requested by:							
		PO	IM	PEG Tube:	Indv	MD/DO	RN					
Dec-18	87	77	7	3	21	52	14					

	DANVILLE (FY 2018-19)											
Month	Total Number of STATs	Ro	ute of Adı	min	Requested by:							
		РО	IM	Peg Tube:	Indv	MD/OD	RN					
Dec-18	186	60	126	0	39	0	147					

	NORRISTOWN - CIVIL (FY 2018-19)											
Month	Total Number of STATs	Ro	ute of Adı	nin	Requested by:							
		РО	IM	Peg Tube:	Indv	MD/DO	RN					
Dec-18	76	31	45	0	2	3	71					

	TORRANCE - CIVIL (FY 2018-19)											
Month	Total Number of STATs	Ro	ute of Adı	min	Requested by:							
		РО	IM	Peg Tube:	Indv	MD/DO	RN					
Dec-18	141	47	94	0	21	34	86					

	WARREN (FY 2018-19)											
Month	Total Number of STATs	Ro	ute of Adı	min	Requested by:							
		PO	IM	Peg Tube:	Indv	MD/DO	RN					
Dec-18	96	42	53	1	13	20	63					

	WERNERSVILLE (FY 2018-19)											
Month	Total Number of STATs	Ro	ute of Adı	min	Requested by:							
		PO	IM	Peg Tube:	Indv	MD/DO	RN					
Dec-18	101	76	25	0	19	40	42					

## **Table 30 - STAT Medication Usage - Forensic**

	NC	DRRISTOW	N - FOREN	SIC (FY 201	8-19)			
Month	Total Number of STATs	Ro	ute of Adı	min	Re			
		РО	IM	Peg Tube:	Indv	MD/DO	RN	UNK
Dec-18	178	50	128	0	27	78	71	2

	TORRANCE - FORENSIC (FY 2018-19)											
Month	Total Number of STATs	Ro	ute of Adı	min	Requested by:							
		PO	IM	Peg Tube:	Indv	MD/DO	RN					
Dec-18	41	27	14	0	22	8	11					

# Table 31 - STAT Medication Usage – ACT 21 (SRTP)

	TORRANCE - ACT 21 (FY 2018-19)											
Month	Total Number of STATs	Ro	ute of Adı	min	Requested by:							
		РО	IM	Peg Tube:	Indv	MD/DO	RN					
Dec-18	15	9	6	0	2	2	11					