



**Table of Contents**

1. Admissions to SEH	-----	2
2. Discharges to SEH	-----	2
3. Average Daily Census	-----	3
4. Transfers	-----	3
5. 30-Day Readmission Rate	-----	4
6. Unusual Incidents	-----	4
7. Patient-Involved Unusual Incidents	-----	5
8. Selected Types of Incidents	-----	5
9. Physical Assaults	-----	6
10. Patient Injuries	-----	6
11. Staff Injuries	-----	7
12. Patient and Staff Falls	-----	7
13. Percent of Patients Restrained or Secluded	-----	8
14. Restraint Hours Rate & Seclusion Hours Rate	-----	8
15. Reported Medication Variance Events	-----	9
16. Reported Adverse Drug Reactions	-----	9
17. Percent of Missing Documentation on Med-Administration	-----	10
18. Medication Refusal Rate	-----	10
19. Number of STAT Events and Individuals Involved	-----	11
20. Demographics - Trend of Gender Distribution	-----	11
21. Demographics - Trend of Age Distribution	-----	12
22. Length of Stay - LOS for Individuals in Care	-----	12
23. Length of Stay - LOS for Individuals in Care with Civil	-----	13

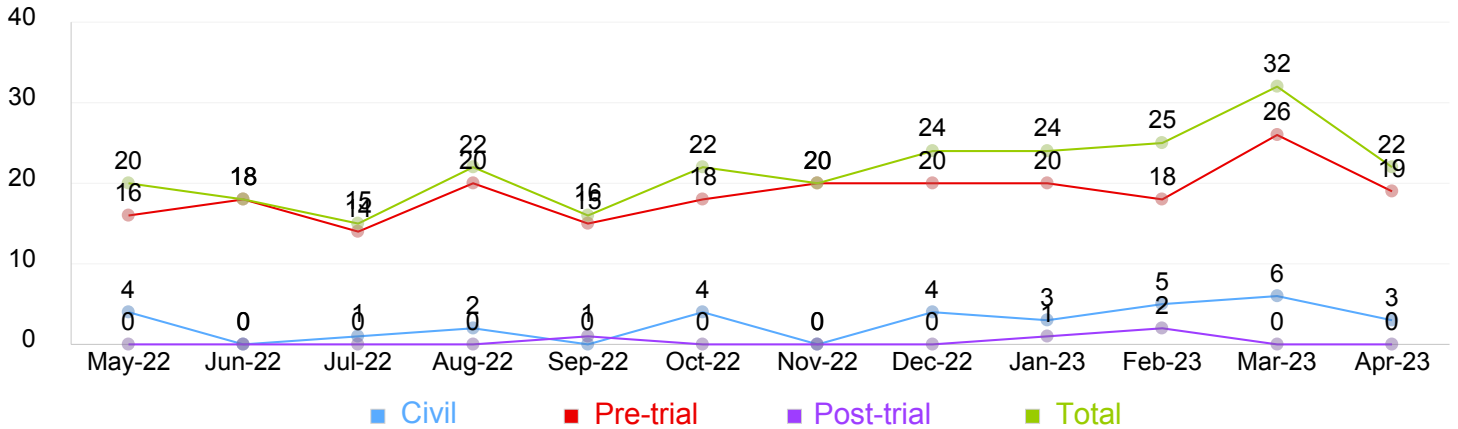
**Data Disclaimer**

The primary source of data extracted and analyzed herein is Avatar, the Saint Elizabeths Hospital's electronic medical record system. Additional data sources include, but are not limited to, the Hospital's Unusual Incident Database and SiteFM. Data reflect information as entered in each system by users. Data and Performance Management (DPM) has made reasonable efforts to ensure that data and its accompanying information are as accurate and up-to-date as possible at the time of analysis and publication, but does not guarantee the accuracy, reliability, or completeness of data. DPM is not liable for any misinterpretation or misuse of the data. Use of any information from PRISM must be fully acknowledged and/or cited. Use of PRISM data for anything other than patient care determinations or management of the services provided within the hospital (including external publications, research papers, presentations, etc.) is prohibited without written permission from the Chief Quality and Data Manager Officer at the Saint Elizabeths Hospital.

As of May, 2019 a new platform, Microstrategy, was implemented for producing PRISM. At that time, two charts were removed from the report. Admissions vs Patient UI rate was removed because it showed two data points that already existed in other charts and put them together. Percentage of SiteFM Work Orders Completed within 3 Days was removed because it related to internal operations. Data from the appendix tables were integrated into the relevant charts.

Microstrategy is a visualization tool that is linked to the data sources for each chart, so the information is not static. If new information is added for a month that has already been reported on, that update will be reflected in the next month's report.

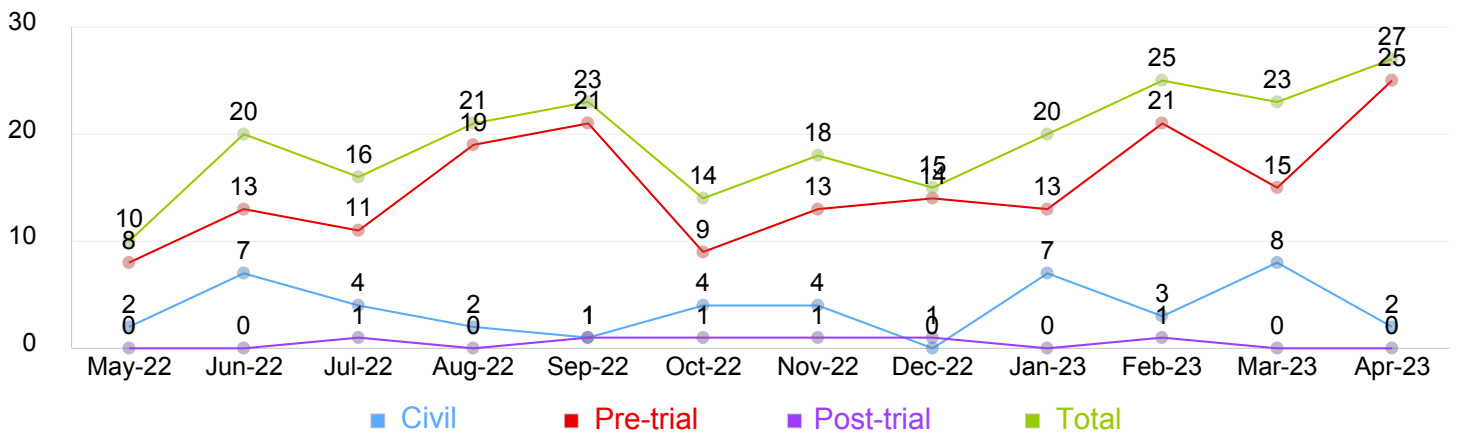
# 1. Admissions



Metrics	Admission Count												Avg	Total
Legal Status Group	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23		
Civil	4	0	1	2	0	4	0	4	3	5	6	3	3	32
Pre-trial	16	18	14	20	15	18	20	20	20	18	26	19	19	224
Post-trial	0	0	0	0	1	0	0	0	1	2	0	0	0	4
<b>Total</b>	<b>20</b>	<b>18</b>	<b>15</b>	<b>22</b>	<b>16</b>	<b>22</b>	<b>20</b>	<b>24</b>	<b>24</b>	<b>25</b>	<b>32</b>	<b>22</b>	<b>22</b>	<b>260</b>

\* Number of admissions to SEH inpatient program, including transfers from forensic outpatient to inpatient program.

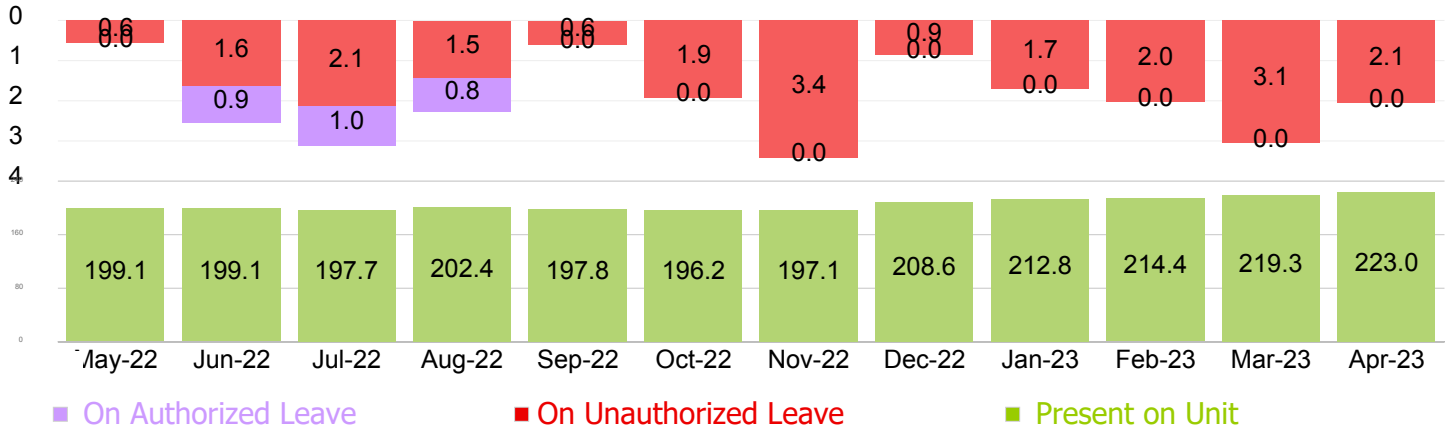
# 2. Discharges



Legal Status Group	Discharge Count												Avg	Total
Legal Status Group	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23		
Civil	2	7	4	2	1	4	4	0	7	3	8	2	4	44
Pre-trial	8	13	11	19	21	9	13	14	13	21	15	25	15	182
Post-trial	0	0	1	0	1	1	1	1	0	1	0	0	1	6
<b>Total</b>	<b>10</b>	<b>20</b>	<b>16</b>	<b>21</b>	<b>23</b>	<b>14</b>	<b>18</b>	<b>15</b>	<b>20</b>	<b>25</b>	<b>23</b>	<b>27</b>	<b>19</b>	<b>232</b>

\* Number of discharges from SEH inpatient program, including transfers from inpatient to forensic outpatient program.

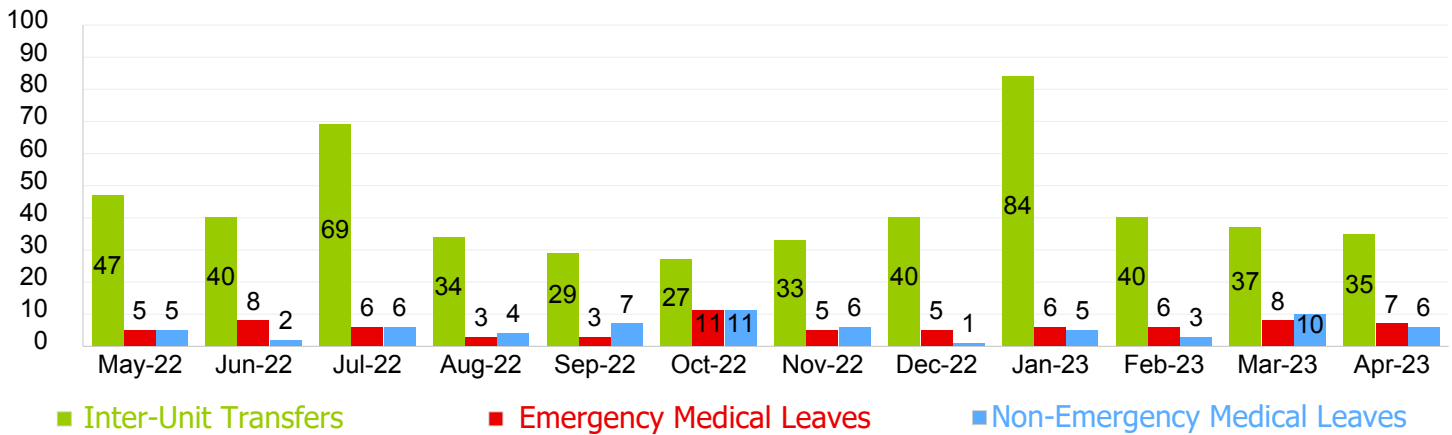
### 3. Average Daily Census



Census_Status	Metrics	Patient Count												Avg
	YearMonth (1)	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	
a. Present on Unit		199.1	199.1	197.7	202.4	197.8	196.2	197.1	208.6	212.8	214.4	219.3	223.0	205.6
b. On AL		0.6	1.6	2.1	1.5	0.6	1.9	3.4	0.9	1.7	2.0	3.1	2.1	1.8
c. On UL		0.0	0.9	1.0	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2
<b>Total</b>		<b>199.7</b>	<b>201.7</b>	<b>200.8</b>	<b>204.6</b>	<b>198.4</b>	<b>198.1</b>	<b>200.5</b>	<b>209.5</b>	<b>214.5</b>	<b>216.4</b>	<b>222.4</b>	<b>225.0</b>	

\* Data above is the daily average number of individuals counted at 11:59 PM every day during each month. Census data is tracked via the AVATAR database.

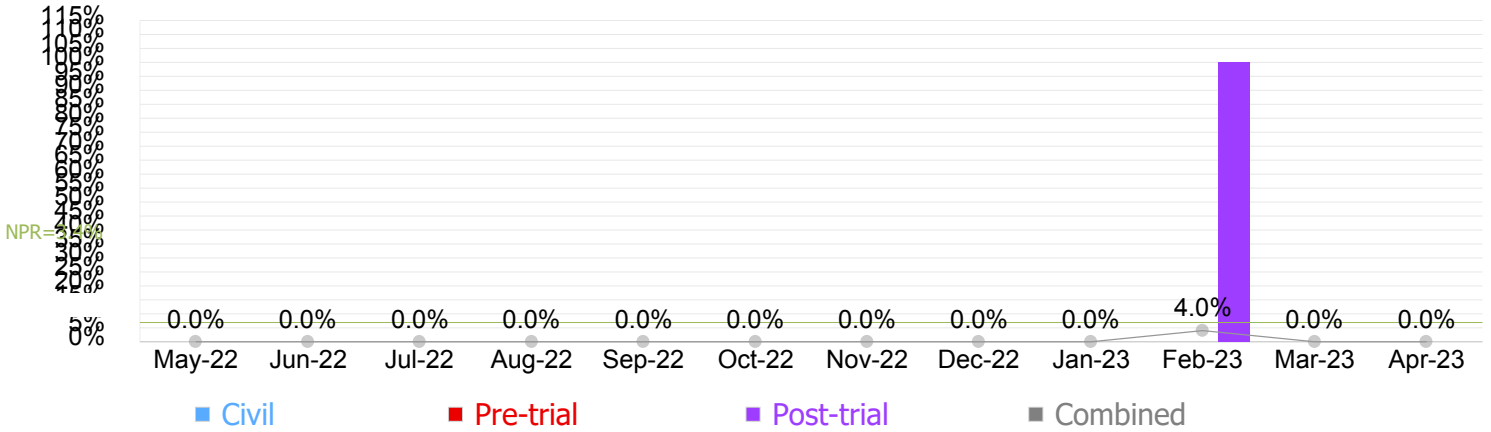
### 4. Transfers



Metrics	YearMonth (1)	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
Inter-Unit Transfers		47	40	69	34	29	27	33	40	84	40	37	35	43	515
Emergency Medical Leaves		5	8	6	3	3	11	5	5	6	6	8	7	6	73
Non-Emergency Medical Leaves		5	2	6	4	7	11	6	1	5	3	10	6	6	66
<b>Total</b>		<b>57</b>	<b>50</b>	<b>81</b>	<b>41</b>	<b>39</b>	<b>49</b>	<b>44</b>	<b>46</b>	<b>95</b>	<b>49</b>	<b>55</b>	<b>48</b>	<b>55</b>	<b>654</b>

\* Number of inter-unit transfers that occurred during month and number of emergency medical leaves that were initiated during month. Challenges related to the COVID-19 pandemic required the hospital to transfer individuals in care to assure proper cohorting based on acuity and COVID status (positive, negative, PUI). The marked increase in transfers April 2020 and onward reflects the change to manage suspected and confirmed COVID-19 cases.

## 5. 30-Day Readmission Rate

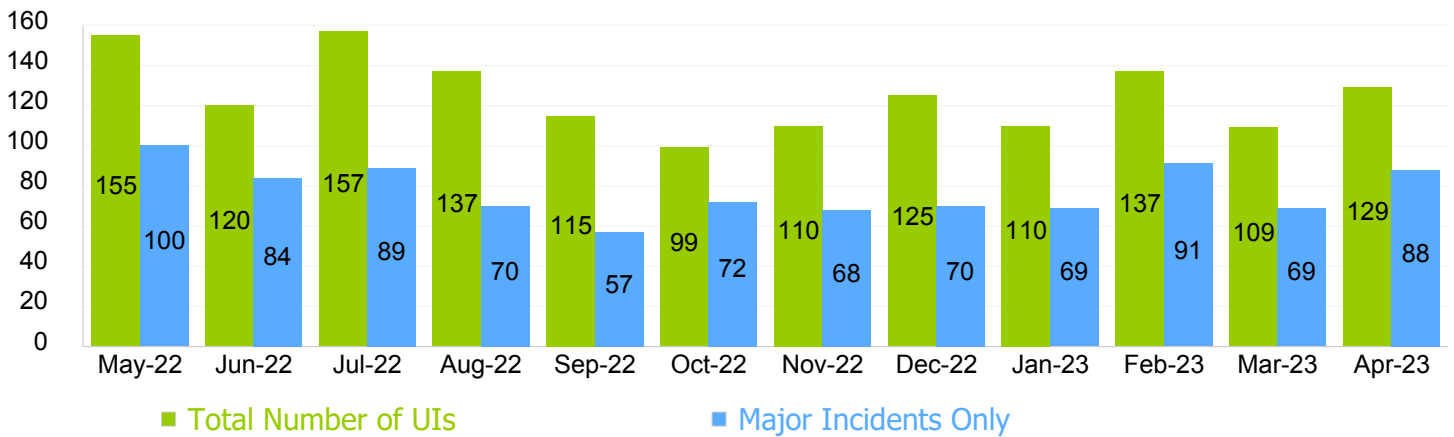


Legal Status Group	Readmission Rate												Avg	
	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23		
Civil	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pre-trial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Post-trial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%	16.7%
Combined	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	4.0%	0.0%	0.0%	0.0%	0.3%

\* Percent of discharges that returned to SEH within 30 days of discharges. It does not include those who may have been re-hospitalized at another psychiatric facility. This measure requires 30-day observation following discharge.

\*\* The post-trial denominators (discharges) per month range only between one and six, making the monthly re-admission rate high when there is any. For example, in December 2014, there was only one post-trial discharge, which was readmitted within 30 days. Thus, the 30-day readmission rate for post-trial discharge at that time was 100%.

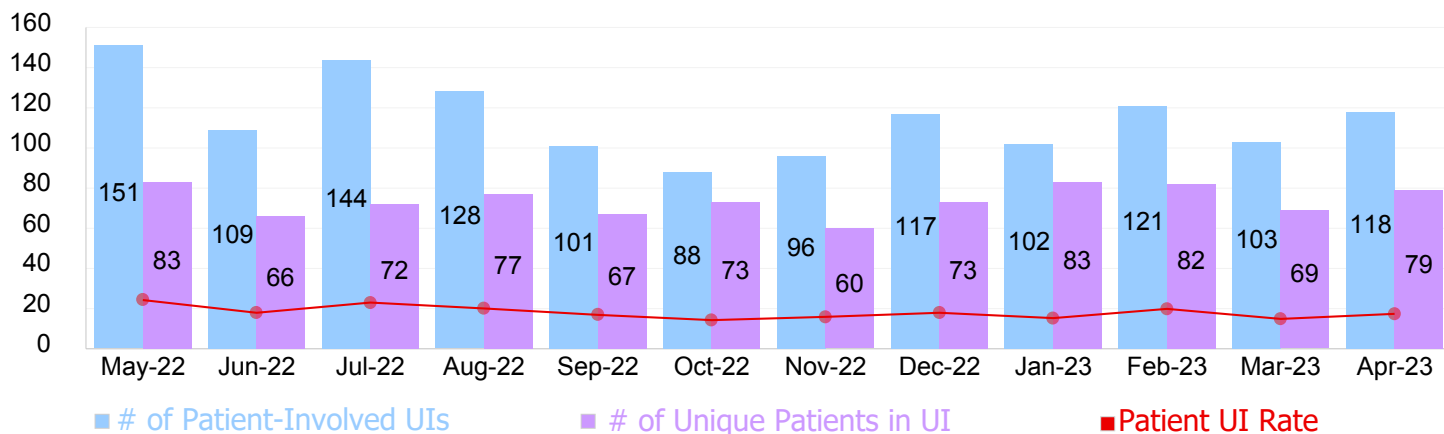
## 6. Unusual Incidents



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
Major Incidents Only	100	84	89	70	57	72	68	70	69	91	69	88	77	927
Total Number of UIs	155	120	157	137	115	99	110	125	110	137	109	129	125	1,503

\* A Major Unusual Incident is any adverse event that can compromise health, safety, and welfare of individuals in care and/or staff. An Unusual Incident is any significant occurrence or extraordinary event deviating from regular routine or established procedure, but does not rise to the level of MUI.

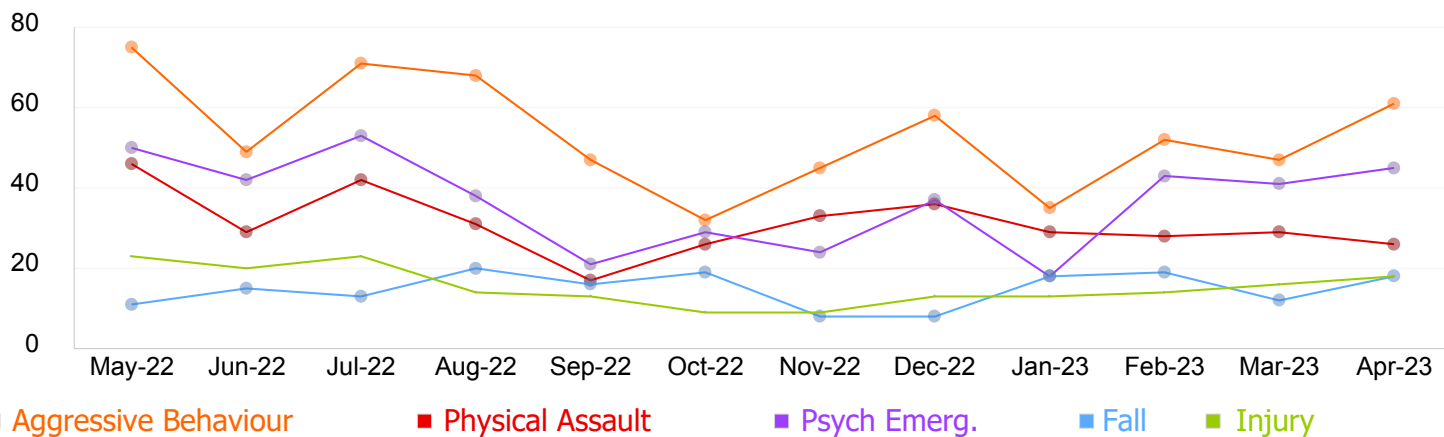
## 7. Patient-Involved Unusual Incidents



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
# of Unique Patients in UI	83	66	72	77	67	73	60	73	83	82	69	79	74	884
Patient Involved UI	151	109	144	128	101	88	96	117	102	121	103	118	115	1,378
Patient UI Rate	24.27	17.93	23.02	20.08	16.88	14.27	15.90	17.93	15.27	19.88	14.87	17.40	18.14	18.10

\* The patient UI rate is the number of patient-involved unusual incidents reported for every 1000 inpatient days.

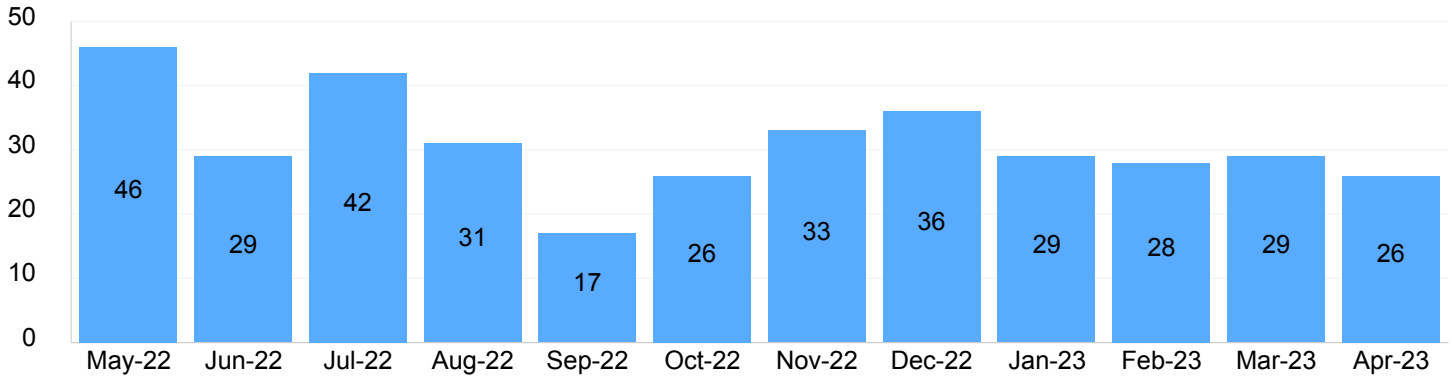
## 8. Selected Types of Incidents



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg
Physical Assault	46	29	42	31	17	26	33	36	29	28	29	26	31
Injury	23	20	23	14	13	9	9	13	13	14	16	18	15
Psychiatric Emergency	50	42	53	38	21	29	24	37	18	43	41	45	37
Falls	11	15	13	20	16	19	8	8	18	19	12	18	15
Aggressive Behaviour	75	49	71	68	47	32	45	58	35	52	47	61	53

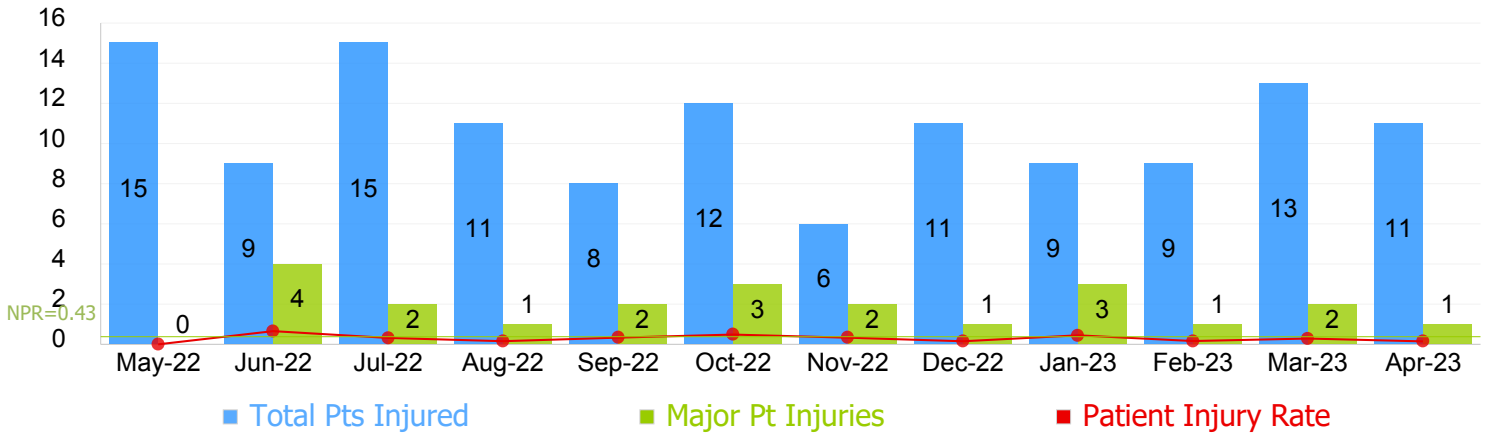
\* These are incident types that are frequently reported. Some incidents may be counted in multiple categories. For example, a physical assault incident that accompanied psychiatric emergency and injury is counted under psychiatric emergency and injury as well as under physical assault. Injury is broadly defined to include any type of injury, regardless of the cause or severity level.

## 9. Physical Assaults



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
Physical Assault	46	29	42	31	17	26	33	36	29	28	29	26	31	372

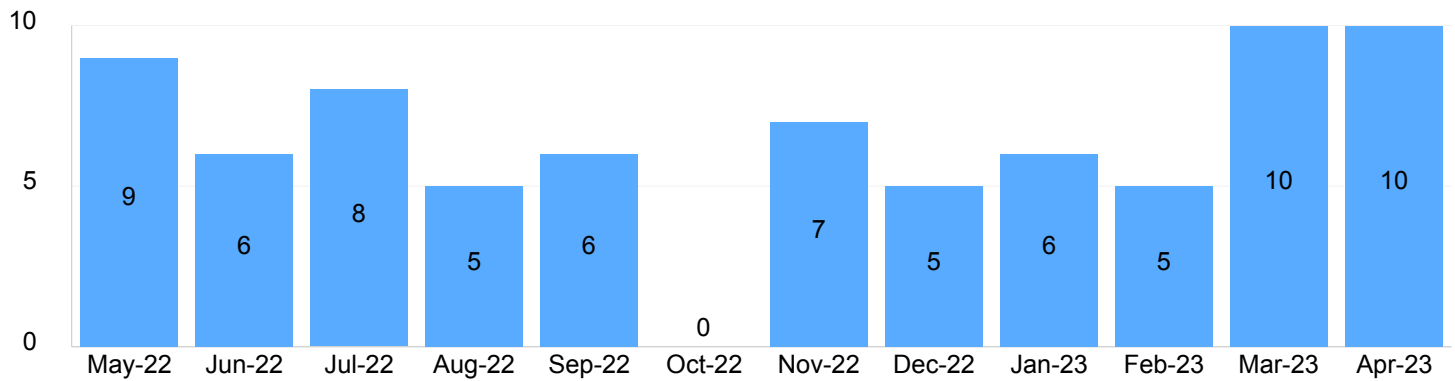
## 10. Patient Injuries



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
Total Pts Injured	15	9	15	11	8	12	6	11	9	9	13	11	11	129
Major Pt Injuries	0	4	2	1	2	3	2	1	3	1	2	1	2	22
Patient Injury Rate	0.00	0.66	0.32	0.16	0.33	0.49	0.33	0.15	0.45	0.16	0.29	0.15	0.29	0.29

\*Injury is broadly defined to include any type of injuries regardless of the cause or severity level. The total number of patients injured represents all of the reported injuries including minor injuries treated with first aid alone. However, the patient injury rate considers only the number of patient injuries that required treatment for minor injuries based on the NRI definition. The patient injury rate is the number of 'major' patient injuries per every 1000 inpatient days.

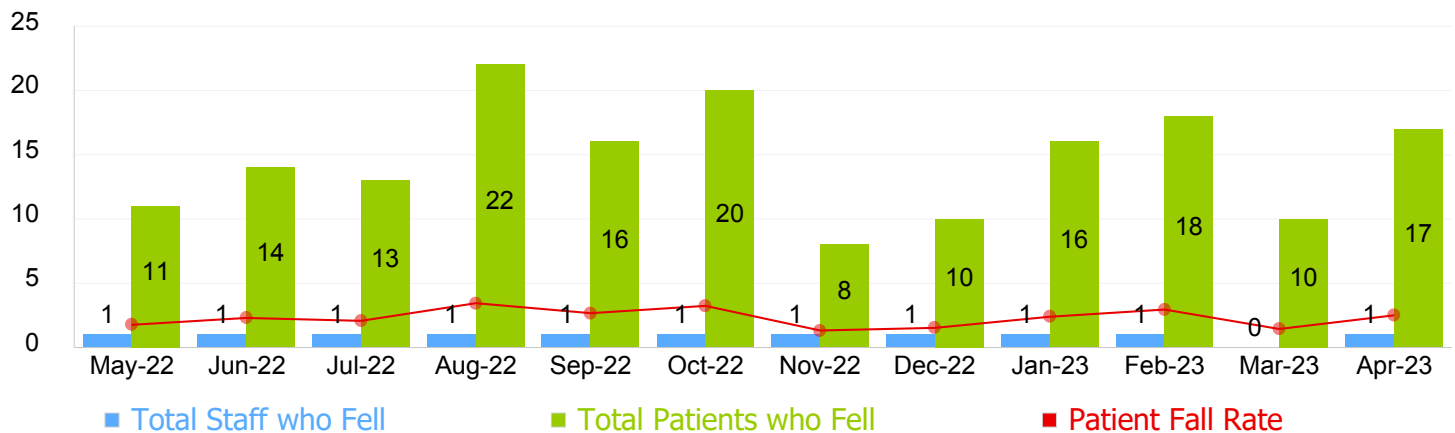
## 11. Staff Injuries



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
# of Staff Injured	9	6	8	5	6	0	7	5	6	5	10	10	6	77

\*Injury is broadly defined to include any type of injuries regardless of the cause or severity. The total number of staff injured represents all of the reported staff injuries including treatment for minor injuries.

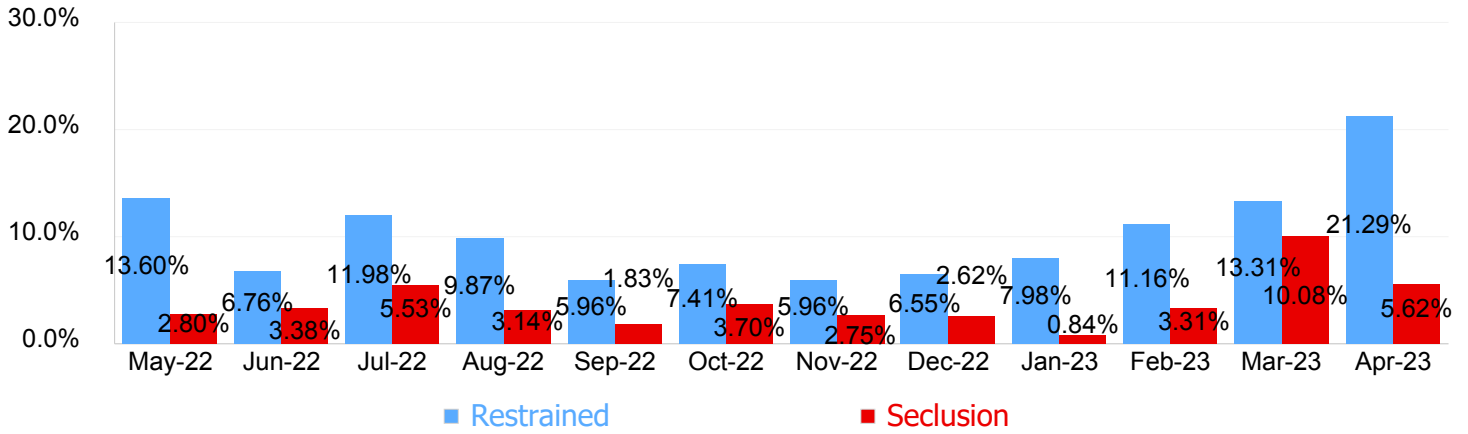
## 12. Patient and Staff Falls



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
Total Staff who Fell	1	1	1	1	1	1	1	1	1	1	0	1	1	11
Total Patients who Fell	11	14	13	22	16	20	8	10	16	18	10	17	15	175
Patient Fall Rate	1.77	2.30	2.08	3.45	2.67	3.24	1.32	1.53	2.40	2.96	1.44	2.51	2.31	2.30

\* The patient fall rate is the number of patient falls per every 1000 inpatient days.

### 13. Percent of Patients Restrained or Secluded



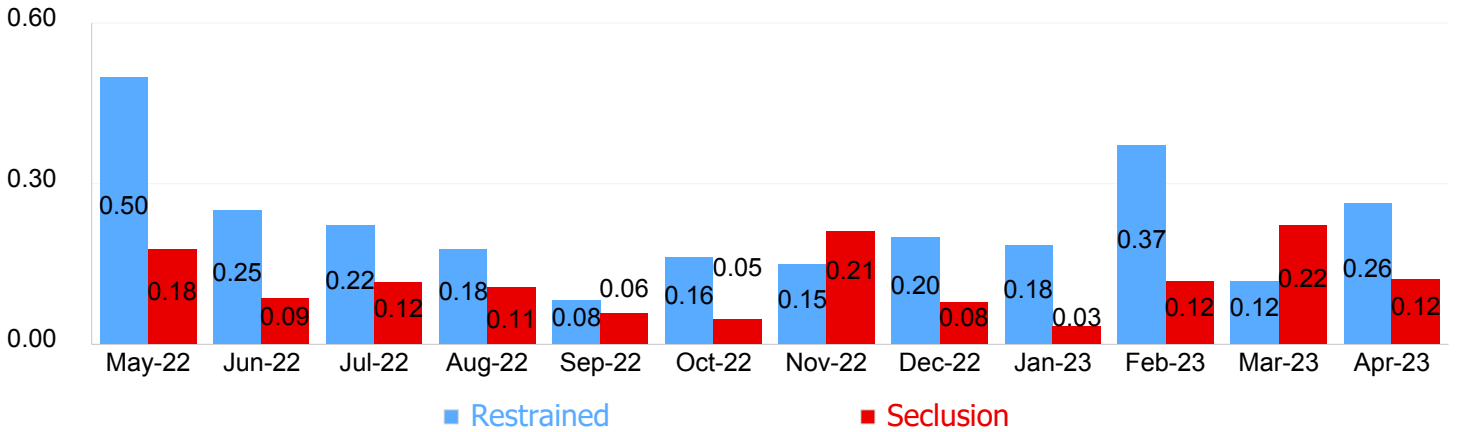
	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg
Seclusion	2.80%	3.38%	5.53%	3.14%	1.83%	3.70%	2.75%	2.62%	0.84%	3.31%	10.08%	5.62%	3.80%
Restraint	13.60%	6.76%	11.98%	9.87%	5.96%	7.41%	5.96%	6.55%	7.98%	11.16%	13.31%	21.29%	10.15%

As of January 2022, the National Public Rates (NPR) Weighted Averages are as follows: % of Patients Restrained NPR = 5.768 and the % of Patients Secluded NPR = 2.445.

Percent of unique patients who were restrained at least once and percent of unique patients who were secluded at least once. The denominator includes all individuals who were served in care 1+ day during month.

\*\*\*As of May 2019, SEH refined the logic of this calculation to count patients who were restrained via a physical hold and a mechanical restraint only once. Previous logic counted the same person twice if they received both a physical hold and mechanical restraint in the same month.

### 14. Restraint Hours Rate & Seclusion Hours Rate



Event Type	Hour Rate												Avg
	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	
Restraint	0.50	0.25	0.22	0.18	0.08	0.16	0.15	0.20	0.18	0.37	0.12	0.26	0.22
Seclusion	0.18	0.09	0.12	0.11	0.06	0.05	0.21	0.08	0.03	0.12	0.22	0.12	0.11

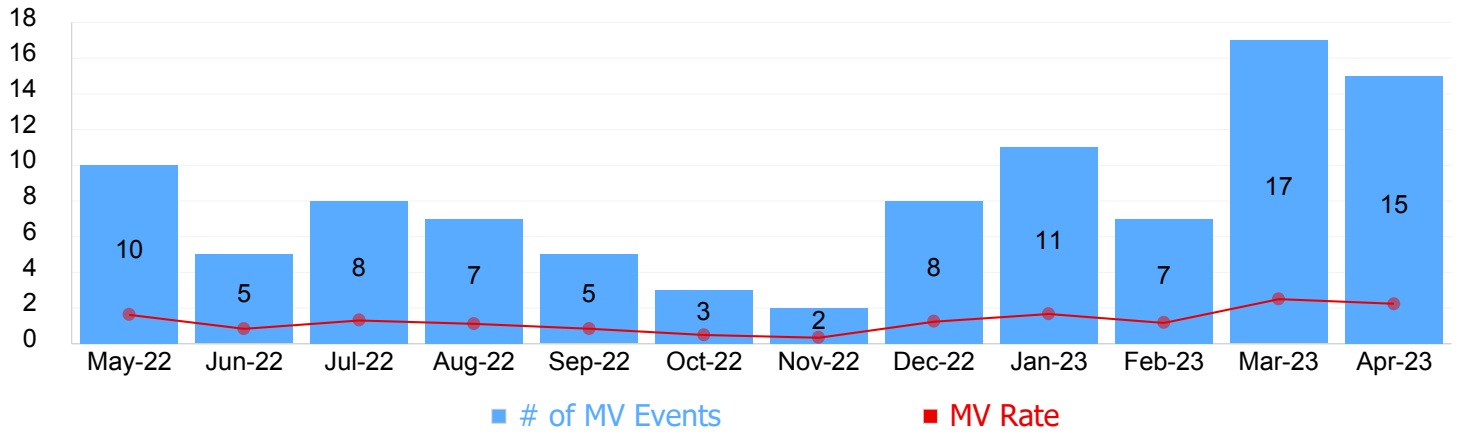
As of January 2022, the National Public Rates (NPR) Weighted Averages are as follows: Restraint Hours Rate NPR = 0.779 and the Seclusion Hours Rate NPR = 0.332.

\* Restraint/Seclusion Hours Rate: Number of hours spent in restraint/seclusion for every 1000 inpatient hours.

\*\* The duration of each physical hold event is counted as 1 minute as a physical hold is ordered and used only as a temporary intervention that lasts less than a minute to break up any physical conflicts or to administer emergency medications.



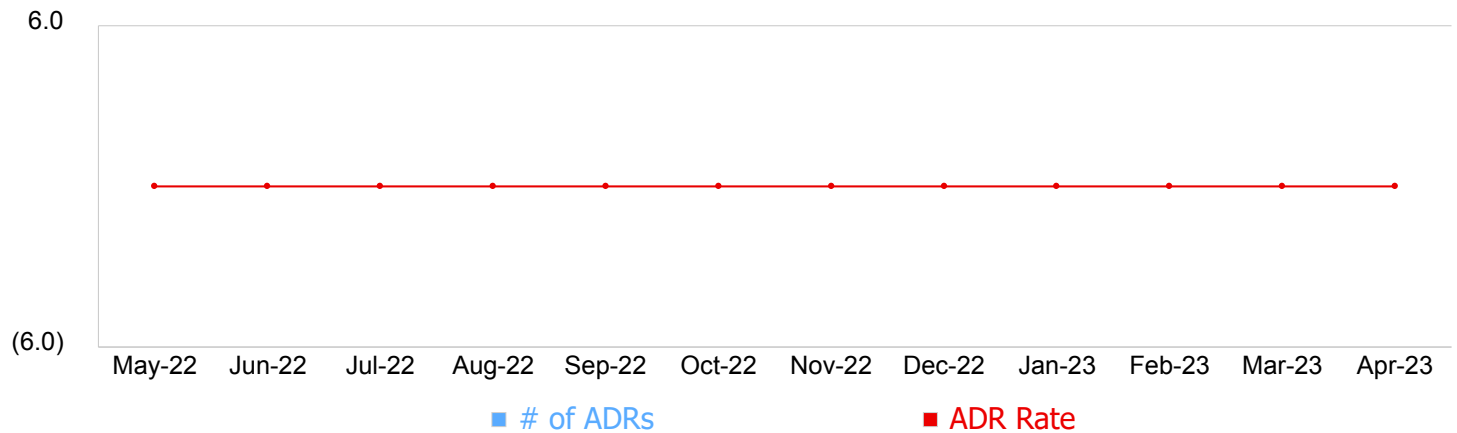
### 15. Reported Medication Variance Events & Rate



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
# of MV Events	10	5	8	7	5	3	2	8	11	7	17	15	8	98
MV Rate	1.62	0.84	1.31	1.12	0.84	0.49	0.34	1.24	1.67	1.17	2.50	2.24	1.28	15.37

\* MV Rate: Number of reported medication variance events that occurred for every 1000 inpatient days.

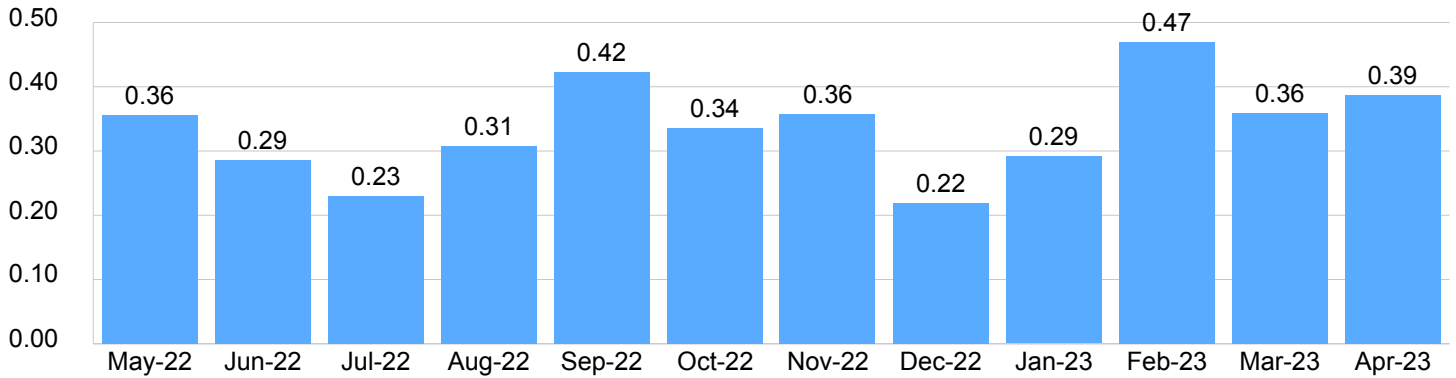
### 16. Reported Adverse Drug Reactions & Rate



(1)	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
NumADRs	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ADR Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	--

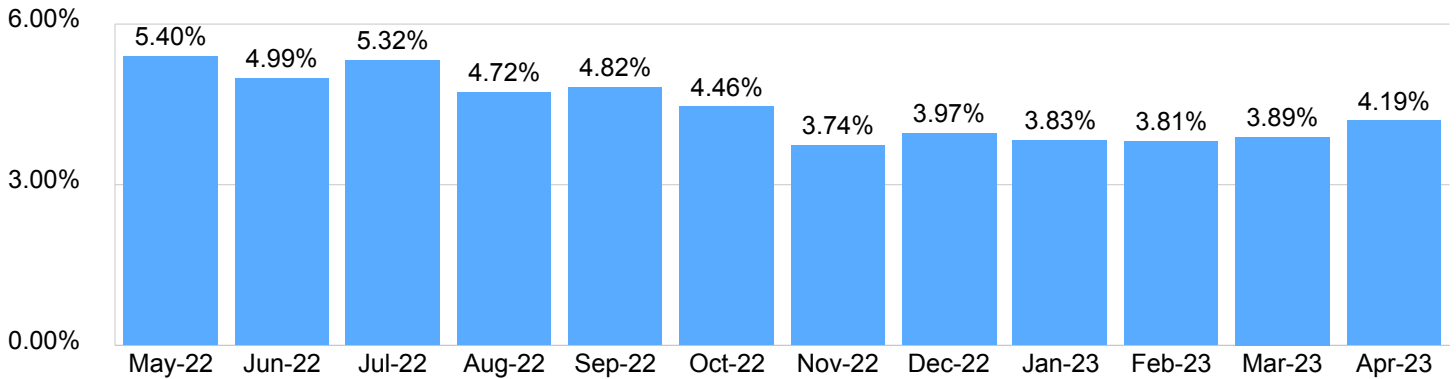
\* ADR Rate: Number of reported adverse drug reaction events that occurred for every 1000 inpatient days.

## 17. Percent of Missing Documentation on Med-Administration



Event Type	Rate												Avg
	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	
PercOfMissingDocumentation	0.36	0.29	0.23	0.31	0.42	0.34	0.36	0.22	0.29	0.47	0.36	0.39	0.34

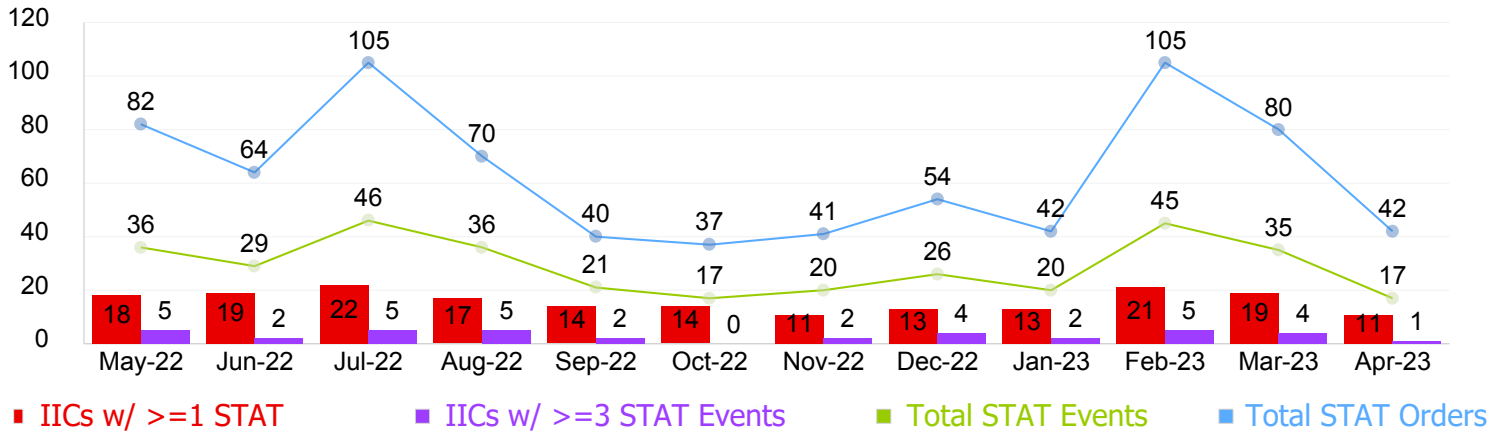
## 18. Medication Refusal Rate



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Average
Medication Refusal Rate	5.40	4.99	5.32	4.72	4.82	4.46	3.74	3.97	3.83	3.81	3.89	4.19	4.43

\* Medication Refusal Rate: the number of refused medication doses divided by the total number of doses scheduled for administration.

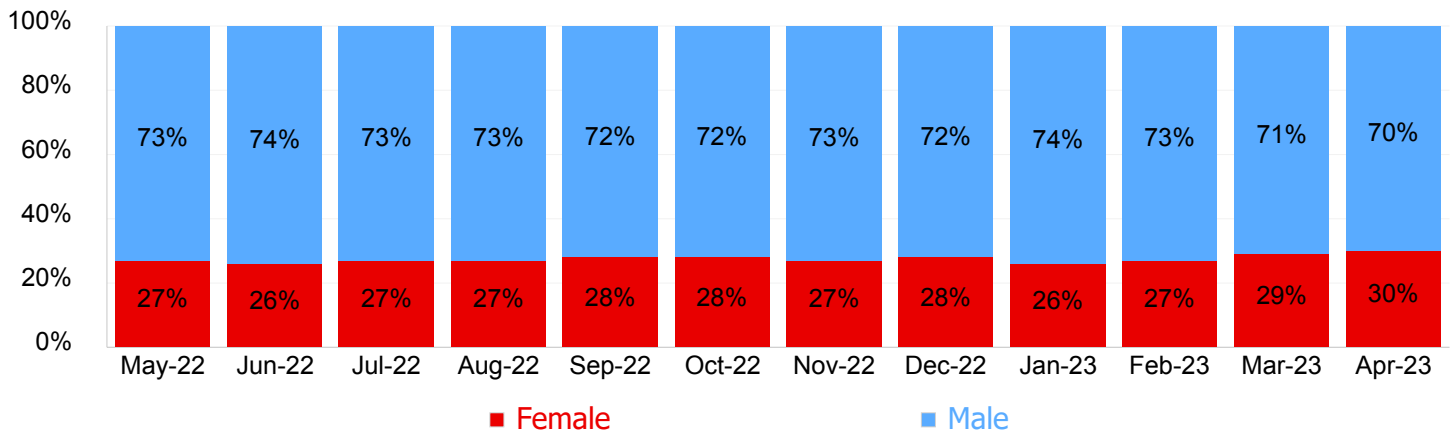
### 19. Number of STAT Events and Individuals Involved



	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Avg	Total
IICs w/ >=1 STAT	18	19	22	17	14	14	11	13	13	21	19	11	16	192
IICs w/ >=3 STAT Events	5	2	5	5	2	0	2	4	2	5	4	1	3	37
Total STAT Events	36	29	46	36	21	17	20	26	20	45	35	17	29	348
Total STAT Orders	82	64	105	70	40	37	41	54	42	105	80	42	64	762

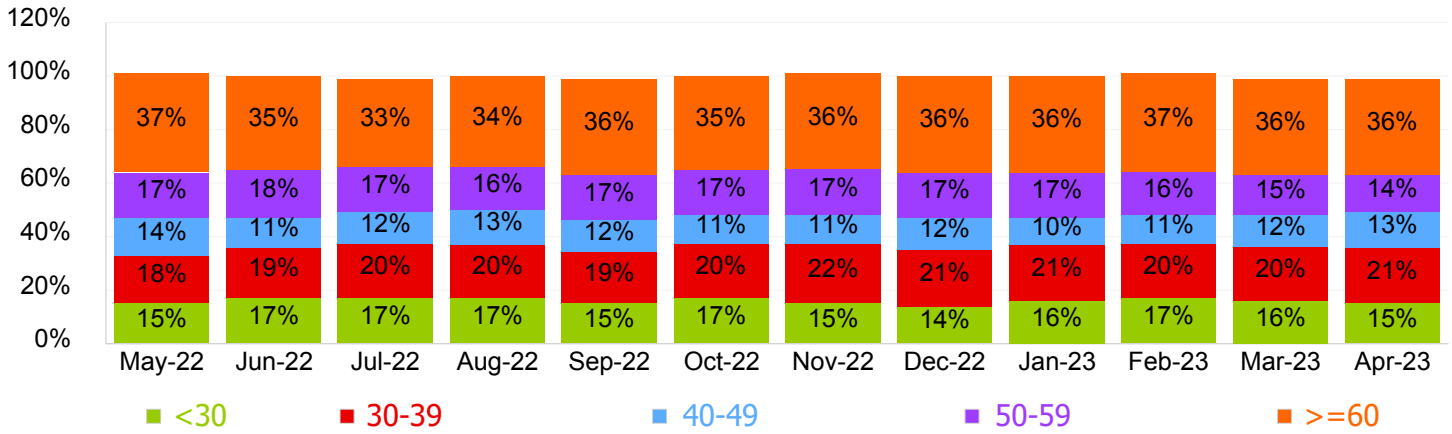
\* A STAT event is an emergency medication prescribed and administered to a person involuntarily.

### 20. Demographics - Trend of Gender Distribution



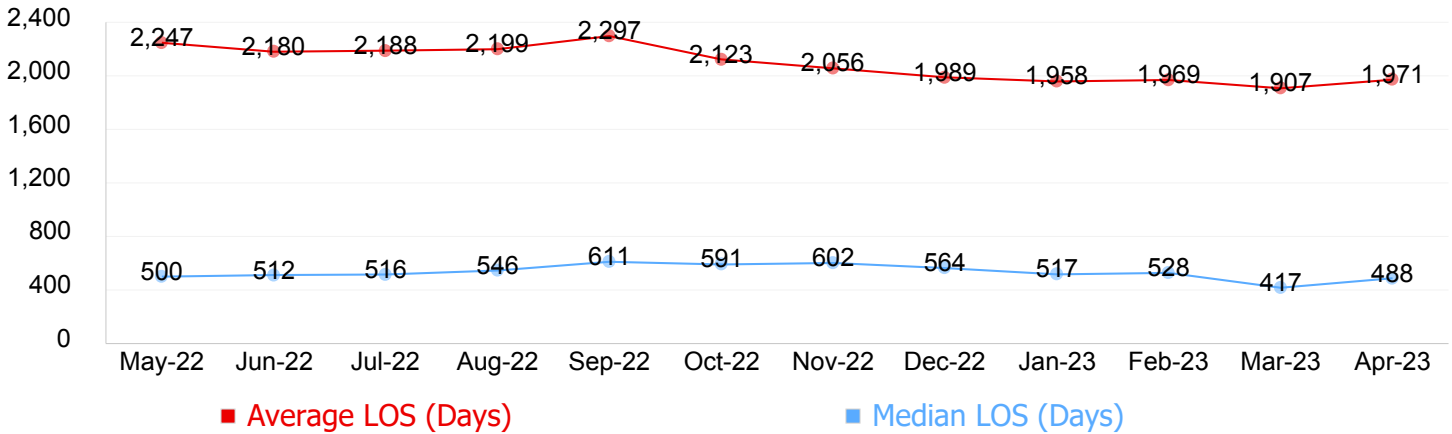
Gender	Rate												Avg
	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	
Female	27%	26%	27%	27%	28%	28%	27%	28%	26%	27%	29%	30%	28%
Male	73%	74%	73%	73%	72%	72%	73%	72%	74%	73%	71%	70%	73%

## 21. Demographics - Trend of Age Distribution



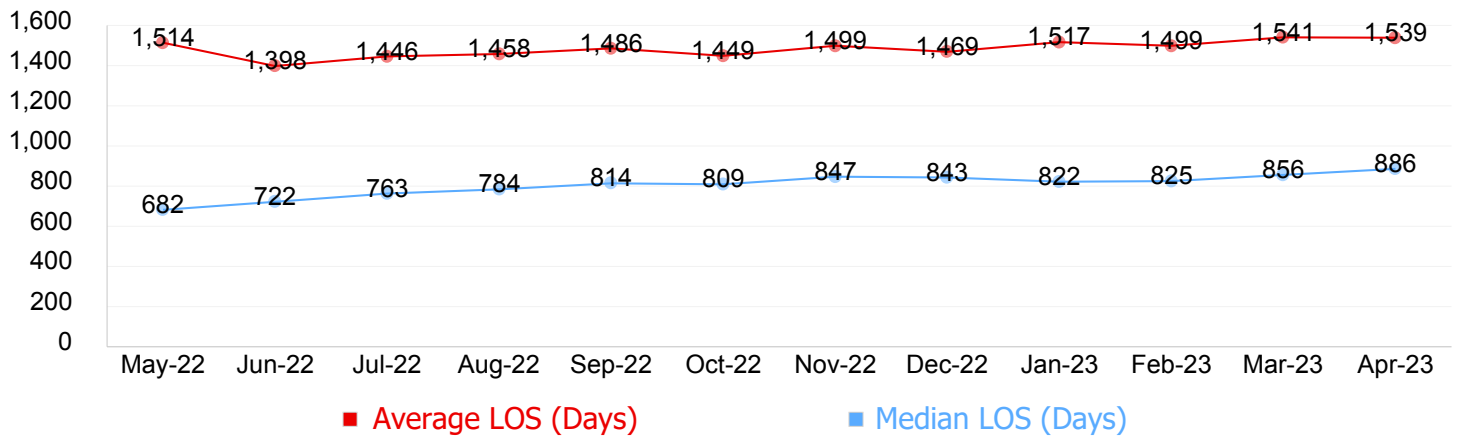
Age Group	Rate												Avg
	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	
<30	15%	17%	17%	17%	15%	17%	15%	14%	16%	17%	16%	15%	16%
30-39	18%	19%	20%	20%	19%	20%	22%	21%	21%	20%	20%	21%	20%
40-49	14%	11%	12%	13%	12%	11%	11%	12%	10%	11%	12%	13%	12%
50-59	17%	18%	17%	16%	17%	17%	17%	17%	17%	16%	15%	14%	17%
60+	37%	35%	33%	34%	36%	35%	36%	36%	36%	37%	36%	36%	36%

## 22. Length of Stay - Average and Median Length of Stay for Individuals in Care



Type	Individuals In Care											
	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23
Average LOS	2,247	2,180	2,188	2,199	2,297	2,123	2,056	1,989	1,958	1,969	1,907	1,971
Median LOS	500	512	516	546	611	591	602	564	517	528	417	488

## 23. Length of Stay - Length of Stay for Individuals in Care with Civil Legal Status



Type	Civil											
	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23
Average LOS	1,514	1,398	1,446	1,458	1,486	1,449	1,499	1,469	1,517	1,499	1,541	1,539
Median LOS	682	722	763	784	814	809	847	843	822	825	856	886