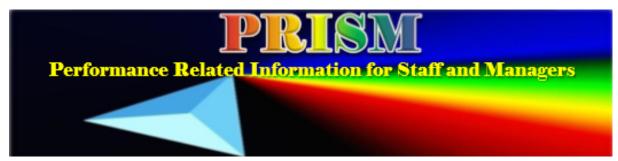


# Government of the District of Columbia Department of Behavioral Health (DBH)





Oct-19

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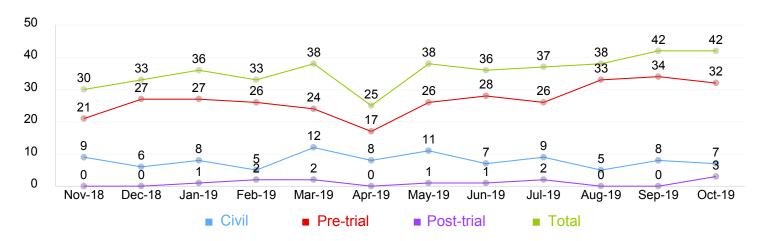
#### **Data Disclaimer**

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.

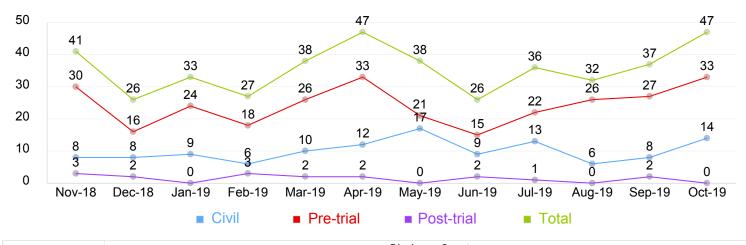
#### 1. Admissions



| Metrics               |        |        |        |        |        |        | Admissi | on Count |        |        |        |        |     |       |
|-----------------------|--------|--------|--------|--------|--------|--------|---------|----------|--------|--------|--------|--------|-----|-------|
| Legal Status<br>Group | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19  | Jun-19   | Jul-19 | Aug-19 | Sep-19 | Oct-19 | Avg | Total |
| Civil                 | 9      | 6      | 8      | 5      | 12     | 8      | 11      | 7        | 9      | 5      | 8      | 7      | 8   | 95    |
| Pre-trial             | 21     | 27     | 27     | 26     | 24     | 17     | 26      | 28       | 26     | 33     | 34     | 32     | 27  | 321   |
| Post-trial            | 0      | 0      | 1      | 2      | 2      | 0      | 1       | 1        | 2      | 0      | 0      | 3      | 1   | 12    |
| Total                 | 30     | 33     | 36     | 33     | 38     | 25     | 38      | 36       | 37     | 38     | 42     | 42     | 36  | 428   |

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

## 2. Discharges



|                       |        |        |        |        |        |        | Dischar | ge Count |        |        |        |        |     |       |
|-----------------------|--------|--------|--------|--------|--------|--------|---------|----------|--------|--------|--------|--------|-----|-------|
| Legal Status<br>Group | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19  | Jun-19   | Jul-19 | Aug-19 | Sep-19 | Oct-19 | Avg | Total |
| Civil                 | 8      | 8      | 9      | 6      | 10     | 12     | 17      | 9        | 13     | 6      | 8      | 14     | 10  | 120   |
| Pre-trial             | 30     | 16     | 24     | 18     | 26     | 33     | 21      | 15       | 22     | 26     | 27     | 33     | 24  | 291   |
| Post-trial            | 3      | 2      | 0      | 3      | 2      | 2      | 0       | 2        | 1      | 0      | 2      | 0      | 2   | 17    |
| Total                 | 41     | 26     | 33     | 27     | 38     | 47     | 38      | 26       | 36     | 32     | 37     | 47     | 36  | 428   |

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

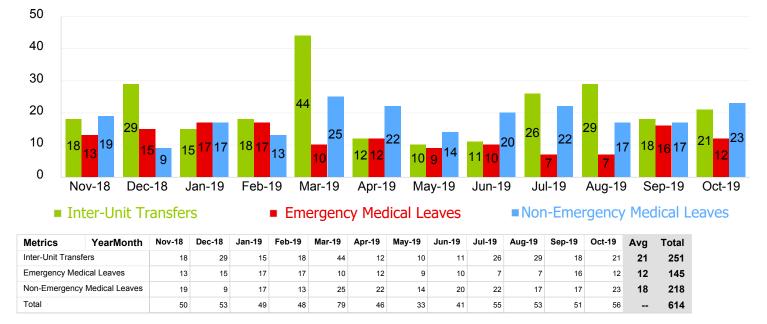
## 3. Average Daily Census



| Census_Status      | Metrics   |        |        |        |        |        | Р      | atient Cou | ınt    |        |        |        |        |         |
|--------------------|-----------|--------|--------|--------|--------|--------|--------|------------|--------|--------|--------|--------|--------|---------|
|                    | YearMonth | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19     | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Oct-19 | Average |
| a. Present on Unit |           | 270    | 266    | 272    | 274    | 272    | 261    | 254        | 260    | 264    | 269    | 273    | 269    | 267     |
| b. On AL           |           | 3      | 3      | 4      | 5      | 3      | 5      | 1          | 2      | 2      | 1      | 3      | 2      | 3       |
| c. On UL           |           | 1      | 1      | 1      | 1      | 1      | 1      | 0          | 0      | 0      | 0      | 0      | 0      | 0       |
| Total              |           | 274    | 271    | 276    | 279    | 277    | 267    | 256        | 262    | 265    | 271    | 276    | 271    |         |

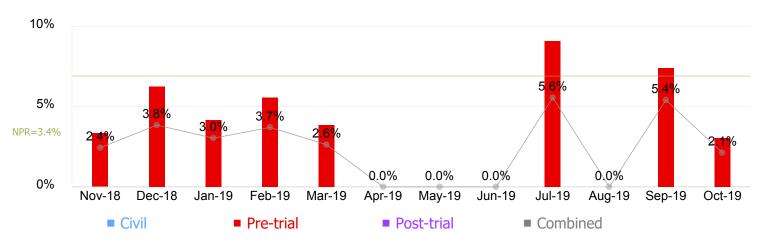
<sup>\*</sup> Data above is the daily average number of individuals counted at 11:59 PM every day during each month. Census data is tracked via the AVATAR database.

#### 4. Transfers



<sup>\*</sup> Number of inter-unit transfers that occurred during month and number of emergency medical leaves that were initiated during month.

## 5. 30-Day Readmission Rate



|                    | Readmission Rate |        |        |        |        |        |        |        |        |        |        |        |      |  |
|--------------------|------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|------|--|
| Legal Status Group | Nov-18           | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Oct-19 | Avg  |  |
| 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% |  |
| Pre-trial          | 3.3%             | 6.3%   | 4.2%   | 5.6%   | 3.8%   | 0.0%   | 0.0%   | 0.0%   | 9.1%   | 0.0%   | 7.4%   | 3.0%   | 3.6% |  |
| Post-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% |  |
| Combined           | 2.4%             | 3.8%   | 3.0%   | 3.7%   | 2.6%   | 0.0%   | 0.0%   | 0.0%   | 5.6%   | 0.0%   | 5.4%   | 2.1%   | 2.4% |  |

<sup>\*</sup> 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.

<sup>\*\*</sup> 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%.

Total Number of

Patient UI Rate

Uls

#### 6. Unusual Incidents



164

167

160

192

198

241

176

186

2,231

#### 7. Patient-Involved Unusual Incidents

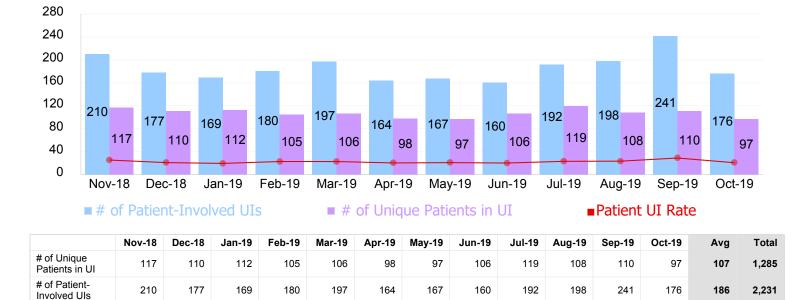
177

169

180

197

210



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

22.92

22.90

20.43

20.99

20.27

23.26

23.53

29.02

20.85

22.53

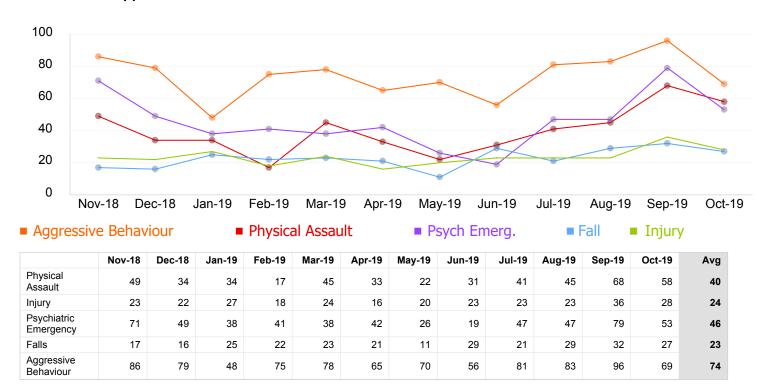
19.66

21.03

25.49

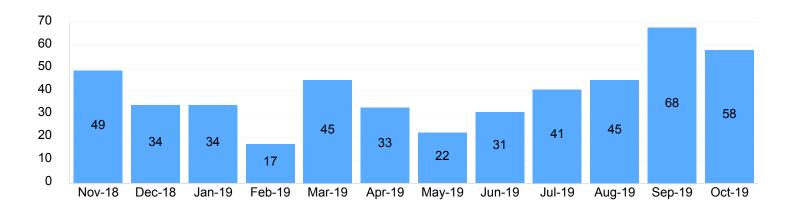
<sup>\*</sup> A Major Unusual Incident is any adverse even that can compromise health, safety, and welfare of individuals in care and/or staff. An Unusual Incident is any significant occurrence or extraordinary event deviating from regular routine or established procedure, but does not rise to the level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

## 8. Selected Types of Incidents



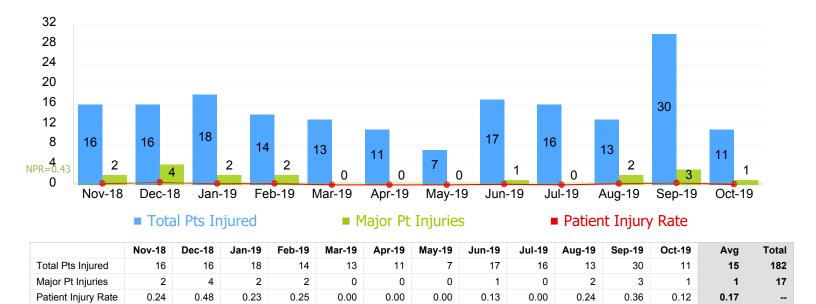
<sup>\*</sup> These are incident types that are frequently reported. Some incidents may be counted in multiple categories. For example, a physical assault incident that accompanied psychiatric emergency and injury is counted under psychiatric emergency and injury as well as under physical assault. Injury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

## 9. Physical Assaults



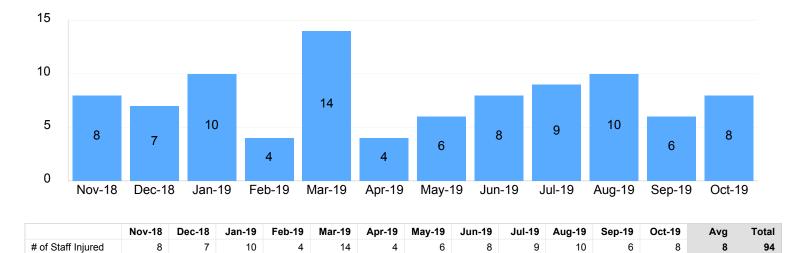
|   |    |    |    |    |    | Physical | Assault |    |    |    |    |    |       |
|---|----|----|----|----|----|----------|---------|----|----|----|----|----|-------|
| Nov-18 Dec-18 Jan-19 Feb-19 Mar-19 Apr-19 May-19 Jun-19 Jul-19 Aug-19 Sep-19 Oct-19 Avg Total |    |    |    |    |    |          |         |    |    |    |    |    | Total |
| 49  | 34 | 34 | 17 | 45 | 33 | 22       | 31      | 41 | 45 | 68 | 58 | 40 | 477   |

## 10. Patient Injuries



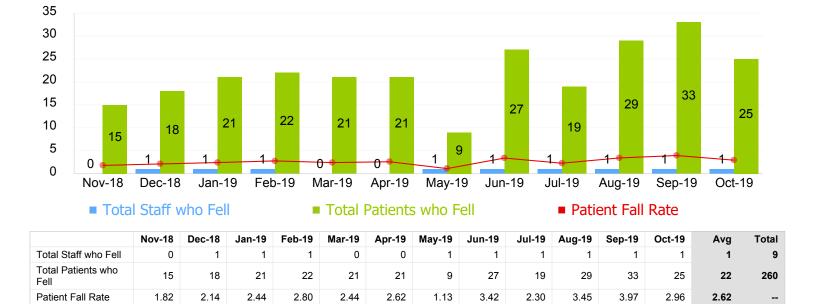
<sup>\*</sup>Injury is broadly defined to include any type of injuries regardless of the cause or severity level. The total number of patients injured represents all of the reported injuries including minor injuries treated with first aid alone. However, the patient injury rate considers only the number 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



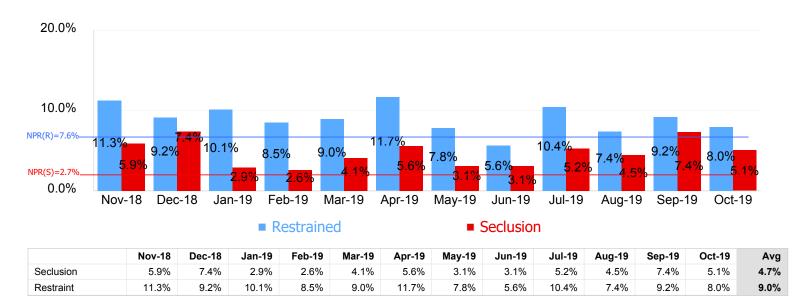
<sup>\*</sup>Injury is broadly defined to include any type of injuries regardless of the cause or severity. The total number of staff injured represents all of the reported staff injuries including treatment for minor injuries.

#### 12. Patient and Staff Falls



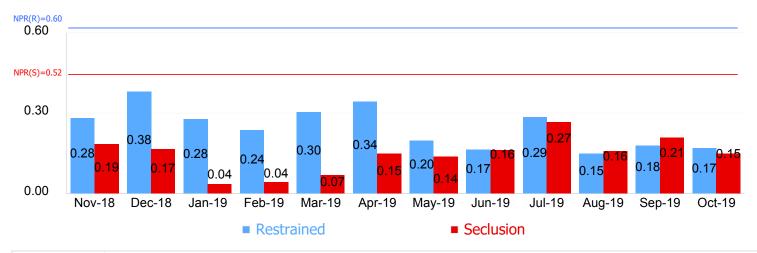
 $<sup>\</sup>ensuremath{^{*}}$  The patient fall rate is the number of patient falls per every 1000 inpatient days.

#### 13. Percent of Patients Restrained or Secluded



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.

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



| Event Type |        |        |        |        |        |        | Hour Rate |        |        |        |        |        |      |
|------------|--------|--------|--------|--------|--------|--------|-----------|--------|--------|--------|--------|--------|------|
| Event Type | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19    | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Oct-19 | Avg  |
| Restraint  | 0.28   | 0.38   | 0.28   | 0.24   | 0.30   | 0.34   | 0.20      | 0.17   | 0.29   | 0.15   | 0.18   | 0.17   | 0.25 |
| Seclusion  | 0.19   | 0.17   | 0.04   | 0.04   | 0.07   | 0.15   | 0.14      | 0.16   | 0.27   | 0.16   | 0.21   | 0.15   | 0.14 |

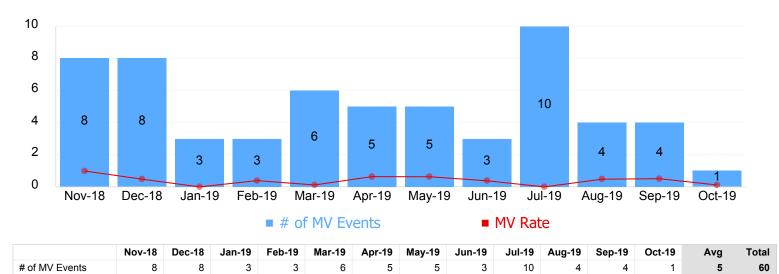
<sup>\*</sup> Restraint/Seclusion Hours Rate: Number of hours spent in restraint/seclusion for every 1000 inpatient hours.

<sup>\*\*\*</sup>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.

<sup>\*\*</sup> 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

MV Rate

## 15. Reported Medication Variance Events & Rate



0.64

0.63

0.38

0.00

0.51

0.48

0.12

0.40

4.74

0.00

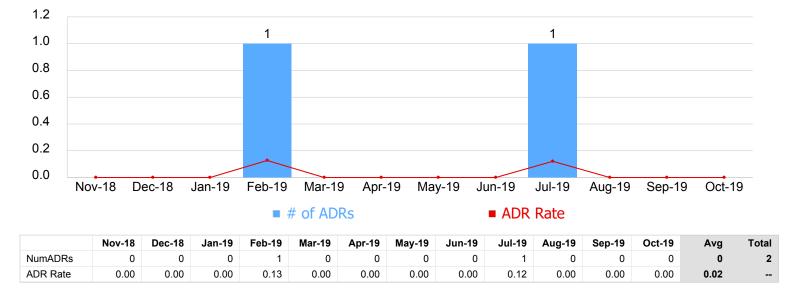
0.39

0.12

## 16. Reported Adverse Drug Reactions & Rate

0.48

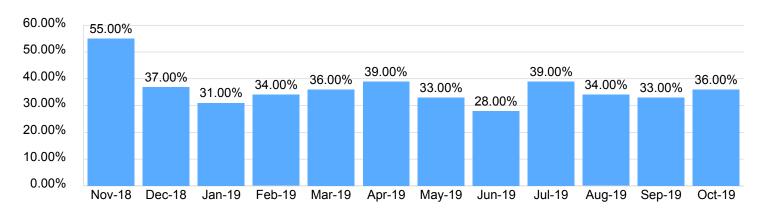
0.99



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

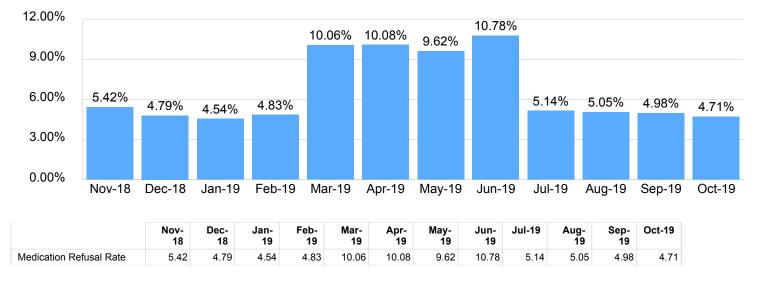
<sup>\*</sup> MV Rate: Number of reported medication variance events that occurred for every 1000 inpatient days.

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



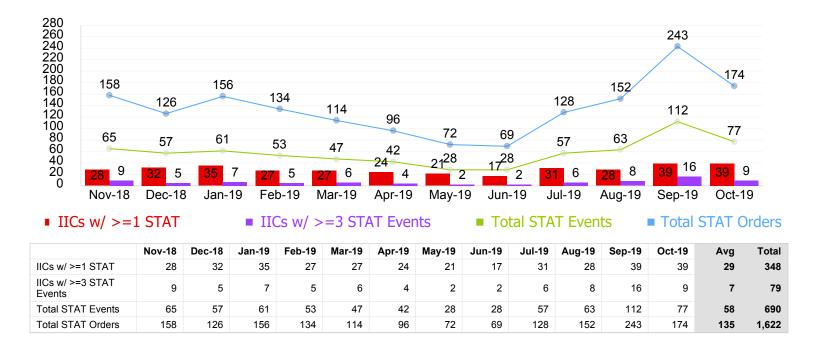
| Event Type                 |        |   |        |        |        |        | Rate   |        |        |        |        |        |        |
|----------------------------|--------|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Event Type                 | Nov-18 | v-18 Dec-18 Jan-19 Feb-19 Mar-19 Apr-19 |        |        |        | Apr-19 | May-19 | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Oct-19 | Avg    |
| PercOfMissingDocumentation | 55.00% | 37.00%                                  | 31.00% | 34.00% | 36.00% | 39.00% | 33.00% | 28.00% | 39.00% | 34.00% | 33.00% | 36.00% | 36.25% |

#### 18. Medication Refusal Rate



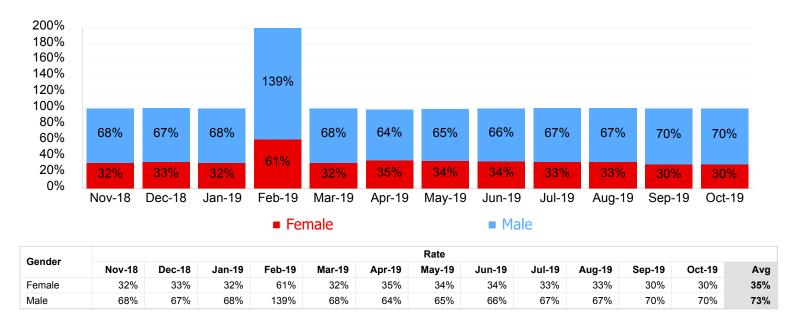
<sup>\*</sup> Medication Refusal Rate: the number of refused medication doses divided by the total number of doses scheduled for administration.

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

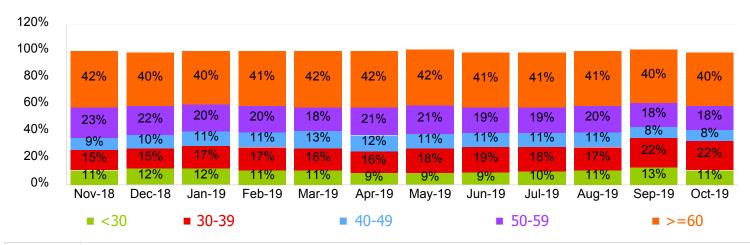


<sup>\*</sup> A STAT event is an emergency medication prescribed and administered to a person involuntarily.

## 20. Demographics - Trend of Gender Distribution

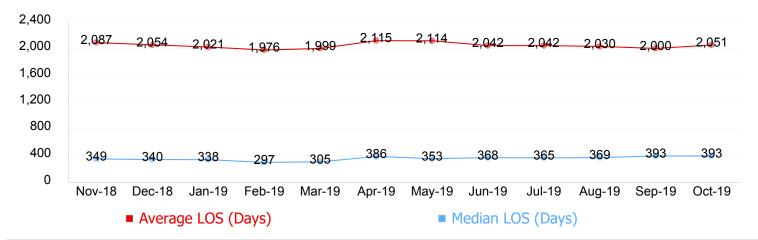


## 21. Demographics - Trend of Age Distribution



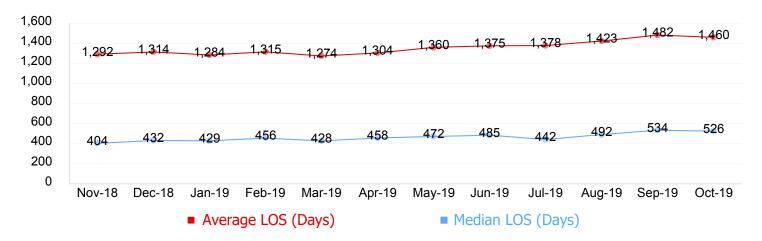
| Age Group |        | Rate   |        |        |        |        |        |        |        |        |        |        |     |  |  |
|-----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----|--|--|
| Age Group | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Oct-19 | Avg |  |  |
| <30       | 11%    | 12%    | 12%    | 11%    | 11%    | 9%     | 9%     | 9%     | 10%    | 11%    | 13%    | 11%    | 11% |  |  |
| 30-39     | 15%    | 15%    | 17%    | 17%    | 16%    | 16%    | 18%    | 19%    | 18%    | 17%    | 22%    | 22%    | 18% |  |  |
| 40-49     | 9%     | 10%    | 11%    | 11%    | 13%    | 12%    | 11%    | 11%    | 11%    | 11%    | 8%     | 8%     | 11% |  |  |
| 50-59     | 23%    | 22%    | 20%    | 20%    | 18%    | 21%    | 21%    | 19%    | 19%    | 20%    | 18%    | 18%    | 20% |  |  |
| 60+       | 42%    | 40%    | 40%    | 41%    | 42%    | 42%    | 42%    | 41%    | 41%    | 41%    | 40%    | 40%    | 41% |  |  |

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



| Tuna        |        |        |        |        |        | Individual | s In Care |        |        |        |        |        |
|-------------|--------|--------|--------|--------|--------|------------|-----------|--------|--------|--------|--------|--------|
| Туре        | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19     | May-19    | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Oct-19 |
| Average LOS | 2,087  | 2,054  | 2,021  | 1,976  | 1,999  | 2,115      | 2,114     | 2,042  | 2,042  | 2,030  | 2,000  | 2,051  |
| Median LOS  | 349    | 340    | 338    | 297    | 305    | 386        | 353       | 368    | 365    | 369    | 393    | 393    |

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



| Tuna        |        |        |        |        |        | Civ    | ril    |        |        |        |        |        |
|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Туре        | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Oct-19 |
| Average LOS | 1,292  | 1,314  | 1,284  | 1,315  | 1,274  | 1,304  | 1,360  | 1,375  | 1,378  | 1,423  | 1,482  | 1,460  |
| Median LOS  | 404    | 432    | 429    | 456    | 428    | 458    | 472    | 485    | 442    | 492    | 534    | 526    |