



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



Sep-22

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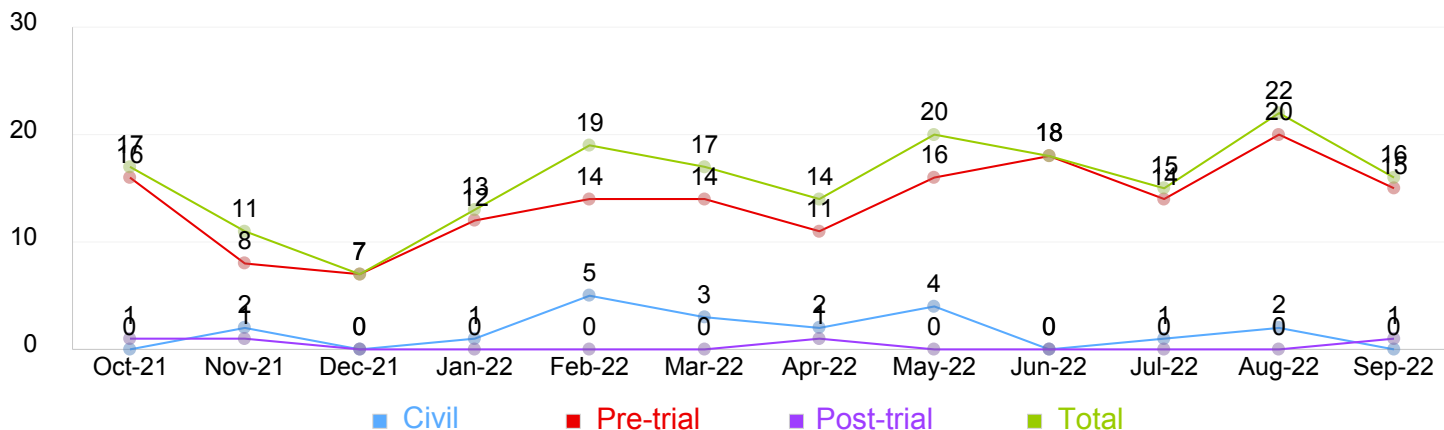
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Data Disclaimer

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.

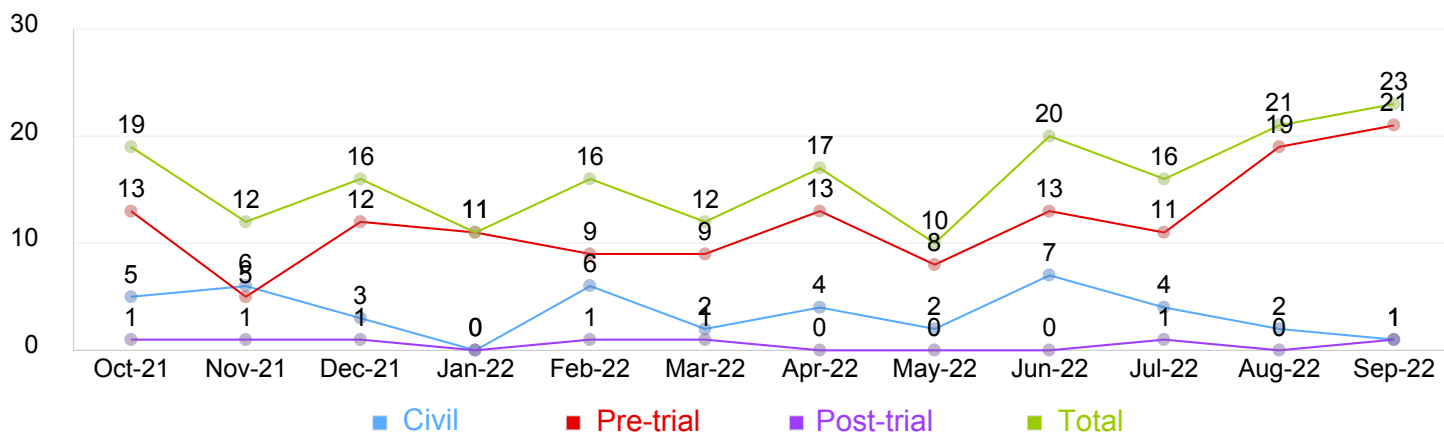
1. Admissions



Metrics	Admission Count												Avg	Total
Legal Status Group	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22		
Civil	0	2	0	1	5	3	2	4	0	1	2	0	2	20
Pre-trial	16	8	7	12	14	14	11	16	18	14	20	15	14	165
Post-trial	1	1	0	0	0	0	1	0	0	0	0	1	0	4
Total	17	11	7	13	19	17	14	20	18	15	22	16	16	189

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

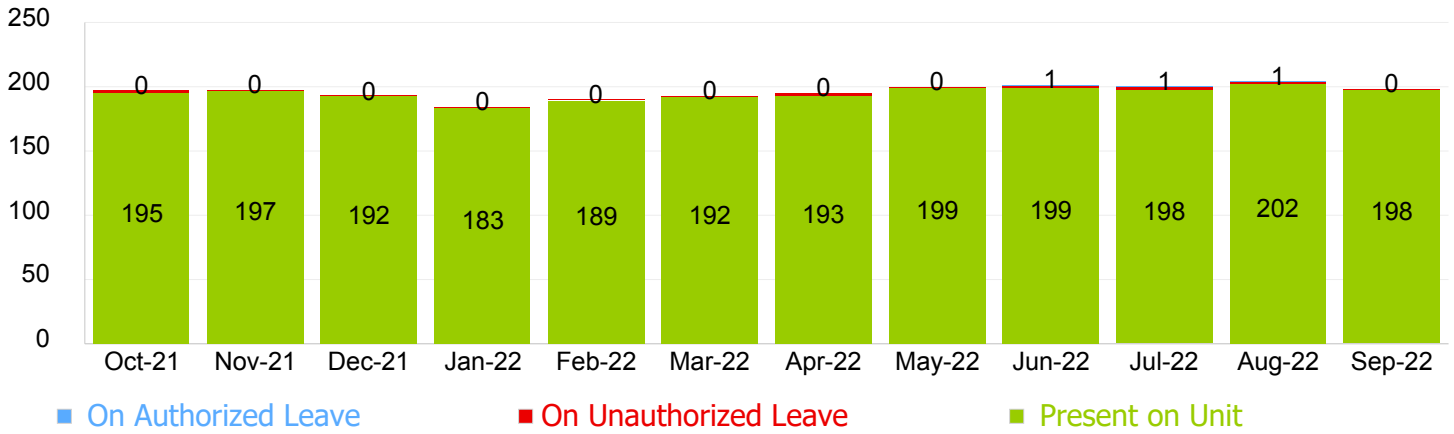
2. Discharges



Legal Status Group	Discharge Count												Avg	Total
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22		
Civil	5	6	3	0	6	2	4	2	7	4	2	1	4	42
Pre-trial	13	5	12	11	9	9	13	8	13	11	19	21	12	144
Post-trial	1	1	1	0	1	1	0	0	0	1	0	1	1	7
Total	19	12	16	11	16	12	17	10	20	16	21	23	16	193

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

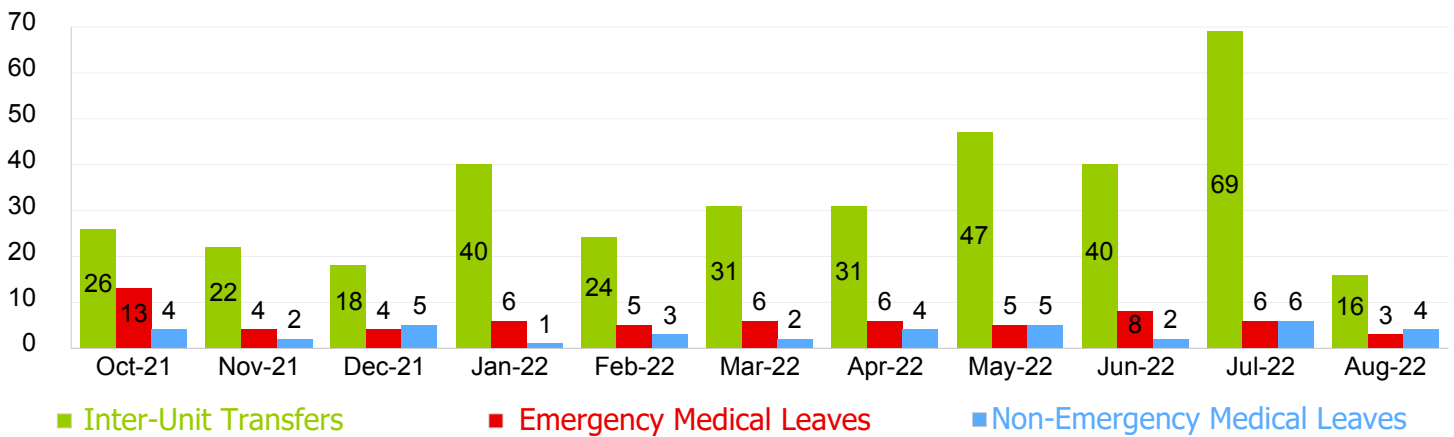
3. Average Daily Census



Census_Status	Patient Count												Average
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	
a. Present on Unit	195	197	192	183	189	192	193	199	199	198	202	198	195
b. On AL	2	1	0	1	1	1	2	1	2	2	1	1	1
c. On UL	0	0	0	0	0	0	0	0	1	1	1	0	0
Total	197	198	193	184	190	193	195	200	202	201	205	198	

* 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.

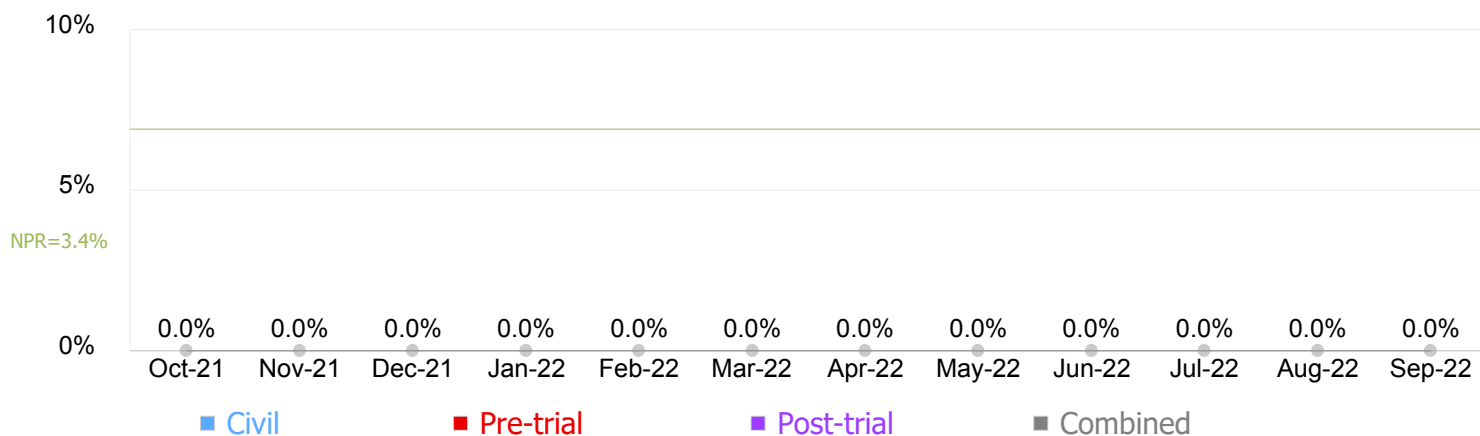
4. Transfers



Metrics	YearMonth	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Avg	Total
Inter-Unit Transfers		26	22	18	40	24	31	31	47	40	69	16	33	364
Emergency Medical Leaves		13	4	4	6	5	6	6	5	8	6	3	6	66
Non-Emergency Medical Leaves		4	2	5	1	3	2	4	5	2	6	4	3	38
Total		43	28	27	47	32	39	41	57	50	81	23	--	468

* 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

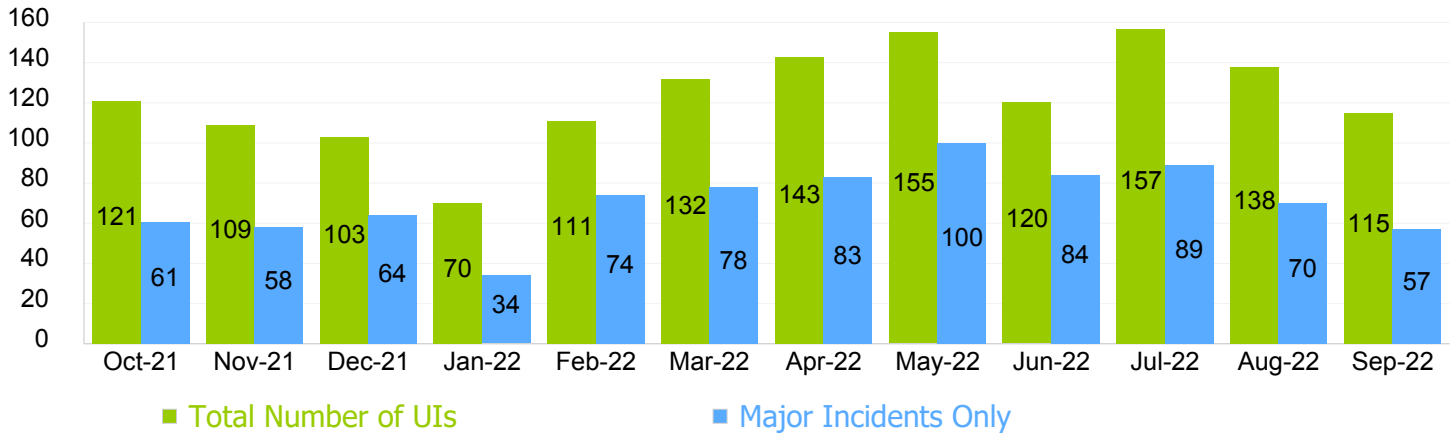


Legal Status Group	Readmission Rate												Avg	
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22		
Civil	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pre-trial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Post-trial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

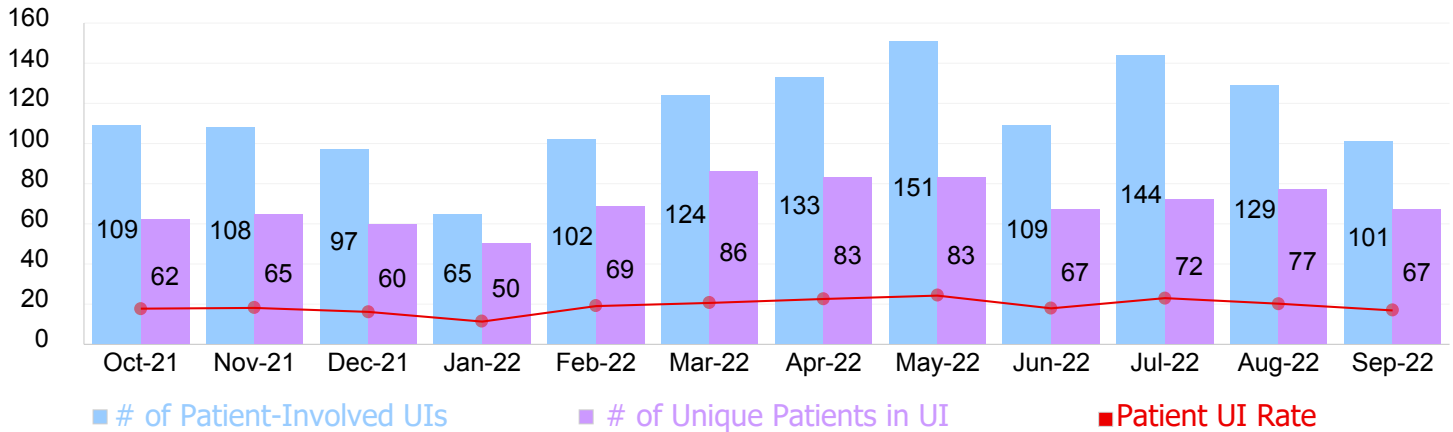
6. Unusual Incidents



	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Avg	Total
Major Incidents Only	61	58	64	34	74	78	83	100	84	89	70	57	71	852
Total Number of UIs	121	109	103	70	111	132	143	155	120	157	138	115	123	1,474

* 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.

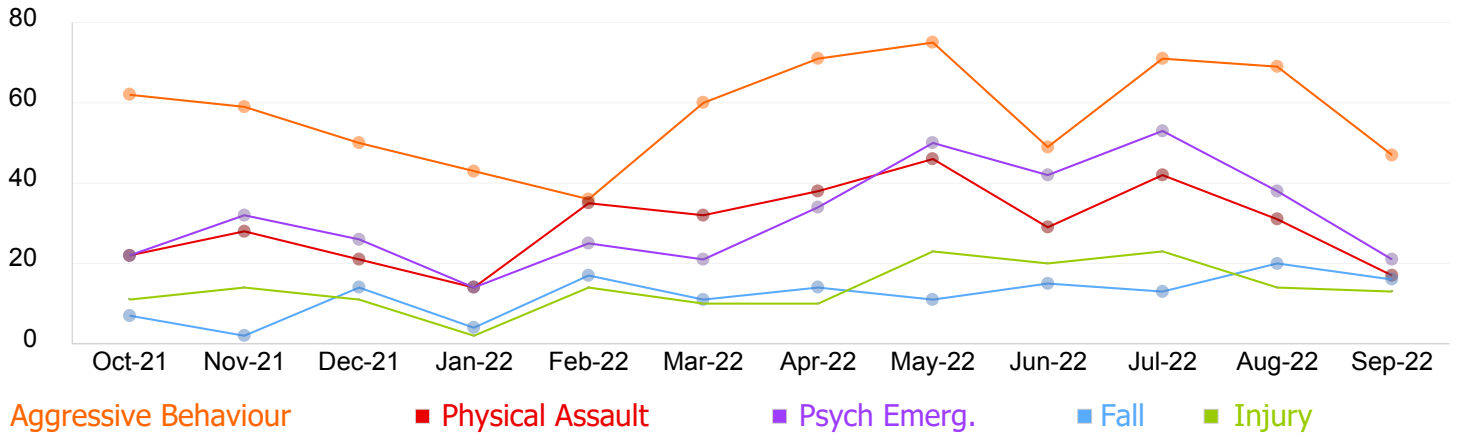
7. Patient-Involved Unusual Incidents



	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Avg	Total
# of Unique Patients in UI	62	65	60	50	69	86	83	83	67	72	77	67	70	841
Patient Involved UI	109	108	97	65	102	124	133	151	109	144	129	101	--	--
Patient UI Rate	17.77	18.14	16.16	11.32	19.04	20.63	22.59	24.27	17.93	23.02	20.24	16.88	19.00	--

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

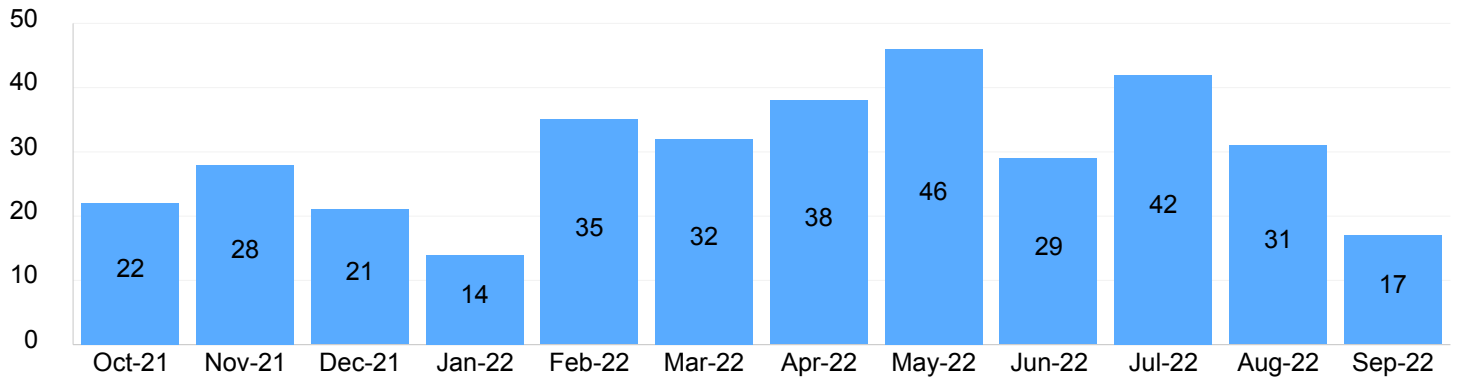
8. Selected Types of Incidents



	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Avg
Physical Assault	22	28	21	14	35	32	38	46	29	42	31	17	30
Injury	11	14	11	2	14	10	10	23	20	23	14	13	14
Psychiatric Emergency	22	32	26	14	25	21	34	50	42	53	38	21	32
Falls	7	2	14	4	17	11	14	11	15	13	20	16	12
Aggressive Behaviour	62	59	50	43	36	60	71	75	49	71	69	47	58

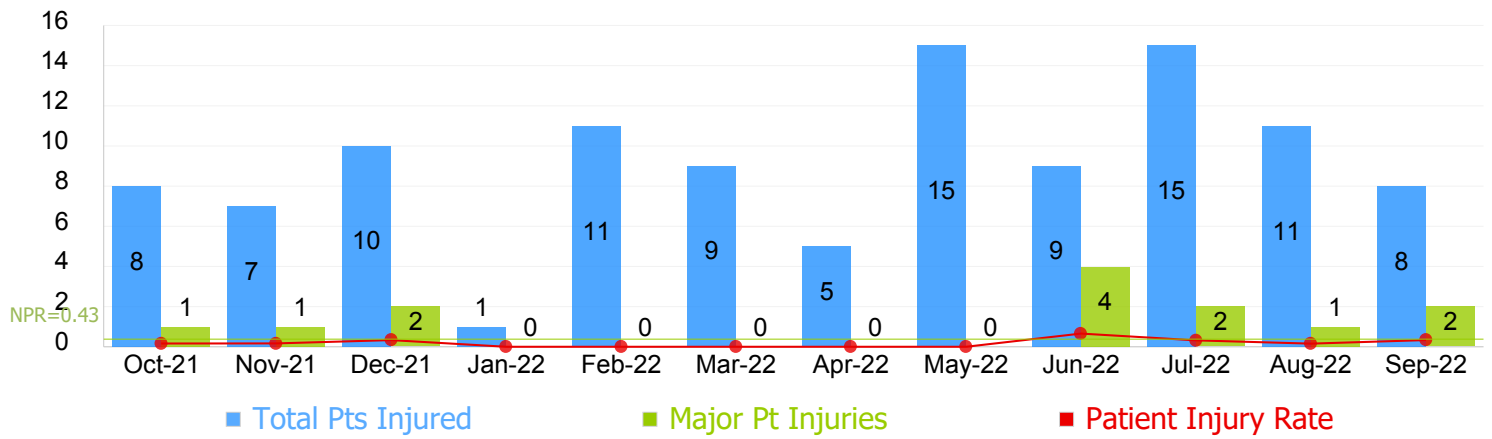
* These are incident types that are frequently reported. Some incidents may be counted in multiple categories. For example, a physical assault incident that accompanied psychiatric emergency and injury is counted under psychiatric emergency and injury as well as under physical assault. Injury is broadly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

9. Physical Assaults



Physical Assault												Avg	Total
Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22		
22	28	21	14	35	32	38	46	29	42	31	17	30	355

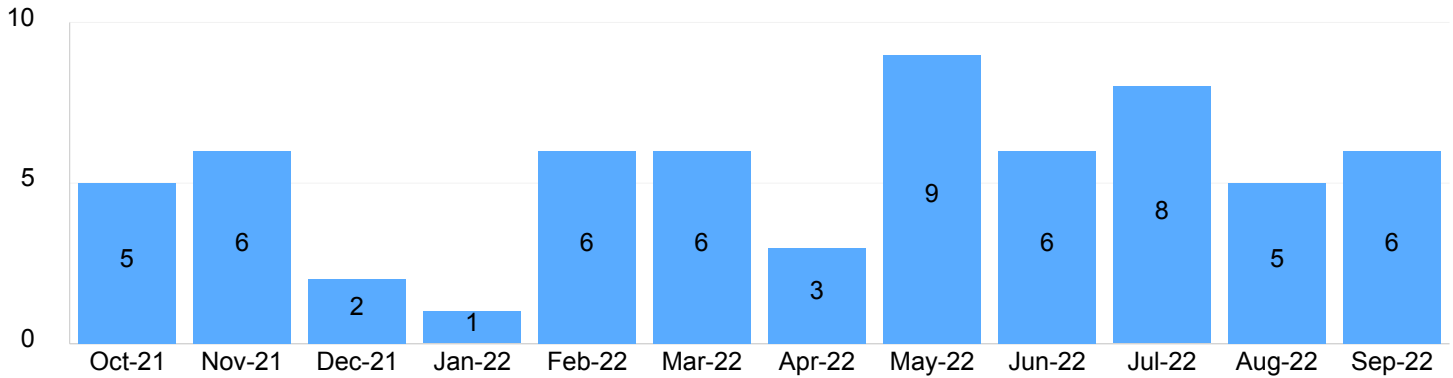
10. Patient Injuries



	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Avg	Total
Total Pts Injured	8	7	10	1	11	9	5	15	9	15	11	8	9	109
Major Pt Injuries	1	1	2	0	0	0	0	0	4	2	1	2	1	13
Patient Injury Rate	0.16	0.17	0.33	0.00	0.00	0.00	0.00	0.00	0.66	0.32	0.16	0.33	0.18	--

*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.

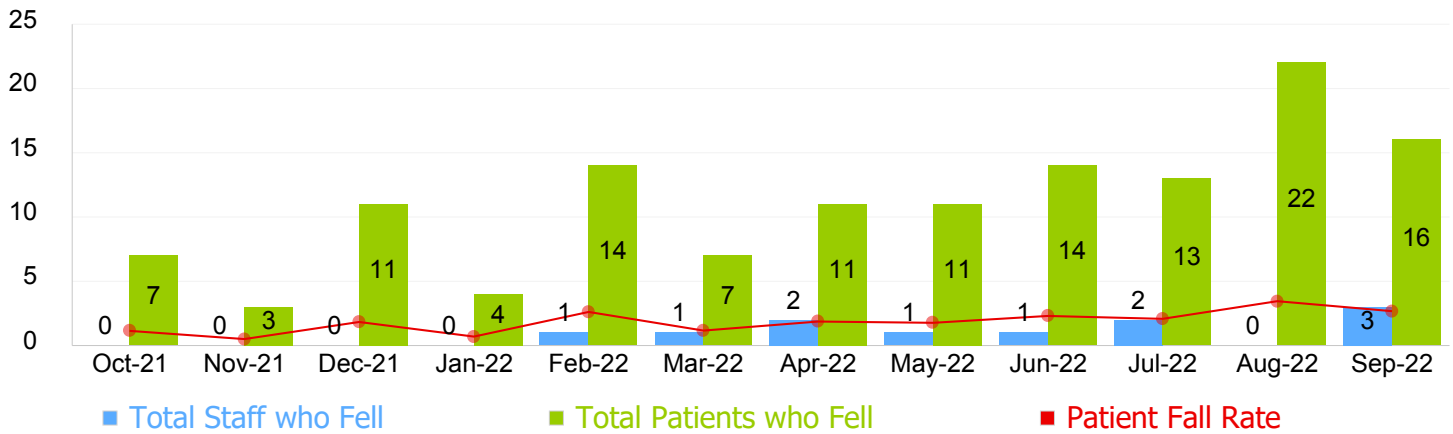
11. Staff Injuries



	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Avg	Total
# of Staff Injured	5	6	2	1	6	6	3	9	6	8	5	6	5	63

*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.

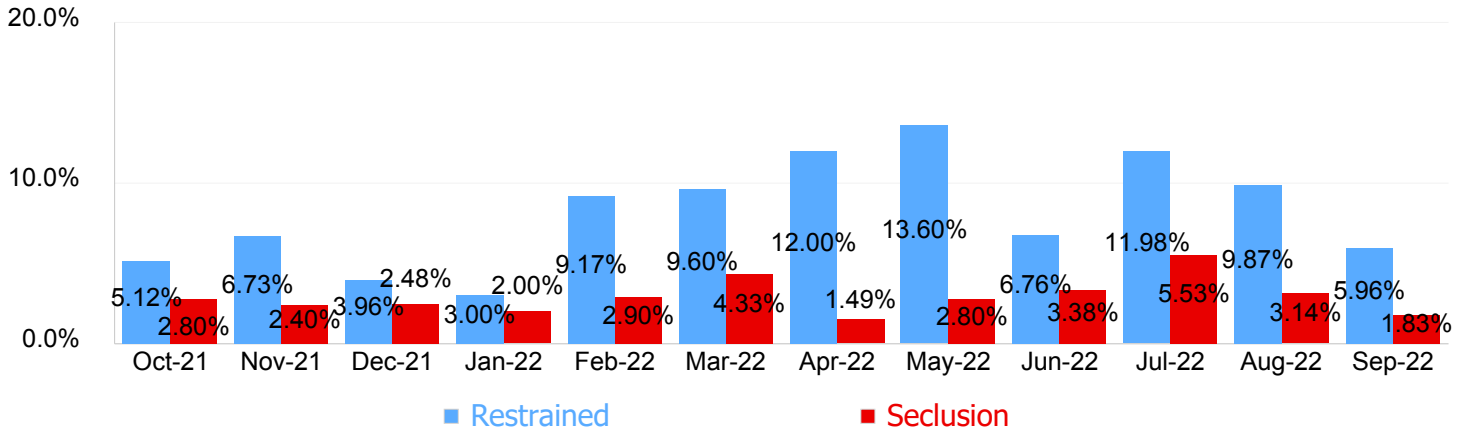
12. Patient and Staff Falls



	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Avg	Total
Total Staff who Fell	0	0	0	0	1	1	2	1	1	2	0	3	1	11
Total Patients who Fell	7	3	11	4	14	7	11	11	14	13	22	16	11	133
Patient Fall Rate	1.14	0.50	1.83	0.70	2.61	1.16	1.87	1.77	2.30	2.08	3.45	2.67	1.84	--

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

13. Percent of Patients Restrained or Secluded



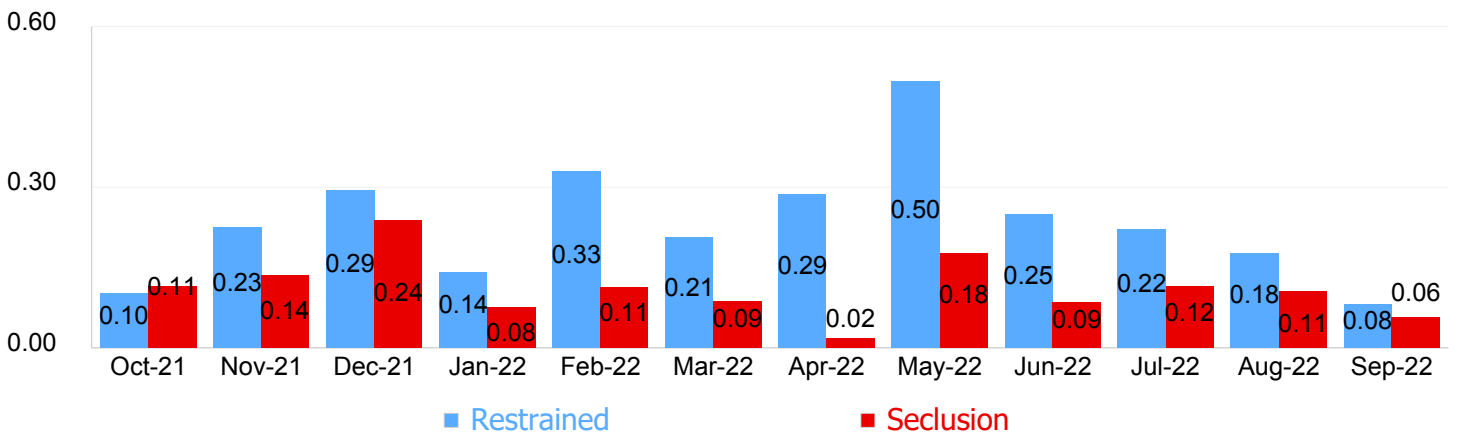
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Avg
Seclusion	2.80%	2.40%	2.48%	2.00%	2.90%	4.33%	1.49%	2.80%	3.38%	5.53%	3.14%	1.83%	2.92%
Restraint	5.12%	6.73%	3.96%	3.00%	9.17%	9.60%	12.00%	13.60%	6.76%	11.98%	9.87%	5.96%	8.15%

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



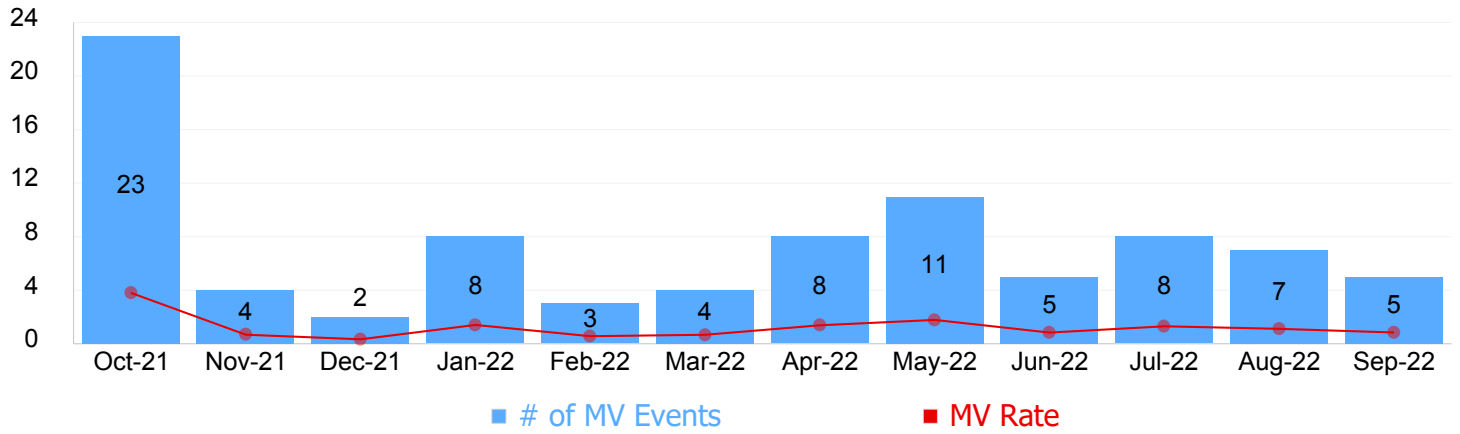
Event Type	Hour Rate												Avg
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	
Restraint	0.10	0.23	0.29	0.14	0.33	0.21	0.29	0.50	0.25	0.22	0.18	0.08	0.23
Seclusion	0.11	0.14	0.24	0.08	0.11	0.09	0.02	0.18	0.09	0.12	0.11	0.06	0.11

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.

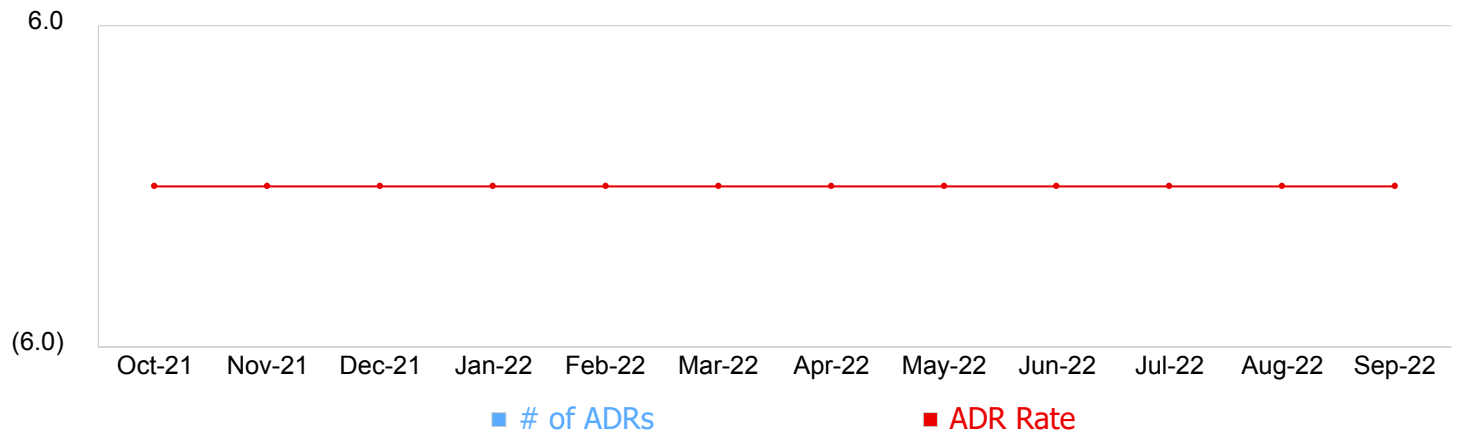
15. Reported Medication Variance Events & Rate



	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Avg	Total
# of MV Events	23	4	2	8	3	4	8	11	5	8	7	5	7	88
MV Rate	3.80	0.68	0.34	1.41	0.57	0.67	1.38	1.78	0.84	1.31	1.12	0.84	1.23	14.73

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

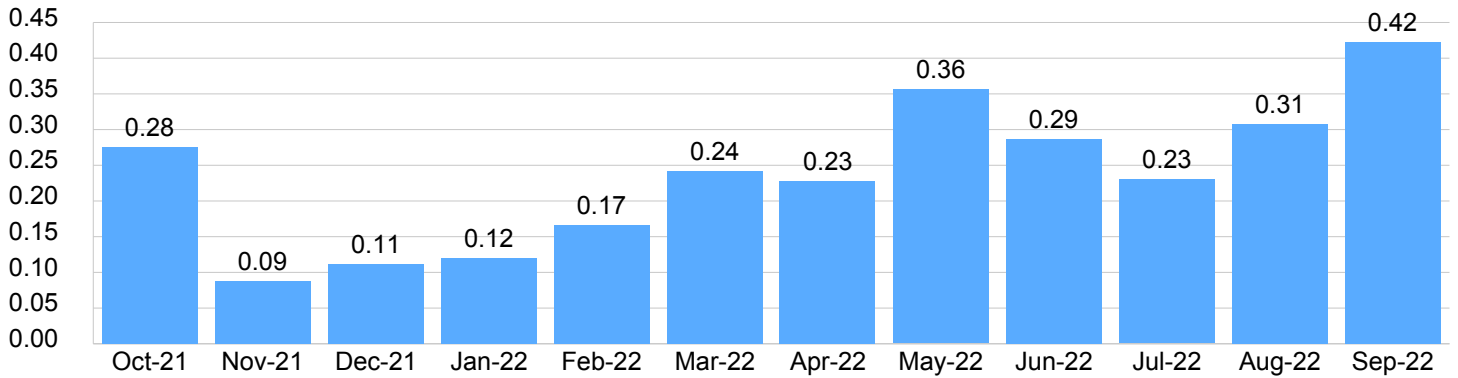
16. Reported Adverse Drug Reactions & Rate



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

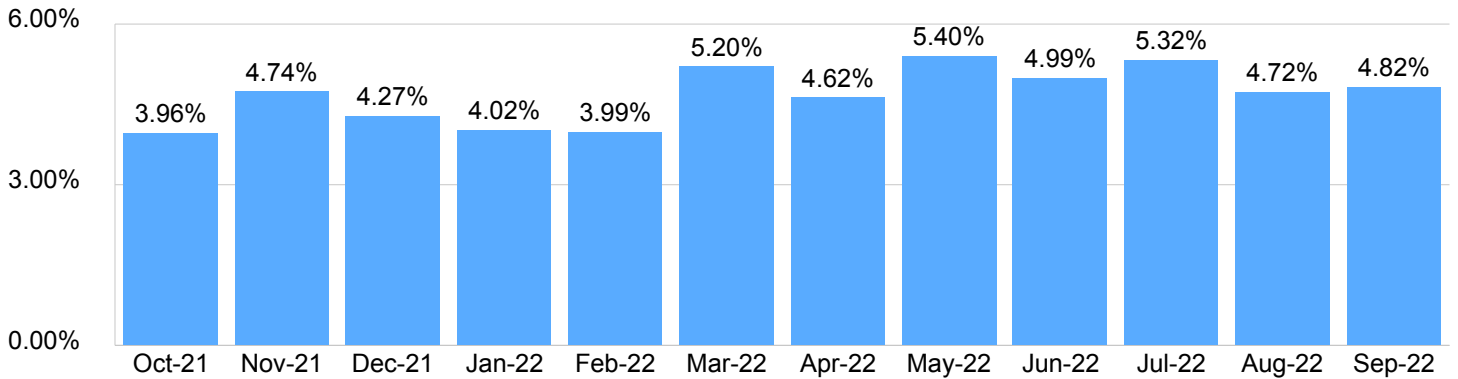
* ADR Rate: Number of reported adverse drug reaction events that occurred for every 1000 inpatient days.

17. Percent of Missing Documentation on Med-Administration



Event Type	Rate												Avg
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	
PercOfMissingDocumentation	0.28	0.09	0.11	0.12	0.17	0.24	0.23	0.36	0.29	0.23	0.31	0.42	0.24

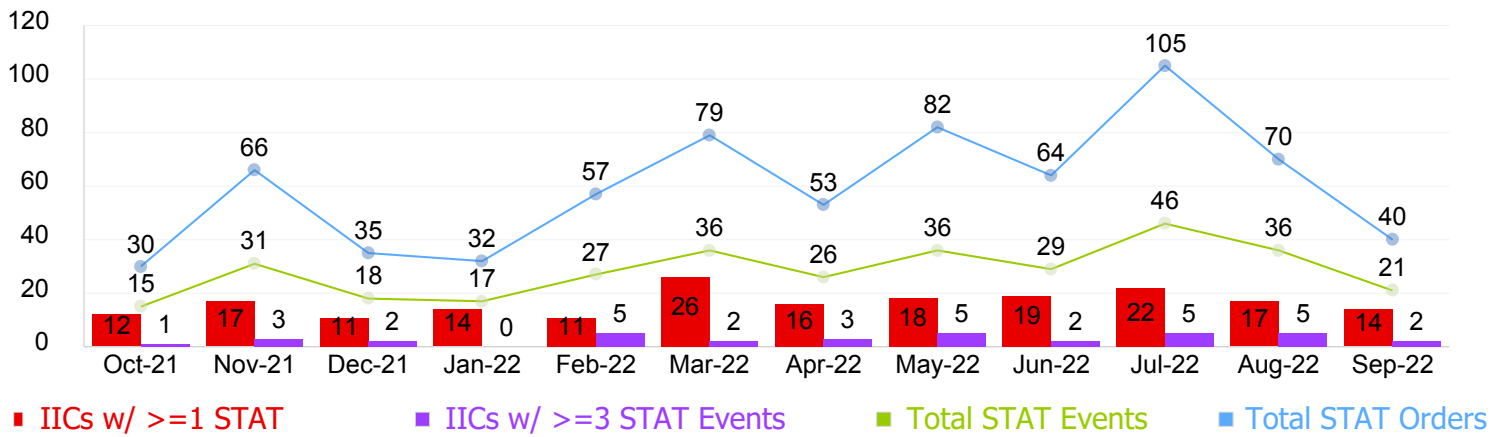
18. Medication Refusal Rate



	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Average
Medication Refusal Rate	3.96	4.74	4.27	4.02	3.99	5.20	4.62	5.40	4.99	5.32	4.72	4.82	4.67

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

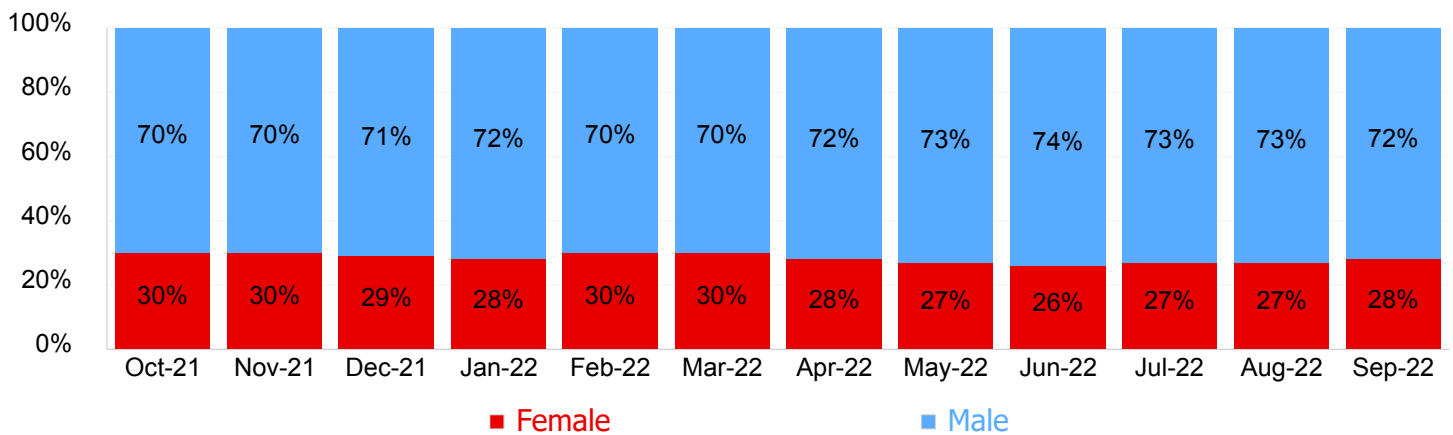
19. Number of STAT Events and Individuals Involved



	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Avg	Total
IICs w/ >=1 STAT	12	17	11	14	11	26	16	18	19	22	17	14	16	197
IICs w/ >=3 STAT Events	1	3	2	0	5	2	3	5	2	5	5	2	3	35
Total STAT Events	15	31	18	17	27	36	26	36	29	46	36	21	28	338
Total STAT Orders	30	66	35	32	57	79	53	82	64	105	70	40	59	713

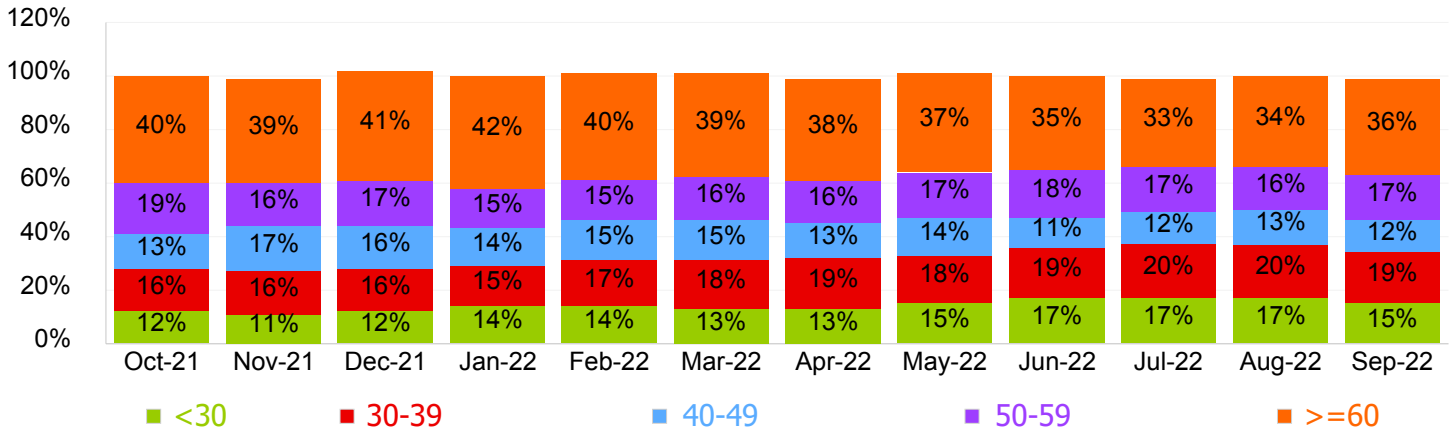
* A STAT event is an emergency medication prescribed and administered to a person involuntarily.

20. Demographics - Trend of Gender Distribution



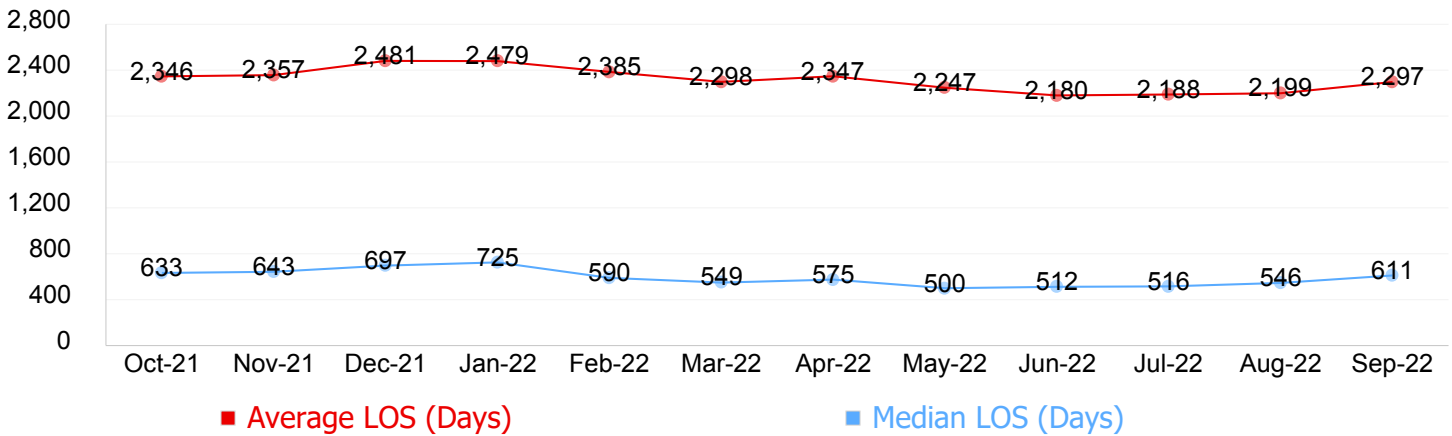
Gender	Rate												Avg
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	
Female	30%	30%	29%	28%	30%	30%	28%	27%	26%	27%	27%	28%	28%
Male	70%	70%	71%	72%	70%	70%	72%	73%	74%	73%	73%	72%	72%

21. Demographics - Trend of Age Distribution



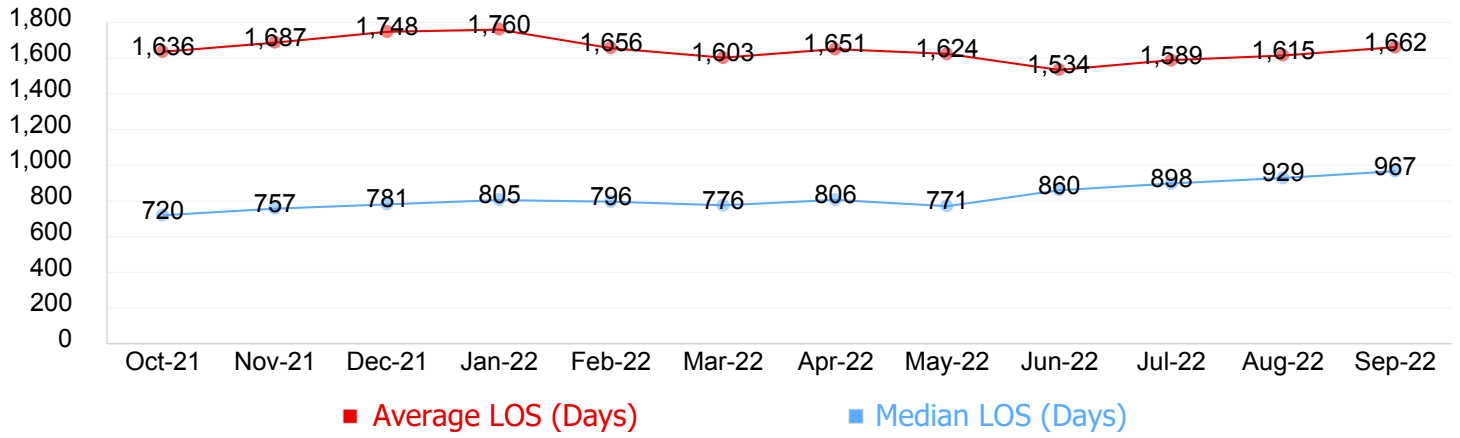
Age Group	Rate												Avg
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	
<30	12%	11%	12%	14%	14%	13%	13%	15%	17%	17%	17%	15%	14%
30-39	16%	16%	16%	15%	17%	18%	19%	18%	19%	20%	20%	19%	18%
40-49	13%	17%	16%	14%	15%	15%	13%	14%	11%	12%	13%	12%	14%
50-59	19%	16%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

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



Type	Individuals In Care											
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
Average LOS	2,346	2,357	2,481	2,479	2,385	2,298	2,347	2,247	2,180	2,188	2,199	2,297
Median LOS	633	643	697	725	590	549	575	500	512	516	546	611

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



Type	Civil											
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
Average LOS	1,636	1,687	1,748	1,760	1,656	1,603	1,651	1,624	1,534	1,589	1,615	1,662
Median LOS	720	757	781	805	796	776	806	771	860	898	929	967