



**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

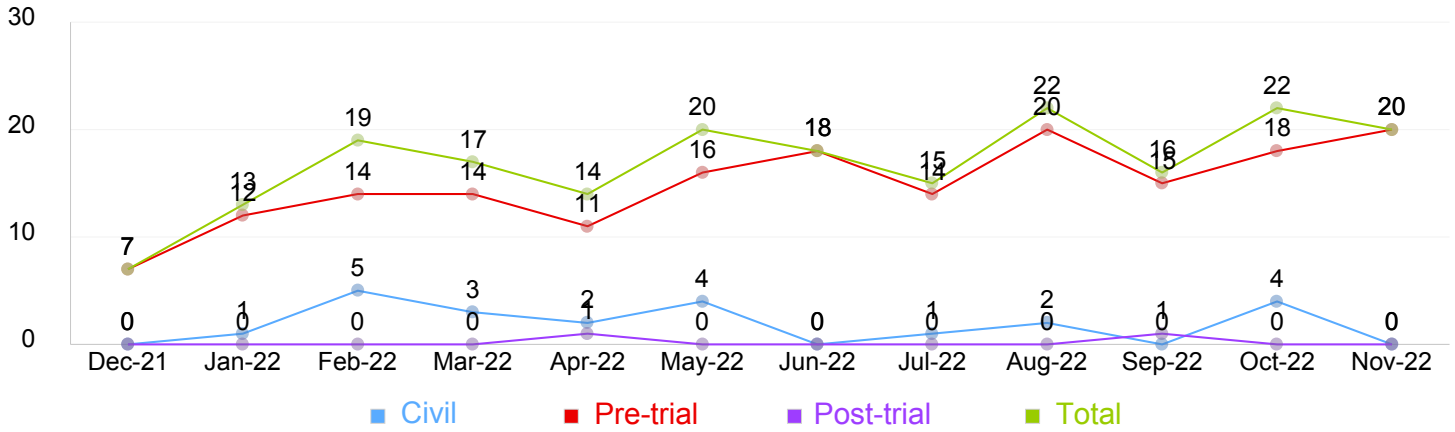
**Data Disclaimer**

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.

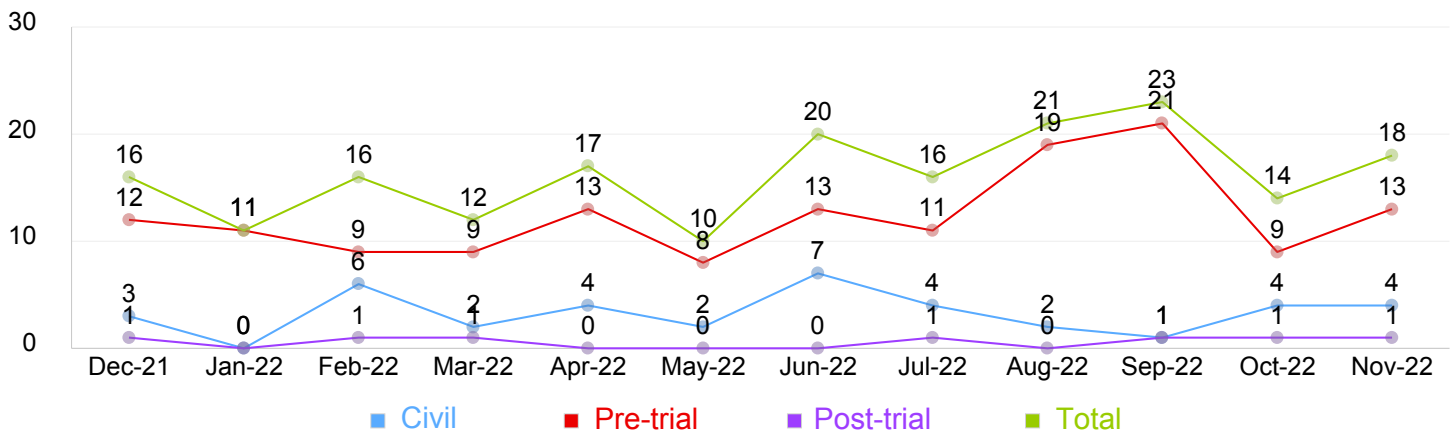
## 1. Admissions



Metrics	Admission Count												Avg	Total
Legal Status Group	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22		
Civil	0	1	5	3	2	4	0	1	2	0	4	0	2	22
Pre-trial	7	12	14	14	11	16	18	14	20	15	18	20	15	179
Post-trial	0	0	0	0	1	0	0	0	0	1	0	0	0	2
<b>Total</b>	<b>7</b>	<b>13</b>	<b>19</b>	<b>17</b>	<b>14</b>	<b>20</b>	<b>18</b>	<b>15</b>	<b>22</b>	<b>16</b>	<b>22</b>	<b>20</b>	<b>17</b>	<b>203</b>

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

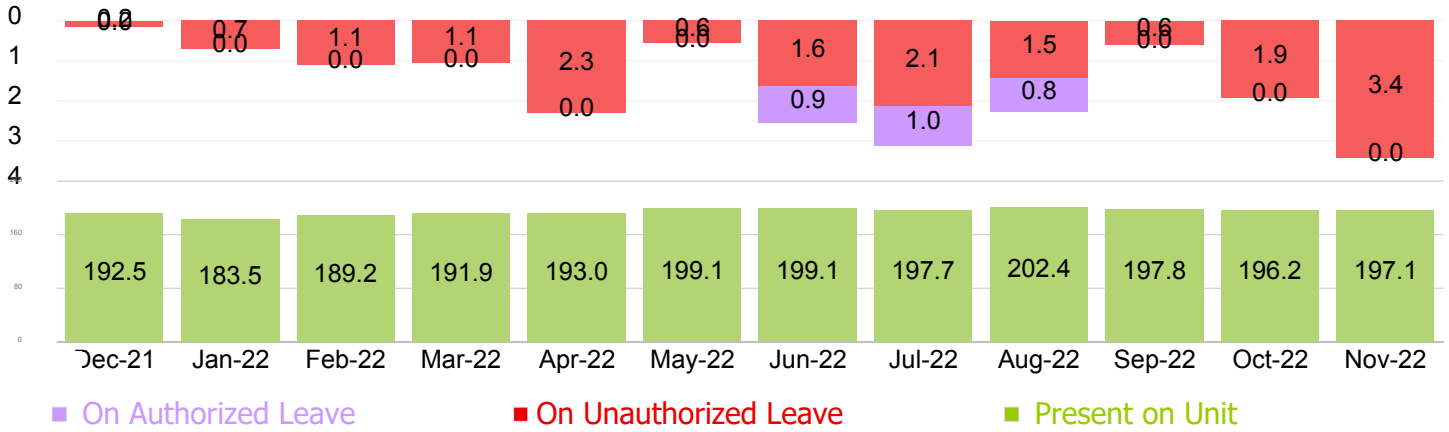
## 2. Discharges



Legal Status Group	Discharge Count												Avg	Total
Legal Status Group	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22		
Civil	3	0	6	2	4	2	7	4	2	1	4	4	4	39
Pre-trial	12	11	9	9	13	8	13	11	19	21	9	13	12	148
Post-trial	1	0	1	1	0	0	0	1	0	1	1	1	1	7
<b>Total</b>	<b>16</b>	<b>11</b>	<b>16</b>	<b>12</b>	<b>17</b>	<b>10</b>	<b>20</b>	<b>16</b>	<b>21</b>	<b>23</b>	<b>14</b>	<b>18</b>	<b>16</b>	<b>194</b>

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

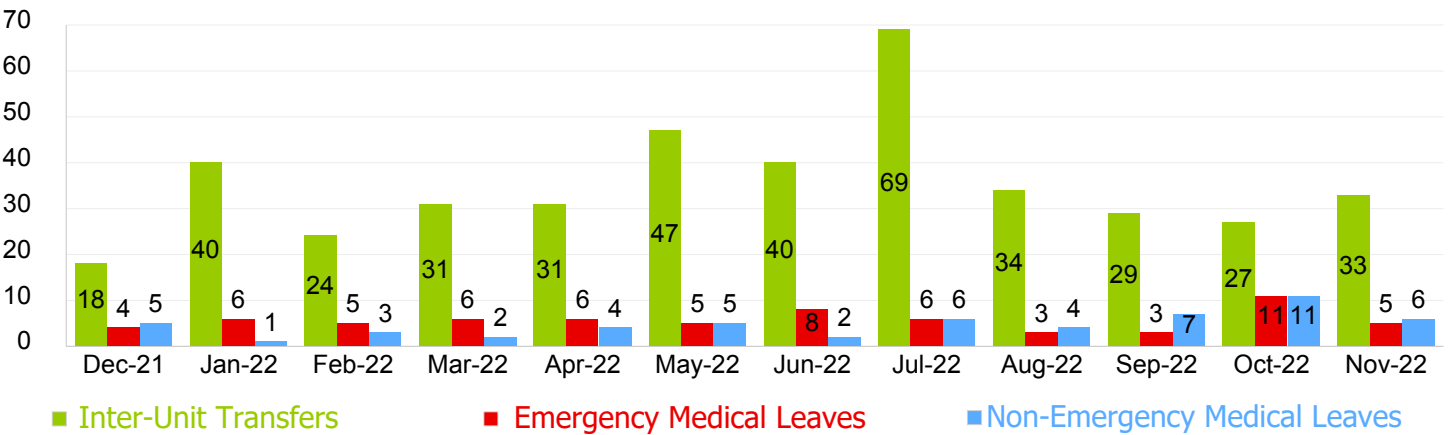
### 3. Average Daily Census



Census_Status	Metrics	Patient Count												Avg	
		YearMonth	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22		Nov-22
a. Present on Unit			192.5	183.5	189.2	191.9	193.0	199.1	199.1	197.7	202.4	197.8	196.2	197.1	194.9
b. On AL			0.2	0.7	1.1	1.1	2.3	0.6	1.6	2.1	1.5	0.6	1.9	3.4	1.4
c. On UL			0.0	0.0	0.0	0.0	0.0	0.0	0.9	1.0	0.8	0.0	0.0	0.0	0.2
<b>Total</b>			<b>192.6</b>	<b>184.2</b>	<b>190.3</b>	<b>192.9</b>	<b>195.3</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>	

\* 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.

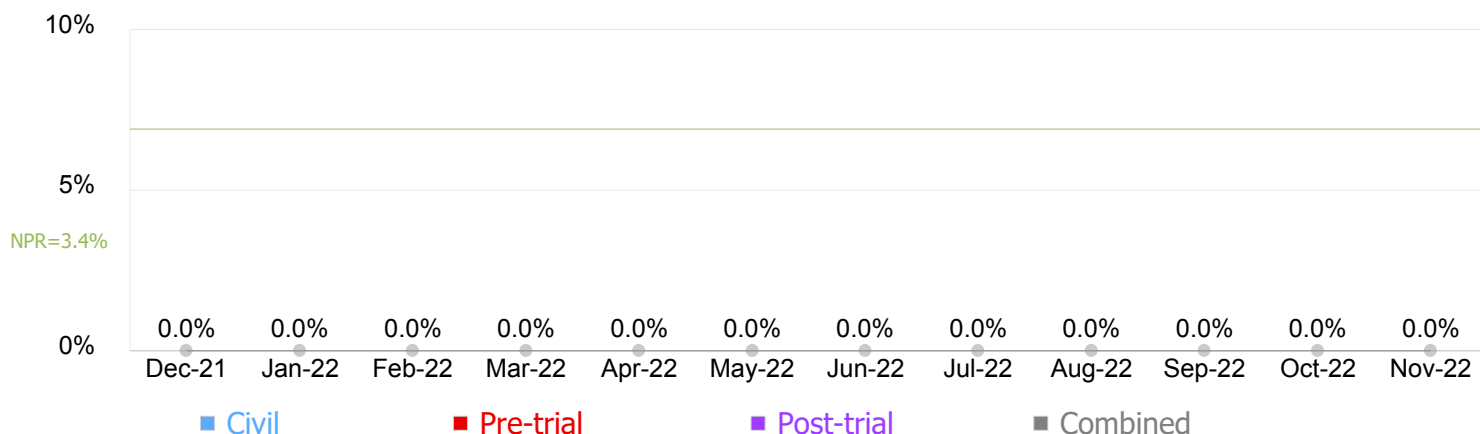
### 4. Transfers



Metrics	YearMonth	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg	Total
Inter-Unit Transfers		18	40	24	31	31	47	40	69	34	29	27	33	35	423
Emergency Medical Leaves		4	6	5	6	6	5	8	6	3	3	11	5	6	68
Non-Emergency Medical Leaves		5	1	3	2	4	5	2	6	4	7	11	6	5	56
<b>Total</b>		<b>27</b>	<b>47</b>	<b>32</b>	<b>39</b>	<b>41</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>547</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

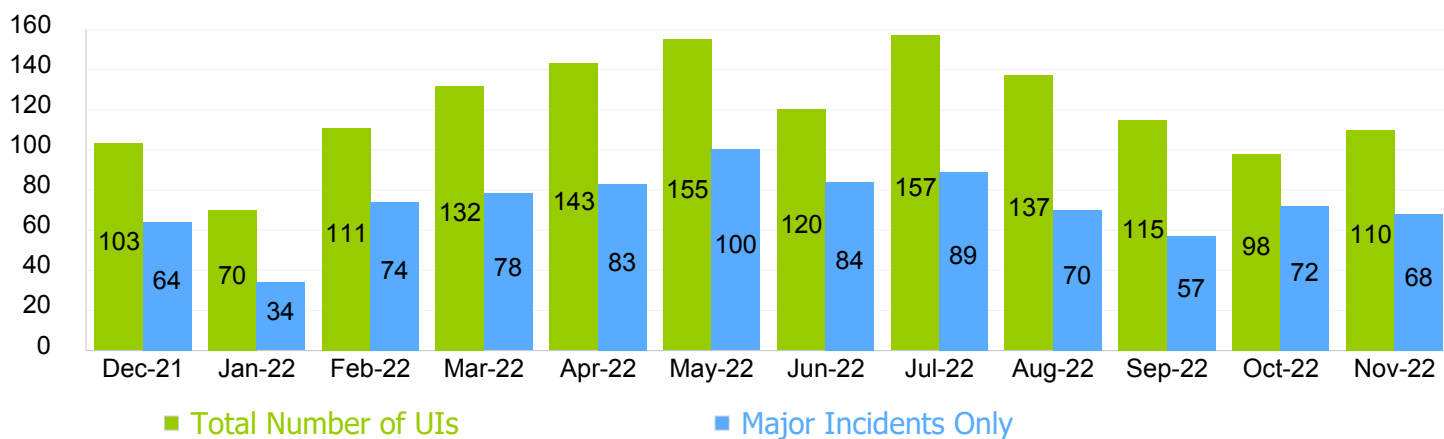


Legal Status Group	Readmission Rate												Avg	
	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22		
Civil	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pre-trial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Post-trial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Combined	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%

\* 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%.

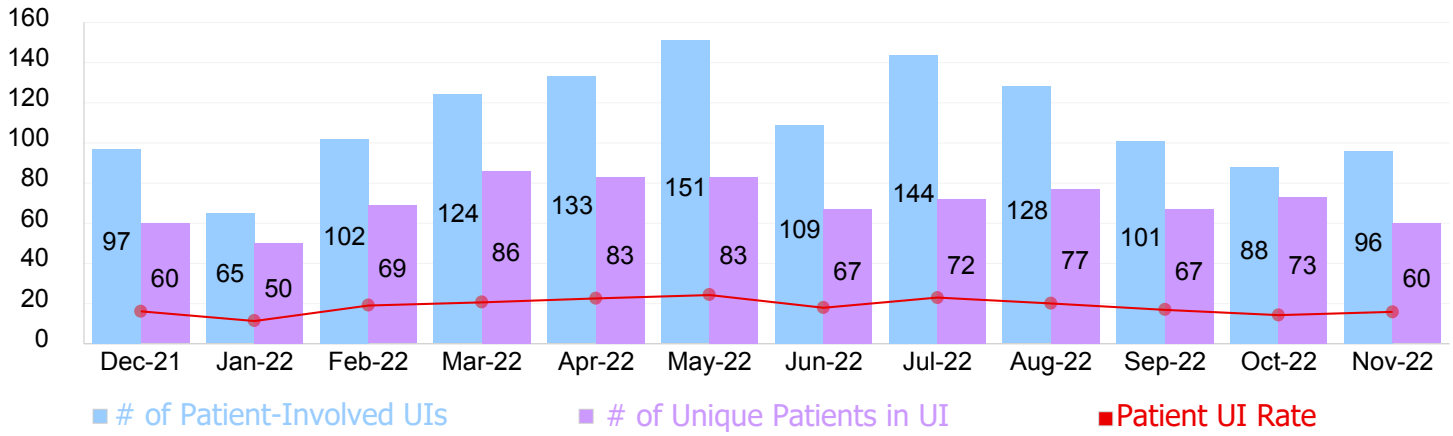
## 6. Unusual Incidents



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg	Total
Major Incidents Only	64	34	74	78	83	100	84	89	70	57	72	68	73	873
Total Number of UIs	103	70	111	132	143	155	120	157	137	115	98	110	121	1,451

\* 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.

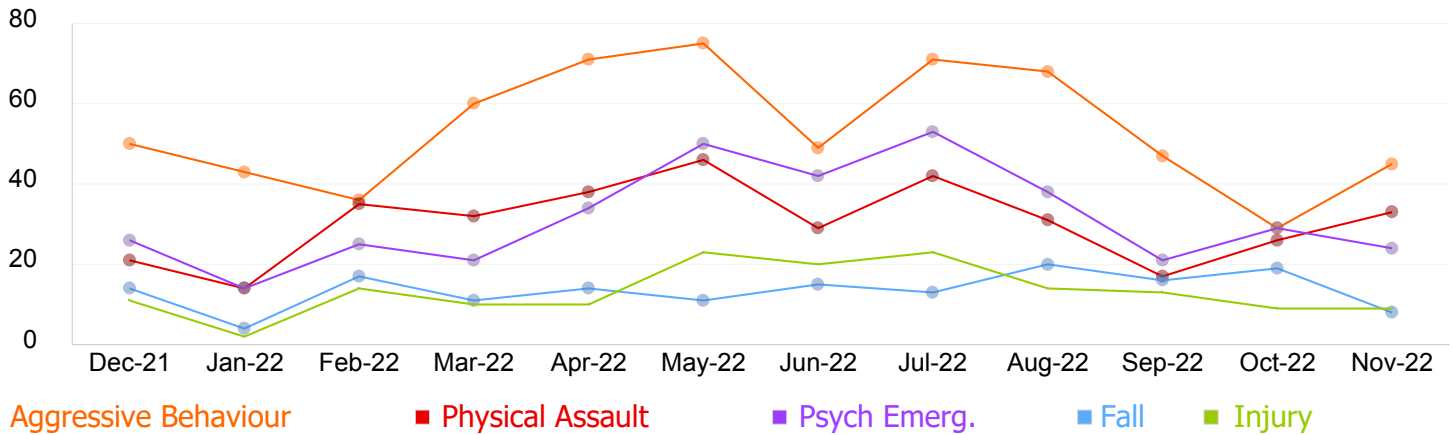
## 7. Patient-Involved Unusual Incidents



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg	Total
# of Unique Patients in UI	60	50	69	86	83	83	67	72	77	67	73	60	71	847
Patient Involved UI	97	65	102	124	133	151	109	144	128	101	88	96	112	1,338
Patient UI Rate	16.16	11.32	19.04	20.63	22.59	24.27	17.93	23.02	20.08	16.88	14.27	15.90	18.51	18.55

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

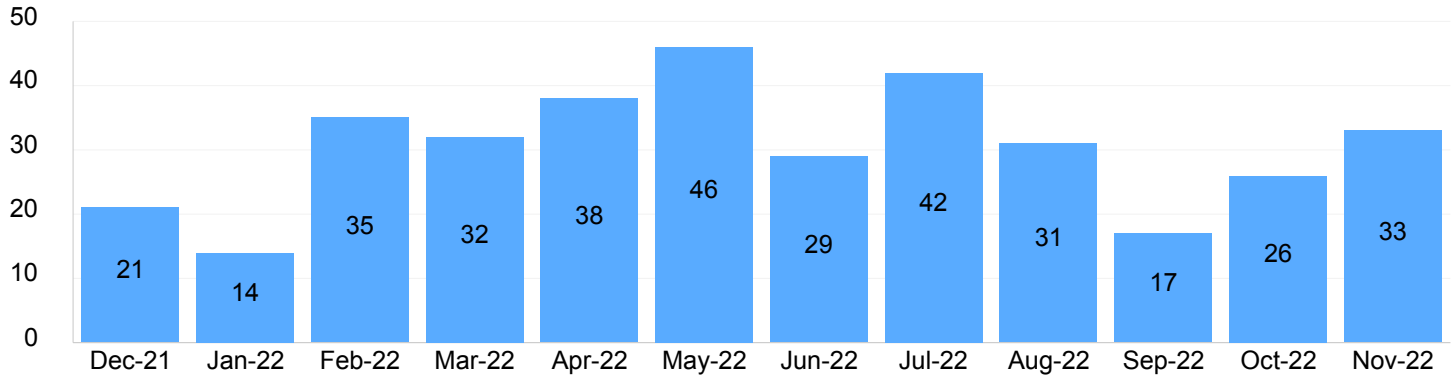
## 8. Selected Types of Incidents



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg
Physical Assault	21	14	35	32	38	46	29	42	31	17	26	33	30
Injury	11	2	14	10	10	23	20	23	14	13	9	9	13
Psychiatric Emergency	26	14	25	21	34	50	42	53	38	21	29	24	31
Falls	14	4	17	11	14	11	15	13	20	16	19	8	14
Aggressive Behaviour	50	43	36	60	71	75	49	71	68	47	29	45	54

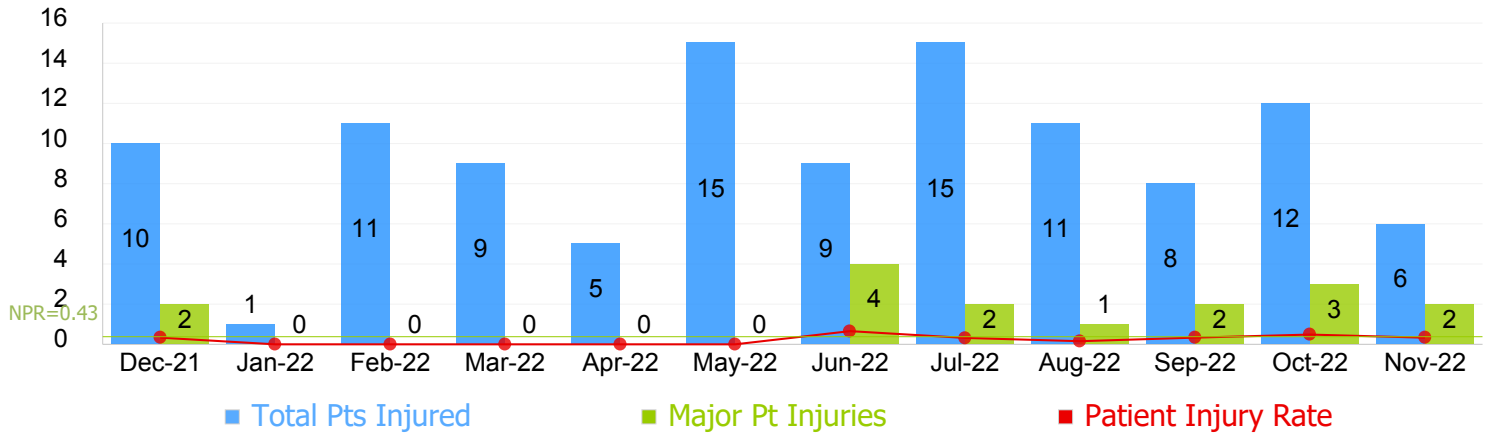
\* These are incident types that are frequently reported. Some incidents may be counted in multiple categories. For example, a physical assault incident that accompanied psychiatric emergency and injury is counted under psychiatric emergency and injury as well as under physical assault. Injury is broadly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

## 9. Physical Assaults



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg	Total
Physical Assault	21	14	35	32	38	46	29	42	31	17	26	33	30	364

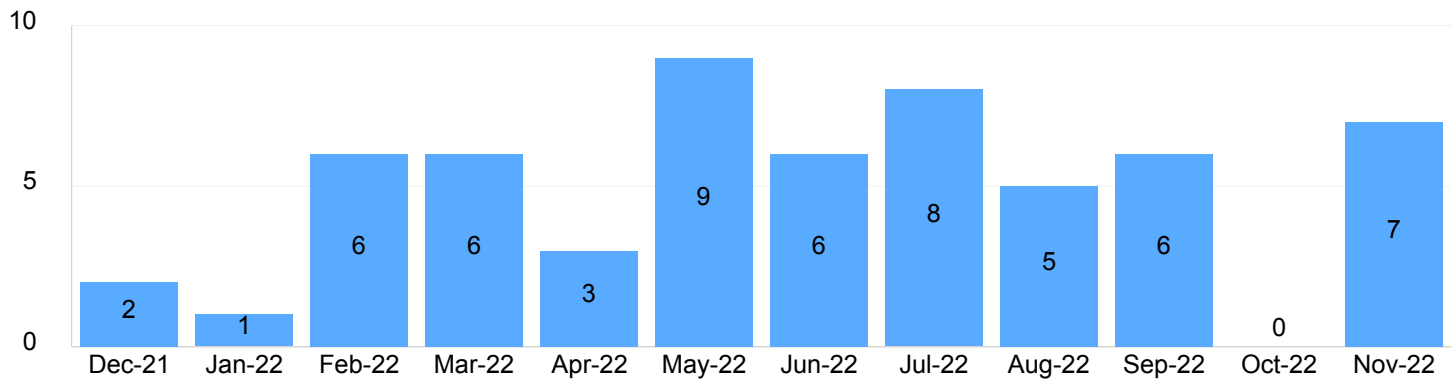
## 10. Patient Injuries



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg	Total
Total Pts Injured	10	1	11	9	5	15	9	15	11	8	12	6	9	112
Major Pt Injuries	2	0	0	0	0	0	4	2	1	2	3	2	1	16
Patient Injury Rate	0.33	0.00	0.00	0.00	0.00	0.00	0.66	0.32	0.16	0.33	0.49	0.33	0.22	0.22

\*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.

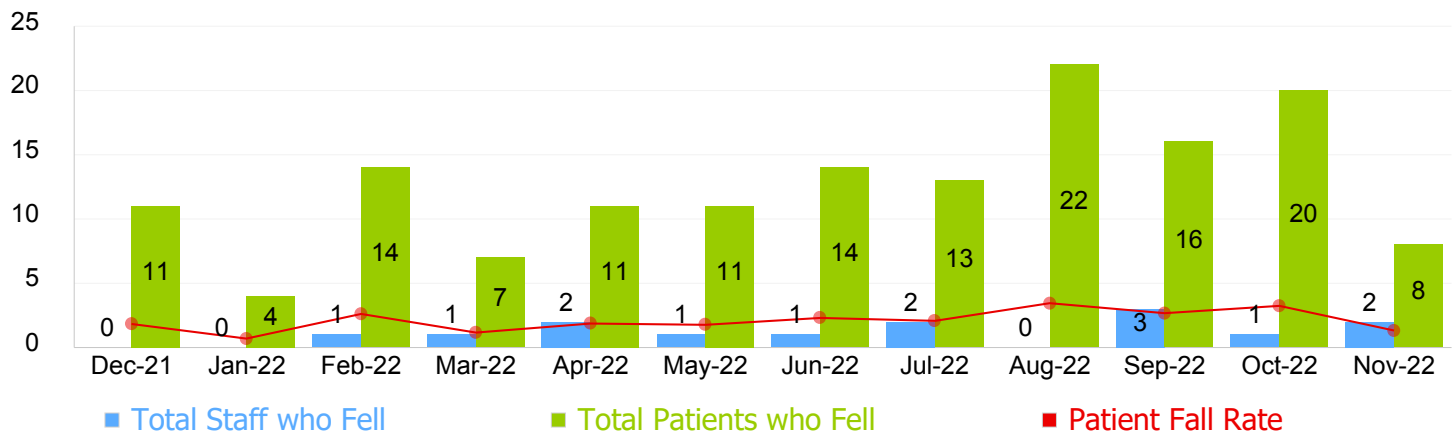
## 11. Staff Injuries



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg	Total
# of Staff Injured	2	1	6	6	3	9	6	8	5	6	0	7	5	59

\*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.

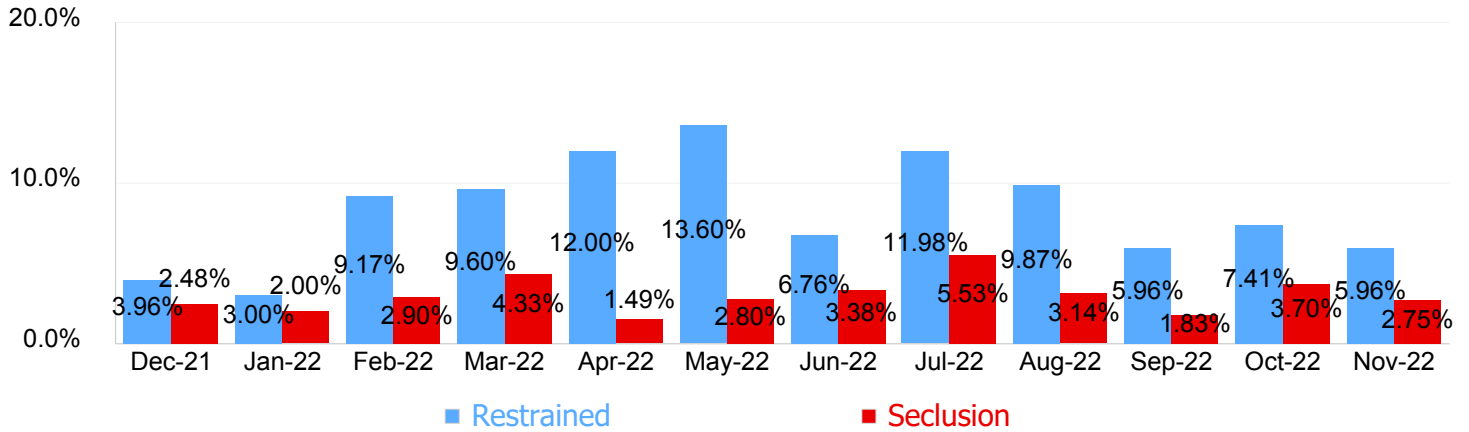
## 12. Patient and Staff Falls



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg	Total
Total Staff who Fell	0	0	1	1	2	1	1	2	0	3	1	2	1	14
Total Patients who Fell	11	4	14	7	11	11	14	13	22	16	20	8	13	151
Patient Fall Rate	1.83	0.70	2.61	1.16	1.87	1.77	2.30	2.08	3.45	2.67	3.24	1.32	2.08	2.09

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

### 13. Percent of Patients Restrained or Secluded



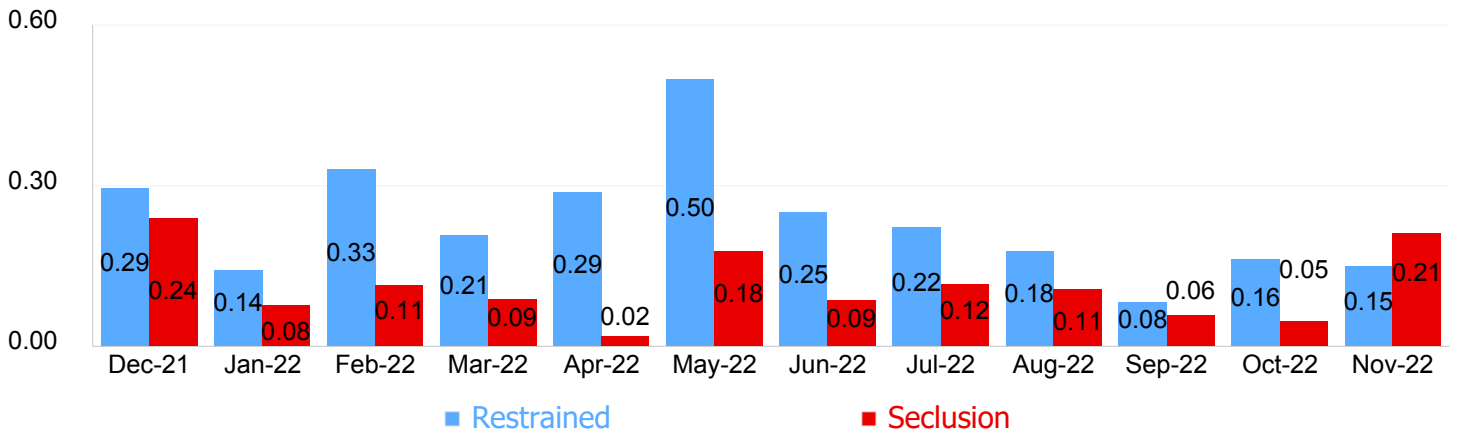
	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg
Seclusion	2.48%	2.00%	2.90%	4.33%	1.49%	2.80%	3.38%	5.53%	3.14%	1.83%	3.70%	2.75%	3.03%
Restraint	3.96%	3.00%	9.17%	9.60%	12.00%	13.60%	6.76%	11.98%	9.87%	5.96%	7.41%	5.96%	8.27%

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
	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	
Restraint	0.29	0.14	0.33	0.21	0.29	0.50	0.25	0.22	0.18	0.08	0.16	0.15	0.23
Seclusion	0.24	0.08	0.11	0.09	0.02	0.18	0.09	0.12	0.11	0.06	0.05	0.21	0.11

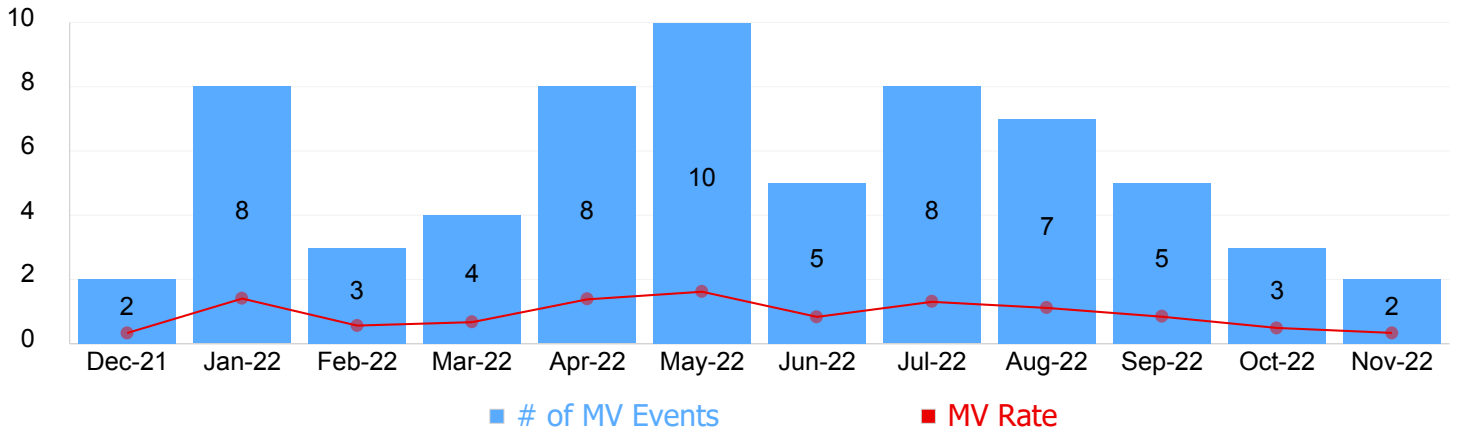
As of January 2022, the National Public Rates (NPR) Weighted Averages are as follows: Restraint Hours Rate NPR = 0.779 and the Seclusion Hours Rate NPR = 0.332.

\* 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.



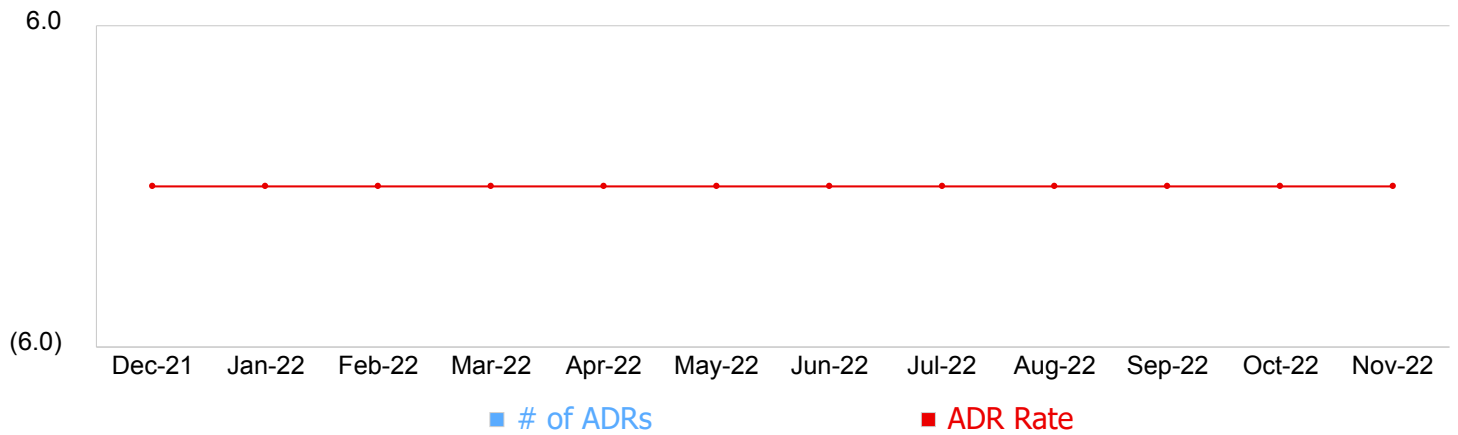
### 15. Reported Medication Variance Events & Rate



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg	Total
# of MV Events	2	8	3	4	8	10	5	8	7	5	3	2	5	65
MV Rate	0.34	1.41	0.57	0.67	1.38	1.62	0.84	1.31	1.12	0.84	0.49	0.34	0.91	10.92

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

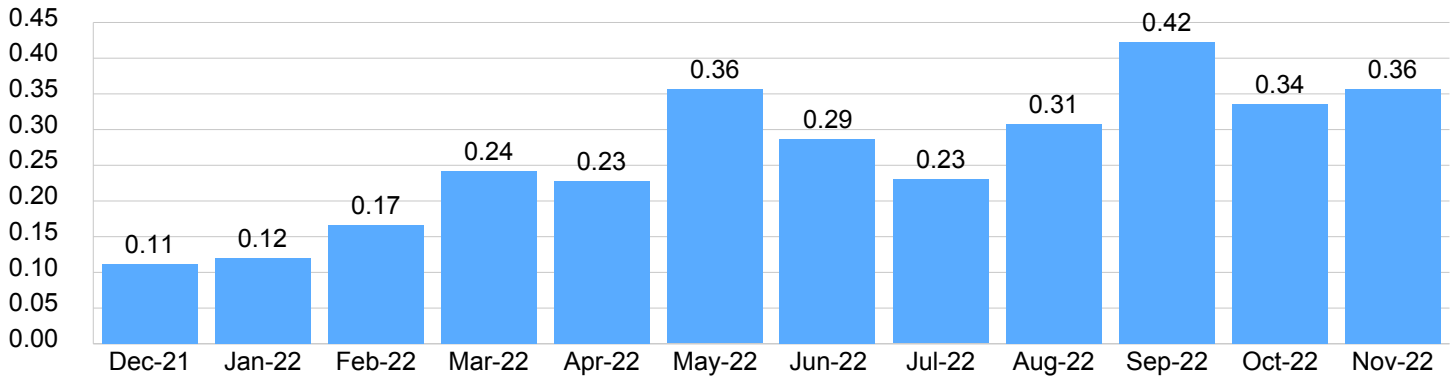
### 16. Reported Adverse Drug Reactions & Rate



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	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	--

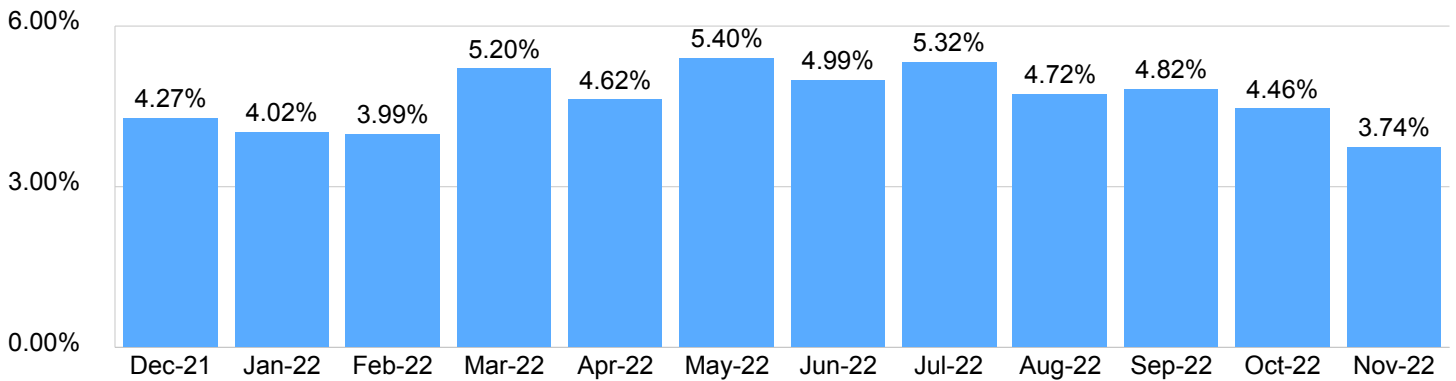
\* ADR Rate: Number of reported adverse drug reaction events that occurred for every 1000 inpatient days.

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



Event Type	Rate												Avg
	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	
PercOfMissingDocumentation	0.11	0.12	0.17	0.24	0.23	0.36	0.29	0.23	0.31	0.42	0.34	0.36	<b>0.26</b>

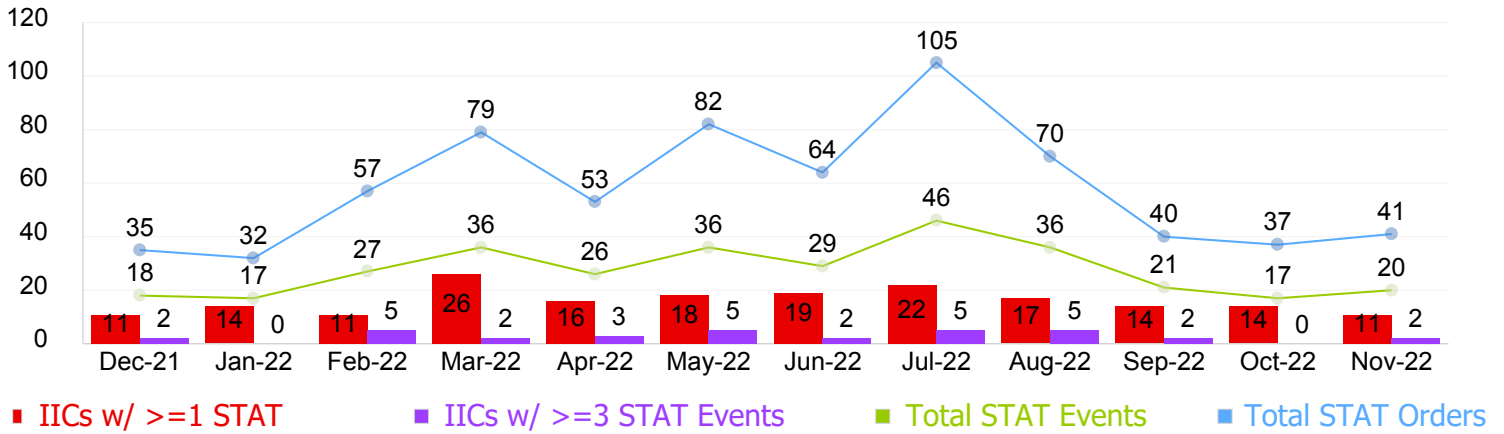
## 18. Medication Refusal Rate



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Average
Medication Refusal Rate	4.27	4.02	3.99	5.20	4.62	5.40	4.99	5.32	4.72	4.82	4.46	3.74	<b>4.63</b>

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

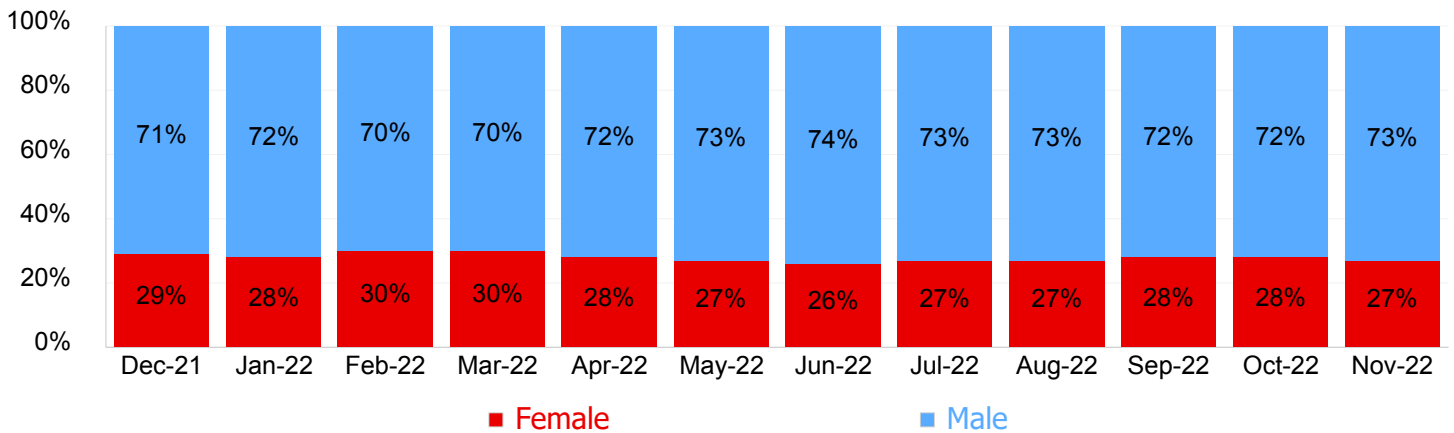
### 19. Number of STAT Events and Individuals Involved



	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Avg	Total
IICs w/ >=1 STAT	11	14	11	26	16	18	19	22	17	14	14	11	16	193
IICs w/ >=3 STAT Events	2	0	5	2	3	5	2	5	5	2	0	2	3	33
Total STAT Events	18	17	27	36	26	36	29	46	36	21	17	20	27	329
Total STAT Orders	35	32	57	79	53	82	64	105	70	40	37	41	58	695

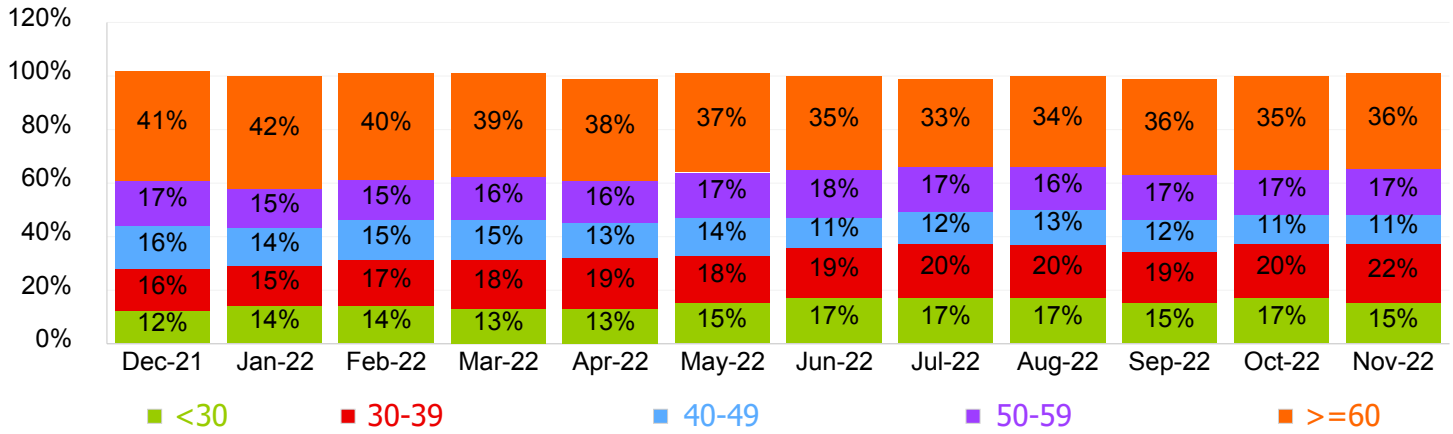
\* A STAT event is an emergency medication prescribed and administered to a person involuntarily.

### 20. Demographics - Trend of Gender Distribution



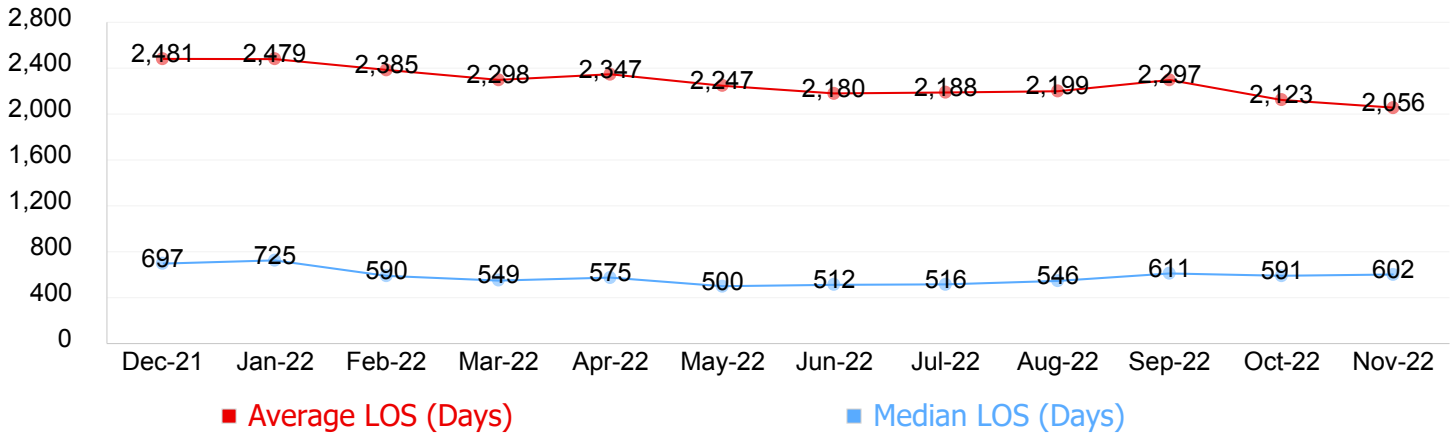
Gender	Rate												Avg
	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	
Female	29%	28%	30%	30%	28%	27%	26%	27%	27%	28%	28%	27%	28%
Male	71%	72%	70%	70%	72%	73%	74%	73%	73%	72%	72%	73%	72%

## 21. Demographics - Trend of Age Distribution



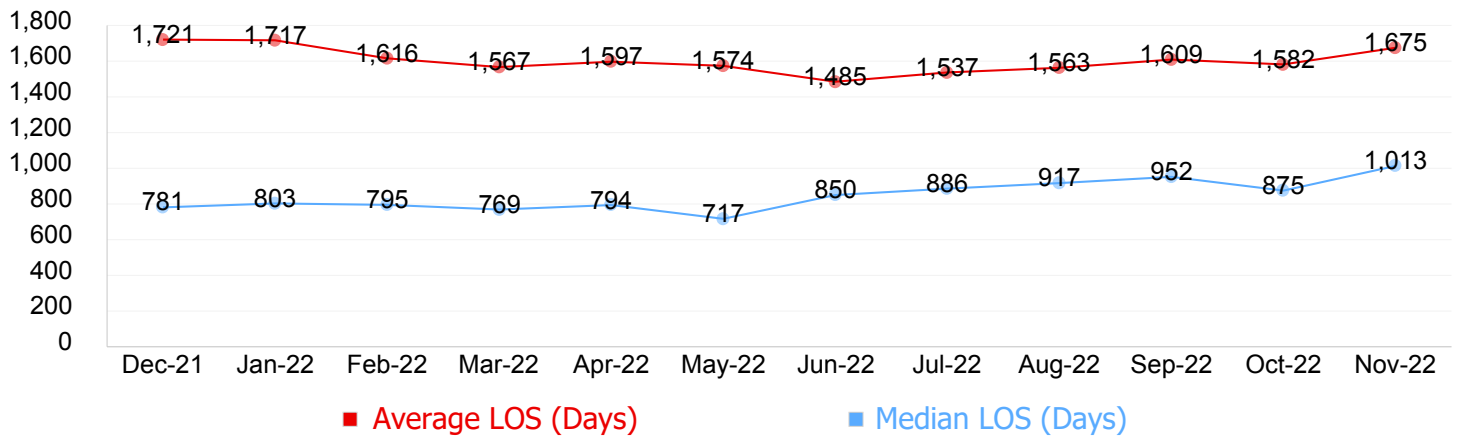
Age Group	Rate												Avg
	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	
<30	12%	14%	14%	13%	13%	15%	17%	17%	17%	15%	17%	15%	15%
30-39	16%	15%	17%	18%	19%	18%	19%	20%	20%	19%	20%	22%	19%
40-49	16%	14%	15%	15%	13%	14%	11%	12%	13%	12%	11%	11%	13%
50-59	17%	15%	15%	16%	16%	17%	18%	17%	16%	17%	17%	17%	17%
60+	41%	42%	40%	39%	38%	37%	35%	33%	34%	36%	35%	36%	37%

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



Type	Individuals In Care											
	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22
Average LOS	2,481	2,479	2,385	2,298	2,347	2,247	2,180	2,188	2,199	2,297	2,123	2,056
Median LOS	697	725	590	549	575	500	512	516	546	611	591	602

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



Type	Civil											
	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22
Average LOS	1,721	1,717	1,616	1,567	1,597	1,574	1,485	1,537	1,563	1,609	1,582	1,675
Median LOS	781	803	795	769	794	717	850	886	917	952	875	1,013