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# Select Committee on Quality Improvement in State Hospitals

## QUARTERLY REPORTING

### **Alice Huber, PhD**

Service Enterprise and Support Administration  
Research and Data Analysis Division  
[alice.huber@dshs.wa.gov](mailto:alice.huber@dshs.wa.gov)

**October 27, 2016**



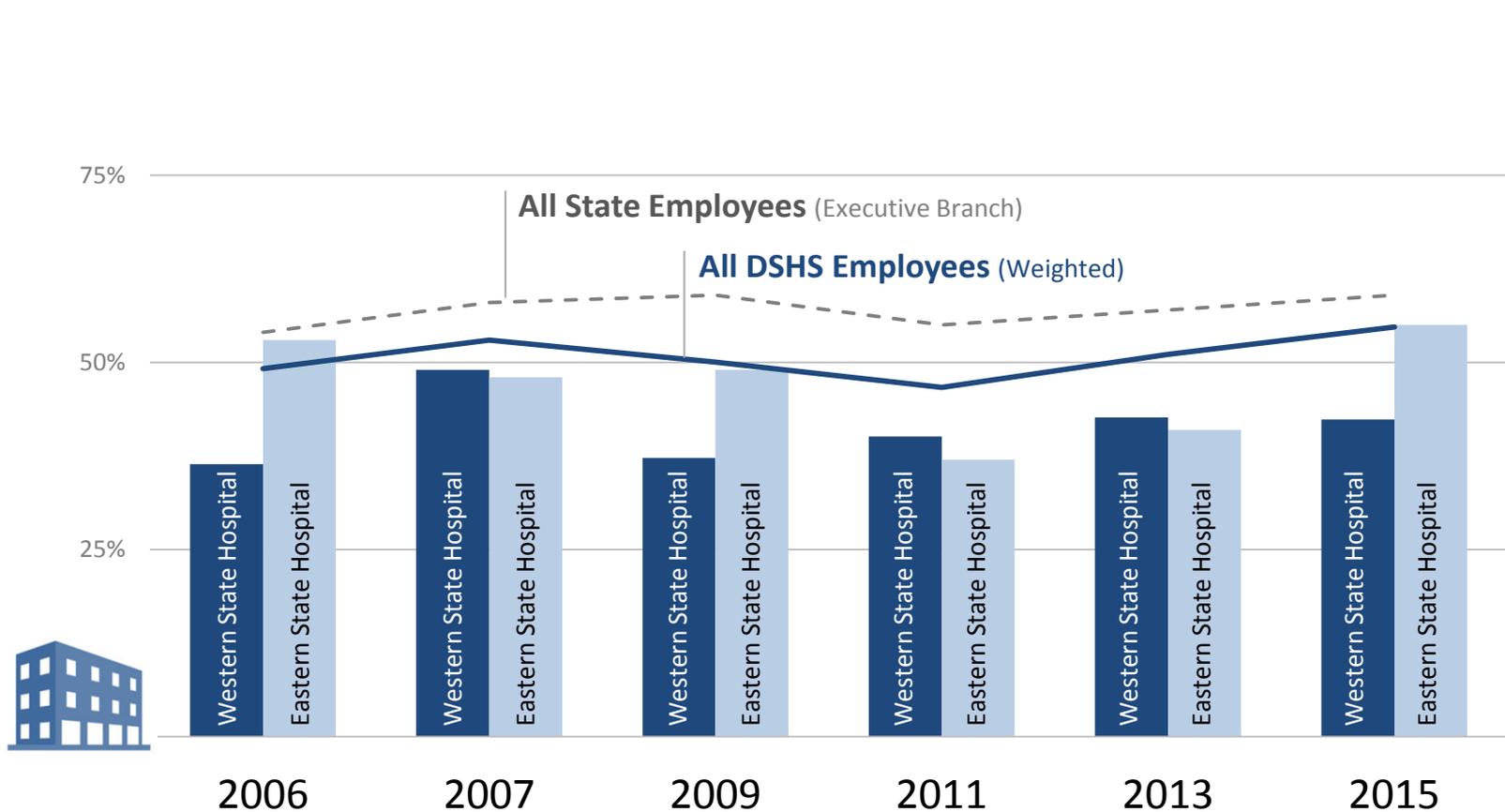
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## PART 1 Results

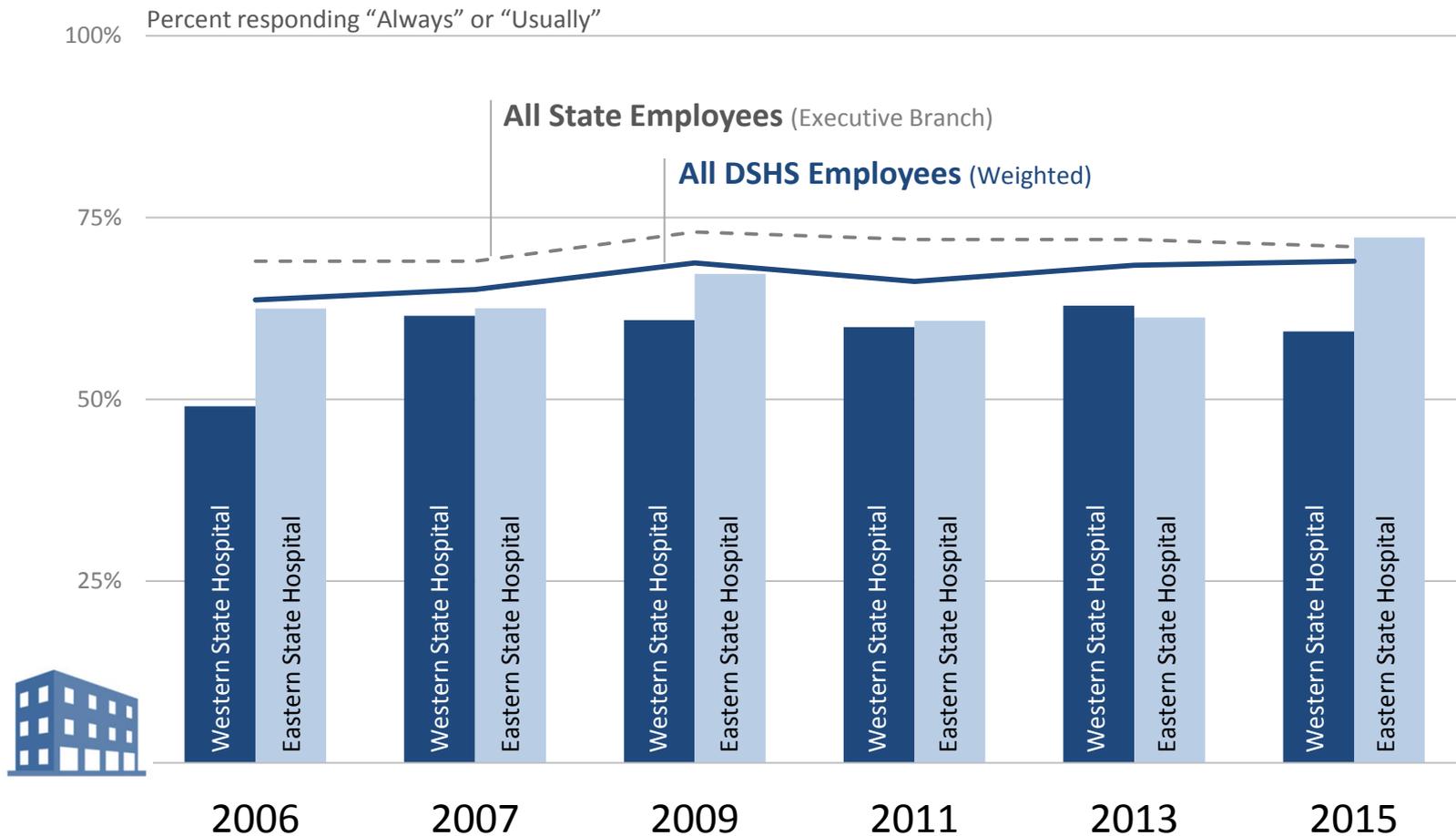
# Q1

## I have the opportunity to give input on decisions affecting my work.

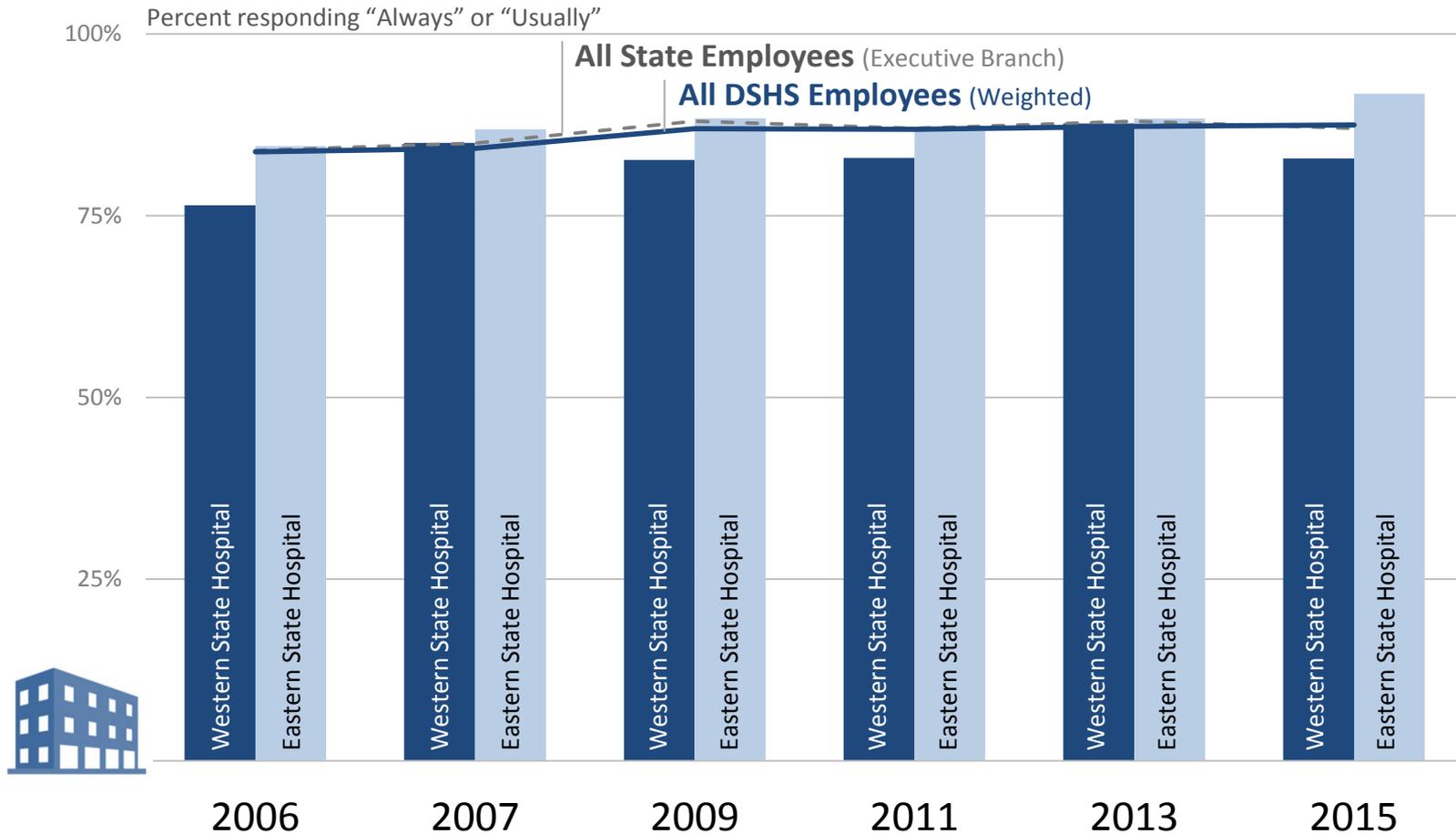
Percent responding "Always" or "Usually"



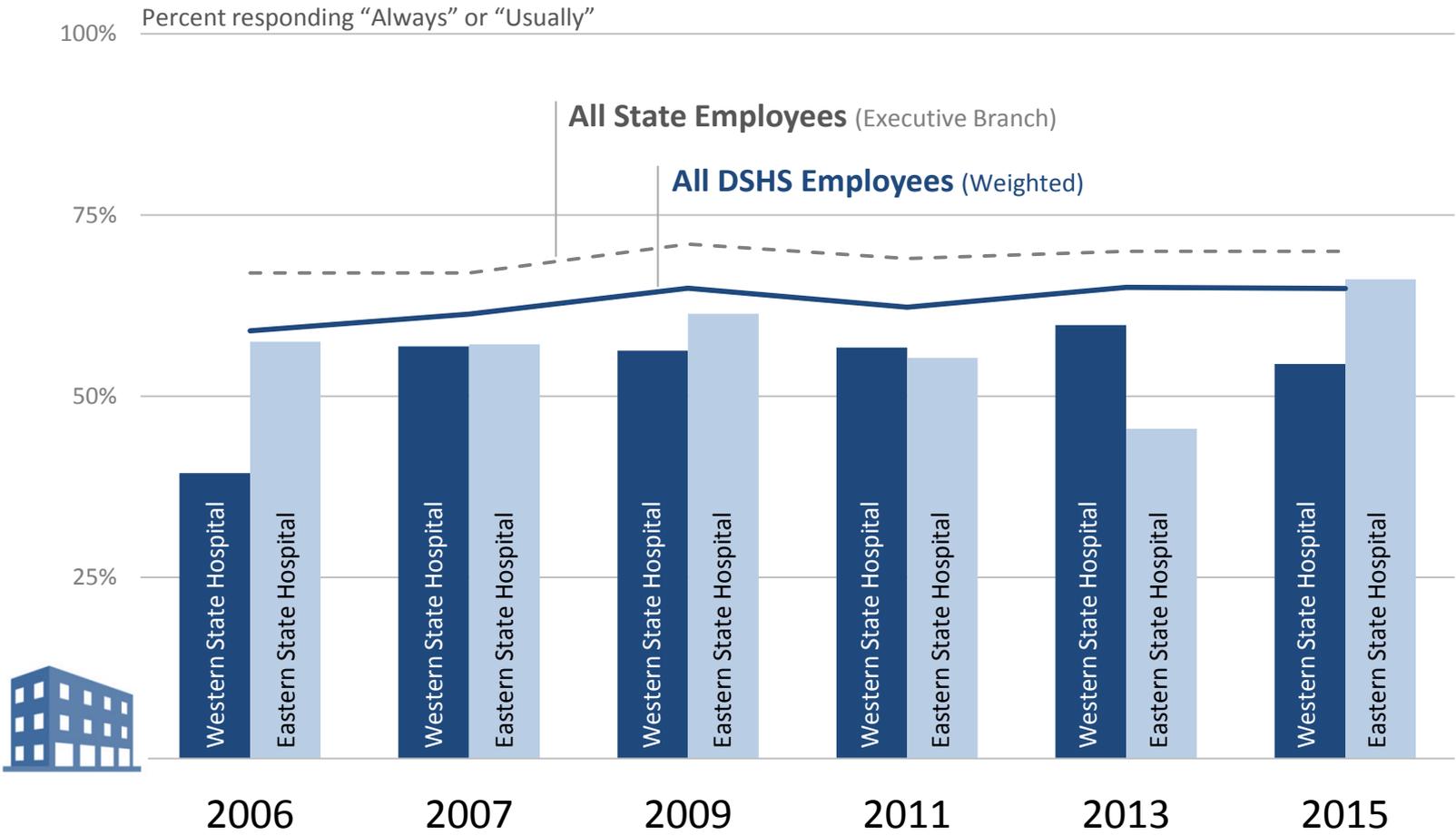
# Q2: I receive the information I need to do my job effectively.



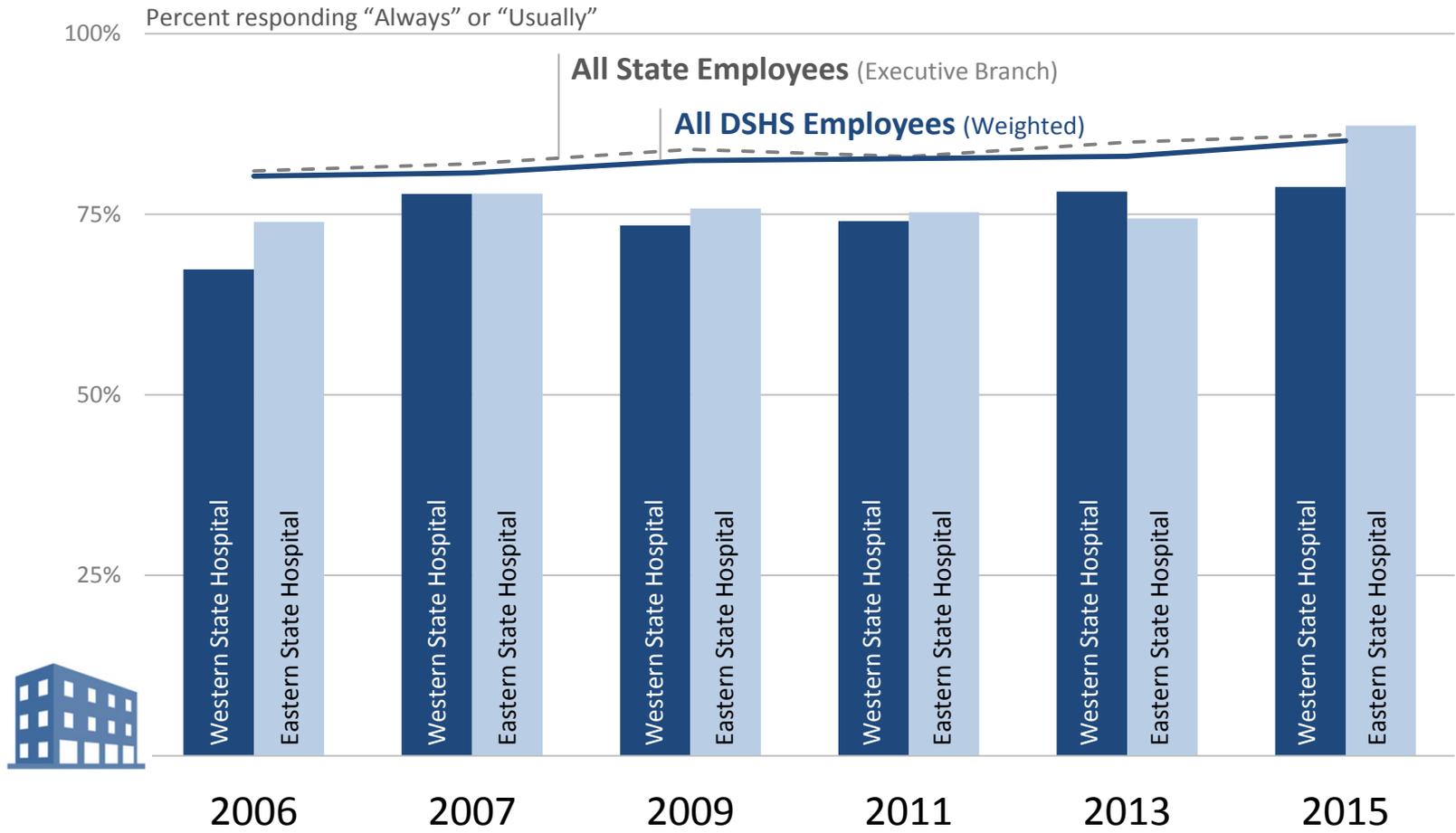
# Q3: I know what is expected of me at work.



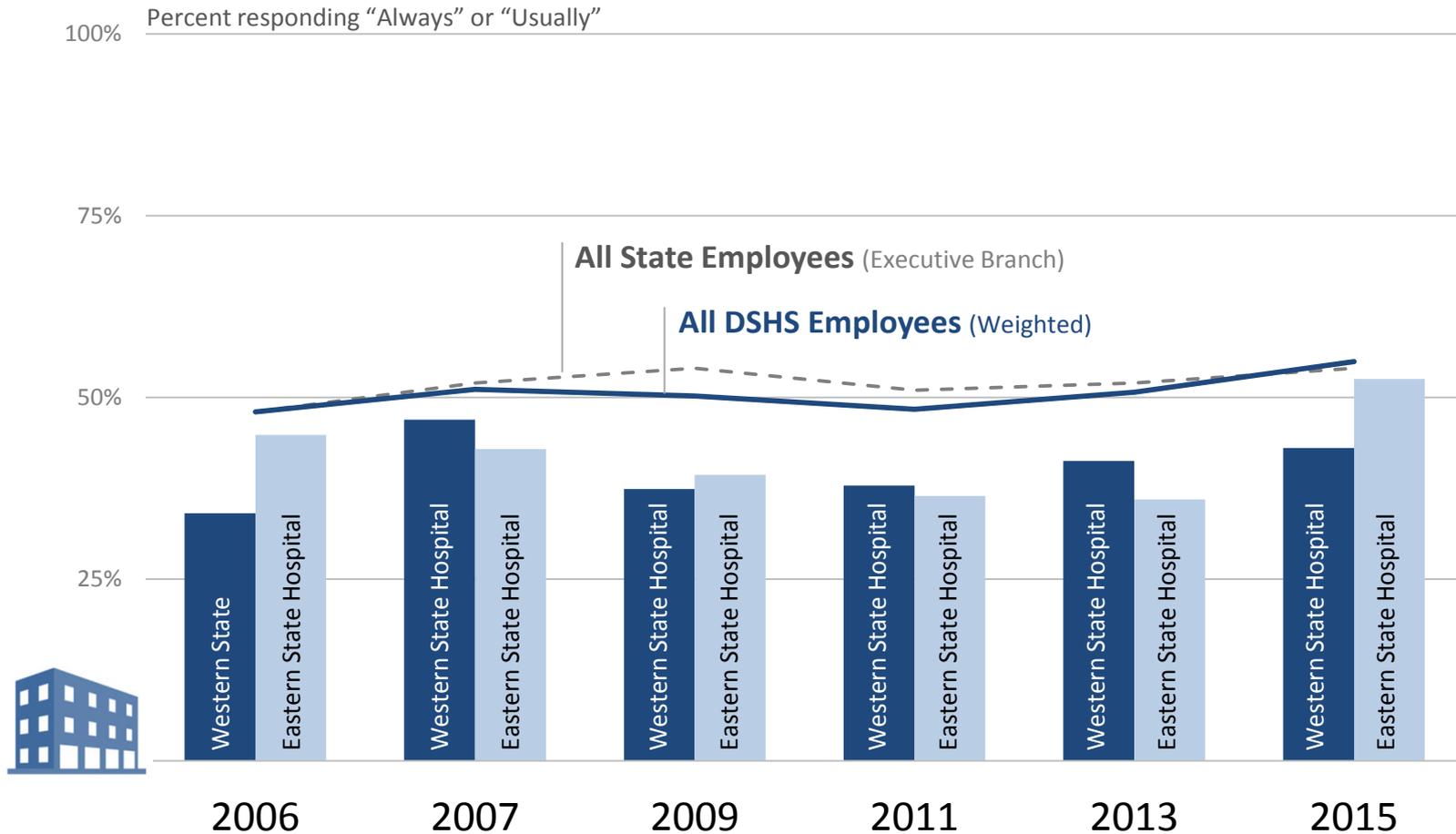
# Q4: I have the tools and resources I need to do my job effectively.



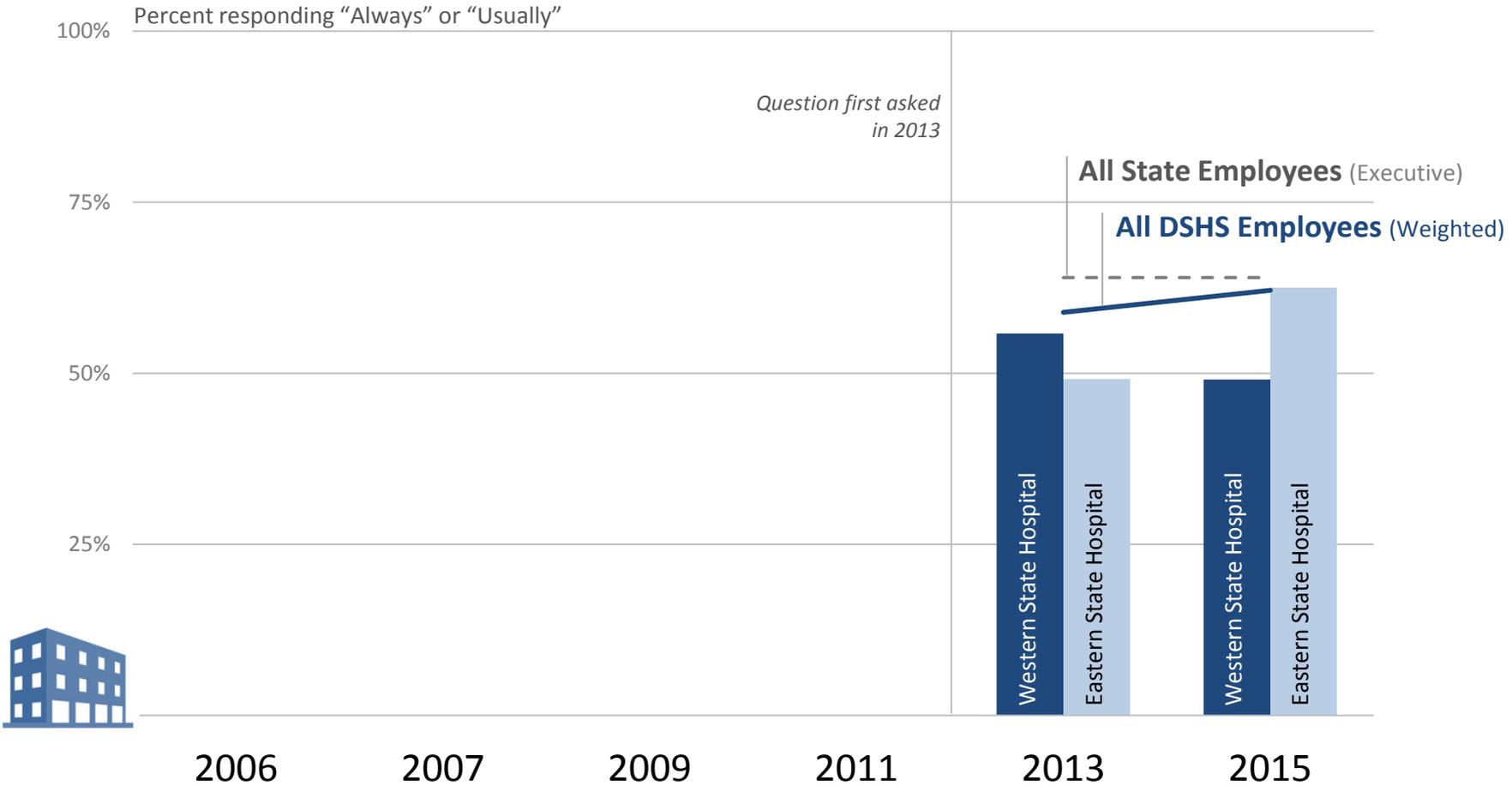
# Q5: My supervisor treats me with dignity and respect.



# Q6: I receive recognition for a job well done.

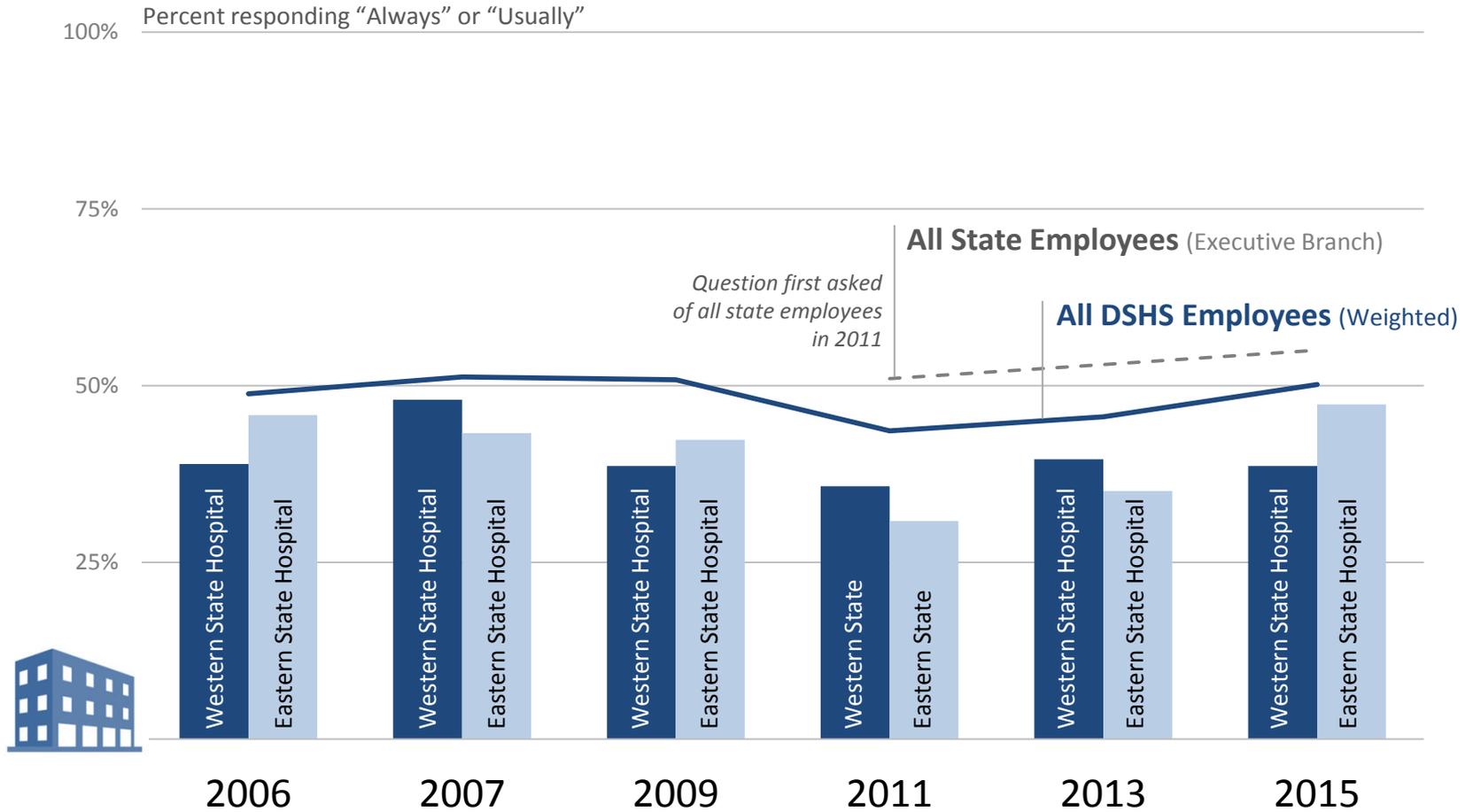


# Q7: We are making improvements to make things better for our customers.



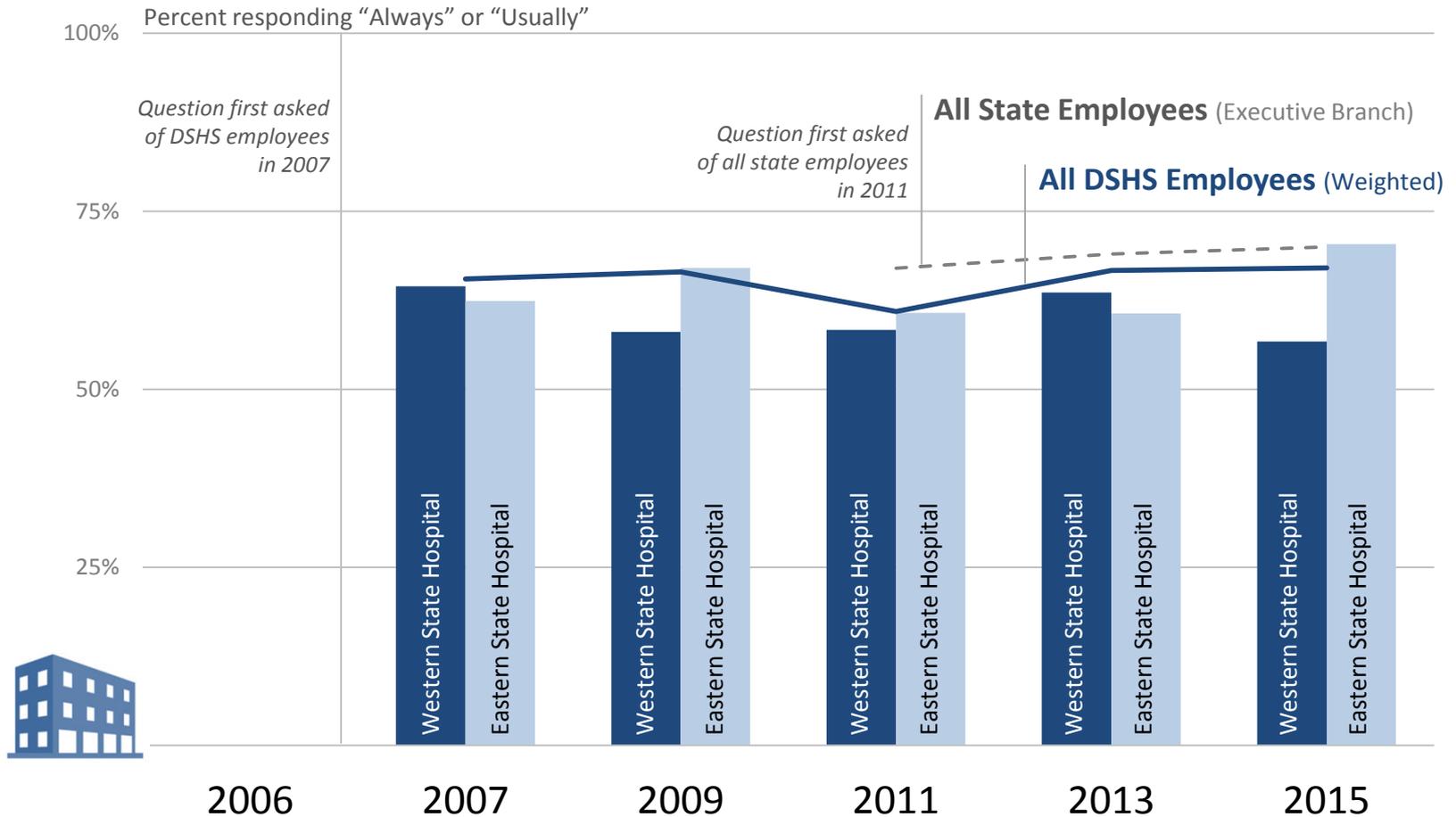
# Q8:

## I am encouraged to come up with better ways of doing things.





# In general, I'm satisfied with my job.

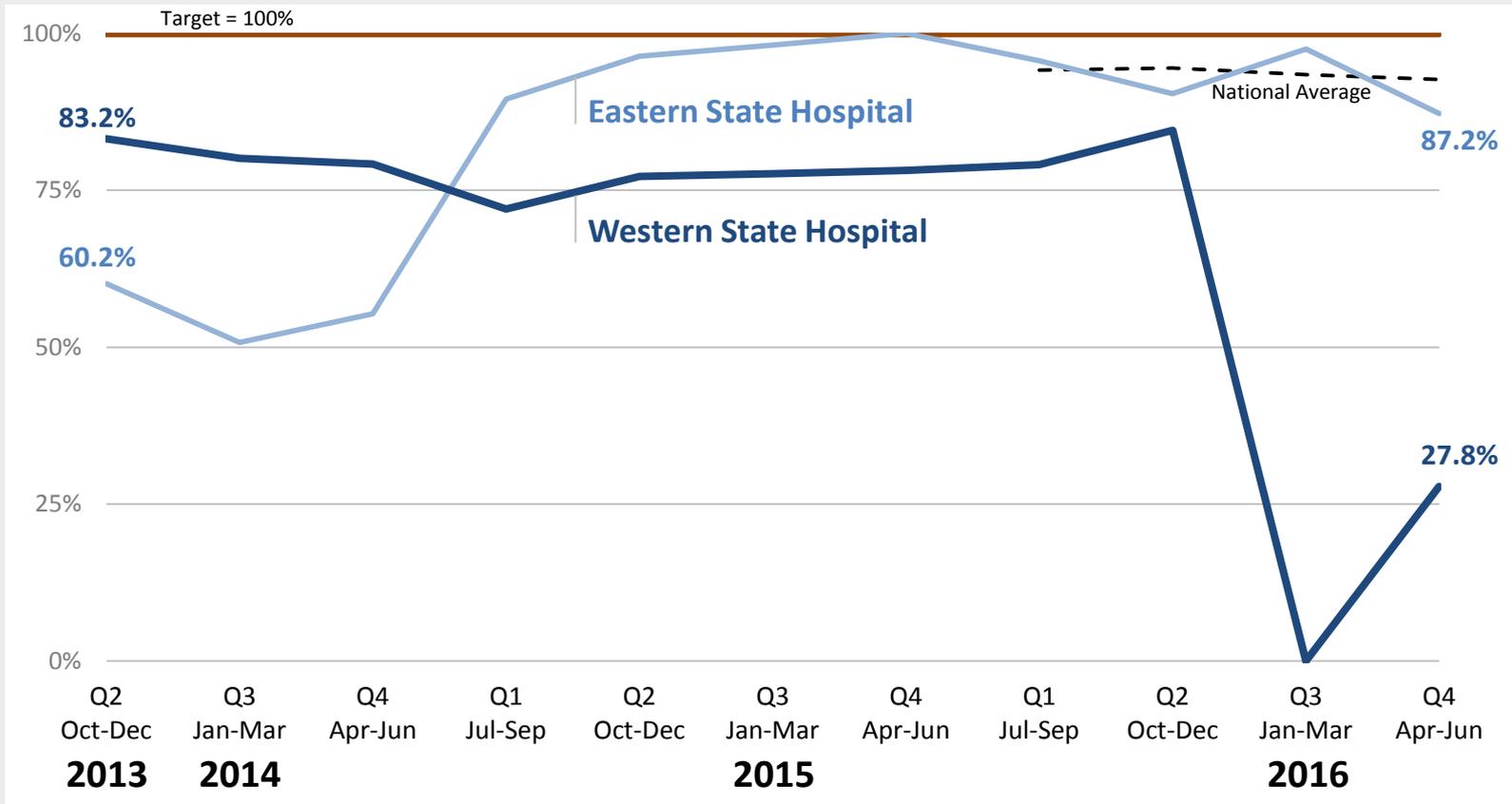




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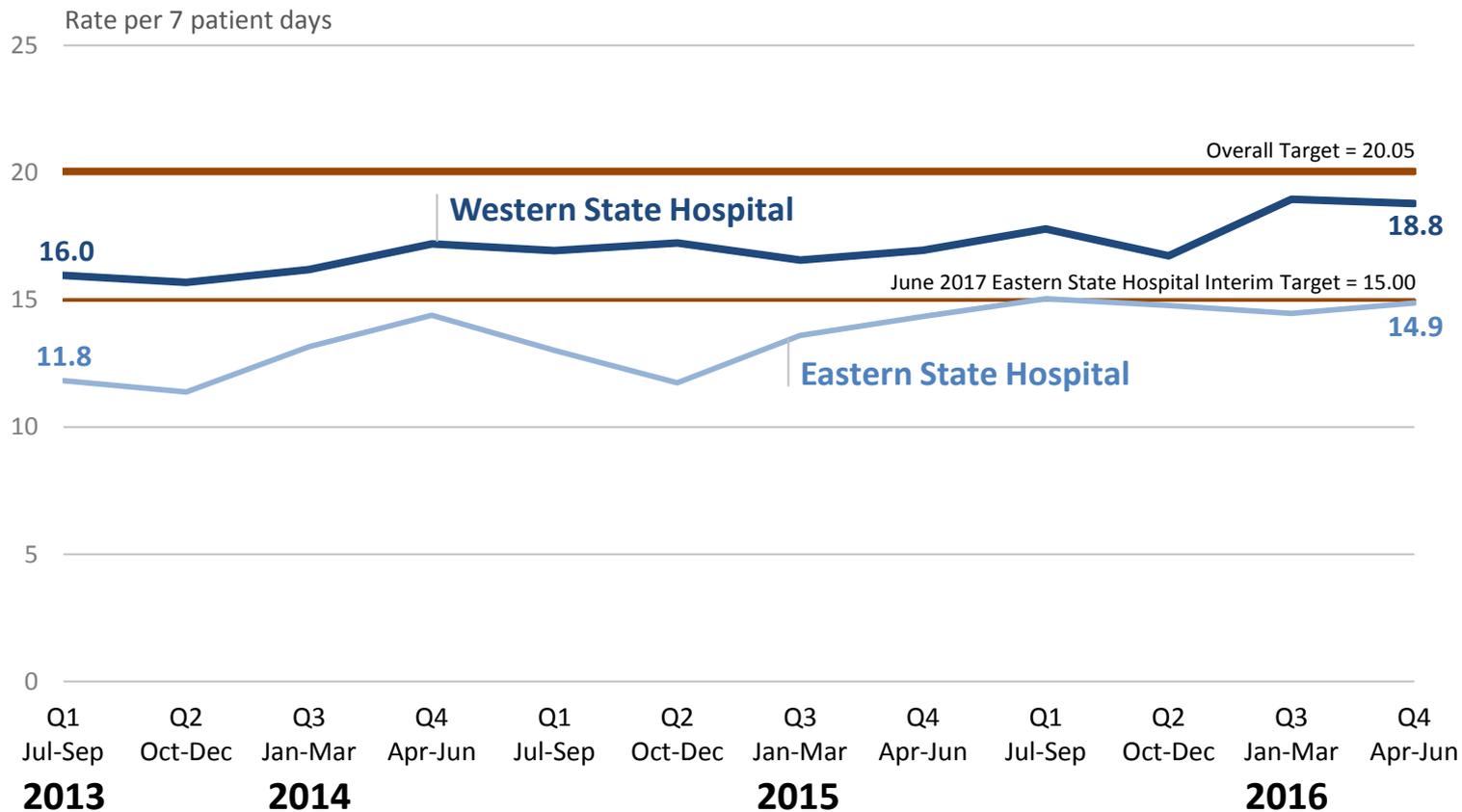
## PART 2 State Hospital Care Measures

# Overall rates of admission screening for risk of violence to self, risk of violence to others, substance use, psychological trauma history, and patient strengths at Eastern State Hospital and Western State Hospital



**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital. National average from NRI's HBIPS Comparative Statistics Report (HAP and BHC).  
**MEASURE DEFINITION:** Overall rates of multi-factor admission screening conducted by the third day post admission. Measure is calculated when patient is discharged.  
**DATA NOTES:** 1 Overall rate calculations: Numerator: Psychiatric inpatients with admission screening by the third day post admission for all of the following: a) risk of violence to self, b) risk of violence to others, c) substance use, d) psychological trauma history, and e) patient strengths. Denominator: All psychiatric inpatient discharges. 2 Included populations in the denominator are patients with ICD-9-CM Principal or Other Diagnosis Codes for Mental Disorders.

## Quarterly rates of active treatment hours delivered per 7 patient days at Eastern State Hospital and Western State Hospital

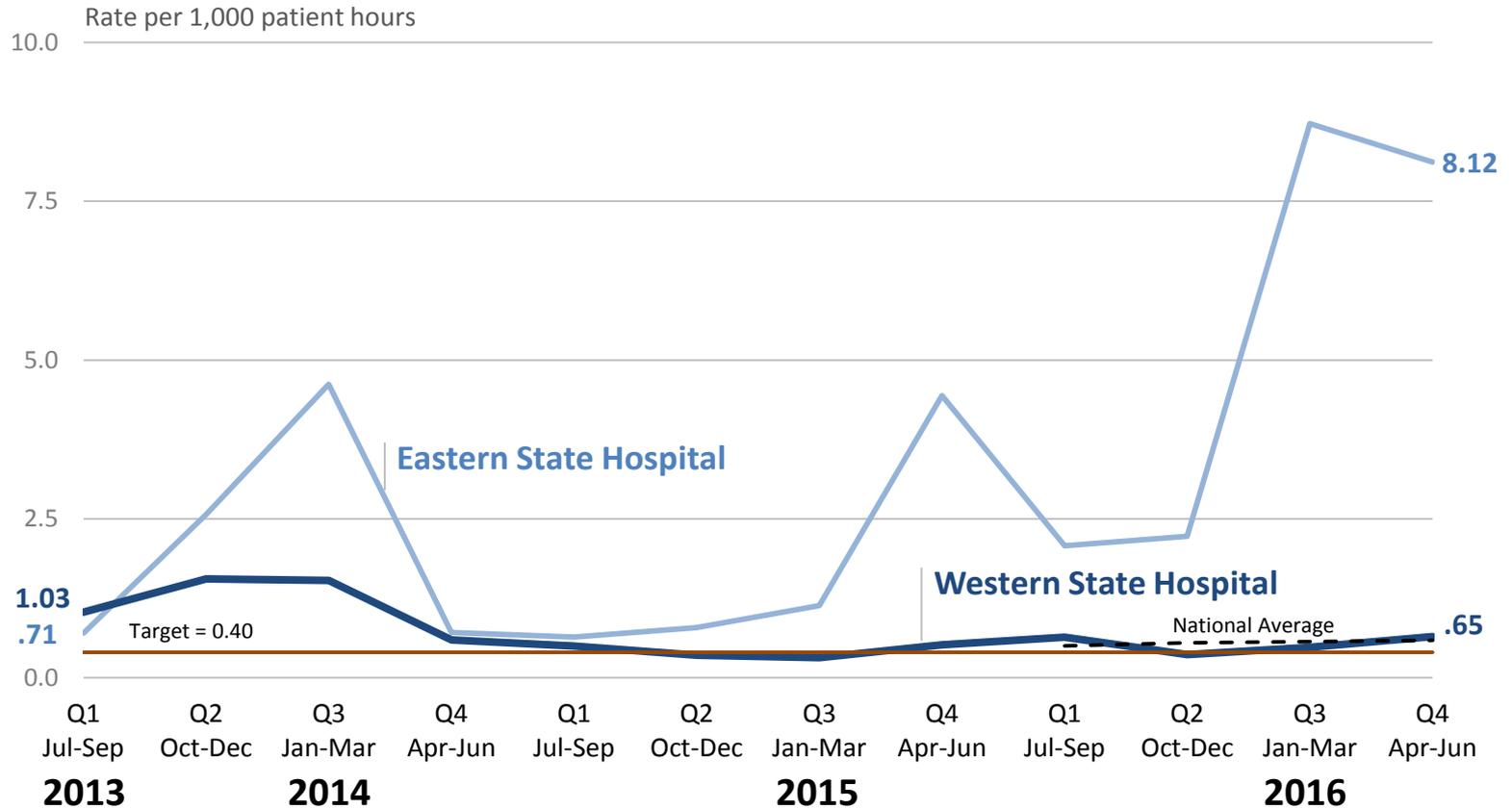


**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital.

**MEASURE DEFINITION:** Active treatment hours delivered (per 7 patient days) during the reporting quarter, at each of Eastern State Hospital and Western State Hospital.

**DATA NOTES:** **1** The performance targets will be reached on or prior to June 30, 2017. **2** The rate is calculated by dividing the number of active treatment hours delivered in a given quarter by the number of patient days utilized by a state hospital in that quarter; and then multiplying the quotient by seven. **3** Active treatment hours are distinctly tracked for each of the state hospitals, for purposes of calculating quarterly rates by facility.

# Quarterly rates of seclusion hours at Eastern State Hospital and Western State Hospital

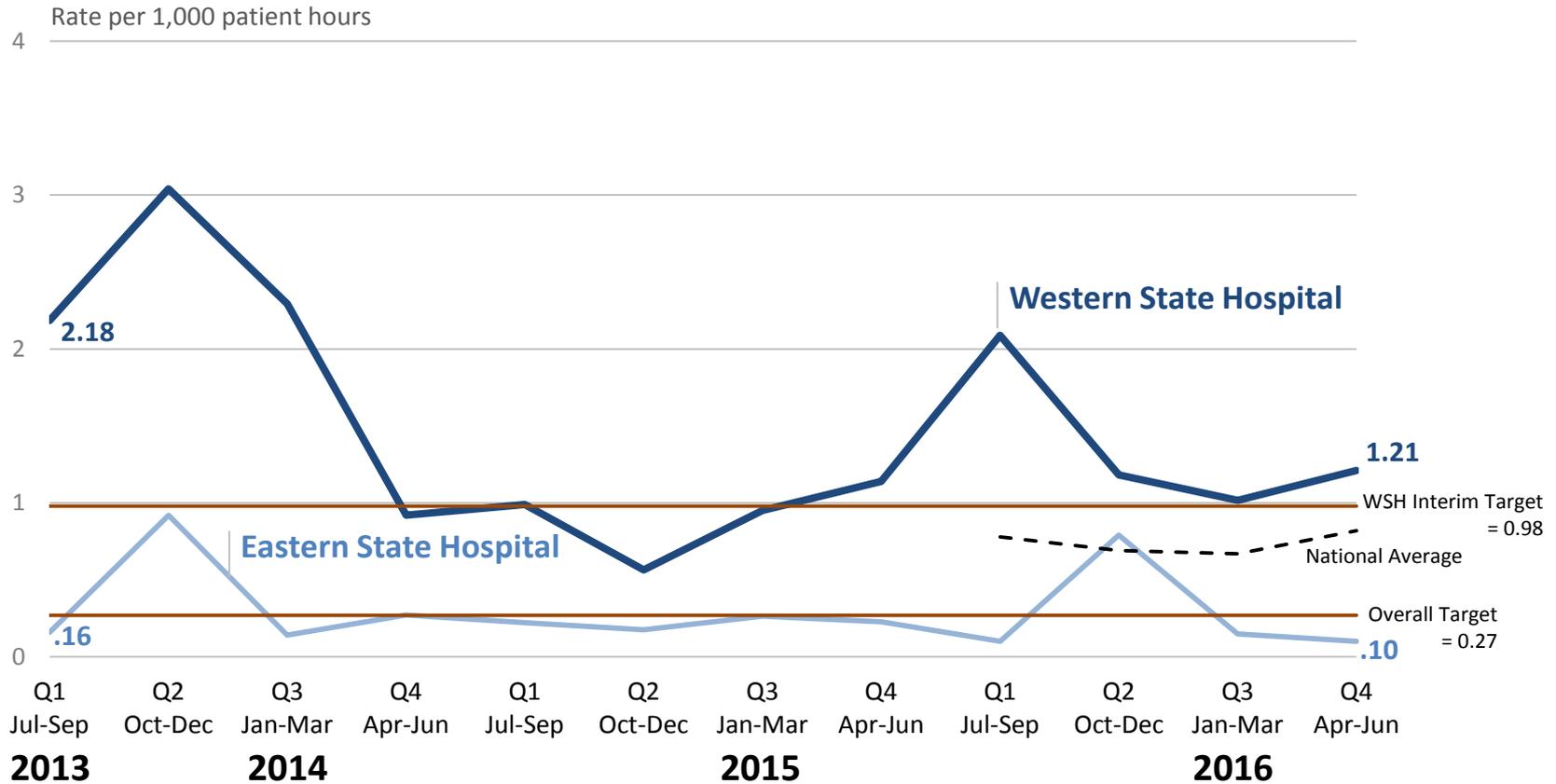


**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital. National average from NRI's HBIPS Comparative Statistics Report (HAP and BHC).

**MEASURE DEFINITION:** Seclusion hours accrued (per 1,000 patient hours) during the reporting quarter, at ESH and WSH.

**DATA NOTES:** 1 The performance targets will be reached on or prior to June 30, 2017.

# Quarterly rates of restraint hours at Eastern State Hospital and Western State Hospital

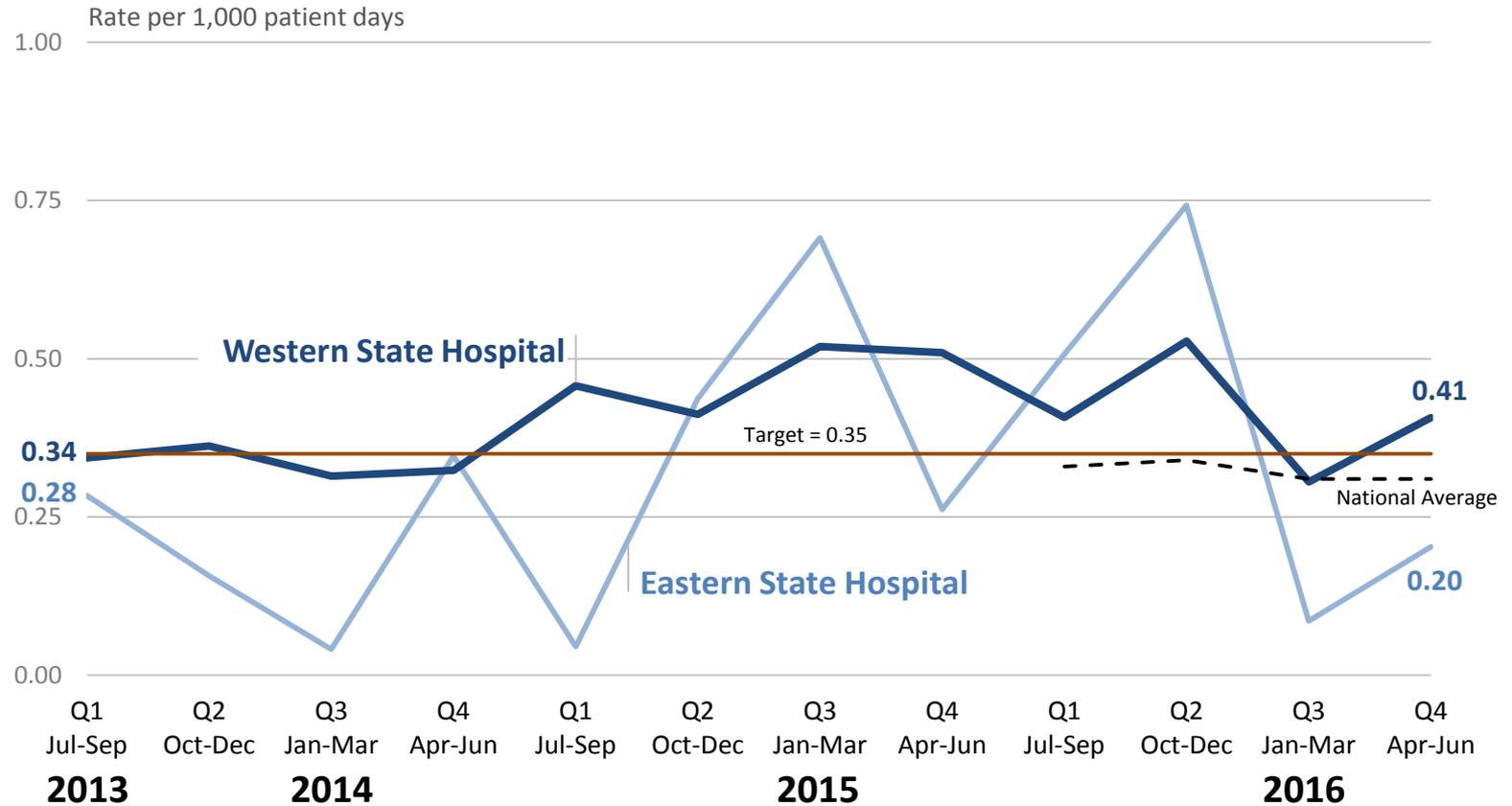


**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital. National average from NRI's HBIPS Comparative Statistics Report (HAP and BHC).

**MEASURE DEFINITION:** Restraint hours accrued (per 1,000 patient hours) during the reporting quarter, at ESH and WSH.

**DATA NOTES:** 1 The performance targets will be reached on or prior to June 30, 2017.

# Severe patient injuries, including patient falls, at Eastern State Hospital and Western State Hospital

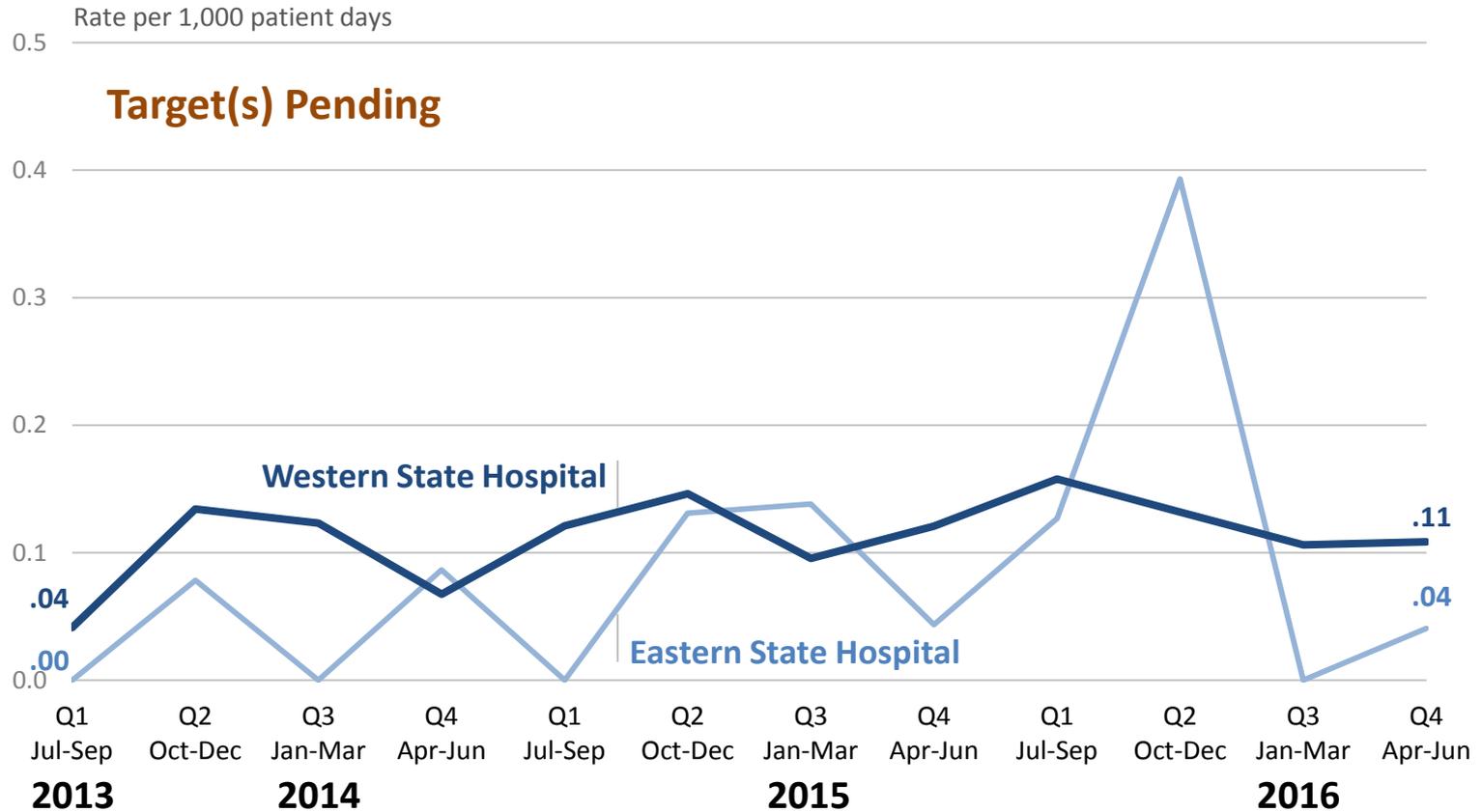


**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital. National average from NRI's Non-Core Comparative Statistics.

**MEASURE DEFINITION:** Rate of severe patient injury (reported during the reporting quarter) per 1,000 patient days, at Eastern State Hospital and Western State Hospital.

**DATA NOTES:** 1 Incidents are distinctly tracked for each of the state hospitals, for purposes of mapping rates by facility. 2 An injury occurs when a patient suffers physical harm or damage, excluding the result of a disease process. Severe patient injuries include all patient injuries with a severity level of "3" or higher (3 = medical intervention; 4 = hospitalization; 5 = death).

# Patient-to-patient aggression incidents resulting in severe patient injury at Eastern State Hospital and Western State Hospital

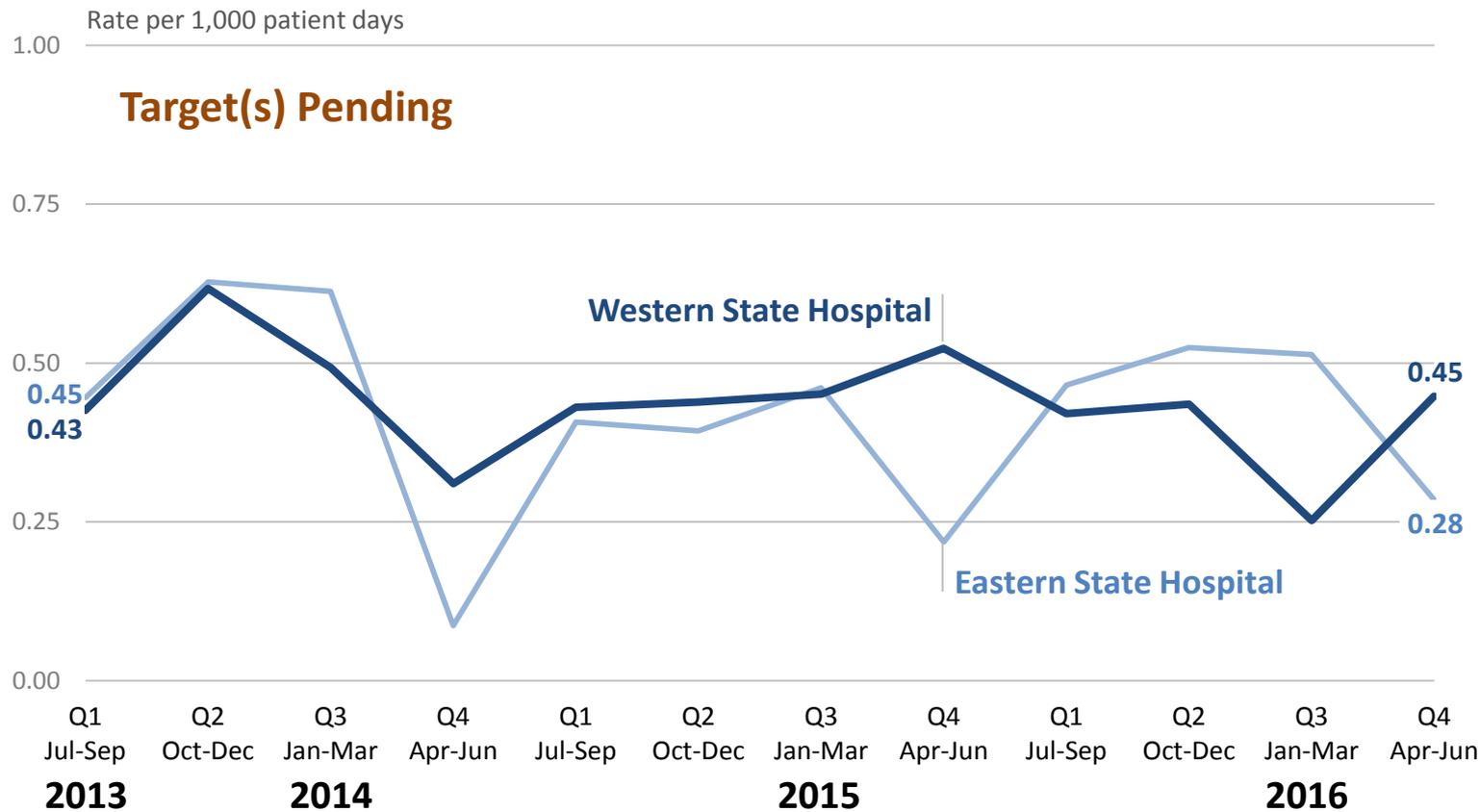


**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital.

**MEASURE DEFINITION:** Rate of patient-to-patient aggression incidents (reported during the reporting quarter) per 1,000 patient days, at Eastern State Hospital and Western State Hospital.

**DATA NOTES:** 1 Incidents are distinctly tracked for each of the state hospitals, for purposes of calculating rates by facility. 2 An injury occurs when a patient suffers physical harm or damage, excluding the result of a disease process. Severe patient injuries include all patient injuries with a severity level of "3" or higher (3 = medical intervention; 4 = hospitalization; 5 = death).

# Rate of patient-to-staff assault claims filed at the state psychiatric hospitals

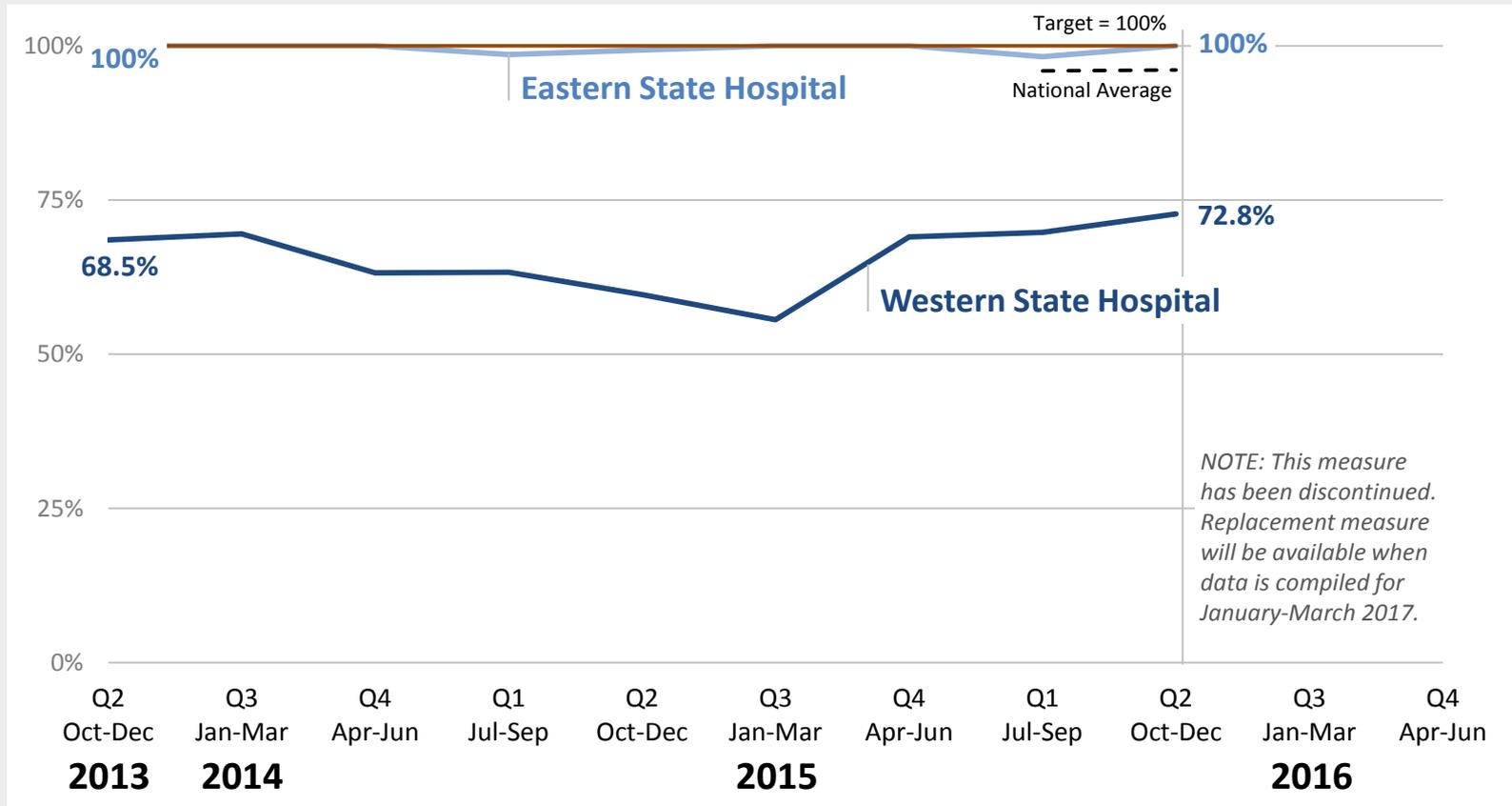


**DATA SOURCE:** Quarterly Assault Benefit (AB) Report, Enterprise Risk Management Office, DSHS.

**MEASURE DEFINITION:** Assault claims filed per 1,000 patient bed days during the reporting quarter, at Eastern State Hospital and Western State Hospital.

**DATA NOTES:** 1 Data has a minimum claims lag of 3 months. 2 Includes the Program for Assisted Living Skills (PALS) up to March 2011. PALS closed in February 2011. 3 The rate per 1,000 is the number of assault claims filed divided by the patient days for the quarter and multiplied by 1,000.

# Overall rates of post discharge continuing care plans created at Eastern State Hospital and Western State Hospital

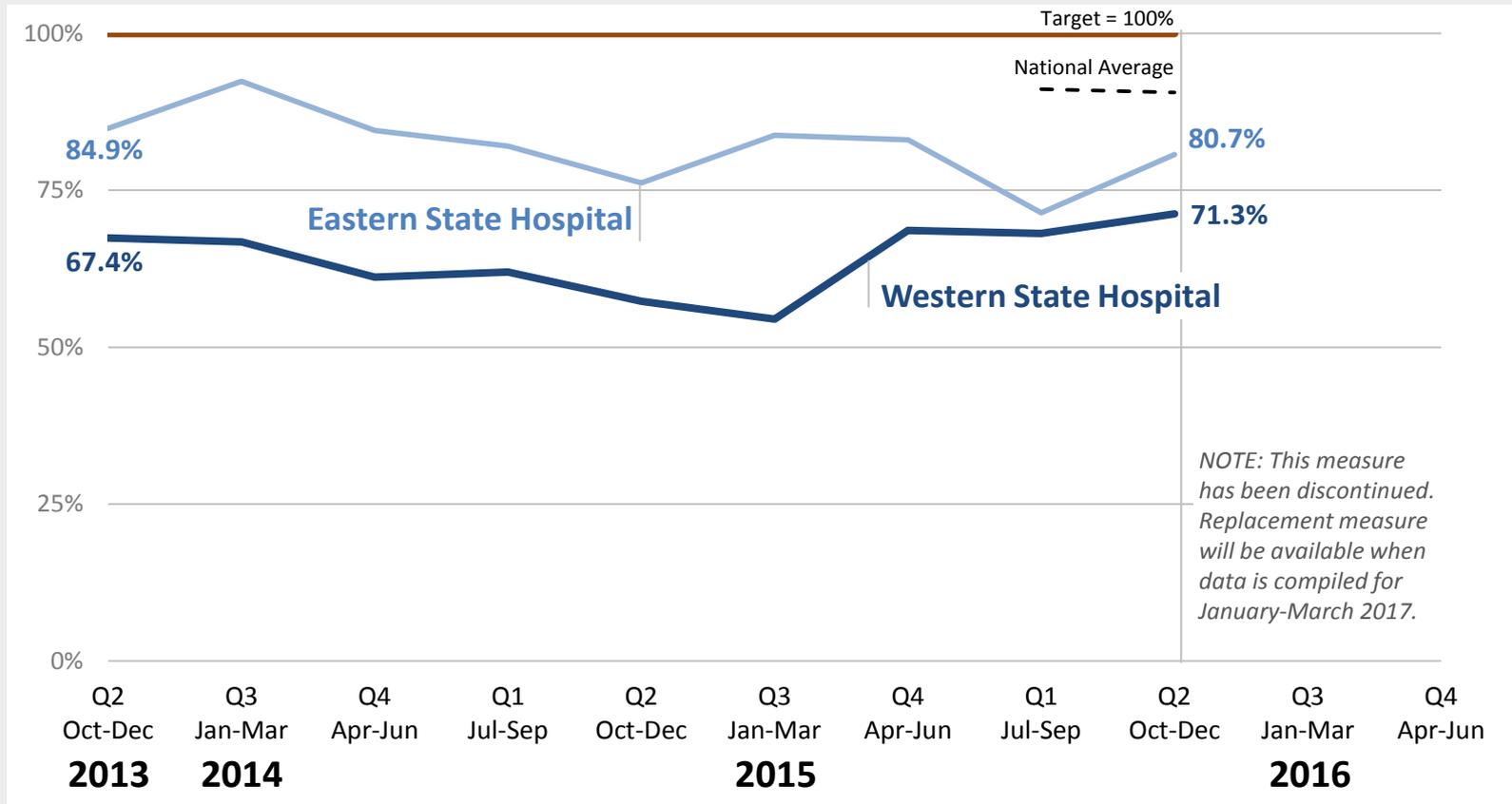


**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital. National average from NRI's HBIPS Comparative Statistics Report (HAP and BHC).

**MEASURE DEFINITION:** Overall rates of post discharge continuing care plan.

**DATA NOTES:** **1** This measure has been discontinued as a Hospital-Based Inpatient Psychiatric Services Measure. Related replacement measures will be available when data is compiled for January-March 2017. **2** Overall rate calculations: Numerator: Inpatients for whom the post discharge continuing care plan is created and contains all of the following: reason for hospitalization, principal discharge diagnosis, discharge medications and next level of care recommendations. Denominator: Inpatient discharges. **3** Included populations: Patients referred for next level of care with mental disorder diagnoses.

# Overall rates of post discharge continuing care plans transmitted to next level of care provider upon discharge at Eastern State Hospital and Western State Hospital

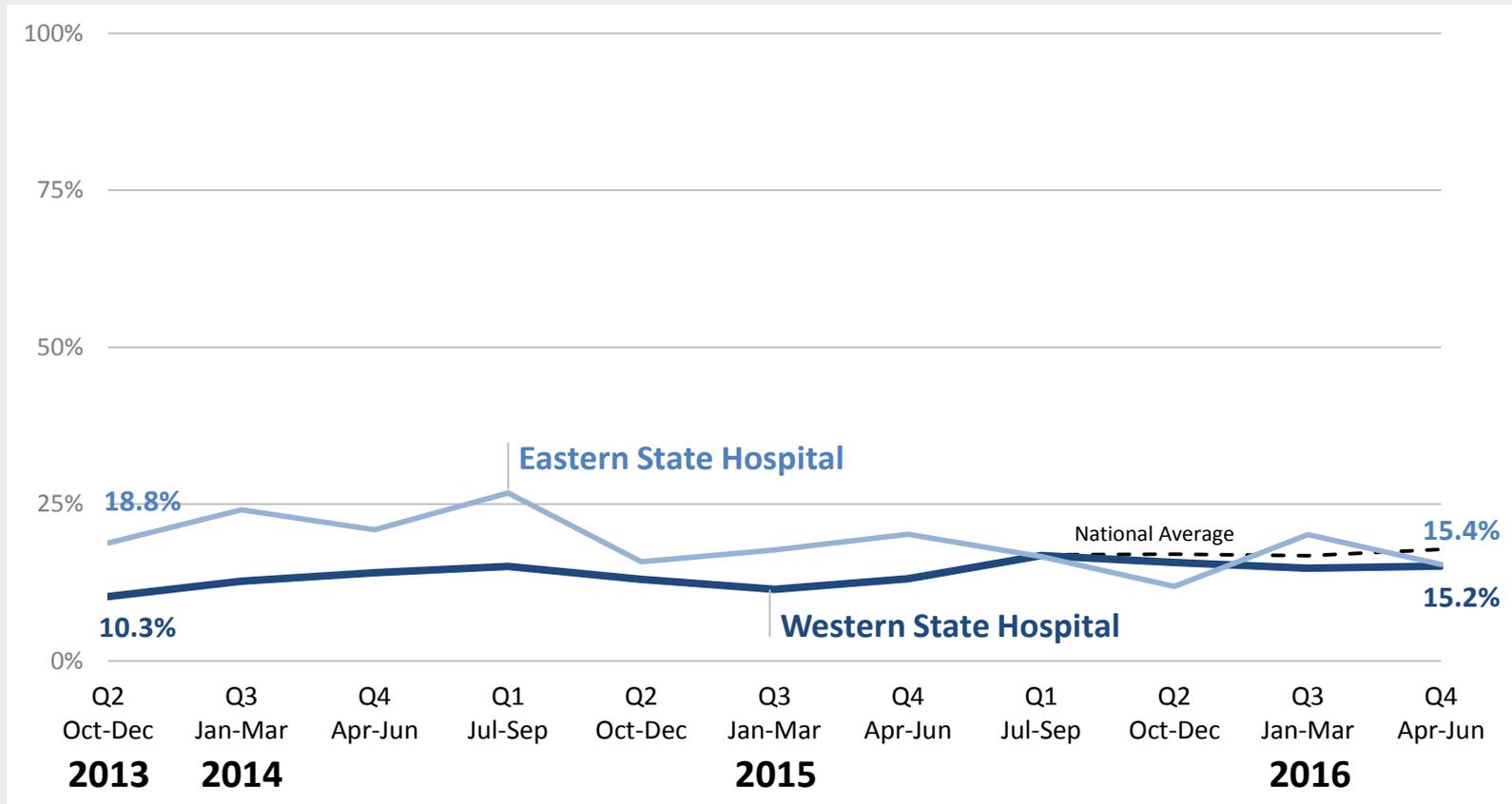


**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital. National average from NRI's HBIPS Comparative Statistics Report (HAP and BHC).

**MEASURE DEFINITION:** Overall rates of post discharge continuing care plan transmitted to next level of care provider upon discharge.

**DATA NOTES:** **1** This measure has been discontinued as a Hospital-Based Inpatient Psychiatric Services Measure. Related replacement measures will be available when data is compiled for January-March 2017. **2** Overall rate calculations: Numerator: inpatients for whom the post discharge continuing care plan was transmitted to the next level of care clinician or entity. Denominator: inpatient discharges. **3** Included populations: Patients referred for next level of care with mental disorder diagnoses.

# Overall rates of patients discharged on multiple antipsychotic medications at Eastern State Hospital and Western State Hospital

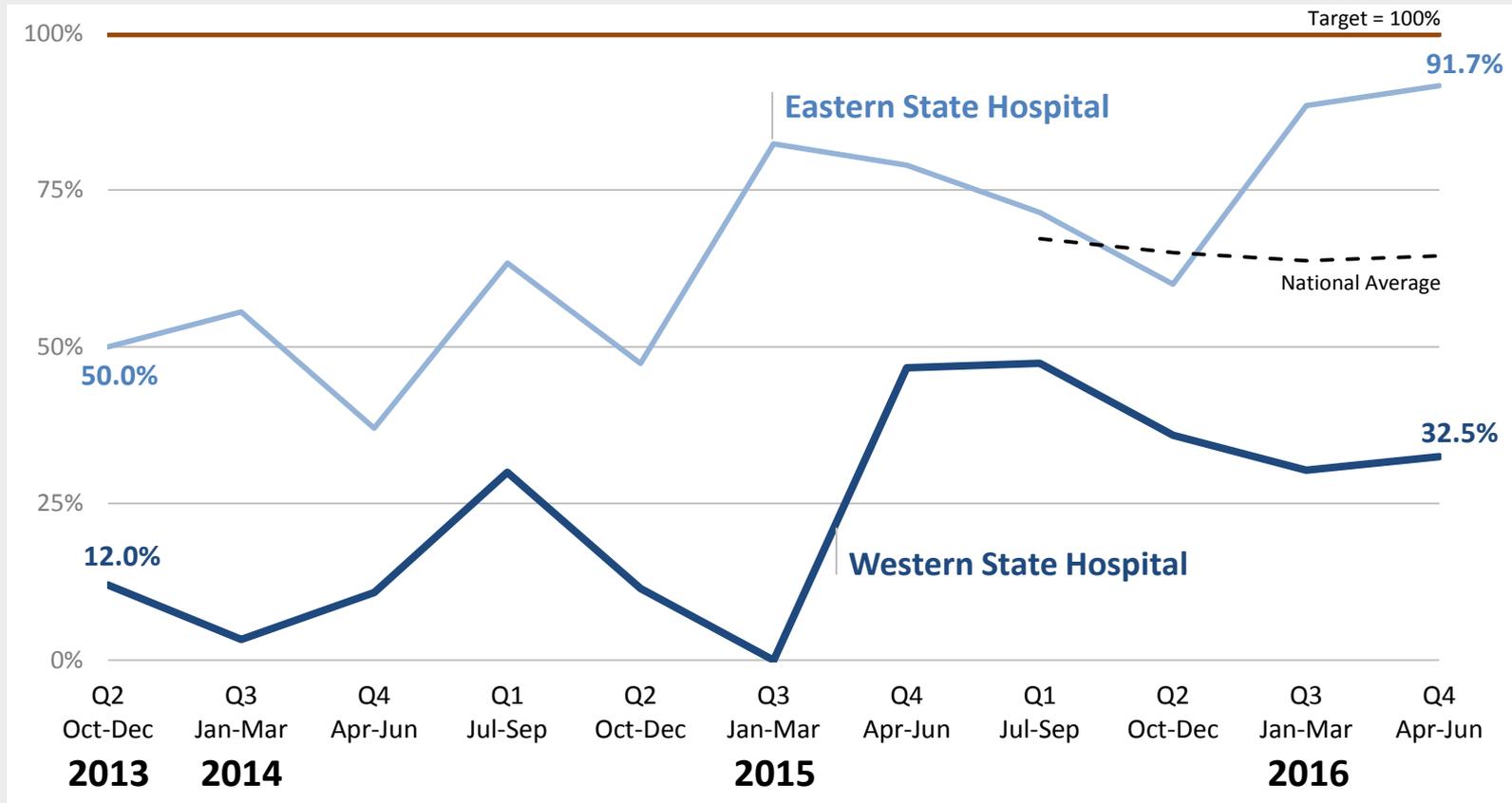


**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital. National average from NRI's HBIPS Comparative Statistics Report (HAP and BHC).

**MEASURE DEFINITION:** Overall rates of patients discharged from a hospital-based inpatient psychiatric setting on two or more antipsychotic medications.

**DATA NOTES:** 1 Overall rate calculations: Numerator: number of psychiatric inpatients discharged on two or more routinely scheduled antipsychotic medications. Denominator: Psychiatric inpatients discharged on one or more routinely scheduled antipsychotic medications. 2 Included populations in the denominator are patients with ICD-9-CM Principal or Other Diagnosis Codes for Mental Disorders.

# Overall rates of patients discharged on multiple antipsychotic medications with appropriate justification at Eastern State Hospital and Western State Hospital



**DATA SOURCE:** Reports from Eastern State Hospital and Western State Hospital. National average from NRI's HBIPS Comparative Statistics Report (HAP and BHC).

**MEASURE DEFINITION:** Overall rates of patients discharged a hospital-based inpatient psychiatric setting on two or more antipsychotic medications with appropriate justification.

**DATA NOTES:** **1** Overall rate calculations: Numerator: psychiatric inpatients discharged on two or more routinely scheduled antipsychotic medications with appropriate justification. Denominator: psychiatric inpatient discharges on two or more routinely scheduled antipsychotic medications. **2** Included populations in the denominator are patients with ICD-9-CM Principal or Other Diagnosis Codes for Mental Disorders.



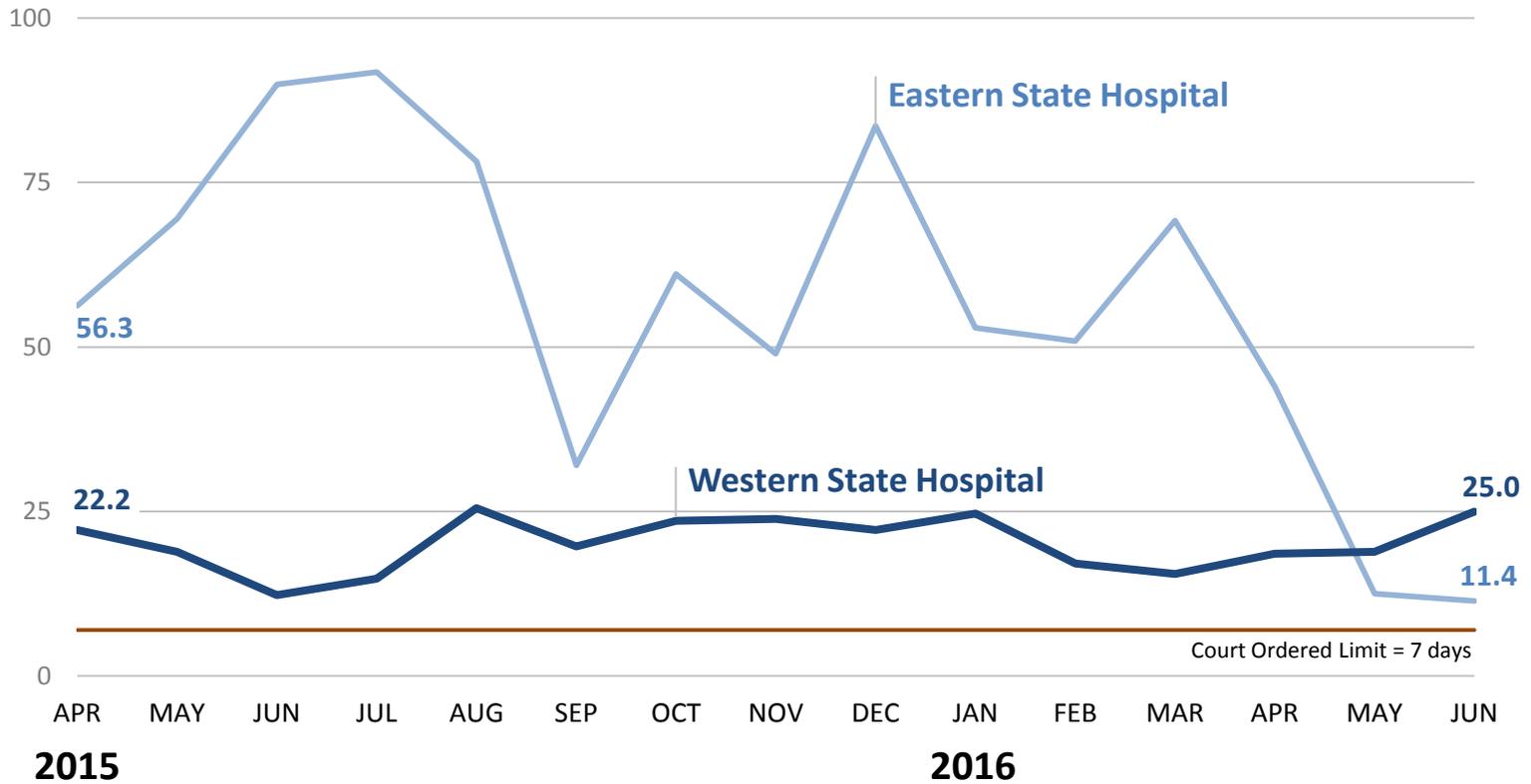
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## PART 3

# Measures Related to the Trueblood Case

# Inpatient Competency Evaluations

Timely response to Trueblood class member court orders  
Average number of days from court order signature to hospital admission for evaluation



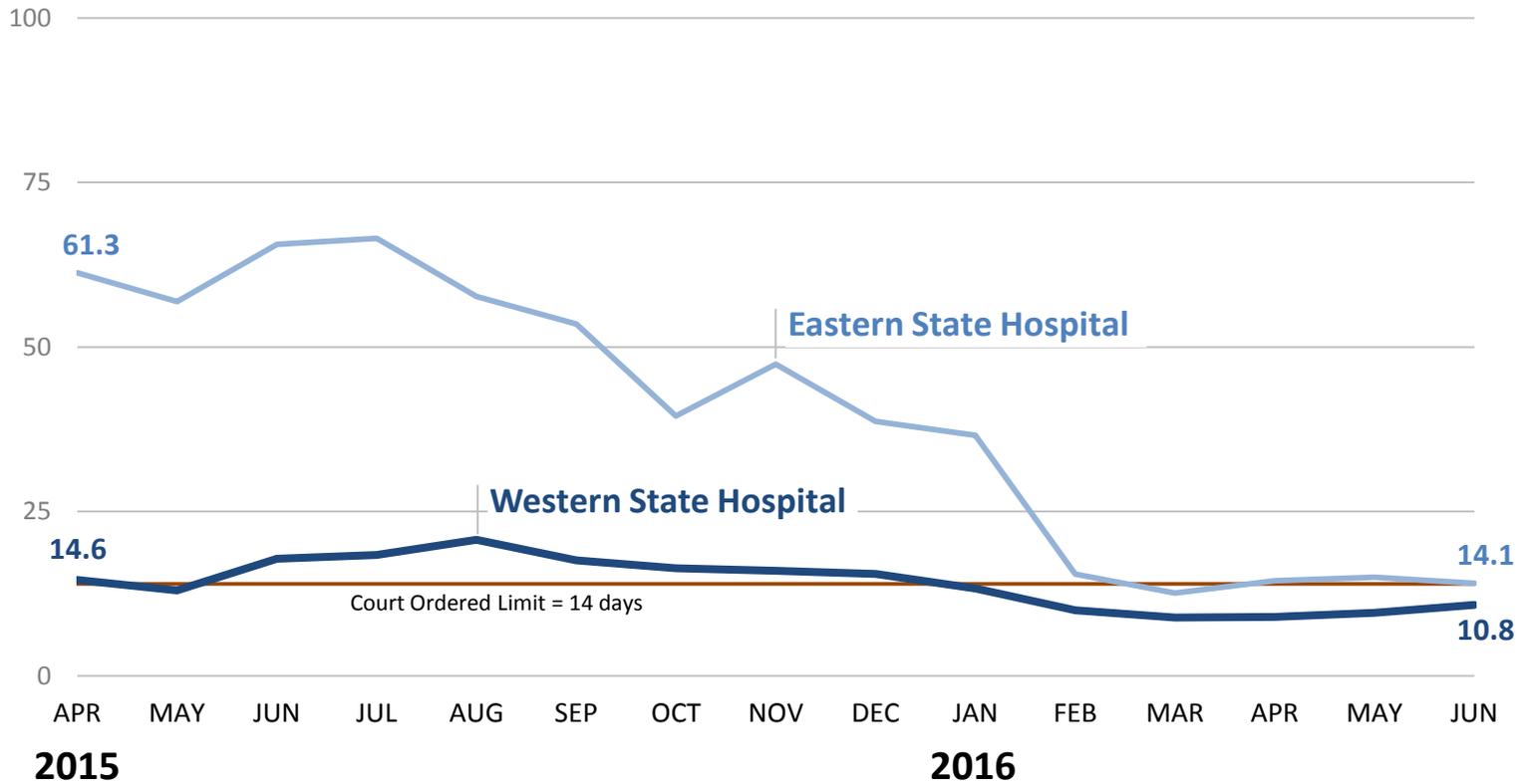
**DATA SOURCE:** Monthly Report to the Trueblood Court Appointed Monitor, completed by Behavioral Health Administration, Office of Forensic Mental Health Services.

**MEASURE DEFINITION:** For all Trueblood class member court orders for inpatient competency evaluations completed in the month, the average number of days from order signature to hospital admission for evaluation.

**DATA NOTES: 1** The most recent month's data is a first look data set, while the previous month's data are considered "mature."

# Jail-based Competency Evaluations

Timely response to Trueblood class member court orders  
Average number of days from court order signature to completed evaluation



**DATA SOURCE:** Monthly Report to the Trueblood Court Appointed Monitor, completed by Behavioral Health Administration, Office of Forensic Mental Health Services.

**MEASURE DEFINITION:** For all Trueblood class member court orders for jail-based competency evaluations completed in the month, the average number of days from order signature to completed evaluation.

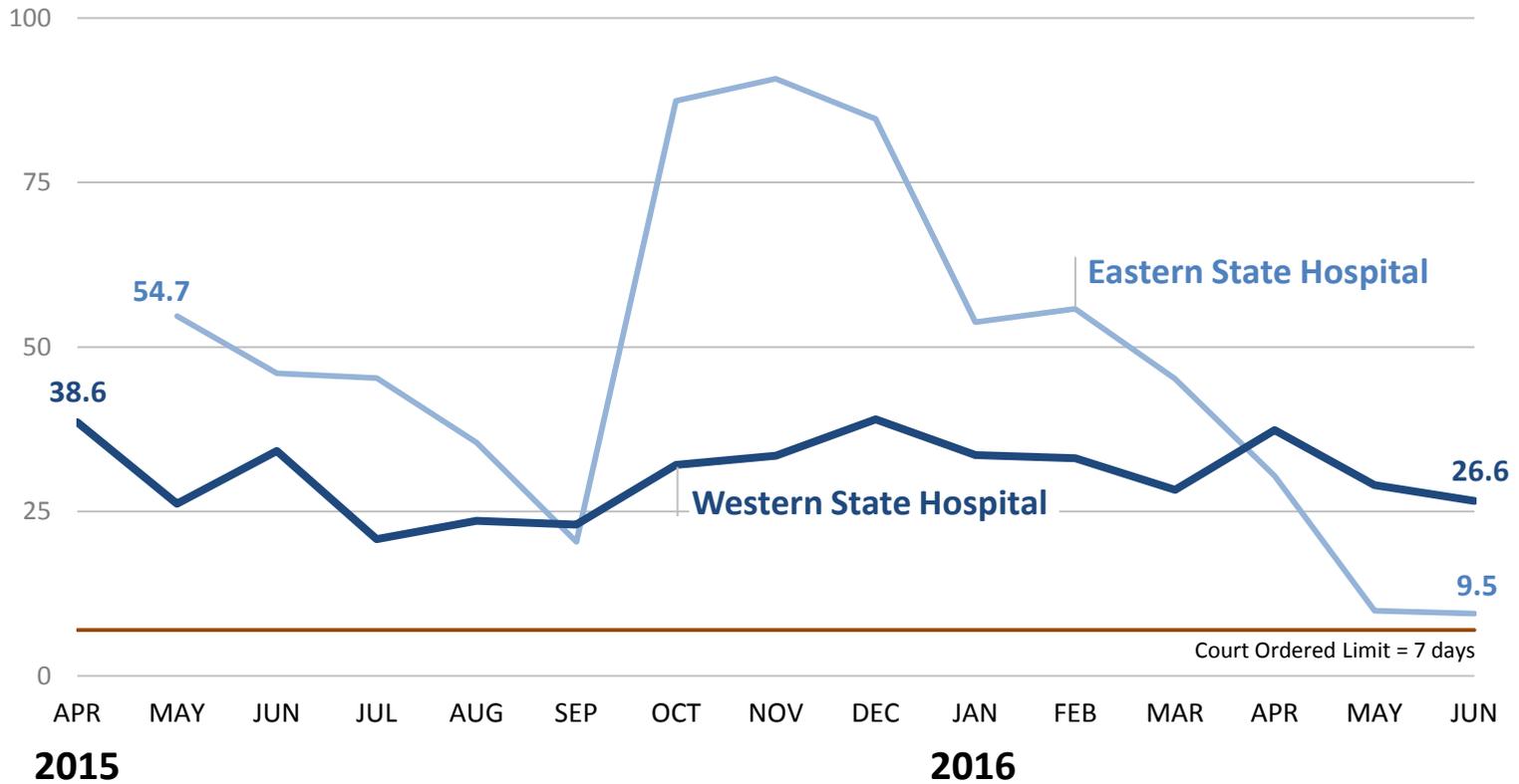
**DATA NOTES: 1** The most recent month's data is a first look data set, while the previous month's data are considered "mature."



Transforming lives

# Restoration Services

**Timely response to Trueblood class member court orders**  
**Average number of days from court order signature to hospital admission**



**DATA SOURCE:** Monthly Report to the Trueblood Court Appointed Monitor, completed by Behavioral Health Administration, Office of Forensic Mental Health Services.

**MEASURE DEFINITION:** For all court orders for competency restoration placement completed in the month, the average number of days from order signature to hospital admission.

**DATA NOTES:** 1 There were no completed court orders for restoration services for Eastern State Hospital in April 2015. 2 The most recent month's data is a first look data set, while the previous month's data are considered "mature."



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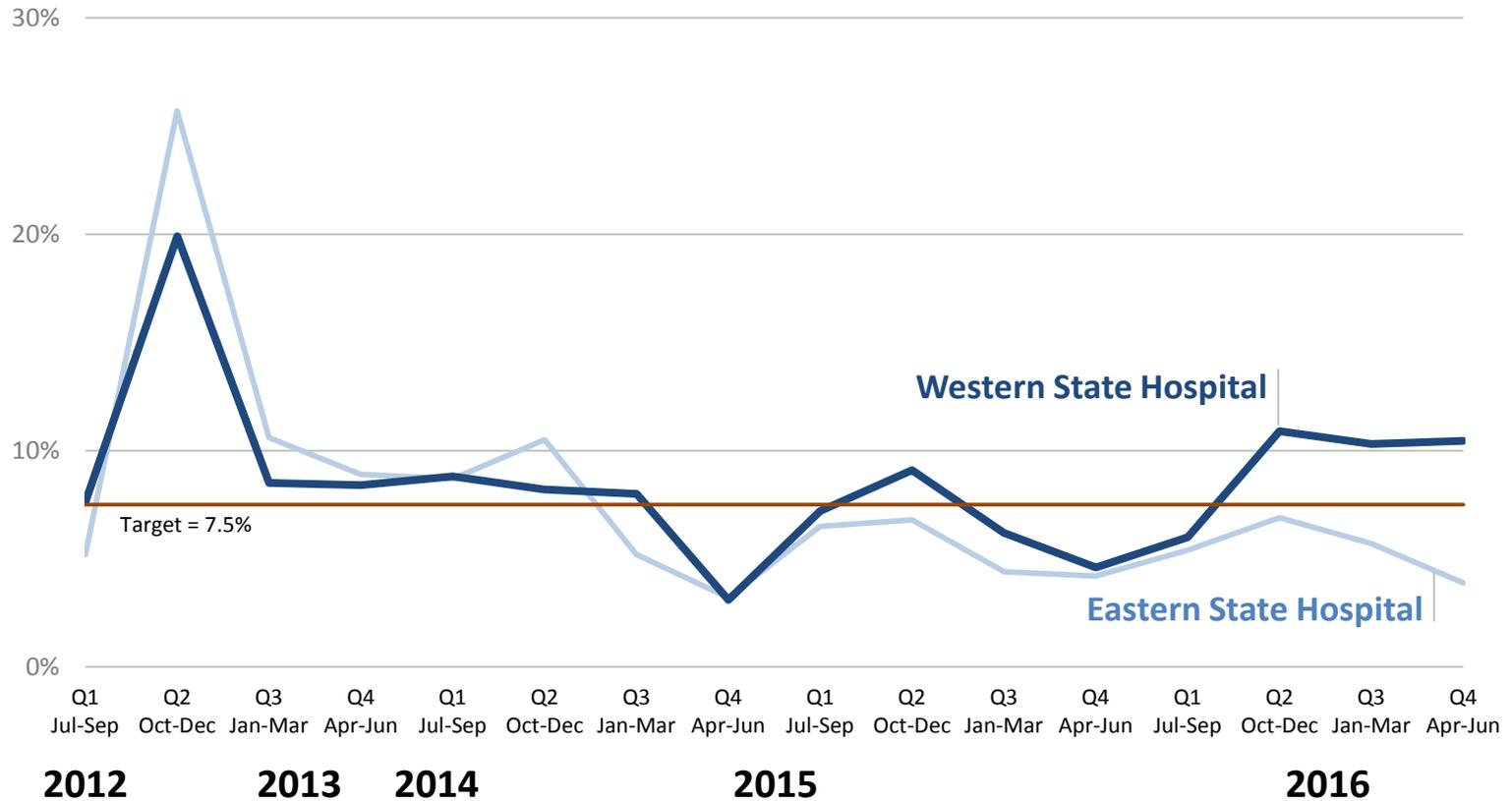


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## PART 4

# Measures Related to Employees

## Percentage of Overtime Use at Western State Hospital, Eastern State Hospital



**DATA SOURCE:** Financial Services Administration's Overtime Report Summary.

**MEASURE DEFINITION:** Average percentage of overtime use at Western State Hospital and Eastern State Hospital.

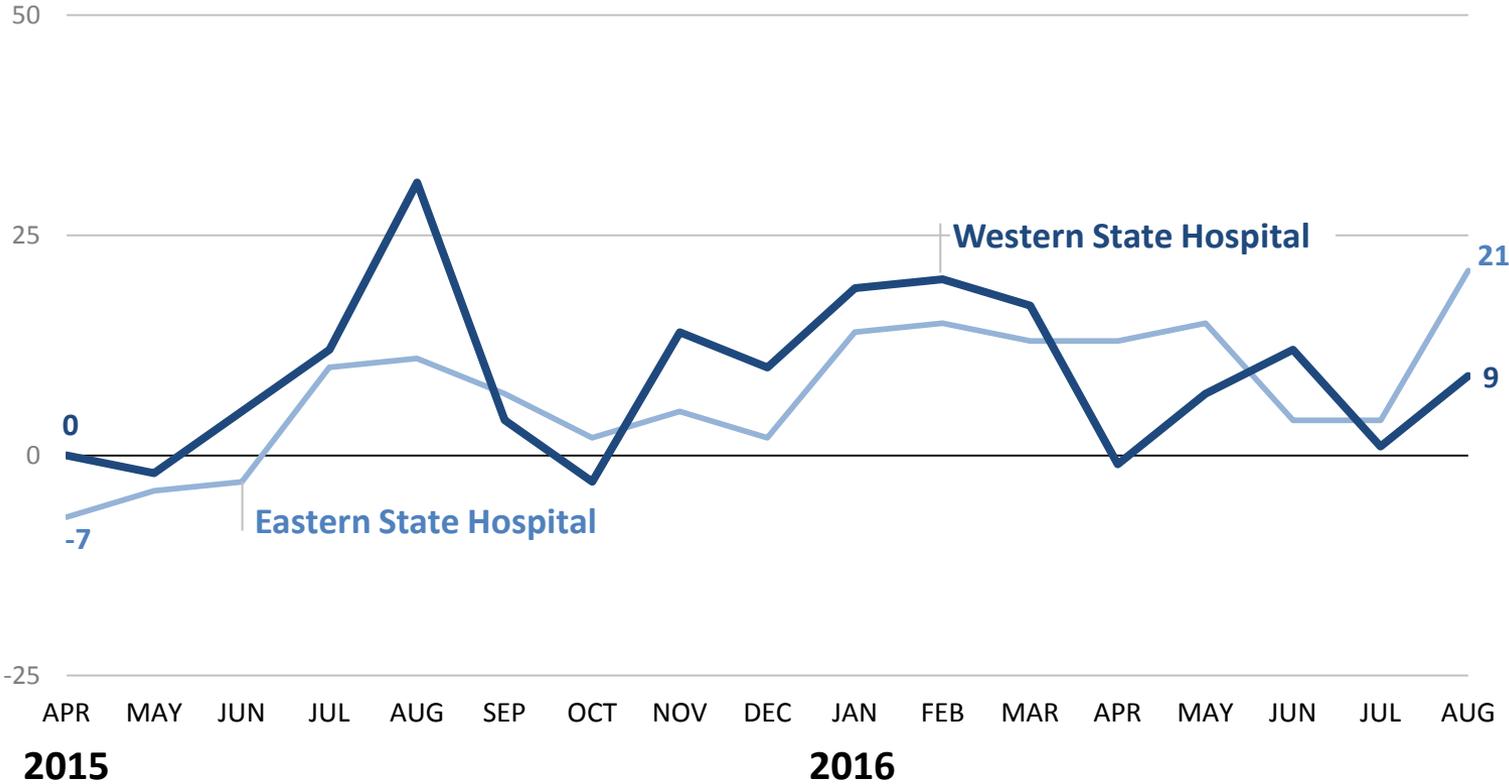
**DATA NOTES:** **1** Each data point represents a quarterly percentage (e.g., SFQ 2016/4 is the sum of total overtime expenditures for SFQ 2016/4, divided by the sum of Object A (employee salary) expenditures for SFQ 2016/4). **2** Includes only Budget Units for Eastern State Hospital and Western State Hospital. **3** Negative amounts in total overtime expenditures and/or total employee salary expenditures are included in the calculation. **4** Zeros are included in the denominator. **5** Includes both disbursements and accruals.



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# Net Change in Number of State Hospital Employees

## Adequate Staffing to Ensure Quality Care

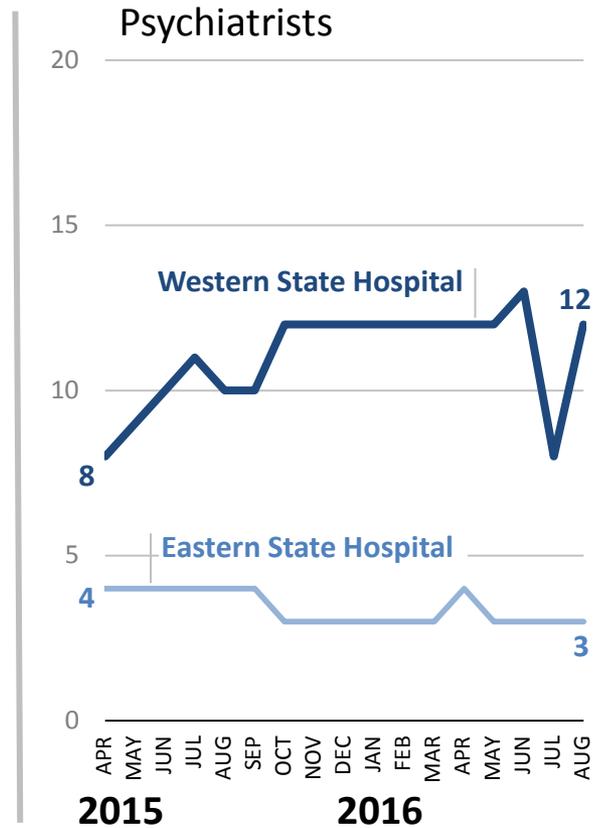
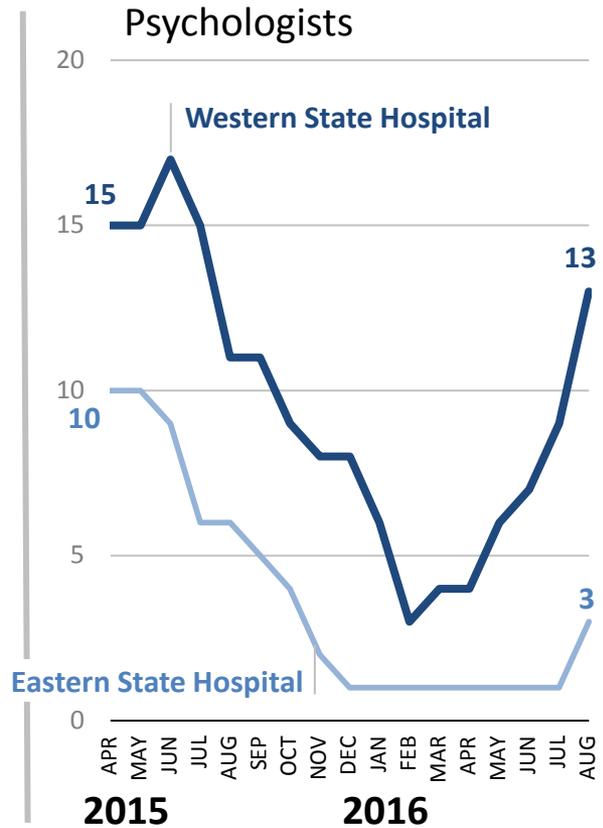
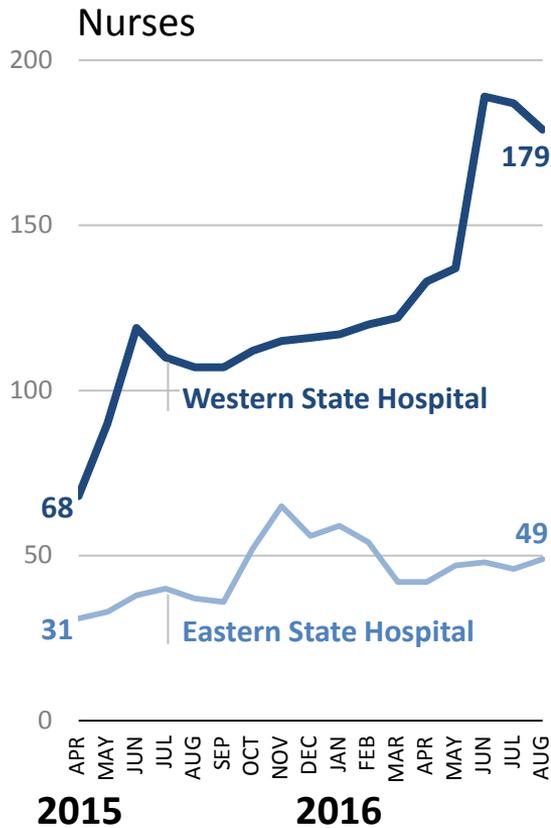


**DATA SOURCE:** DSHS Human Resources Division, Human Resource Management System.  
**MEASURE DEFINITION:** Net change of employees is calculated by gains (new hires) for the month minus losses (attrition).  
**DATA NOTES:** 1 XXXXXX XXXXXXXXXXXX XXXXXXXXXXXX



# Number of Clinical Staff Vacancies

## Number of vacancies for nurses, psychologists, and psychiatrists at Eastern State Hospital and Western State Hospital



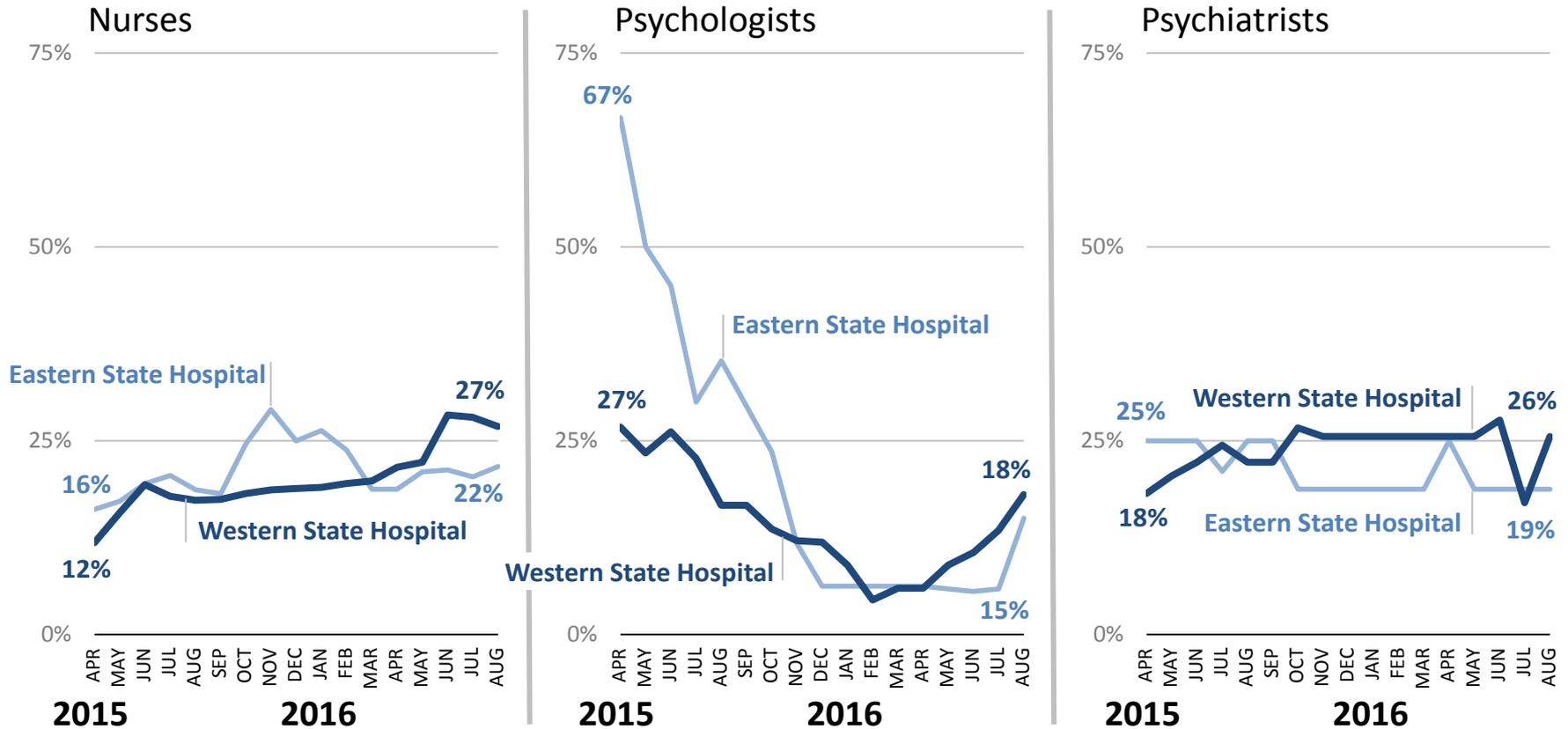
**DATA SOURCE:** DSHS Human Resources Division, Human Resource Management System.

**MEASURE DEFINITION:** Number of vacancies per employee classification.

**DATA NOTES:** 1 The nurse category includes both Registered Nurses and Licensed Professional Nurses.

# Percent of Clinical Staff Vacancies

Percent of vacancies for nurses, psychologists, and psychiatrists at Eastern State Hospital and Western State Hospital



**DATA SOURCE:** DSHS Human Resources Division, Human Resource Management System.

**MEASURE DEFINITION:** Number of vacancies per employee classification.

**DATA NOTES:** 1 The nurse category includes both Registered Nurses and Licensed Professional Nurses.



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## PART 5 Outcomes

**In progress . . .**

**Readmission (ESH, WSH, Community)**

Percent with readmission in a community psychiatric or E&T setting post discharge

**Deaths (ESH, WSH, Community)**

Percent dying post discharge

**Crime (ESH, WSH, Community)**

Percent arrested post discharge

**Homelessness (ESH, WSH, Community)**

Broad and narrow housing instability indicators post discharge

**Rx Filled (ESH, WSH, Community)**

Antipsychotics or antidepressants post discharge

**Follow-up Mental Health Visit (ESH, WSH, Community)**

Outpatient mental health treatment post discharge

**Substance Use Disorder Treatment among Those Who Need Tx (ESH, WSH, Community)**

Receipt of substance use disorder treatment post discharge

**Medicaid Enrollment (ESH, WSH, Community)**

Enrollment in Medicaid post discharge

**Occupancy Rate (ESH, WSH, Community)**

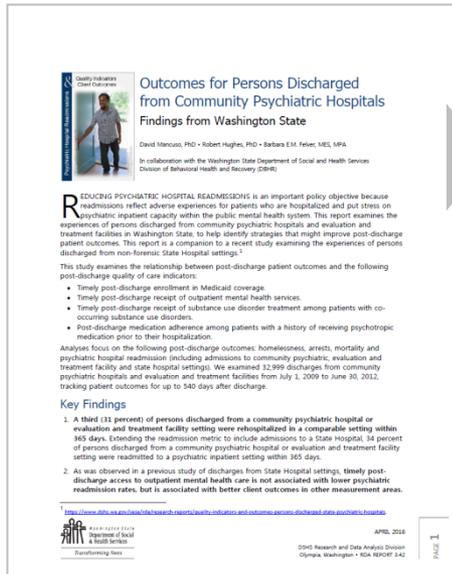
Percent of beds occupied



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## PART 6 Additional Resources

# More on Washington State Psychiatric Hospital Discharges



## Outcomes for Persons Discharged from Community Psychiatric Hospitals *Findings From Washington State*

Examines experiences of persons discharged from community psychiatric hospitals and evaluation and treatment facilities in Washington State, to help identify strategies that might improve post-discharge patient outcomes. Analyses focus on homelessness, arrests, mortality and psychiatric hospital readmission following discharge.

APRIL 2016

Mancuso | Hughes | Felver

<https://www.dshs.wa.gov/sesa/rda/research-reports/outcomes-persons-discharged-community-psychiatric-hospitals>

## Quality Indicators and Outcomes for Persons Discharged from State Psychiatric Hospitals

Examines experiences of persons discharged from a state psychiatric hospital in Washington State, to help identify interventions that might improve post-discharge client outcomes. We found that state psychiatric hospital readmissions are not uncommon—44 percent of those discharged were readmitted to a state or community psychiatric hospital within 540 days. For State psychiatric hospital episodes, timely post-discharge access to outpatient mental health is not associated with lower psychiatric readmission rates, but does appear to improve other client outcomes. Persons with substance use disorders had significantly higher psychiatric readmission rates, and timely post-discharge engagement in substance use disorder treatment is likely to reduce psychiatric readmission rates.

APRIL 2016

Mancuso

<https://www.dshs.wa.gov/sites/default/files/SESA/rda/documents/research-3-41.pdf>

