

Indicator	Measures
Complaints and Grievances	Total grievances
	Clinical care/skill-related grievances
Infection Prevention and Control	Hand hygiene according to guidelines
	Cleaning/disinfecting product usage
	Infection rates (athlete foot)
Patient Services, Care and Safety	Patient injuries
	Medical emergency transfers
	Adverse outcomes
	Readmissions within 30 days
	Mortality
	Elopement
	Suicide management
	Patient falls
Social Work Services	Psychosocial Assessment Completion
	Social Services Discharge & Aftercare Monitoring
	Social Services Documentation Monitoring
Indicator	Measures

Restraint/ Seclusion (Violent/Self Destructive Behavior)	Restraint usage
	Seclusion usage
	Evidence of less restrictive options
	Face-to-face evaluation w/in 1hr
	Patient injuries during restraint
	Inclusion in Treatment Plan
Medication Use/Pharmacy Services	Medication error rates/unavailability
	Medication error rates
	Adverse drug reactions
	Medication order fill adequacy
	Medication & controlled substance labeling
	Controlled substance destruction
	Proper licensure for controlled substance receipt from pharmacy
	E-Kit usage for emergencies
E-Kit content and security	
Indicator	Measures
Significant Adverse Outcomes	Sentinel events

	Event reporting
Food and Nutritional Services	Appropriate diets
	Correct meal preparation
	Nutritional assessments
	Food storage/expired food items
	Food temperature
Physician and AHP Related Issues	Telephone medication orders
	MD-related incidents
	Change of clinician request
Environmental Services	Correct staff reply when queried on disinfectant dwell times
Environment of Care	Staff knowledge:
	Unsafe environment or hazard reporting
	Role in internal/external disaster
	Articulation of fire plan components
	Work order completion w/in 30 days
Laboratory Services	Critical values reporting

Indicator	Measure off target
------------------	---------------------------

**Physician & AHP
Related Issues**

Telephone medication orders

Description	Target	
		On Target
# of patient grievances / Total Bed days per month	10%	X
# of grievances related to clinical care/skill / # of grievances	5%	X
# of observations when the care giver performed hand hygiene per CDC guidelines / # of observations/opportunities (10 observations per month)	80%	
# of cleaning products EPA approved for hospital use / All cleaning products (4 observations per month)	100%	
# of athlete foot infections / Total Bed days per month	0%	
# of patient injuries w or w/o treatment / Total Bed days per month	0%	X
# of patients transferred emergently to an acute hospital / Total bed days per month	2%	
# of inpatient adverse outcomes / Total Bed days per month	2%	X
# of inpatient readmissions within 30 days of discharge / # of inpatient admissions per month	10%	
# of inpatient deaths / Total Bed days per month	0%	
# of elopements / Total Bed days per month	0%	
# of attempted suicides / # of inpatient admissions per month	0%	
# of inpatient falls reported during the month / Total Bed days per month	0.50%	
# of completed assessments / # of assessments audited	100%	
# of discharge and aftercare forms with all elements completed / # of charts audited	100%	
# of charts that include admission note, acute note status and administrative status note / # of charts of audited	100%	
Description	Target	
		On Target

Hours of restraint use / 720 patient hours (16 pts x 30days x 24hrs per day)	N/A	
# of “seclusion episodes” / Total Bed days per month	N/A	
# of restraint/seclusion records reviewed with evidence of alternative & less restrictive measures attempted or considered and rejected prior to restraint use / Total # of restraint/seclusion episodes reviewed	100%	
# of new restraint / seclusion episodes with face-to face evaluation within 1 hour of restraint / seclusion application by Qualified RN or PA or LIP / Total number of new episodes of restraint / seclusion	100%	
# of injuries while restrained or secluded / # of restraint/seclusion episodes	0%	
# of records of restrained and/or secluded patients with inclusion of restraint/seclusion in treatment plan / # patient records with restraint/seclusion	100%	
# of medication errors occurring in patient care areas as a result of medication unavailability / Total medications dispensed (PRN + Main + Ekit)	0%	X
# of medication errors occurring in patient care areas / Total medications dispensed (PRN + Main + Ekit)	2%	X
# of adverse drug reactions / # of medications administered (PRN + Main)	2%	X
# of medications orders filled (delivered) per contract (times per week) / # of medication orders reviewed for fill adequacy (PRN + Main)	100%	X
# of patient medications, including controlled substances labeled and stored according to hospital policy / # of patient stored medications reviewed	100%	X
# of controlled substances properly destroyed including all documentation requirements and destruction time frames (for medications considered abandoned – 7 days or post	100%	X
# of shifts / # of deliveries reviewed	100%	X
# of times the E-Kit was accessed for emergent psychological or physiological need for the patient to address life-threatening situations or in instances where failure to administer the medication has the potential to cause significant negative impact to the patient’s psychological or physiological condition / # of times E kits are accessed	100%	X
Night Audit	100%	X
# of E-Kits with correct content and that are secured / # of E kits x 7 nights		
Description	Target	
		On Target
Event leading to death or significant impairment (per Significant Event Policy) includes Near Misses and State Reportable Events	N/A	

Number of events reported of the following types: Medication-Related; Other significant/Mandated Reporting	N/A	
# of nutritional diets accurate and appropriate for patient's carbohydrate, caloric and protein needs / # of diets reviewed	100%	
#of meals served that match PHF's Daily Spreadsheet with appropriate portion/size / # of meals reviewed	100%	
# of RD assessments performed within 72 hours for patients at high nutritional risk / # high risk nutritional patients reviewed	100%	
# of expired/unlabeled items in refrigerators/freezers / # of food items observed	0%	
# of food temperatures within range / # of temperatures checks performed	100%	
Number of telephone orders signed and dated within 24 hours	100%	
Number of incidents regarding MDs	0	X
Number of change of clinician requests	0	X
# of correct responses from staff when queried on disinfectant dwell (wet/kill) times / # of queries (2 queries per week)	>95%	
# of staff able to articulate how to report unsafe environment or hazard / # of staff interviewed	>95%	X
# of employees correctly describing their role in the event of an internal/external disaster # of employees interviewed	>90%	X
# of staff articulating fire plan components correctly / # of staff queried	>90%	X
# of work orders completed within 30 days of creation / # of work orders created	95%	X
Mean time from resulting availability to notification of the responsible practitioner (physician or other practitioner who may initiate appropriate intervention)	30 min	

Description of issue(s)	Corrective
-------------------------	------------

In the first quarter, there were several telephone orders that were not signed and/or dated with 24 hours.

QCM and PHF staff
the cause of this iss
with specific staff.
addressing this with
supervisor will also
contact the medical
orders have not bee

Oct-17		Previous Quarter
Off Target	Data	July 2017-Sept 2017
	0/491; 0%	On Target
	0/0; 0%	On Target
		On target
		On Target
		On Target
	0/491; 0%	Off Target: 0.1% for Qtr 1
		On Target
	1/491; 0.2%	On target
		On Target
		On Target
		Off Target: 0.1% for Qtr 1
		On Target
		On Target
		On Target
		Off Target: 67% for Qtr 1
		On Target
Oct-17		Previous Quarter
Off Target	Data	July 2017-Sept 2017

		On Target
		On Target
		On Target
		On Target
		On Target
		On Target
		On Target
	0/451;0%	On Target
	0/451;0%	On Target
	1/437;0%	On Target
	437/437;100%	On Target
	24/24; 100%	On Target
	51/51; 100%	On Target
	92/92; 100%	On Target
	13/13; 100%	On Target
	124/124;100%	On Target
Oct-17		Previous Quarter
Off Target	Data	July 2017-Sept 2017
	0	1

	0	1
		On Target
		Off Target: 94% for Qtr 1
		Off Target: 93% for Qtr 1
		On Target
		On Target
X	26/27; 96%	Off Target: 84% for Qtr 1
	0	On Target
	0	On Target
		On Target
	10/10;100%	On Target
	10/10;100%	On Target
	10/10; 100%	On Target
	10/10;100%	On Target
		On Target

Corrective Action Summary	Previous Corrective Action (if any)
---------------------------	-------------------------------------

are currently investigating
ue in order to better address
The PHF medical director is
r all MDs. The nursing
be training team leaders to
l director when telephone
en signed.



