



**pennsylvania**

DEPARTMENT OF HUMAN SERVICES  
OFFICE OF MENTAL HEALTH AND  
SUBSTANCE ABUSE SERVICES



## *Pennsylvania State Hospital Risk Management Summary and Indicator Report*

*June 2022*

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## Introduction

The State Hospital Risk Management System defines an incident as any patient-related event that has the potential for, or which results in, a negative impact upon the quality of patient care or services, including injury or death of a person served in the state hospital system. Past reports can be found on the DHS website using the following link.

<http://www.dhs.pa.gov/publications/forproviders/statehospitalriskmanagementsummaryreports/>

The data dictionary for the measurement system was updated on October 1, 2008, and is available for review as attachments to OMHSAS Bulletin titled Management of Incidents: SI-815 Incident Reporting and Risk Management Policy and Procedural Change. (Available via bulletin search at <http://www.dhs.pa.gov/> .)

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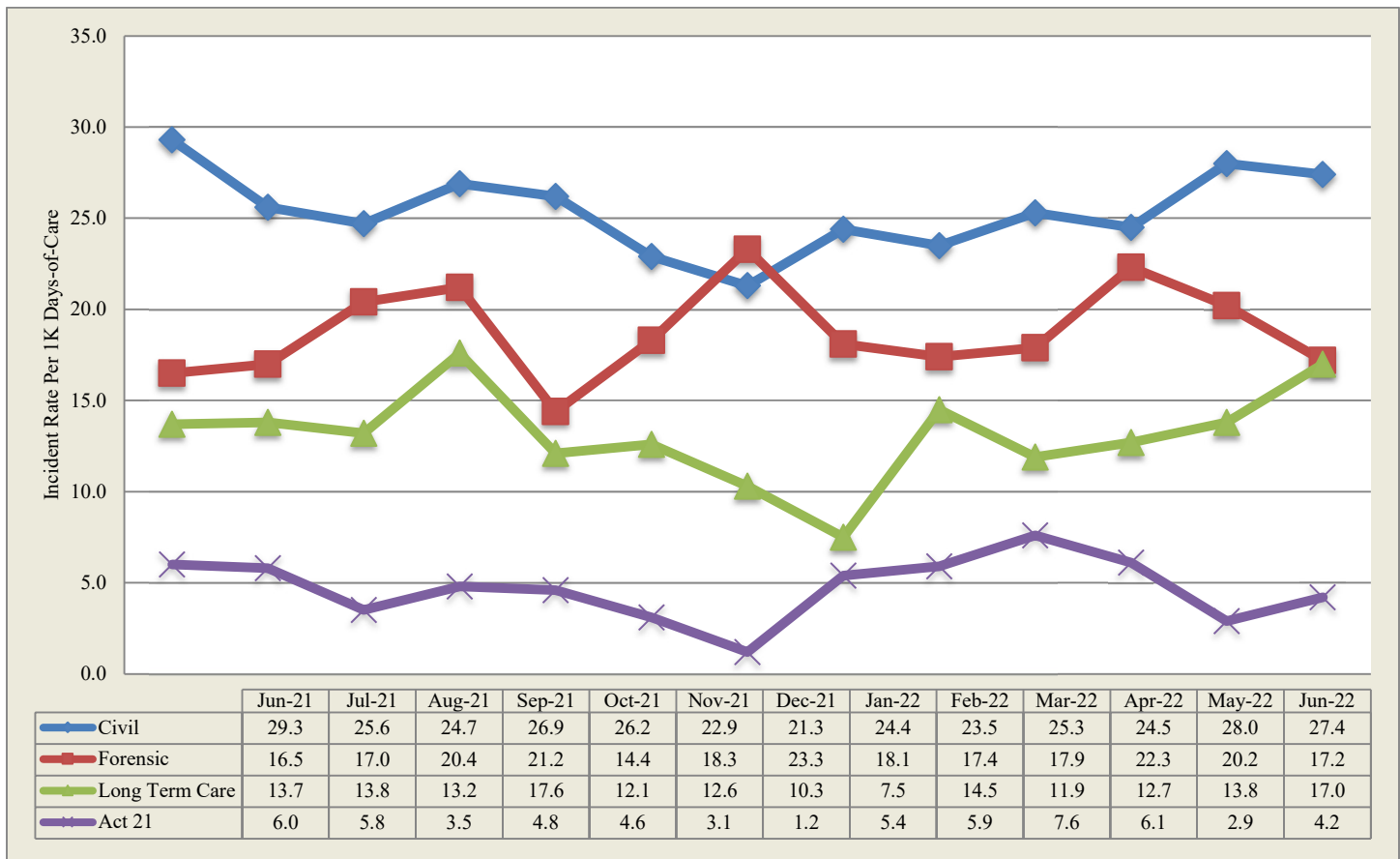
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During **June 2022**, a total of **1002** incident reports were completed by the state hospital system. Additional records addressing specific categories from the previous month were included on page 4 of this report. The following is a breakdown of incidents by individual facility and type of care:

**Table 1 - Number of Incident Reports**

	Census 6/30/2022	Days Provided	Incidents	Per 1000 Days-of-Care
Clarks Summit	150	4401	70	15.9
Danville	157	4717	154	32.6
Norristown	112	3356	87	25.9
Torrance	148	4361	117	26.8
Warren	149	4309	189	43.9
Wernersville	265	7938	179	22.5
<b>Total Civil</b>	981	29082	796	27.4
<b>Forensic</b>				
Norristown	190	5680	104	18.3
Torrance	103	2986	45	15.1
<b>Total Forensic</b>	293	8666	149	17.2
<b>Act 21</b>				
Act 21	62	1671	7	4.2
<b>Total Act 21</b>	62	1671	7	4.2
<b>Long Term Care</b>				
South Mountain	98	2940	50	17.0
<b>Total L. T. C.</b>	98	2940	50	17.0
<b>Total</b>	1887	42359	1002	23.7

**Thirteen-Month Trend of Incidents by Type of Care per 1,000 Days of Care**



\*Note: Rules regarding the reporting of incidents involving patient-to-patient assaults require a separate incident report form on each person involved in an altercation. This includes both the aggressor, when known and any other person involved. The numbers reported above reflect the monthly, total number of SI-815 reports coded as Patient-to-Patient Assaults and not the actual number of altercations.

The following table is refreshed each month from the most recent data (recent 6-month period) available from the State Hospital System RM database.

CATEGORY	Count	Jan_22	Feb_22	Mar_22	Apr_22	May_22	Jun_22
Accident-Injury	126	13	11	30	21	27	24
Adverse Drug Reaction	4		1			3	
Aggression	931	133	117	163	193	189	136
Airway Obstruction type 1 Intervention	16	4	3		4	2	3
Airway Obstruction type 2 No Intervention	9	2	1	2	1	1	2
Alleged Nonconsensual Sexual Activity	7	2		1	1	3	
Alleged Pt. Abuse	26	3	2	4	6	7	4
Assault, Pt./Pt	1540	299	255	244	237	276	229
Assault, Pt./Staff	296	57	38	42	55	46	58
AWOL/UA	20	4	2	3	4	6	1
AWOL-Attempt	31	4	1	9	6	4	7
AWOL-Late	10			4	2	2	2
Change in Medical Status-Stabilized	26	11	2	5		5	3
Change in Medical Status-Transferred	279	60	41	35	38	52	53
Charged post admit/crime committed prior to admit	1				1		
Communications Sys. Misuse	46	8	2	7	11	12	6
Community Incident	2	2					
Contraband Possession	86	6	14	20	15	12	19
Fall Type 1-Injury with treatment	221	36	34	33	31	42	45
Fall Type 2-No treatment needed	671	118	107	96	100	131	119
Family Concern	2			1			1
Fire Setting	2					1	1
Illicit Substance Use/Possession	4	1	1		1		1
Indeterminate/Unconfirmed Cause of Injury	59	5	8	17	9	12	8
Medication Error	83	9	15	15	23	9	12
Missing Property	15	1	4	3	6	1	
Other	218	25	24	31	38	46	54
Procedural Treatment Error	21	1	5	3	1	2	9
Property Damage	72	8	6	19	17	13	9
Seizure	36	3	2	6	8	9	8
Self-Injurious behavior	708	83	90	137	88	146	164
Sexual Behavior	36	5	2	8	10	4	7
Smoking Violation	2				1	1	
Substantiated Patient Abuse	12		1	1	3	1	6
Suicide Attempt	3					2	1
Suicide threat/plan	20	1	1	6	5	4	3
Theft	9	1	2	2	2		2
Unknown	2			1			1
Unsubstantiated Nonconsensual Sexual Activity	3		3				
Unsubstantiated Patient Abuse	14		2	1	3	4	4

**Table 2 - Category or Cause of Incidents in the Civil Hospitals**

Primary Cat #	CLA	DAN	NOR	TOR	WAR	WER	Count
Accident-Injury	1	6	1	1	1	0	10
Aggression	2	17	8	18	23	29	97
Airway Obstruction type 1 Intervention	0	0	0	0	0	1	1
Airway Obstruction type 2 No Intervention	0	0	1	0	1	0	2
Alleged Pt. Abuse	4	0	0	0	0	0	4
Assault, Pt./Pt	15	51	20	19	26	37	168
Assault, Pt./Staff	2	13	8	5	7	12	47
AWOL/UA	0	0	0	0	1	0	1
AWOL-Attempt	0	1	0	0	4	2	7
AWOL-Late	0	0	0	0	2	0	2
Change in Medical Status-Stabilized	0	0	1	0	0	0	1
Change in Medical Status-Transferred	4	12	4	9	7	4	40
Communications Sys. Misuse	1	0	1	0	4	0	6
Contraband Possession	0	5	10	0	1	2	18
Fall Type 1-Injury with treatment	10	3	4	7	0	11	35
Fall Type 2-No treatment needed	13	21	7	16	33	20	110
Family Concern	0	0	0	0	0	1	1
Fire Setting	0	0	0	0	1	0	1
Indeterminate/Unconfirmed Cause of Injury	2	0	1	2	1	0	6
Medication Error	0	6	3	0	0	0	9
Other	1	3	2	16	13	12	47
Property Damage	1	2	2	1	1	1	8
Seizure	0	0	1	0	3	1	5
Self-Injurious behavior	13	12	11	20	58	34	148
Sexual Behavior	0	1	1	3	0	1	6
Substantiated Patient Abuse	0	0	0	0	0	6	6
Suicide Attempt	0	1	0	0	0	0	1
Suicide threat/plan	1	0	1	0	0	0	2
Theft	0	0	0	0	2	0	2
Unknown	0	0	0	0	0	1	1
Unsubstantiated Patient Abuse	0	0	0	0	0	4	4
Totals	70	154	87	117	189	179	796

**Table 3 - Primary Effect of Incidents in the Civil Hospitals**

Primary effect	CLA	DAN	NOR	TOR	WAR	WER	Count
Unknown	0	1	1	1	0	0	3
Abrasion/scrape/scratch/hematoma	17	18	9	13	15	26	98
Asphyxiation	0	0	1	2	0	0	3
Bite-Human	0	1	1	0	0	0	2
Bite-Insect	1	0	0	0	0	0	1
Body System Illness	0	2	0	2	3	2	9
Bruise/contusion/discoloration	3	1	5	7	9	4	29
Cellulitis	0	0	0	0	1	0	1
Death	1	1	0	0	0	0	2
Edema/swelling	2	2	1	4	16	2	27
Emesis	0	1	1	1	0	2	5
Epistaxis	0	1	0	0	0	4	5
Erythema/redness	3	2	0	6	18	4	33
Fever	0	1	0	1	0	0	2
Ingestion of foreign body	4	0	0	0	4	7	15
Laceration: NO sutures/staples/steri-strips	0	2	4	3	2	5	16
Laceration: with steristrips/glue	0	0	0	1	1	0	2
Laceration: with sutures/staples	1	0	0	0	0	0	1
Lethargy	2	2	1	0	0	2	7
No Injury/NA	32	104	57	58	112	104	467
Other	0	4	3	16	0	9	32
Pain unspecified	0	0	1	0	0	1	2
Pain, Specified	3	9	1	2	7	5	27
Seizure	0	0	1	0	0	1	2
Syncopal episode	0	2	0	0	0	0	2
Unconscious/Unresponsive	1	0	0	0	1	0	2
Visual changes	0	0	0	0	0	1	1
Totals	70	154	87	117	189	179	796

**Table 4 - Cause of Incidents in the Forensic Units Category or Cause of Incidents in the Forensic Service by Unit**

Primary Cat #	NSH										TSH					Sys	
	51A1	51A2	51B1	51B2	51C1	51C2	10D1	10D2	10E1	10E2	Total	FB3	FB4	FC1	FC2	Total	Count
Accident-Injury	1										1					0	1
Aggression		1		6	2			1	4		14	1		7	7	15	29
Airway Obstruction type 1 Intervention										2	2					0	2
Assault, Pt./Pt	4	4	4	8	12	2	4	2	2	6	48			3	8	11	59
Assault, Pt./Staff	1		1	4	2		1		1		10					0	10
Change in Medical Status-Stabilized				1							1					0	1
Change in Medical Status-Transferred	1			3	1			1			6					0	6
Contraband Possession											0			1		1	1
Fall Type 1-Injury with treatment			2								2	3	1			4	6
Fall Type 2-No treatment needed			1					1			2		1			1	3
Illicit Substance Use/Possession											0			1		1	1
Indeterminate/Unconfirmed Cause of Injury				1			1				2					0	2
Medication Error					1						1					0	1
Other				1	1						2	2	2			4	6
Procedural Treatment Error		1									1					0	1
Seizure			1								1	1				1	2
Self-Injurious behavior	1			2	6						9	3	1	2	1	7	16
Sexual Behavior				1							1					0	1
Suicide threat/plan									1		1					0	1
<b>Totals</b>	<b>8</b>	<b>6</b>	<b>9</b>	<b>27</b>	<b>25</b>	<b>2</b>	<b>6</b>	<b>5</b>	<b>8</b>	<b>8</b>	<b>104</b>	<b>10</b>	<b>5</b>	<b>14</b>	<b>16</b>	<b>45</b>	<b>149</b>

**Table 5 - Effect of Incidents in the Forensic Service by Unit**

EFFECT	NSH										TSH					Sys	
	51A1	51A2	51B1	51C1	51C2	51B2	10D1	10D2	10E1	10E2	Total	FB3	FB4	FC1	FC2	Total	Count
Unknown						1					1					0	1
Abrasion/scrape/scratch/hematoma				2	3	1		1			7	2	1		1	4	11
Asphyxiation										2	2					0	2
Bite-Human						1					1					0	1
Bruise/contusion/discoloration	1		1								2		1		2	3	5
Emesis						1					1					0	1
Erythema/redness			2	2	1						5	1			3	4	9
Fracture											0	1				1	1
Ingestion of foreign body								1			1					0	1
Laceration: NO sutures/staples/steri-strips						2					2				1	1	3
Lethargy				1							1					0	1
No Injury/NA	6	6	3	18	2	12	4	4	7	5	67	4	3	13	8	28	95
Other						4	1				5			1	1	2	7
Pain unspecified											0	1				1	1
Pain, Specified			2	2	2					1	7					0	7
Seizure			1								1	1				1	2
Syncopal episode	1										1					0	1
<b>Totals</b>	<b>8</b>	<b>6</b>	<b>9</b>	<b>25</b>	<b>2</b>	<b>27</b>	<b>6</b>	<b>5</b>	<b>8</b>	<b>8</b>	<b>104</b>	<b>10</b>	<b>5</b>	<b>14</b>	<b>16</b>	<b>45</b>	<b>149</b>

**Table 6 -Cause of Incidents in the Long Term Care Facility**

Cause	3A	3B	6A	6B	Count
Accident-Injury	4	3	1	1	9
Aggression	5	1		2	8
Assault, Pt./Pt		2			2
Assault, Pt./Staff				1	1
Change in Medical Status-Stabilized	1				1
Change in Medical Status-Transferred	1	2	1	3	7
Fall Type 1-Injury with treatment	1	2		1	4
Fall Type 2-No treatment needed	1	2	1	2	6
Medication Error	1			1	2
Procedural Treatment Error	1	1		6	8
Property Damage				1	1
Seizure	1				1
Totals	16	13	3	18	50

**Table 7 - Effect of Incidents in the Long Term Care Facility**

EFFECT	3A	3B	6A	6B	Count
Abrasion/scrape/scratch/hematoma	2	3		1	6
Blister			1		1
Bruise/contusion/discoloration	2	1		2	5
Fracture		2			2
Laceration: NO sutures/staples/steri-strips		1			1
Laceration: with steristrips/glue	1				1
No Injury/NA	8	6	1	13	28
Other			1	1	2
Pain, Specified	1				1
Seizure	1				1
Sunburn	1				1
Unconscious/Unresponsive				1	1
Totals	16	13	3	18	50



**Act-21-Sexual Responsibility & Treatment Program at Torrance State Hospital**

In July 2003, the Pennsylvania Legislature enacted Act 21 for adjudicated youth, aging out of the juvenile justice system who have a "mental abnormality" that renders them unable to control their violent sexual impulses. The Act mandates the state to provide mental health and sex-offense specific treatment to an identified population that had been adjudicated of certain sex crimes, received treatment in a juvenile program, yet remains a significant risk to sexually re-offend after reaching the age of 21, an age when oversight by the juvenile justice system typically ends. The Act requires the referral of such individuals who have committed these specific crimes to the Pennsylvania Sexual Offenders Assessment Board (SOAB) ninety days prior to their 20th birthday for purposes of determining if the individual has "serious difficulty in controlling sexually violent behavior." If so determined, a petition for a mental health hearing will be made for determination of civil commitment to the Sexual Responsibility and Treatment Program (SRTP) on the grounds of Torrance State Hospital. On July 1, 2006, the operation of this program transferred from an independent contractor to the Torrance State Hospital.

**Table 8 - Cause of Incidents in the Sexual Responsibility and Treatment Program**

Cause	TOR	Count
Accident-Injury	4	4
Aggression	2	2
Other	1	1
Totals	7	7

**Table 9 - Effect of Incidents in the Sexual Responsibility and Treatment Program**

Primary effect	TOR	Count
Allergic reaction	1	1
Bruise/contusion/discoloration	1	1
Edema/swelling	1	1
Muscle pull/strain/sprain	1	1
No Injury/NA	2	2
Other	1	1
Totals	7	7

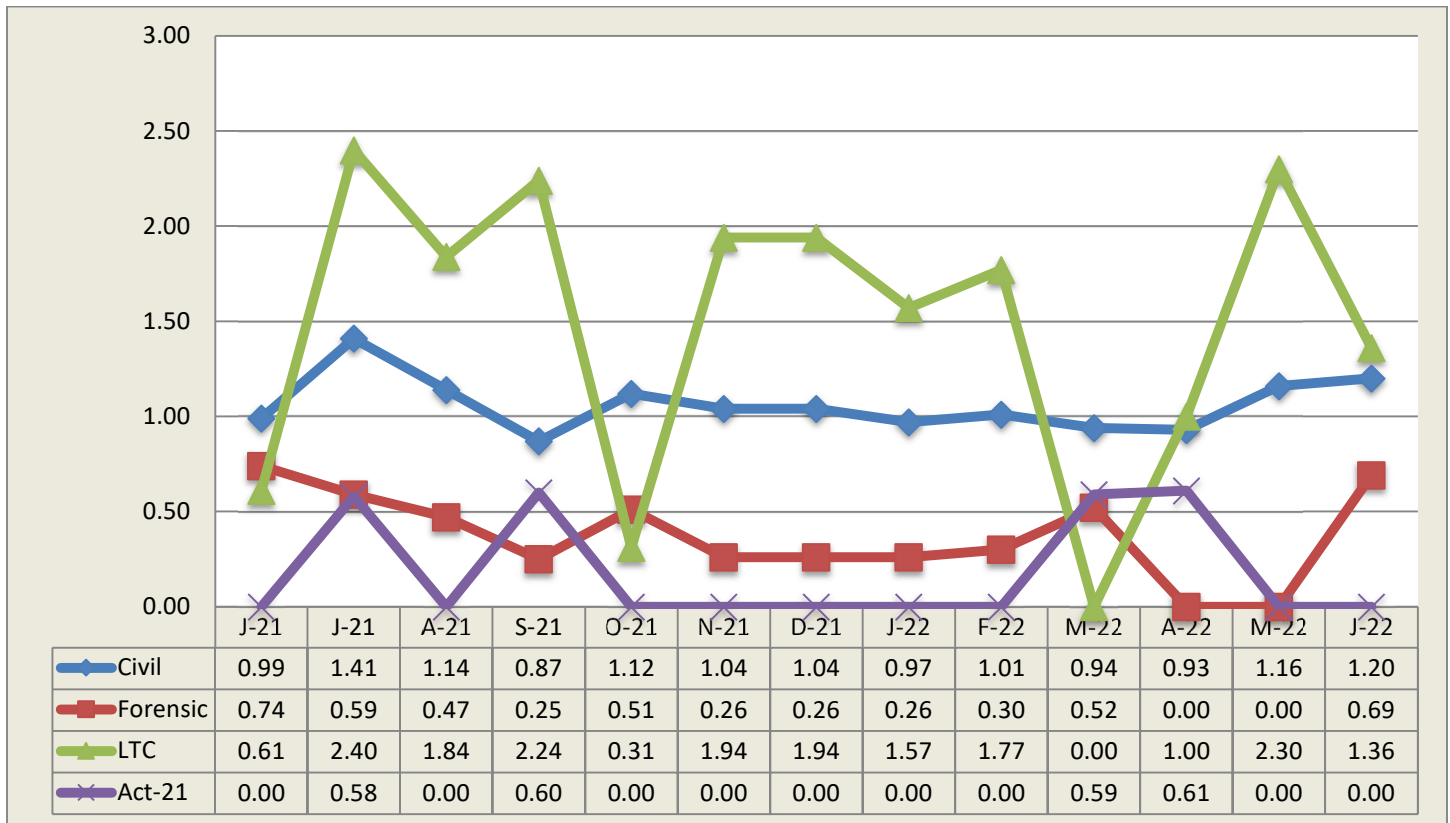
## Falls

Falls within the state hospital risk management system are divided into two categories, type 1 and type 2, with the need for medical intervention or lack thereof defining the difference. The following data relates to falls, type 1 which are defined as an involuntary descent to a lower position, excluding seizures, that is witnessed or reported and requires medical intervention.

**Table 10 - 13-Month Rate of Type 1 Falls Per 1,000 Days-of-Care**

M/Year	Civil Hospital							Forensic			A21	LTC	Sys Avg
	Cl	Dan	Nor	Tor	War	Wer	Ttl	Nor	Tor	Total	A21	SMRC	
Jun-21	2.69	0.43	0.28	1.60	0.00	0.92	0.99	0.70	0.86	0.74	0.00	0.61	0.87
Jul-21	2.34	1.61	1.41	2.13	0.23	1.01	1.41	0.83	0.00	0.59	0.58	2.40	1.30
Aug-21	1.60	0.61	1.15	2.18	0.23	1.13	1.14	0.17	1.26	0.47	0.00	1.84	1.02
Sep-21	1.18	0.63	0.30	0.90	0.00	1.53	0.87	0.17	0.43	0.25	0.60	2.24	0.84
Oct-21	2.49	0.00	1.19	1.79	0.00	1.24	1.12	0.52	0.47	0.51	0.00	0.31	0.84
Nov-21	2.59	0.00	1.82	1.60	0.23	0.64	1.04	0.00	0.98	0.26	0.00	1.94	0.92
Dec-21	2.59	0.00	1.82	1.60	0.23	0.64	1.04	0.00	0.98	0.26	0.00	1.94	0.92
Jan-22	2.06	0.20	0.91	1.95	0.22	0.74	0.97	0.36	0.98	0.26	0.00	1.57	0.85
Feb-22	2.56	0.23	0.33	0.96	0.25	1.37	1.01	0.43	0.00	0.30	0.00	1.77	0.90
Mar-22	2.23	0.41	0.60	1.51	0.00	0.86	0.94	0.57	0.39	0.52	0.59	0.00	0.78
Apr-22	1.16	0.84	0.90	2.01	0.46	0.51	0.93	0.00	0.00	0.00	0.61	1.00	0.74
May-22	1.78	0.00	1.47	2.63	0.00	1.23	1.16	0.00	0.00	0.00	0.00	2.30	0.96
Jun-22	2.27	0.64	1.19	1.61	0.00	1.39	1.20	0.35	1.34	0.69	0.00	1.36	1.06

**13-Month Trend of Type 1 Falls by Type of Care per 1,000 Days-of-Care**



**State Hospital Use of Seclusion**

**Civil and Forensic**

Data on seclusion use for psychiatric reasons includes the civil and forensic populations and is reported for both monthly and yearly totals.

**Table 11 - Hours of Seclusion Use, Monthly Totals for Past Year**

No Use of Seclusion in PA State Hospital system since July 2013

**Table 12 - Number of Seclusion Events, Monthly Totals for Past Year**

No Use of Seclusion in PA State Hospital system since July 2013

**State Hospital Use of Mechanical Restraint**

**Civil and Forensic**

Data on mechanical restraint use for psychiatric reasons includes the forensic and civil populations and is reported for both monthly and yearly totals.

**Table 13 - Total Hours of Mechanical Restraint Use by Hospital and Unit In Month**

No use of Mechanical Restraint in PA State Hospital system since September 2015

**Table 14 - Hours of Mechanical Restraint Use, Monthly Totals for Past Year**

No use of Mechanical Restraint in PA State Hospital system since September 2015

**Table 15 - Number of Mechanical Restraint Events, Monthly Totals for Past Year**

No use of Mechanical Restraint in PA State Hospital system since September 2015

**State Hospital Use of Physical Holds**

Data on physical holds use for psychiatric reasons includes all level of care populations and is reported for both monthly and yearly totals. Physical hold events lasting less than 60 seconds are reflected as 0.00 hours.

**Table 16 - Hours of Physical Holds (Restraint) Used by Hospital & Unit**

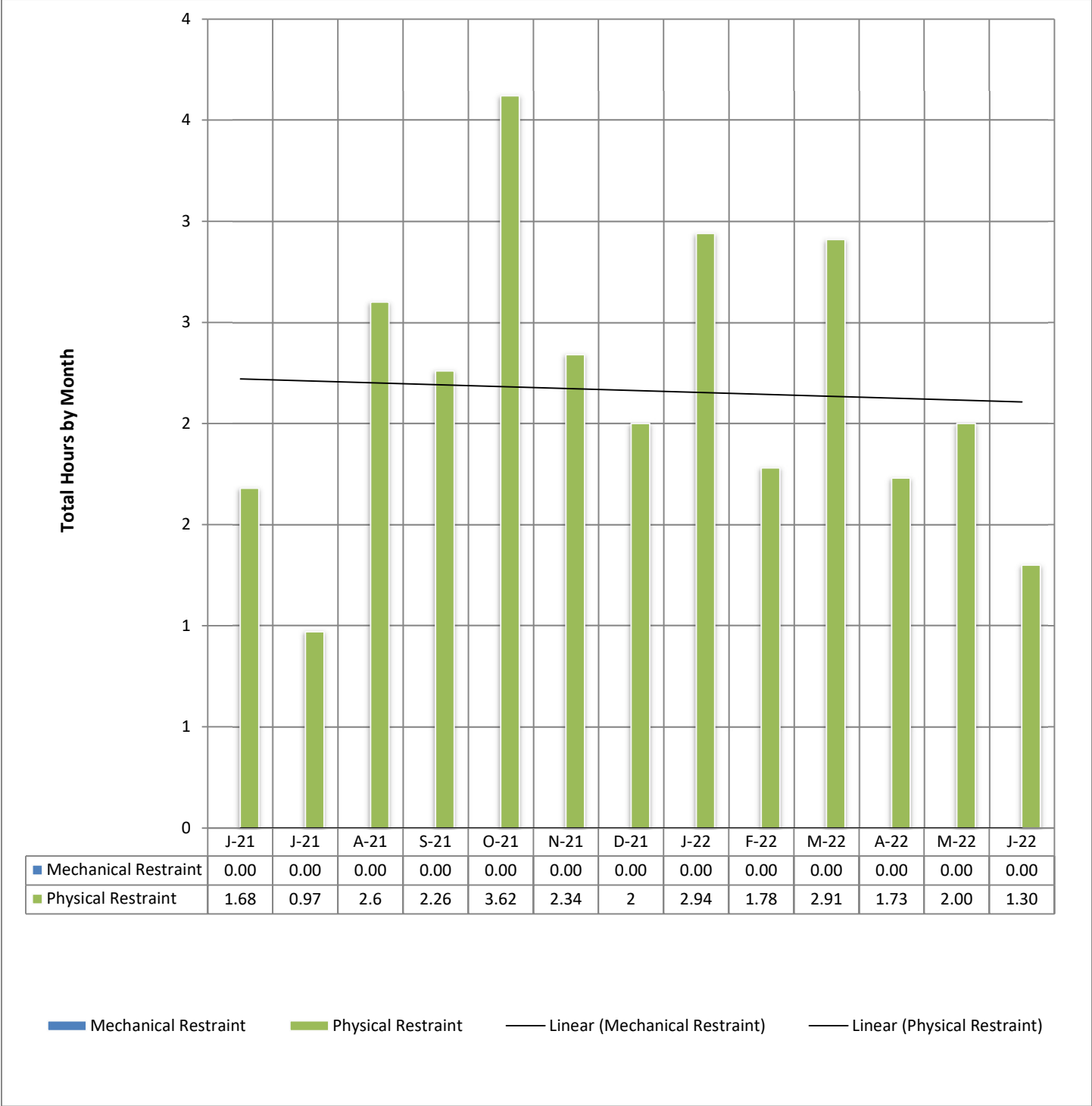
ABV	WARD	Total	ABV	WARD	Total	ABV	WARD	Total
NOR	01C1	0.61	NOR	51C1	0.05	WER	35-2	0.01
TOR	FC2	0.15	WER	37-1	0.03	NOR	01A2	0.01
WAR	3IF	0.10	CLA	3	0.03	CLA	6	0.01
NOR	10E1	0.10	NOR	51B2	0.03	NOR	10D1	0.003
WAR	3NM	0.08	NOR	51A2	0.03	DAN	212	0.001
TOR	011	0.05	NOR	51A1	0.02			

**Table 17 - Hours of Physical Holds (Restraint) Use, Monthly Totals for Past Year**

ABV	Total	Jul_21	Aug_21	Sep_21	Oct_21	Nov_21	Dec_21	Jan_22	Feb_22	Mar_22	Apr_22	May_22	Jun_22
CLA	6.33	1.67	0.00	0.80	0.83	1.05	0.66	1.02	0.00	0.00	0.06	0.21	0.04
DAN	1.47	0.12	0.22	0.27	0.20	0.24	0.20	0.02	0.01	0.04	0.08	0.07	0.00
NOR	9.53	0.14	0.63	0.74	1.54	0.22	1.00	1.59	0.78	1.11	0.52	0.42	0.83
TOR	6.82	0.62	1.32	0.33	0.20	0.73	0.55	0.43	0.18	1.18	0.42	0.65	0.20
WAR	9.64	0.15	0.47	1.42	0.70	1.23	0.58	0.84	0.52	1.78	0.57	0.77	0.63
WER	4.45	0.09	0.10	0.85	0.85	0.95	0.00	0.52	0.53	0.35	0.10	0.06	0.06
<b>Total</b>	<b>38.23</b>	<b>2.77</b>	<b>2.74</b>	<b>4.41</b>	<b>4.32</b>	<b>4.42</b>	<b>2.98</b>	<b>4.42</b>	<b>2.02</b>	<b>4.46</b>	<b>1.74</b>	<b>2.19</b>	<b>1.77</b>

**Table 18 - Number of Physical Holds (Restraint) Events, Monthly Totals for Past Year**

ABV	Total	Jul_21	Aug_21	Sep_21	Oct_21	Nov_21	Dec_21	Jan_22	Feb_22	Mar_22	Apr_22	May_22	Jun_22
CLA	26	6	0	1	4	2	3	3	0	0	2	3	2
DAN	47	5	5	7	6	6	3	2	1	2	4	5	1
NOR	295	11	20	32	17	18	35	37	21	20	34	26	24
TOR	69	11	11	6	2	5	4	4	3	8	5	8	2
WAR	136	6	13	12	19	14	7	9	8	16	12	16	4
WER	49	5	4	9	9	3	0	3	1	2	6	2	5



## Assaults

Assaults within the state hospital system are defined as any aggressive act by a patient, involving physical contact that may or may not result in injury. Assaults can be directed at a peer, staff or any other individual. The system was designed to require an incident report (form SI-815) on any patient involved in a physical altercation regardless of who may have started the assault. Therefore, every patient-to-patient altercation will result in at least two incident reports.

**Table 19 - Patient-to-Patient Assaults by Unit, All Levels of Care**

ABV	WARD	Cnt	ABV	WARD	Cnt	ABV	WARD	Cnt
DAN	212	23	NOR	10E2	6	NOR	51A1	4
NOR	01C1	14	WAR	2SW	6	WER	37-3	3
NOR	51C1	12	TOR	022	6	TOR	FC1	3
DAN	210	11	WER	35-4	5	WAR	3IM	3
DAN	312	9	CLA	3	5	WAR	PCAC	2
DAN	310	8	CLA	4	4	CLA	7	2
NOR	51B2	8	CLA	6	4	TOR	024	2
TOR	FC2	8	NOR	01A2	4	WER	34-3	2
WAR	2NM	8	WER	35-2	4	NOR	01C2	2
WER	37-2	8	NOR	10D1	4	NOR	10D2	2
WER	35-3	8	NOR	51B1	4	NOR	10E1	2
WAR	3NM	7	NOR	51A2	4	NOR	51C2	2
TOR	013	7	TOR	011	4	SMO	3B	2
WER	37-1	7						

**Table 20 - Rate of Patient-to-Patient Assaults Events with Patient Injury per 1,000 Days-of-Care**

Pt.-to-Pt. Assault w/ any Injury	Civil							Forensic			S RTP
	Cla	Dan	Nor	Tor	War	Wer	Tot.	Nor	Tor	Tot.	S RTP
Jun-21	0.73	1.91	2.85	1.60	0.97	1.19	1.48	2.79	1.29	2.36	0.00
Jul-21	0.70	0.20	3.09	2.35	0.69	1.65	1.41	2.99	2.94	2.97	0.00
Aug-21	0.00	0.61	3.45	1.52	1.58	0.88	1.21	2.64	2.10	2.49	0.00
Sep-21	1.14	0.84	3.01	2.70	1.44	1.15	1.63	2.97	3.43	3.10	0.00
Oct-21	0.00	1.04	1.19	3.13	2.31	0.49	1.26	2.26	2.37	2.29	0.00
Nov-21	0.24	0.64	1.21	2.29	0.46	0.76	0.90	3.02	1.47	2.60	0.00
Dec-21	0.68	0.41	3.29	1.53	1.09	0.62	1.10	4.03	1.66	3.46	0.00
Jan-22	1.15	2.23	2.73	1.08	0.88	1.98	1.68	2.33	1.02	1.99	0.00
Feb-22	1.02	2.03	3.64	1.68	2.25	1.78	1.98	4.28	0.00	3.02	0.65
Mar-22	1.34	1.22	2.38	1.94	2.47	0.99	1.60	2.87	0.39	2.06	0.00
Apr-22	0.70	1.04	1.20	1.12	1.84	1.15	1.17	4.71	1.09	3.47	0.00
May-22	0.89	2.22	1.17	2.41	1.54	1.10	1.53	3.26	0.00	2.14	0.00
Jun-22	0.91	2.33	1.79	1.61	1.39	0.88	1.41	2.11	1.67	1.96	0.00

**Table 21 - Patient-to-Staff Assault Events by Unit, All Levels of Care**

ABV	WARD	Cnt	ABV	WARD	Cnt	ABV	WARD	Cnt
NOR	01C1	7	WER	35-3	2	NOR	10D1	1
WER	37-1	5	TOR	022	2	NOR	51A1	1
NOR	51B2	4	NOR	10E1	1	NOR	51B1	1
DAN	212	4	DAN	210	1	WAR	2NM	1
WAR	2SW	4	WER	34-4	1	TOR	024	1
WER	35-4	3	WAR	3NM	1	WER	37-3	1
DAN	211	3	DAN	311	1	TOR	011	1
DAN	310	3	DAN	312	1	TOR	013	1
CLA	6	2	NOR	01A2	1	WAR	3IF	1
NOR	51C1	2	SMO	6B	1			

**Table 22 - Rate of Patient-to-Staff Assault Events with Injury to Staff per 1,000 Days-of-Care**

Pt/Staff Assault w/ Staff Inj per 1K days	Civil							Forensic			S RTP
	Cl a	D an	N or	T or	W ar	W er	T ot.	N or	T or	T ot.	S RTP
Jun-21	0.24	0.85	0.28	0.00	0.49	0.26	0.35	1.05	0.43	0.87	0.00
Jul-21	0.47	0.20	0.00	0.43	0.69	0.63	0.44	0.17	0.84	0.36	0.58
Aug-21	0.00	0.20	0.00	0.22	0.68	0.13	0.20	0.33	0.00	0.24	0.00
Sep-21	0.94	0.00	1.20	0.00	0.24	0.51	0.45	0.52	0.00	0.37	0.00
Oct-21	0.00	0.42	0.00	0.67	0.46	0.62	0.41	0.52	0.00	0.38	0.00
Nov-21	0.00	0.00	0.00	0.00	0.46	0.51	0.21	0.18	0.49	0.26	0.00
Dec-21	0.00	1.43	1.20	0.22	3.50	0.86	1.17	1.75	0.55	1.46	0.00
Jan-22	0.00	0.61	0.30	0.43	0.22	0.37	0.34	0.36	0.00	0.26	0.00
Feb-22	0.00	0.45	0.33	0.00	0.50	0.14	0.22	0.43	0.00	0.30	0.00
Mar-22	0.00	0.41	0.00	0.43	0.67	0.00	0.23	0.00	0.39	0.13	0.00
Apr-22	0.46	0.63	0.00	0.22	0.23	0.77	0.45	0.75	0.36	0.62	0.00
May-22	0.00	0.20	0.29	0.00	1.32	0.25	0.33	0.34	0.66	0.45	0.59
Jun-22	0.00	0.42	1.49	0.23	0.23	0.38	0.41	0.53	0.00	0.35	0.00

**Table 23 - Risk Adjusted Safety Indicators**

Jun-22	Civil							Forensic					
Month	Cl	Dan	Nor	Tor	War	Wer	C. Total	Nor	Tor	F. Total	LTC	SRTP	System
Patient Days	4401	4717	3356	4361	4309	7938	29082	5680	2986	8666	2940	1671	42359
Census	150	157	112	148	149	265	981	190	103	293	98	62	1434
<b>Safety Indicators</b>													
Type 1 Falls (count)	10	3	4	7	0	11	35	2	4	6	4	0	45
Num Per 1,000 Pt Days	2.27	0.64	1.19	1.61	0.00	1.39	1.20	0.35	1.34	0.69	1.36	0.00	1.06
Total Falls (count)	23	24	11	23	33	31	145	4	5	9	10	0	164
Num Per 1,000 Pt Days	5.23	5.09	3.28	5.27	7.66	3.91	4.99	0.70	1.67	1.04	3.40	0.00	3.87
<b>PT:PT Assaults w/Injury(count)</b>													
PT:PT Assaults w/Injury(count)	4	11	6	7	6	7	41	12	5	17	1	0	59
Num Per 1,000 Pt Days	0.91	2.33	1.79	1.61	1.39	0.88	1.41	2.11	1.67	1.96	0.34	0.00	1.39
Total PT:PT Assault Events (count)	15	51	20	19	26	37	168	48	11	59	2	0	229
Num Per 1,000 Pt Days	3.41	10.81	5.96	4.36	6.03	4.66	5.78	8.45	3.68	6.81	0.68	0.00	5.41
<b>PT:Staff Assaults w/Injury(count)</b>													
PT:Staff Assaults w/Injury(count)	0	2	5	1	1	3	12	3	0	3	1	0	16
Num Per 1,000 Pt Days	0.00	0.42	1.49	0.23	0.23	0.38	0.41	0.53	0.00	0.35	0.34	0.00	0.38
Total PT:Staff Assault Events (count)	2	13	8	5	7	12	47	10	0	10	1	0	58
Num Per 1,000 Pt Days	0.45	2.76	2.38	1.15	1.62	1.51	1.62	1.76	0.00	1.15	0.34	0.00	1.37
<b>SIB Events (count)</b>													
SIB Events (count)	13	12	11	20	58	34	148	9	7	16	0	0	164
Num Per 1,000 Pt Days	2.95	2.54	3.28	4.59	13.46	4.28	5.09	1.58	2.34	1.85	0.00	0.00	3.87
<b>Total Physical Restraint Hours</b>													
Total Physical Restraint Hours	0.04	0.001	0.62	0.05	0.183	0.04	0.93	0.22	0.15	0.37		0.00	1.30
Num Per 1,000 Pt Days	0.01	0.00	0.18	0.01	0.04	0.01	0.03	0.04	0.05	0.04		0.00	0.03
<b>Medication Measures</b>													
Benzodiazepines	94	77	45	40	76	90	422	7	3	10		6	438
Percentage of Census	0.63	0.49	0.40	0.27	0.51	0.34	0.43	0.04	0.03	0.03		0.10	0.31
<b>Multiple Atypicals</b>													
Multiple Atypicals	29	60	13	41	60	72	275	11	16	27		0	302
Percentage of Census	0.19	0.38	0.12	0.28	0.40	0.27	0.28	0.06	0.16	0.09		0.00	0.21
<b>Typical- Atypical</b>													
Typical- Atypical	37	59	42	71	48	119	376	50	39	89		0	465
Percentage of Census	0.25	0.38	0.38	0.48	0.32	0.45	0.38	0.26	0.38	0.30		0.00	0.32



## Wellness Indicators

The National Association of State Mental Health Program Directors (NASMHPD) issued a report in October 2006 about mortality and morbidity in people with serious mental illness (SMI). According to Mental Health America's *Survey of People with Schizophrenia and Providers* ([www.mentalhealthamerica.net](http://www.mentalhealthamerica.net)), the NASMHPD report revealed that people with SMI die on average 25 years earlier than the general population. The major natural causes of death for people with SMI are heart disease, diabetes, respiratory disease and infectious disease. Many of the risk factors for these diseases are modifiable.

**Table 24 - Reasons for Hospitalizations as the Result of an Incident, All Levels of Care**

The Risk Management System requires that an incident report form be completed anytime a person is transported from a state hospital to an acute care hospital. This includes if the person was only seen in the emergency room, received diagnostic tests and/or was actually admitted. It does **not** include hospitalizations for a preplanned procedure, test or surgery.

Cause	CLA	DAN	NOR	TOR	WAR	WER	Count
Aggression						1	1
Assault, Pt./Pt		1					1
Change in Medical Status-Transferred	4	12	10	8	7	3	44
Fall Type 1-Injury with treatment		1					1
Fall Type 2-No treatment needed				1			1
Indeterminate/Unconfirmed Cause of Injury			1				1
Other				2		2	4
Seizure			1			1	2
Self-Injurious behavior		1		1		7	9
Unknown						1	1
<b>Totals</b>	<b>4</b>	<b>15</b>	<b>12</b>	<b>12</b>	<b>7</b>	<b>15</b>	<b>65</b>

## Medication Measures

Beginning in September 2008 the OMHSAS Bureau of Community and Hospital Operations identified the following three medication measures for inclusion in this monthly report. The table information is compiled from the QS1 pharmacy software and reflects the unique count of the number of people served at each hospital on the last day of the month for each measure.

**Table 25 - Benzodiazepines**

**Measure Definition:** *Benzodiazepines refers to the number of unique patients served at each hospital, by level-of-care, who have an active, straight order for any benzodiazepine medication on the last day of each month.*

<b>BZD</b>								<b>Forensic</b>			<b>SRTP</b>	<b>Sys</b>
<b>M/Y</b>	Cl	Dan	Nor	Tor	War	Wer	Total	Nor	Tor	Cnt	Tor	Total
Aug-21	88	72	41	31	81	76	389	7	10	17	7	413
Nov-21	90	89	34	35	77	81	406	8	7	15	5	426
22-Feb	89	78	39	36	72	78	392	10	5	15	7	414
22-Jun	94	77	45	40	76	90	422	7	3	10	6	438

**Table 26 - Multiple Atypicals**

**Measure Definition:** *Multiple Atypicals refers to the number of unique patients served at each hospital, by level-of-care, who have an active, straight order for two or more atypical antipsychotic medications on the last day of each month.*

<b>Multiple Atypicals</b>								<b>Forensic</b>			<b>SRTP</b>	<b>Sys</b>
<b>M/Y</b>	Cl	Dan	Nor	Tor	War	Wer	Total	Nor	Tor	Cnt	Tor	Total
Aug-21	28	49	10	46	57	79	269	12	13	25	0	294
Nov-21	28	51	4	41	58	77	259	17	8	25	0	284
22-Feb	23	52	7	40	62	76	260	14	15	29	0	289
22-Jun	29	60	13	41	60	72	275	11	16	27	0	302

**Table 27 - Typical-Atypical**

**Measure Definition:** *Typical-Atypicals refers to the number of unique patients served at each hospital, by level-of-care, who have an active, straight order for a typical and an atypical antipsychotic medication on the last day of each month.*

<b>Typical - Atypical</b>								<b>Forensic</b>			<b>SRTP</b>	<b>Sys</b>
<b>M/Y</b>	Cl	Dan	Nor	Tor	War	Wer	Total	Nor	Tor	Cnt	Tor	Total
Aug-21	40	54	41	65	39	120	359	62	41	103	0	400
Nov-21	45	59	43	69	39	115	370	55	31	86	0	456
22-Feb	41	60	37	66	37	112	353	49	31	80	0	433
22-Jun	37	59	42	71	48	119	376	50	39	89	0	465

**Table 28 - STAT Medication Usage – Civil**

**Measure Definition:** STAT medication are counted as psychiatric medications that have been administered. If two STAT medications are administered, it is counted as one event. Each STAT medication event is documented by “Route of Administration” and “Requested by”. This measure includes all levels of care.

CLARKS SUMMIT (FY 2021-22)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	PEG Tube:	Indv	MD/DO	RN
Jun-22	76	68	8	0	34	42	0

DANVILLE (FY 2021-22)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/OD	RN
Jun-22	146	27	119	0	32	14	73

NORRISTOWN - CIVIL (FY 2021-22)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Jun-22	57	15	42	0	3	12	42

TORRANCE - CIVIL (FY 2021-22)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Jun-22	75	31	41	3	10	18	47

WARREN (FY 2021-22)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube	Indv	MD/DO	RN
Jun-22	74	50	24	0	13	15	46

WERNERSVILLE (FY 2021-22)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Jun-22	175	135	40	0	70	42	63

**Table 29 - STAT Medication Usage – Forensic**

NORRISTOWN - FORENSIC (FY 2021-22)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube/other	Indv	MD/DO	RN
Jun-22	140	32	108	0	6	27	107

TORRANCE - FORENSIC (FY 2021-22)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Jun-22	62	43	19	0	20	18	24

**Table 30 - STAT Medication Usage – ACT 21 (SRTP)**

TORRANCE - ACT 21 (FY 2021-22)							
Month	Total Number of STATs	Route of Admin			Requested by:		
		PO	IM	Peg Tube:	Indv	MD/DO	RN
Jun-22	0	0	0	0	0	0	0