

Health and Human Services Commission
Department of State Health Services
State Hospital Section
2015 Management Plan

1st Quarter FY 2015

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FISCAL YEAR 2015
Hospital Management Plan and Agenda
including
STATEWIDE PERFORMANCE INDICATORS

The growth of managed care offers unique challenges and opportunities for the traditional state hospital system as a provider in the public-sector system-of-care in Texas. Managed care organizations prefer short-term stays, but the state hospitals have traditionally provided a range of lengths of stay from short to relatively long-term. Patients prefer services close to home, but many of the state hospitals are a significant distance from population centers. In addition to acute care and extended acute care, state hospitals are providing residential services for patients who are simply difficult-to-place. Growing pressures for forensic services have squeezed available beds. Finally, the growth of Medicaid managed care means that private sector providers will increase across many areas of the state resulting in a change of the profile of patients served by the state hospitals.

MHSA proposes to tackle these challenges by defining the best fit for the state hospital system, and by beginning a transition of its network of hospitals to meet that particular services need. Specifically, the system envisions a focus on offering managed care organizations an alternative level of care for patients who do not stabilize with brief, acute inpatient stays.

The DSHS network of hospitals intends to fill the gap that will result from the growth of the private sector as a provider by focusing on two types of extended acute care: general psychiatry and forensic psychiatry. Therefore, FY15 will bring the initiation of a transition of the network into those specialized roles.

In order to assure that the full range of mental health services is available to patients close to their homes, the network's hospitals will:

- Target complex patients of the highest severity who have a good chance of improvement
- Transition into facilities that take greater than 90% of admissions from crisis stabilization units and acute psychiatric care hospitals

In order to maintain a focus on quality of care and outcomes, all network hospitals will:

- Offer intensive case management (especially discharge planning) and psychiatric rehabilitation therapy using best-practice curricula consonant with the outpatient curricula
- Have multidisciplinary teams that prepare and carry out treatment plans
- Respond promptly to quality management (QM) and utilization review (UR) processes by regulators and payors
- Be Medicare-certified, and accredited by the Joint Commission

In order to assure fiscal viability, all network hospitals will:

- Maximize collection of third party revenues
- Optimize indirect costs
- Manage length of stay by bed type

The fiscal year 2015 performance indicators have been selected in order to foster the transition of the state hospital network toward the goals above. Each hospital's board is to be provided updates at each Board meeting, as described in italics below, in a meeting with the format described in Appendix A below.

In addition to the changes in performance goals, broad changes in the governance and administrative structure of the hospitals are also being undertaken during the fiscal year. This includes a change in the structure of hospital board meetings, the agenda for which is also included here.

LOCAL HOSPITAL PERFORMANCE INDICATORS AND REQUIRED REPORTS

Regulatory Indicators

REPORTS TO LOCAL BOARD FROM MANAGEMENT

CMS surveys/complaint visits *Unusual incident reports should be presented when surveys/complaint visits occur, and copies of the report findings should be presented when received. Include a cover page with bulleted successes and with bulleted issues with associated narrative action plans for each.*

Joint Commission surveys/complaints *Unusual Incident reports should be presented when surveys/complaint visits occur, and copies of the report findings should be presented when received. Include a cover page with bulleted successes and with bulleted issues with associated narrative action plans for each.*

Pending Litigation Report *Report at each meeting – information needed: case number, title of case, brief description, date filed, venue, status and if it has been appealed.*

Annual Contract Status Report *Report at each meeting in the format of Attachment C and D. Include a cover page with bulleted successes and with bulleted issues with associated narrative action plans for each. Information needed for C (Purchased Services Contracts) and D (Revenue Generating Contracts) is Req. #, Purchase Order #, Date Submitted, Contract #, Name of Contractor, Services Provided, Contract Type, Annual Contract Amount, Expiration Date, Date Completed by ECPS, Date of Execution, Performance Measures Met Y/N.*

Approval of Patient Grievance Policy/Patient Rights Issues/Patient Satisfaction *SHS 2-4 (Guidelines for Hospital Patient Grievance Process) outlines the requirements for Patient Grievance Policy*

Research Summary *Report at each meeting the following information: Topic or Title of Approved or Proposed Research; Investigator; Reviewed by Institutional Review Board Y/N; If reviewed by IRB, Date of Approval; Date of Approval by Governing Body; Brief Description; Status (Planning, In Progress [Data Collection/Analysis], Completed; If Completed report results and problems; Publication/Dissertation Date.*

Approve process for managing conflict among leadership groups

MEASURES

Locally generated and reported to Board *Develop three local regulatory indicators with objective metrics and goals. Report these at each meeting as bullets with associated narrative action plans for each that is not meeting goal.*

Centrally generated and reported to Board *Report (as reported by central office) adherence to internal operating procedure by leadership, with action plans for any problems noted.*

Financial Indicators

REPORTS TO LOCAL BOARD FROM MANAGEMENT

- Quarterly financial statements
- Quarterly aged receivables and payables
- Quarterly scorecard variances and plans

For these three, present a six-month report in the format obtained from DSHS Finance. Include a cover page with bulleted successes and with bulleted issues with associated narrative action plans for each.

MEASURES

Locally generated and reported to Board:

- Cost per unique patient served, quarter
- Medicaid value of services-charted on GR patients divided by GR-allocated
- Revenue versus budget
- Bottom-line versus goal

Report each of these as a bullet with performance versus goal, with associated narrative action plans for each that is not meeting goal.

Centrally generated and reported to Board:

- Outside medical costs per 1,000 bed days, quarter and annual-to-date
- Percent MCO pts days-auth'd for current week, weekly
- Percent MCO admission days-auth'd, by week of admission, weekly

Report (as reported by central office) performance versus goal on each of these, along with narrative action plans for any problems noted.

Clinical Quality Indicators

REPORTS TO LOCAL BOARD FROM MANAGEMENT

UM Plan and activities

At each meeting, present bulleted successes and also bulleted issues with associated narrative action plans for each.

QAPI Plan/issues identified

At each meeting, present bulleted successes and also bulleted issues with associated narrative action plans for each.

Medical Staff report

At each meeting, present bulleted successes and also bulleted issues with associated narrative action plans for each. Also report clinical privileging activity and associated motion in the format of Attachment F.

Integrated Safety Program Report
Report once each year in the format of Attachment G

Staff Competency Report
Report once each year in the format of Attachment H

Nursing Report
Report once each year in the format of Attachment I

Infection Control Report
Report once each year in the format of Attachment J

Medication Management Report
Report once each year in the format of Attachment K

Patient Satisfaction Report
At each meeting, provide a summary of queries with sample size, mean score and standard deviation on each. Include a cover page with bulleted successes and also bulleted issues with associated narrative action plans for each.

MEASURES

Locally generated and reported to Board:
Internal and external CPI scores by month and review type
Three other local measures

Report each of these as a bullet with performance versus goal, with associated narrative action plans for each that is not meeting goal.

Centrally generated and reported to Board:
Outliers on all NRI/Joint outcomes/cores (plan on variances)
Mean changes in ANSA/CANS scores from admission to discharge
Mean ASSIST (CD) at admission
Potentially preventable readmissions (15 days)
Frequency of Employee Injury, per 1,000 bed days, per month
Frequency of Patient Injury, per 1,000 bed days, per month
Frequency of Patient Restraint (Mechanical & Physical Holds), per 1,000 bed days, per month
Frequency of Patient to Patient Aggression, per 1,000 bed days, per month
Frequency of Abuse & Neglect Allegations, per 1,000 bed days, per month

Report (as reported by central office) performance versus goal on each of these, along with narrative action plans for any problems noted.

Access Indicators

REPORTS TO LOCAL BOARD FROM MANAGEMENT
None

MEASURES

Locally generated and reported to Board:
Days on Diversion (any unit), by month
Three other local measures

Report each of these as a bullet with performance versus goal, with associated narrative action plans for each that is not meeting goal.

Centrally generated and reported to Board:
ALOS, weekly on day of record, for currently admitted
Percent of admissions discharged in 15 days weekly, by week of admission
Unique-to-hospital-system patients admitted for the week, by week
Bed-days used / capacity, by month

Report (as reported by central office) performance versus goal on each of these, along with narrative action plans for any problems noted.

Statutory

REPORTS TO LOCAL BOARD FROM MANAGEMENT

Annual update on cemetery activities
Report once each year in the format of Attachment L

Annual approval of vending machines

MEASURES

Locally generated and reported to Board:
None

Centrally generated and reported to Board:
None

**APPENDIX A.
FORMAT BOARD MEETING AGENDA**

Clinical success story

Patient presentation

CEO report

Reviews all measures, generally

Notes major successes and problems in the follow reporting areas and asks approval:

Statutory

Regulatory

CFO report

Reviews monthly financial statements and asks acceptance
explain variances and plan, at account level

Reviews scorecard

explain variances and plan

Reviews aged receivables and payables

CMO report

Notes major successes and problems in the following report and asks approval:

Clinical Quality

Other Biannual Reports to Board from Management for Approval

Annual Reports to Board from Management for Approval

Attachment B
Format for Summary Report of Litigation

| No. | Case | Brief Description | Date Filed | Venue | Status | Appeal |
|-----|------|-------------------|------------|-------|--------|--------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

Directions:

1. Begin recording active and potential cases at the beginning of the new fiscal year. Any case that is active or has a potential for significant impact on the department or hospital as of September 1st should be listed. The list will be maintained throughout the fiscal year and a new one started every fiscal year.
2. Do not remove any cases during the year. Leave cases that have been closed or dropped on the report throughout the fiscal year until the report is closed and a new fiscal year report started.
3. **No.** – Assign each case a sequential number.
4. **Case** – List the case as it is titled or a potential case as the plaintiff’s name.
5. **Brief Description** – Brief is the operative word. “Employment related”, “auto accident”, “patient injury”, etc. is sufficient. Also, enter the goal of the suit such as “monetary damages \$10,000”, “return to job”, “increase staff”, etc.
6. **Date Filed** – Enter the date the case was filed. If it is a potential case, enter “potential”.
7. **Venue** – The Court in which, the case has been filed “Federal”, “State”, and “County”, “Small Claims”, etc. enter “Unknown” for potential cases.
8. **Status** – List the stage of the case; such as “Discovery”, “Depositions”, “Adjudicated in favor of facility”, “Trial scheduled for xxxdate”, Suit dropped by Plaintiff”, etc.
9. **Appeal**–Enter “No” or if “Yes,” by whom

Attachment E
Format for Reporting Research

Topic or Title of Approved or Proposed Research:

Investigator:

Reviewed by Institutional Review Board (IRB): Yes No

If yes, Date of Approval by IRB:

Date of Approval by Governing Body:

Brief Description:

Status:

Planning

In Progress (Data Collection/Analysis)

Completed

If Completed:

Results

Problems

Publication/Dissertation Date:

Attachment F
Format for Reporting Medical Staff Privileging

List of Entire Medical Staff including Privileges, license number, and licensure dates for each:

List of Medical Staff who has been privileged since the last meeting of the Governing Body for affirmation.

List of Medical Staff who has separated since the last meeting of the Governing Body.

**ATTACHMENT G
FORMAT FOR REPORT ON SAFETY**

I. System or Process Failures

II. Number and Type of Sentinel Events

For type categories, use Joint Commission's Sentinel Event Website which includes:

| | |
|-----------------------|-----------------------|
| Anesthesia-related | Medication Error |
| Assault/Rape/Homicide | Patient Abductions |
| Delay In Treatment | Patient Falls |
| Elopement | Restraint Deaths |
| Fires | Suicide |
| Infection-related | Transfusion |
| Medical Equipment | Wrong-site Surgery |

III. Whether patients and families were informed of the sentinel event

IV. Actions taken to improve safety

- a. Proactively – include FMEA update
- b. In response to events

V. Results of analyses related to the adequacy of staffing

Only report information that is additional to the nurse staffing report and the medical staff report.

Attachment H
FORMAT FOR REPORT ON STAFF COMPETENCY

- I. List training/education/awareness issues identified for the prior year through the monitoring and evaluation of SHS performance indicators
- II. Show the establishment of a baseline of patterns/trends regarding these training issues
- III. Provide a narrative of a plan to address training/education/awareness needs identified
- IV. Describe how the plan was implemented over the prior year
- V. Provide an evaluation of the effectiveness of the year's training/education based upon the pre-and post-training pattern/trend analysis done previously
- VI. Outline the proposed training/education/awareness issues and plan for the next year

Attachment I
FORMAT FOR REPORT ON NURSING SERVICES ACTIVITY

I. Workforce Strength

- A. Current number of positions (both filled and vacant):
 - 1. RN,
 - 2. LVN
 - 3. PNA/Medical Aide
- B. Percent (%) of positions vacant:
 - 1. RN
 - 2. LVN
 - 3. PNA/Medical Aide
- C. Turnover percentages (%):
 - 1. RN
 - 2. LVN
 - 3. PNA/Medical Aide
- D. Number of employee shifts on FMLA or Extended Leave \geq fourteen (14) days.
 - 1. RN
 - 2. LVN
 - 3. PNA/Medical Aide
- E. Total number of employee shifts on extended sick leave
 - 1. RN
 - 2. LVN
 - 3. PNA/Medical Aide
- F. Total number of employee shifts on 1:1
- G. Total number of employee shifts as hospital sitter
- H. Total hours of contract nursing services utilized
 - 1. RN
 - 2. LVN
 - 3. PNA/Medical Aide
- I. Total hours of overtime used to supplement staffing
 - 1. RN
 - 2. LVN
 - 3. PNA/Medical Aide

II. Retention Activity

- A. Number of employees separating within the first 6 months of employment
 - 1. RN
 - 2. LVN
 - 3. PNA/Medical Aide
- B. Summary of reasons identified for separation
 - 1. RN
 - 2. LVN
 - 3. PNA/Medical Aide
- C. Performance Improvement activities

III. Recruitment Activity

- A. Number of offers for employment made
- B. Number of offers made but refused

- C. Recruitment activities
- IV. Competency of Nursing Workforce
 - A. Number of new graduate nurses employed.
 - 1. RN less than one year since graduation
 - 2. LVN less than one year since graduation
 - B. Percentage of Registered Nurses with applicable specialty certification.
 - C. Percentage of Registered Nurses with Bachelor's degree in Nursing
 - D. Number of nursing staff members currently enrolled (exclude those enrolled in prerequisite course) in:
 - 1. Vocational nurse education program
 - 2. Basic professional nursing education (RN or LVN - RN) program
 - 3. Advanced professional nursing education program (RN - BSN or MSN)
- V. Academic Linkages
 - Number of students by type (LVN, Associate Degree, Diploma, Baccalaureate, Graduate, Advanced Practice Nurse) and educational institution

ATTACHMENT J
FORMAT FOR REPORT ON INFECTION PREVENTION AND CONTROL

Section 1: Overview of Infection Control Program-Scope of Program

Describe:

- the purpose of your program
- the authority for your program (ie, where it fits in the committee structure)
- customers served

Example: The purpose of the Infection Control Program is to establish a systematic infection prevention and control program through proactive risk assessment based on our patient population, prior experience, geographical area, services provided and authoritative resources. Our Infection Control Program is under the authority of the Medical Executive Committee. Our Infection Control Plan is evaluated, updated and approved on an annual or as needed basis.

Section 2: Goals/ Objectives

Reference joint commission and CMS infection control standards, performance measures, and program goals.

Example: The goal of the Infection Control Plan is to ensure and maintain ongoing oversight and implementation of the Infection Control Program. In order to establish this, routine reports are collected monthly and reviewed through the established hospital systems. The Infection Control Plan is established using current Joint Commission/ CMS standards, the Annual Management Plan and other hospital established indicators. Findings from the prior year's evaluation are utilized to revise the plan as indicated.

Section 3: Reports

Include the following reports, associated data analyses, along with a cover the list bullets of problems noted and associated narrative plans of action:

- M-10A Healthcare Associated Infections
- M-10B Employee influenza immunization with goal of 90%
- M-10C Rate of pneumococcal/influenza immunizations for high risk patients
- TB-for employees and patients
- Hepatitis B- for employees
- Accidental needle sticks
- Outbreaks of infectious diseases
- New or revised IC policies
- ICP training offered

Section 4: Risks Identified and Strategies for Improvement

List, as bullets, the prioritized risks identified within your environment and (with each) a narrative of proposed strategies for performance improvement in the coming year. For each, list the proposed metrics and goals for the coming year and the

Section 5: Evaluation of Infection Control Program

Provide an overall summary of the infection control program: successes, problems, plans for improvement.

Attachment K
FORMAT FOR REPORT ON MEDICATION MANAGEMENT

I. Medication Management Planning

List current high-alert/high-risk medications
Summarize reports of abuses or losses of controlled substances, if any

II. Formulary and Procurement

Number of unique patients receiving medication in the year
Total cost of medications
Cost of medication per patient
Cost of medication per filled bed-day

III. Storage

Summary of medication storage inspection results

IV. Operating and Transcribing

Summary of drug utilization review process
 Bullets of issues identified by drug utilization review, and narrative of action plan for each
Summary of performance improvement activities/practices have been implemented regarding the use of verbal/telephone orders
Summary of medication reconciliation performance improvement
Number of patients discharged with polypharmacy number and action plan for any associated problems noted

V. Pharmacy Preparing and Dispensing

Narrative of process to assure patients safely obtain medications when pharmacy is closed
Numeric report of medication recalls, discontinued medication, and waste, as well as a narrative of action plan for any problems noted

VI. Medication Administration

Numeric summary of adverse drug reactions (including the names of the medications, type of reaction and actions taken),

Numeric summary of medication errors (including analysis and actions taken) as well as narrative on action plans for problems identified.

VII. Program Evaluation

A narrative report of identified opportunities for improvement in the medication management system, and overall impact of actions taken on improvement opportunities identified in prior year.

Performance improvement plans for the next year, including in areas where action taken did not lead to achieved or sustained goals of prior year.

ATTACHMENT L
FORMAT FOR UPDATE ON CEMETERY-RELATED ACTIVITIES

| |
|--|
| Number of interments during reporting period: |
| Number of known graves at end of report period: |
| Is space still available for future interments? |
| Are cemetery records current and available to match all gravesites with consumer's names? |
| Describe on-going and potential plans for preservation of information contained in death and cemetery records. |
| Is there a way to formally recognize or memorialize those consumers who occupy gravesites that are unknown, unmarked, or marked incorrectly? |
| Brief review of cemetery conditions to include landscaping, plot plans, public access, perimeter fencing, and grave markings. |
| Describe on-going and potential plans for maintenance and improvement of landscaping access roads, and/or pathways, grave markings, etc. |
| Describe past or planned use of public cemeteries in local communities through contracted services. |
| Describe any new issues or noteworthy family/community contacts that occurred during the reporting period. |

**ATTACHMENT 2.
DETAILED GUIDELINES FOR AGENDA ITEMS**

Approval of Minutes from previous meeting

See Attachment 3 for guidelines

Clinical success story

Invite a clinical staff member or team to present a case

Patient presentation

Invite a patient representative to address the Board on any issue of the patients' choosing.

CEO report

Present a one-page, bulleted review of performance indicators and other success and concerns for the hospital

Present, and request Board approval of, a formal report in the manner described in Attachment 1 on Regulatory Indicators

Present, and request Board approval of, a formal report in the manner described in Attachment 1 on Statutory Indicators

CFO report

Review, and request acceptance of, quarterly financial statements for time since last meeting in the manner described in Attachment 1

Review quarterly scorecard and explain variances and plan

Reviews aged receivables and payables

CMO report

Present, and request Board approval of, a formal report in the manner described in Attachment 1 on Clinical Quality Indicators

Other Biannual Reports to Board from Management for Approval

Present, and request approval of, any other biannual reports called for in Attachment 1 that do not readily fall under the reports elsewhere on the agenda

Annual Reports to Board from Management for Approval

Present, and request approval of, any other annual reports called for in Attachment 1 that do not readily fall under the reports elsewhere on the agenda

ATTACHMENT 3.
FORMAT FOR BOARD MINUTES

A packet of materials should be prepared prior to all Board meetings. The packet should contain:

Meeting agenda

A copy of the minutes from the last meeting that includes:

A summary of all state hospital management plan measures presented at the last meeting

A summary of all required reports presented at the last meeting

A summary of other items on the agenda, by agenda item

Five report sections:

CEO report

Includes written reports of measures and plans to be reported by the CEO

CFO report

Includes written reports regarding, and copies of, the financial statements , scorecard, and aged receivables and payables

CMO report

Includes written reports of measures and plans to be reported by the CMO

Other Biannual Reports to Board from Management for Approval

Includes written reports of measures and plans to be reported by the CMO

Other Annual Reports to Board from Management for Approval

Includes written reports of measures and plans to be reported by the CMO

Other Information for Board

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Regulatory Indicator

RI-1

Report: CMS & Joint Commission Surveys/Complaint Visits

Timeframe: Quarterly

Definition

State hospital's current status in JC accreditation, Medicare certification (based on the last Medicare-related survey [TDH or CMS], ICF-MR certification, and IMD review. The CEO of each facility will inform the Director of State Hospital Section in writing of any change in accreditation or certification status.

Data Source

Notification from Accreditation Agency
ODS Accreditation form

Data Display and Chart Description

Table shows the accreditation date of JC and number of unannounced visits for the year; number of certified Medicare beds, number of complaint visits and the date of last CMS on-site survey; date of last IMD Review and number of IMD certified beds; date of ICF-MR certification and number of certified beds for RGSC; and date of the latest TVFC audit for WCFY.

Purpose

All accreditation dates and certified beds are current.

RI - 1 Accreditation and Certifications

(As of November 30, 2014)

| | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | TCID | WCFY |
|----------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| JC Accreditation | | | | | | | | | | | |
| Date of accreditation: | Nov-12 | Apr-12 | Feb-13 | Sep-12 | Feb-13 | Jun-14 | Feb-13 | May-13 | Jun-13 | Aug-12 | May-14 |
| Unannounced Visit/Complaint FY15 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 |
| Medicare Certification | | | | | | | | | | | |
| No. certified beds: | 201 | 156 | 41 | 48 | 100 | 55 | 106 | 136 | 74 | 40 | N/A |
| No. of Complaint Visits for Q1 | 1 | 0 | 2 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | N/A |
| No. of Complaint Visits for FY | 1 | 0 | 2 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | N/A |
| Date of CMS On-Site Survey | Nov-12 | Jun-09 | Nov-14 | Sep-12 | Sep-07 | May-08 | Dec-12 | Jul-11 | Sep-13 | Aug-11 | |
| Date of last IMD Review: | Jul-14 | Oct-13 | Aug-11 | Dec-08 | Dec-12 | N/A | Nov-13 | Oct-11 | Oct-14 | N/A | N/A |
| IMD certified beds* | 50 | 27 | N/A | 38 | 40 | N/A | 28 | 48 | 44 | N/A | N/A |
| Date of TVFC Audit:** | | | | | | | | | | | Sep-14 |
| ICF-MR Certification | | | | | | | | | | | |
| Last date certified: | N/A | N/A | N/A | N/A | N/A | Nov-13 | N/A | N/A | N/A | N/A | N/A |
| No. certified beds: | N/A | N/A | N/A | N/A | N/A | 110 | N/A | N/A | N/A | N/A | N/A |

*Geriatric-certified/Medicare beds (these beds are included in the total certified medicare bed numbers)

**Texas Vaccines For Children Audit applies to WCFY only.

**. FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Financial Indicator

FI-1

Report: Aged Receivables and Payables

Timeframe: Quarterly

Definition

State hospital's financial statement obtained from DSHS Finance.

Data Source

DSHS Finance Report

Data Display and Chart Description

Table with total quarterly charges and collections

Purpose

All aged receivable and payables information are correct.

**FI - 1 Aged Receivables and Payables
All State Hospitals**

Aged Receivables

FY2015

| Facility | Q1 | Q2 | Q3 | Q4 | FY |
|-----------------|----------------------|------------|------------|------------|----------------------|
| ASH | \$18,016,868 | | | | \$18,016,868 |
| BSSH | \$10,765,528 | | | | \$10,765,528 |
| EPPC | \$4,862,311 | | | | \$4,862,311 |
| KSH | \$10,200,888 | | | | \$10,200,888 |
| NTSH | \$34,209,574 | | | | \$34,209,574 |
| RGSC | \$4,175,360 | | | | \$4,175,360 |
| RSH | \$18,027,444 | | | | \$18,027,444 |
| SASH | \$18,351,149 | | | | \$18,351,149 |
| TSH | \$13,197,971 | | | | \$13,197,971 |
| TCID | \$3,564,494 | | | | \$3,564,494 |
| WCFY | \$3,970,668 | | | | \$3,970,668 |
| All SH | \$139,342,256 | \$0 | \$0 | \$0 | \$139,342,256 |

**FI - 1 Aged Receivables and Payables
All State Hospitals**

Aged Payables

FY2015

| Facility | Q1 | Q2 | Q3 | Q4 | FY |
|-----------------|---------------------|------------|------------|------------|---------------------|
| ASH | \$2,010,481 | | | | \$2,010,481 |
| BSSH | \$676,692 | | | | \$676,692 |
| EPPC | \$546,030 | | | | \$546,030 |
| KSH | \$176,627 | | | | \$176,627 |
| NTSH | \$2,744,721 | | | | \$2,744,721 |
| RGSC | \$274,281 | | | | \$274,281 |
| RSH | \$715,116 | | | | \$715,116 |
| SASH | \$2,572,207 | | | | \$2,572,207 |
| TSH | \$1,270,449 | | | | \$1,270,449 |
| TCID | \$145,702 | | | | \$145,702 |
| WCFY | \$8,693 | | | | \$8,693 |
| All SH | \$11,140,998 | \$0 | \$0 | \$0 | \$11,140,998 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Financial Measure

FM-1

Measure: Cost Per Unique Patient Served

Timeframe: Quarterly

Definition

State hospital cost per person served represents the average cost of care for an individual per FY quarter.

Data Source

CARE Report HC022330 (Unduplicated Count of Clients Served)
Financial Cost Summary Report

Methodology

Quarterly average cost per patient = LBB Cost [total state hospital cost + benefits/quarterly total bed days derived from the Cost Report] x average patient days* during period (unduplicated count of patient's served).

*Average patient days means the net stay in days at the component during the quarter divided by the number of unduplicated count of patient's served during the quarter.

Date Display and Chart Description

Table displays average patient days, LBB cost per bed day and average cost for FY quarter for individual state hospitals and system-wide. Chart shows accumulated quarterly data points of average cost per persons served for individual state hospitals and system-wide.

Purpose

Measures the average cost per patient day.

**FM -1 Average Cost Per Patient Served
All State Hospitals**

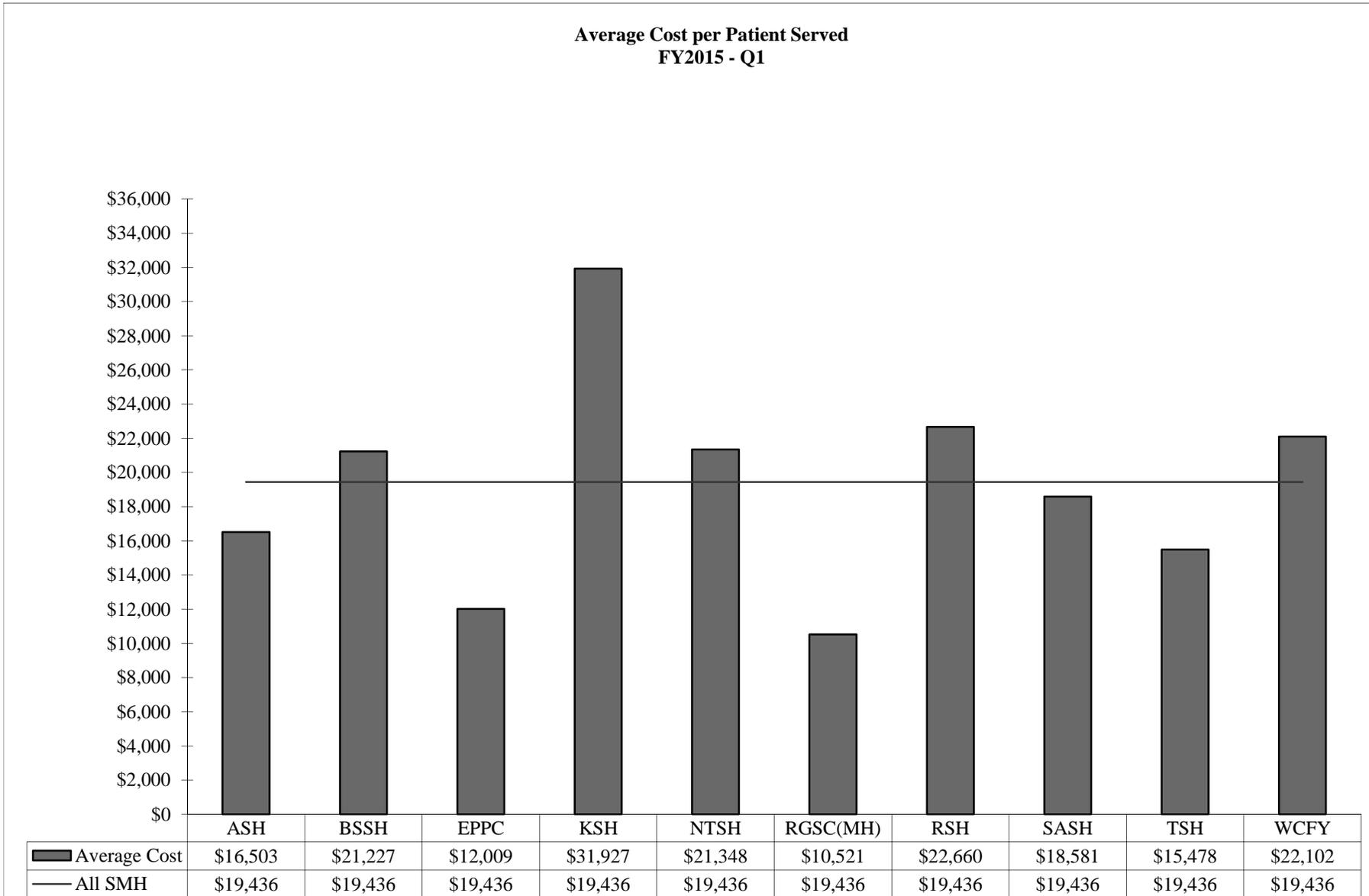
| | FY13 | | | | FY14 | | | | FY15 | | | |
|-----------------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----|-----|-----|
| | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 |
| Austin State Hospital | | | | | | | | | | | | |
| Avg. Patient Days | 22 | 23 | 22 | 25 | 26 | 27 | 31 | 32 | 34 | | | |
| LBB Cost/Bed Day | \$436 | \$498 | \$490 | \$477 | \$438 | \$524 | \$518 | \$529 | \$479 | | | |
| Average Cost | \$9,754 | \$11,239 | \$10,956 | \$11,703 | \$11,582 | \$14,059 | \$15,956 | \$16,767 | \$16,503 | \$0 | \$0 | \$0 |
| Big Spring State Hospital | | | | | | | | | | | | |
| Avg. Patient Days | 44 | 42 | 46 | 49 | 52 | 53 | 54 | 54 | 50 | | | |
| LBB Cost/Bed Day | \$399 | \$407 | \$418 | \$440 | \$389 | \$447 | \$436 | \$480 | \$421 | | | |
| Average Cost | \$17,401 | \$17,134 | \$19,029 | \$21,446 | \$20,318 | \$23,866 | \$23,599 | \$25,775 | \$21,227 | \$0 | \$0 | \$0 |
| El Paso Psychiatric Center | | | | | | | | | | | | |
| Avg. Patient Days | 19 | 20 | 21 | 19 | 19 | 22 | 20 | 20 | 23 | | | |
| LBB Cost/Bed Day | \$474 | \$538 | \$536 | \$552 | \$523 | \$588 | \$536 | \$642 | \$515 | | | |
| Average Cost | \$8,841 | \$10,743 | \$11,287 | \$10,417 | \$9,745 | \$13,085 | \$10,846 | \$12,881 | \$12,009 | \$0 | \$0 | \$0 |
| Kerrville State Hospital | | | | | | | | | | | | |
| Avg. Patient Days | 82 | 82 | 84 | 80 | 78 | 84 | 85 | 80 | 82 | | | |
| LBB Cost/Bed Day | \$377 | \$377 | \$374 | \$389 | \$369 | \$408 | \$382 | \$420 | \$387 | | | |
| Average Cost | \$30,769 | \$31,043 | \$31,409 | \$31,312 | \$28,776 | \$34,056 | \$32,361 | \$33,604 | \$31,927 | \$0 | \$0 | \$0 |
| North Texas State Hospital | | | | | | | | | | | | |
| Avg. Patient Days | 51 | 46 | 49 | 48 | 50 | 51 | 50 | 50 | 51 | | | |
| LBB Cost/Bed Day | \$398 | \$384 | \$385 | \$405 | \$399 | \$469 | \$445 | \$450 | \$422 | | | |
| Average Cost | \$20,126 | \$17,839 | \$18,998 | \$19,520 | \$20,093 | \$24,060 | \$22,451 | \$22,409 | \$21,348 | \$0 | \$0 | \$0 |
| Rusk State Hospital | | | | | | | | | | | | |
| Avg. Patient Days | 63 | 60 | 62 | 59 | 70 | 64 | 59 | 59 | 64 | | | |
| LBB Cost/Bed Day | \$366 | \$383 | \$342 | \$391 | \$321 | \$362 | \$366 | \$396 | \$355 | | | |
| Average Cost | \$23,089 | \$22,855 | \$21,064 | \$22,998 | \$22,409 | \$23,351 | \$21,701 | \$23,293 | \$22,660 | \$0 | \$0 | \$0 |
| San Antonio State Hospital | | | | | | | | | | | | |
| Avg. Patient Days | 32 | 36 | 36 | 35 | 37 | 35 | 40 | 42 | 42 | | | |
| LBB Cost/Bed Day | \$440 | \$459 | \$454 | \$491 | \$416 | \$491 | \$491 | \$515 | \$439 | | | |
| Average Cost | \$13,955 | \$16,714 | \$16,333 | \$17,382 | \$15,374 | \$17,264 | \$19,663 | \$21,522 | \$18,581 | \$0 | \$0 | \$0 |

**FM -1 Average Cost Per Patient Served
All State Hospitals**

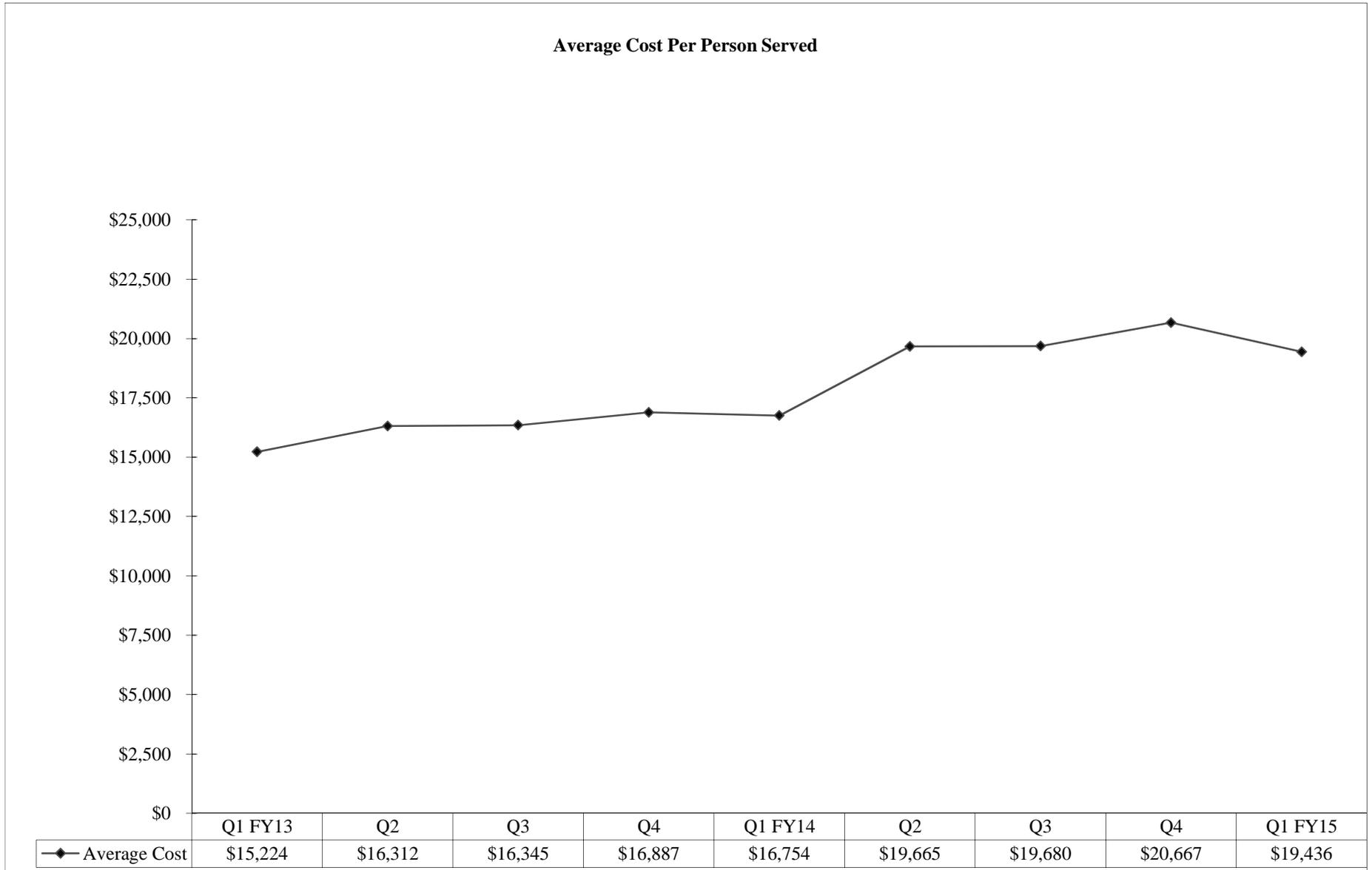
| | FY13 | | | | FY14 | | | | FY15 | | | |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|----------|-----------|-----|-----|-----|
| | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 |
| Terrell State Hospital | | | | | | | | | | | | |
| Avg. Patient Days | 31 | 29 | 28 | 31 | 29 | 30 | 31 | 30 | 31 | | | |
| LBB Cost/Bed Day | \$391 | \$423 | \$405 | \$442 | \$459 | \$537 | \$499 | \$550 | \$499 | | | |
| Average Cost | \$12,082 | \$12,201 | \$11,541 | \$13,608 | \$13,340 | \$15,870 | \$15,639 | \$16,278 | \$15,478 | \$0 | \$0 | \$0 |
| Waco Center for Youth | | | | | | | | | | | | |
| Avg. Patient Days | 66 | 54 | 65 | 58 | 57 | 65 | 56 | 52 | 62 | | | |
| LBB Cost/Bed Day | \$352 | \$435 | \$375 | \$424 | \$352 | \$421 | \$399 | \$439 | \$358 | | | |
| Average Cost | \$23,339 | \$23,615 | \$24,299 | \$24,461 | \$19,957 | \$27,295 | \$22,287 | \$23,002 | \$22,102 | \$0 | \$0 | \$0 |
| Rio Grande State Center (MH) | | | | | | | | | | | | |
| Avg. Patient Days | 14 | 17 | 17 | 17 | 19 | 29 | 23 | 23 | 22 | | | |
| LBB Cost/Bed Day | \$645 | \$853 | \$816 | \$483 | \$499 | \$524 | \$528 | \$495 | \$481 | | | |
| Average Cost | \$9,304 | \$14,191 | \$13,989 | \$8,083 | \$9,402 | \$15,387 | \$12,038 | \$11,178 | \$10,521 | \$0 | \$0 | \$0 |
| All MH Hospitals | | | | | | | | | | | | |
| Avg. Patient Days | 37 | 38 | 39 | 40 | 42 | 42 | 44 | 43 | 45 | | | |
| LBB Cost/Bed Day | \$407 | \$427 | \$415 | \$422 | \$401 | \$465 | \$450 | \$476 | \$429 | | | |
| Average Cost | \$15,224 | \$16,312 | \$16,345 | \$16,887 | \$16,754 | \$19,665 | \$19,680 | \$20,667 | \$19,436 | \$0 | \$0 | \$0 |
| Texas Center for Infectious Disease | | | | | | | | | | | | |
| Avg. Patient Days | 209 | 146 | 189 | 141 | 223 | 158 | 192 | 147 | 196 | | | |
| LBB Cost/Bed Day | \$648 | \$741 | \$932 | \$812 | \$978 | \$850 | \$771 | \$663 | \$666 | | | |
| Average Cost | \$135,503 | \$108,119 | \$176,463 | \$114,510 | \$218,085 | \$134,340 | \$147,709 | \$97,448 | \$130,603 | \$0 | \$0 | \$0 |

LBB Cost - total facility expense minus benefits

**FM -1 Average Cost Per Patient Served
All State MH Hospitals**

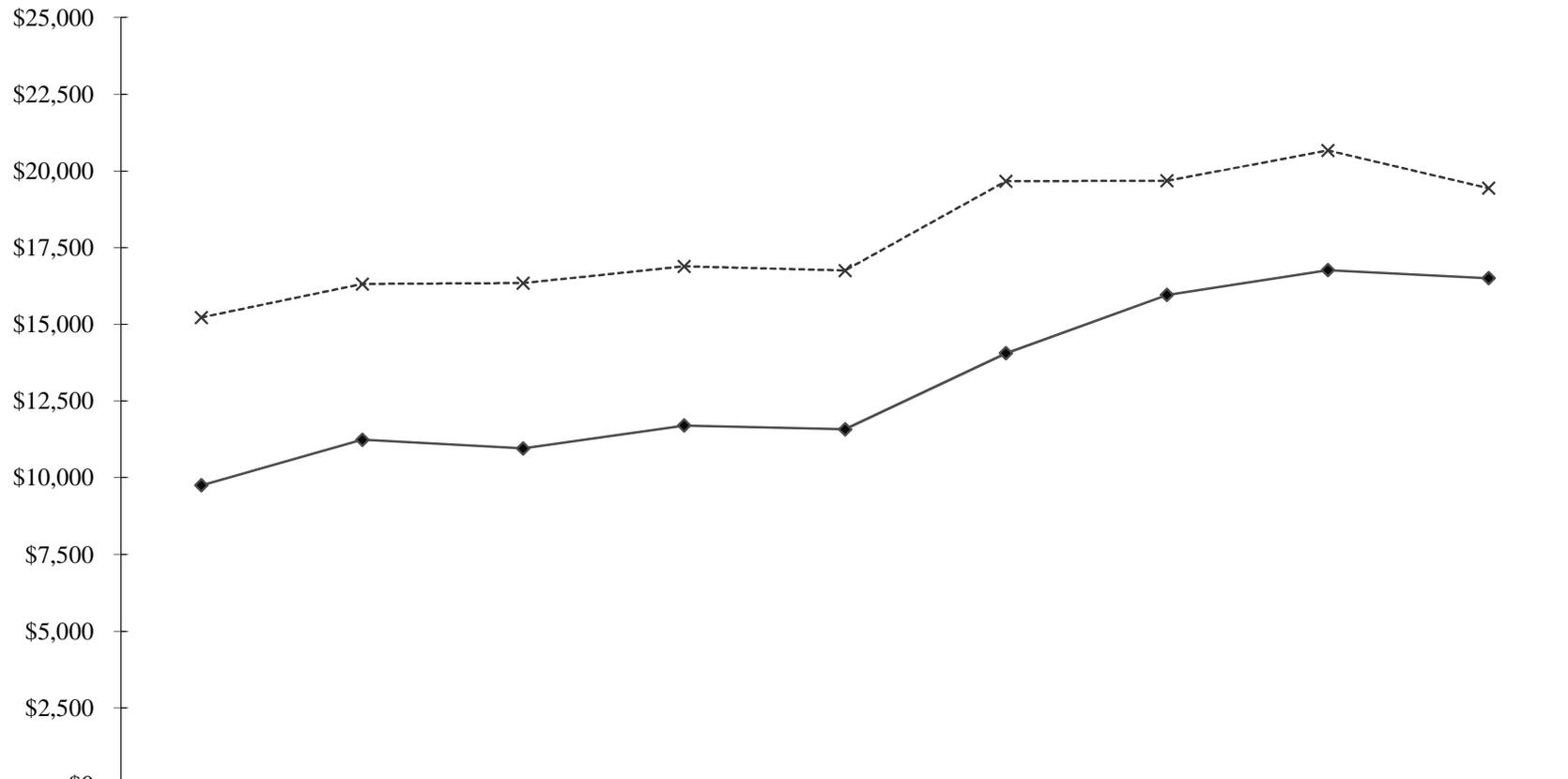


**FM -1 Average Cost Per Patient Served
All State MH Hospitals**



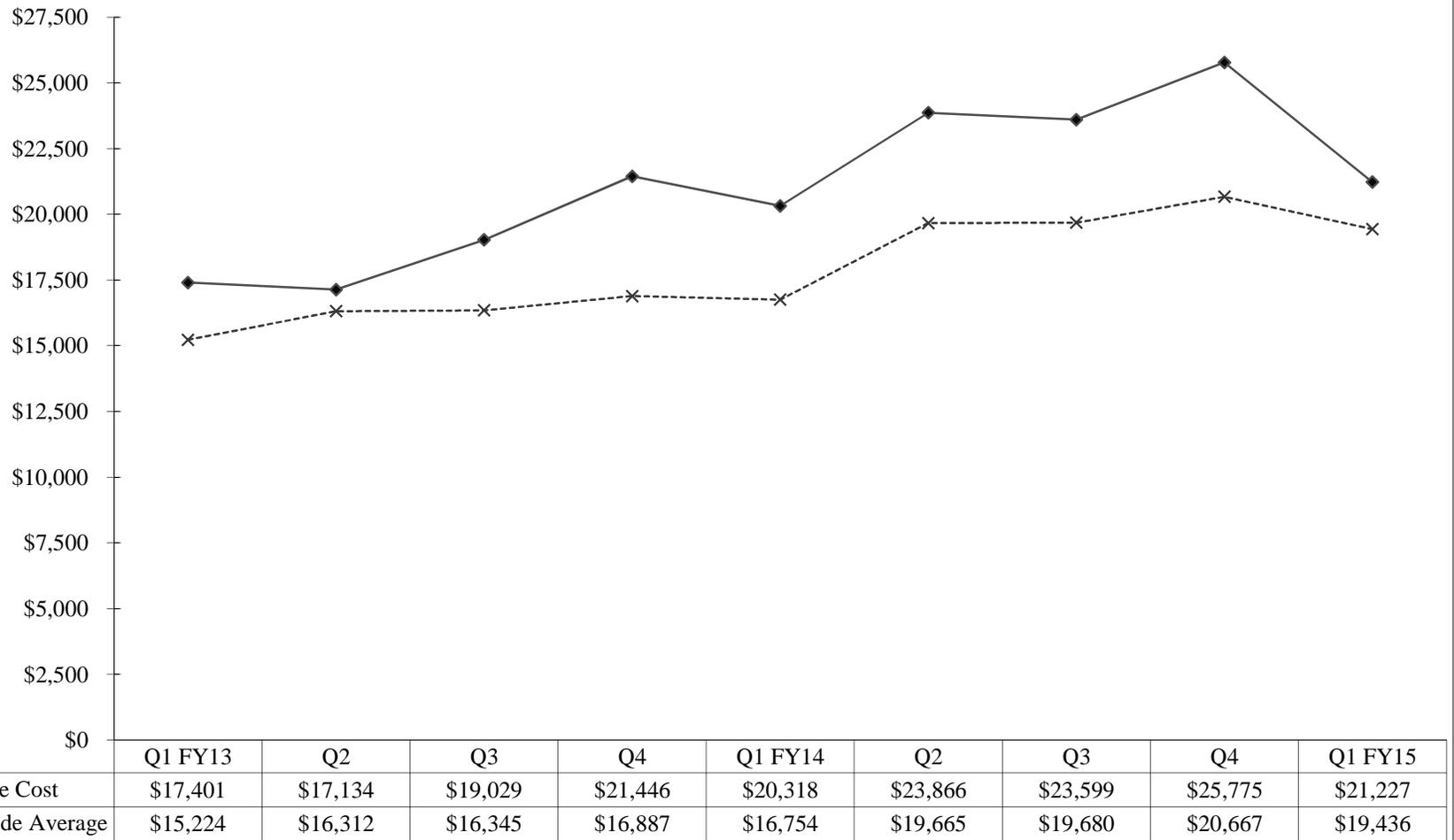
**FM -1 Average Cost Per Patient Served
Austin State Hospital**

Average Cost Per Person Served



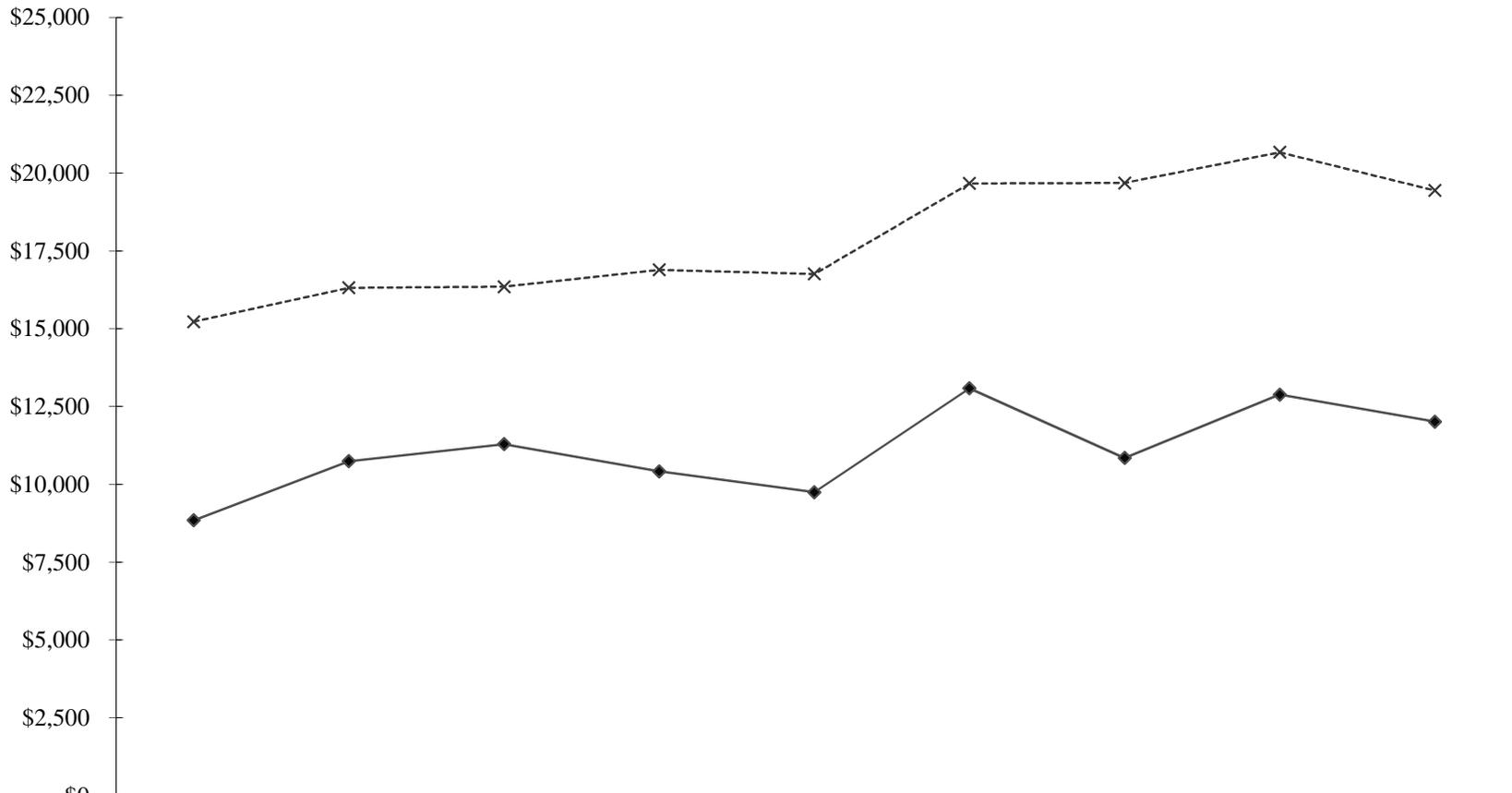
**FM -1 Average Cost Per Patient Served
Big Spring State Hospital**

Average Cost Per Person Served



**FM -1 Average Cost Per Patient Served
El Paso Psychiatric Center**

Average Cost Per Person Served



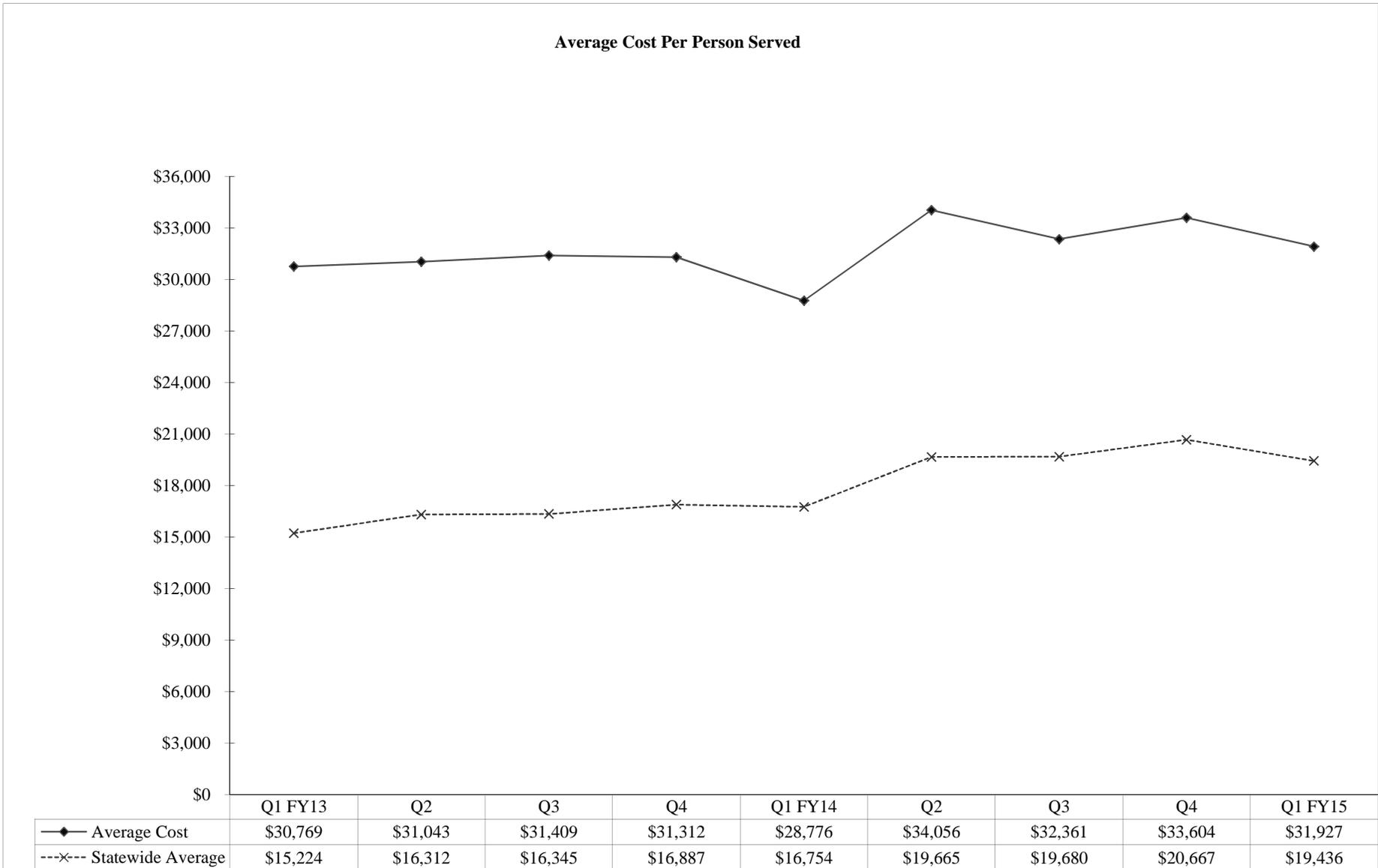
—◆— Average Cost

--×-- Statewide Average

| | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| —◆— Average Cost | \$8,841 | \$10,743 | \$11,287 | \$10,417 | \$9,745 | \$13,085 | \$10,846 | \$12,881 | \$12,009 |
| --×-- Statewide Average | \$15,224 | \$16,312 | \$16,345 | \$16,887 | \$16,754 | \$19,665 | \$19,680 | \$20,667 | \$19,436 |

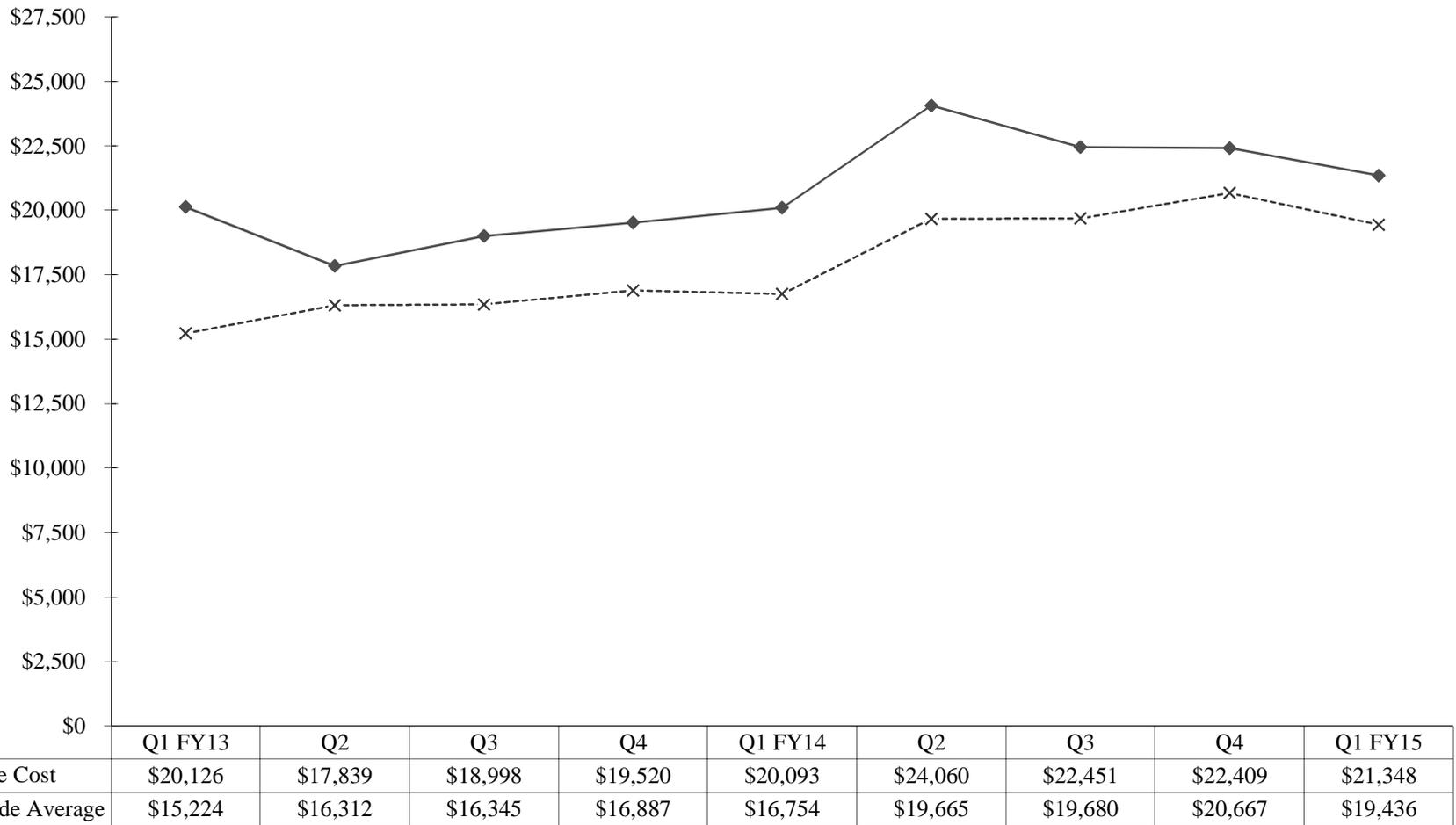
Source: CARE Report HC022330,
Financial Statistical Report-Fiscal Services;
DSHS Budgeting Forecasting Dept.

**FM -1 Average Cost Per Patient Served
Kerrville State Hospital**

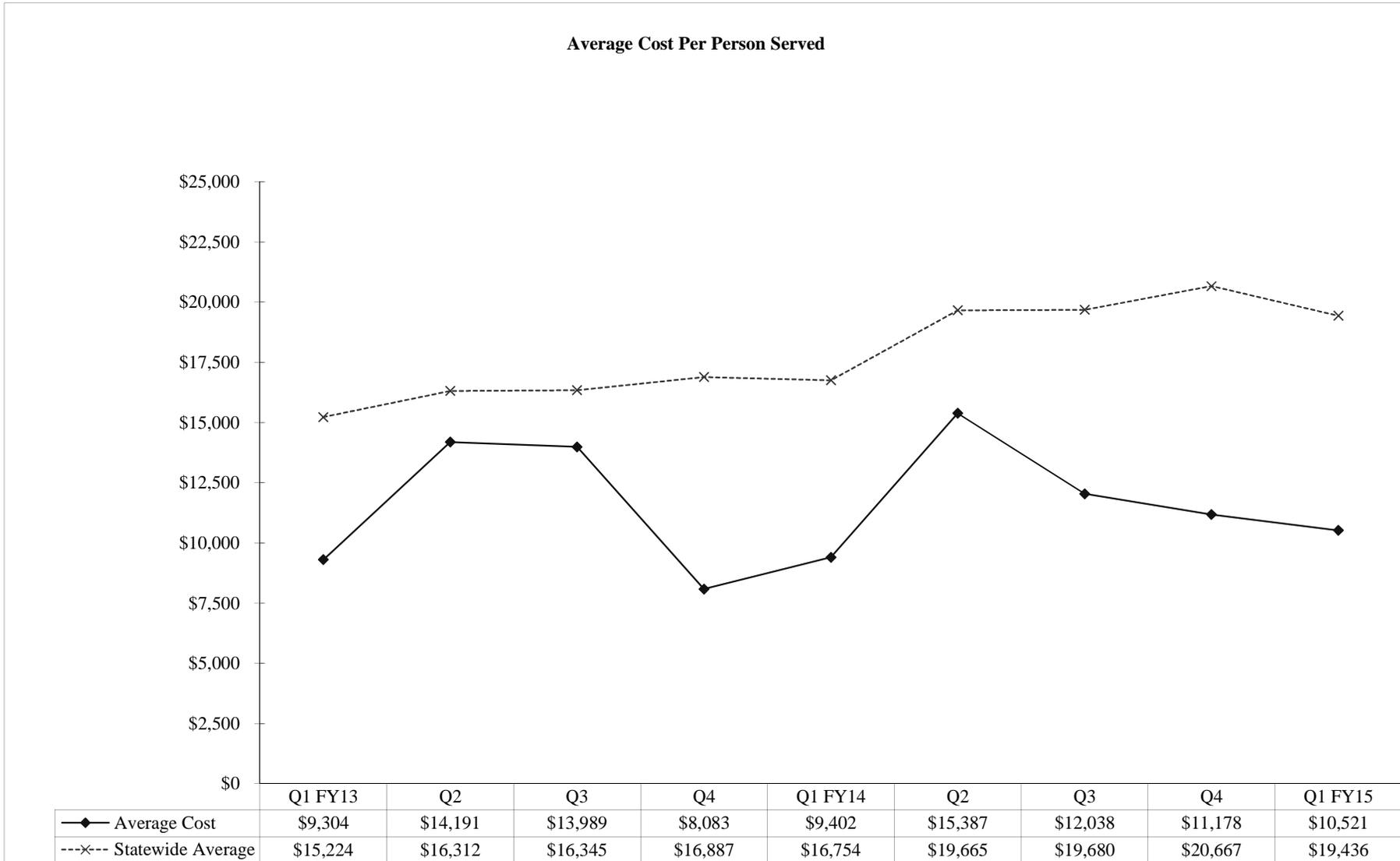


**FM -1 Average Cost Per Patient Served
North Texas State Hospital**

Average Cost Per Person Served

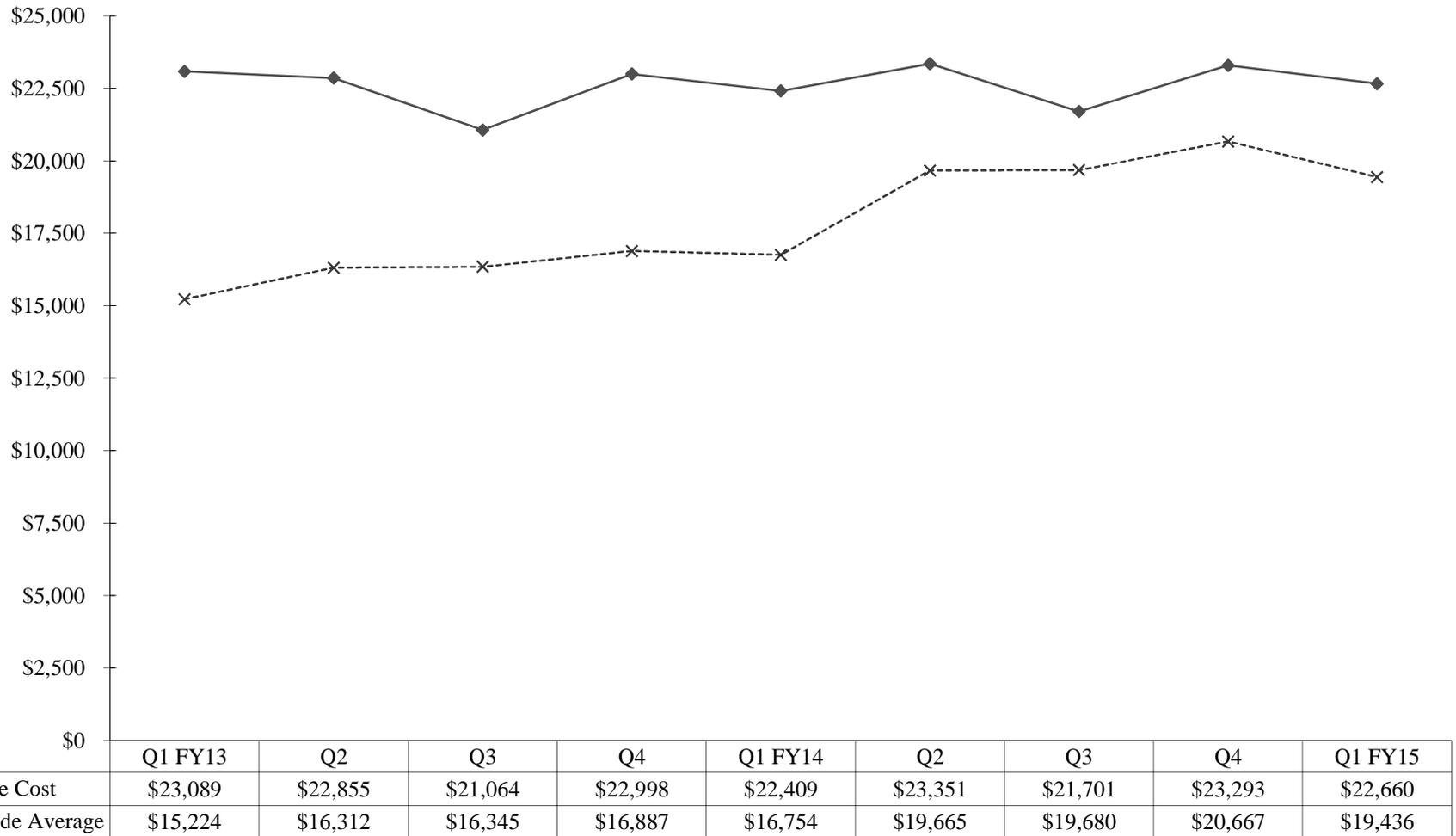


**FM -1 Average Cost Per Patient Served
Rio Grande State Center (MH only)**



**FM -1 Average Cost Per Patient Served
Rusk State Hospital**

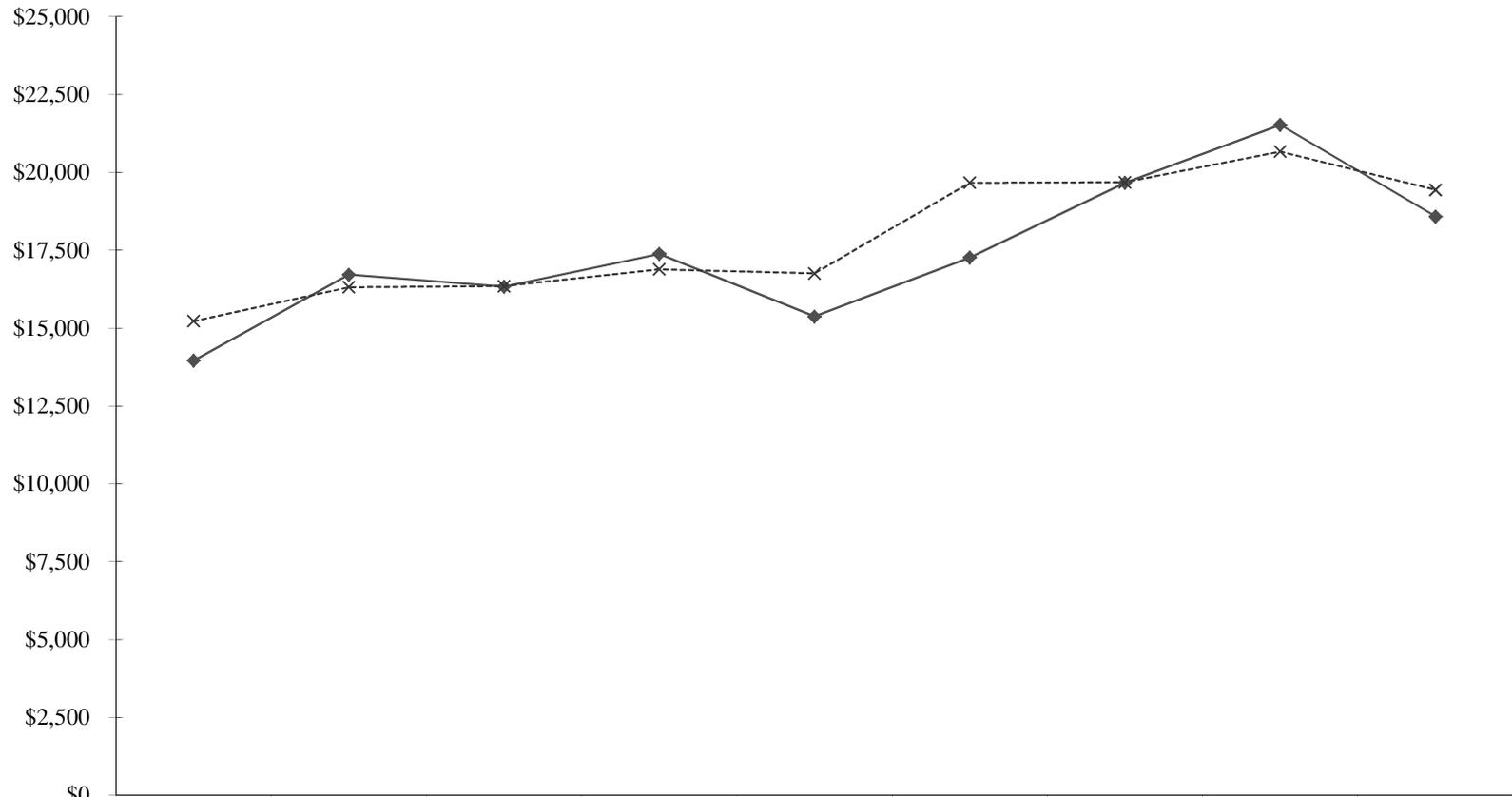
Average Cost Per Person Served



Source: CARE Report HC022330,
Financial Statistical Report-Fiscal Services;
DSHS Budgeting Forecasting Dept.

**FM -1 Average Cost Per Patient Served
San Antonio State Hospital**

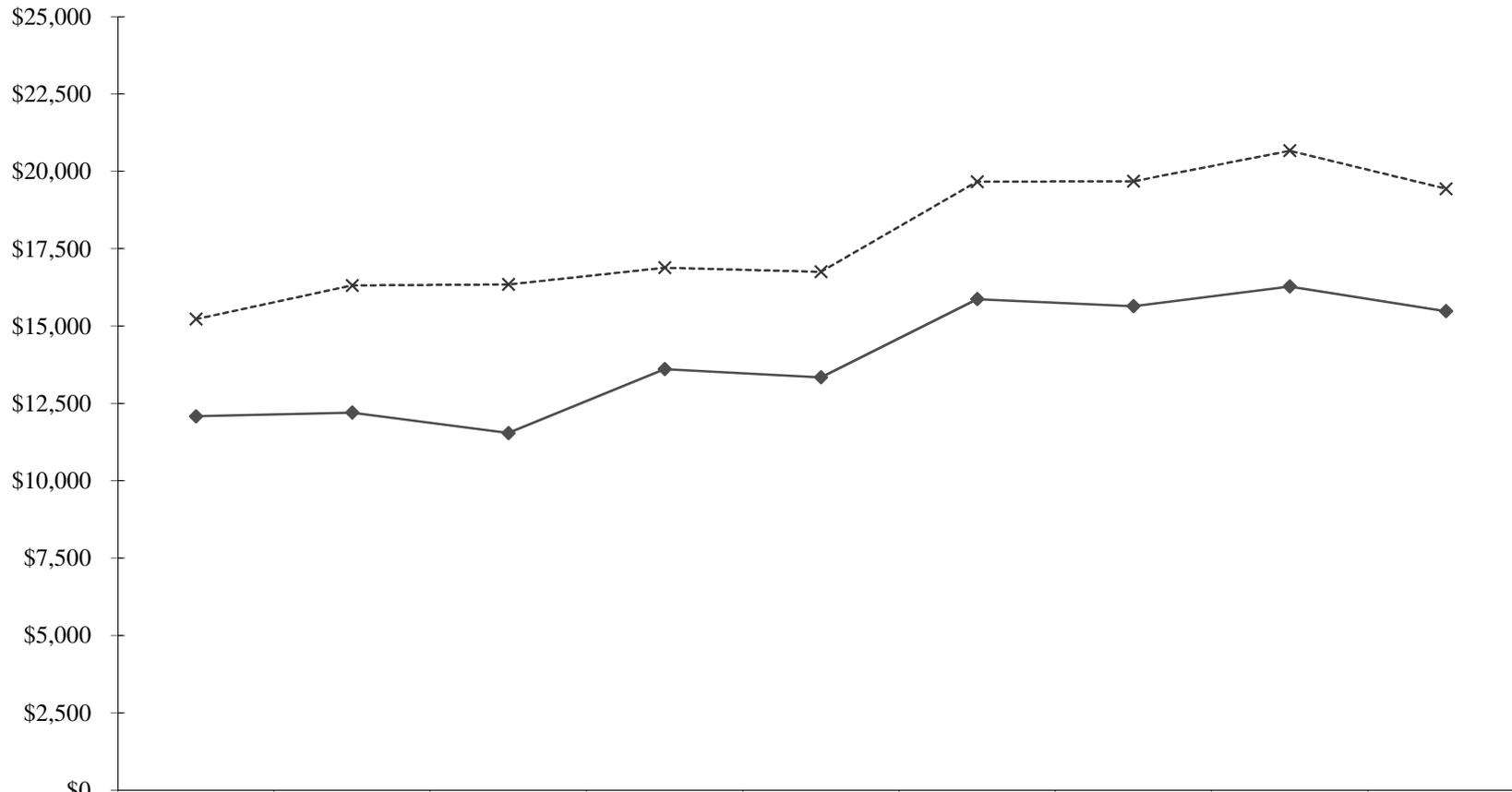
Average Cost Per Person Served



Source: CARE Report HC022330,
Financial Statistical Report-Fiscal Services;
DSHS Budgeting Forecasting Dept.

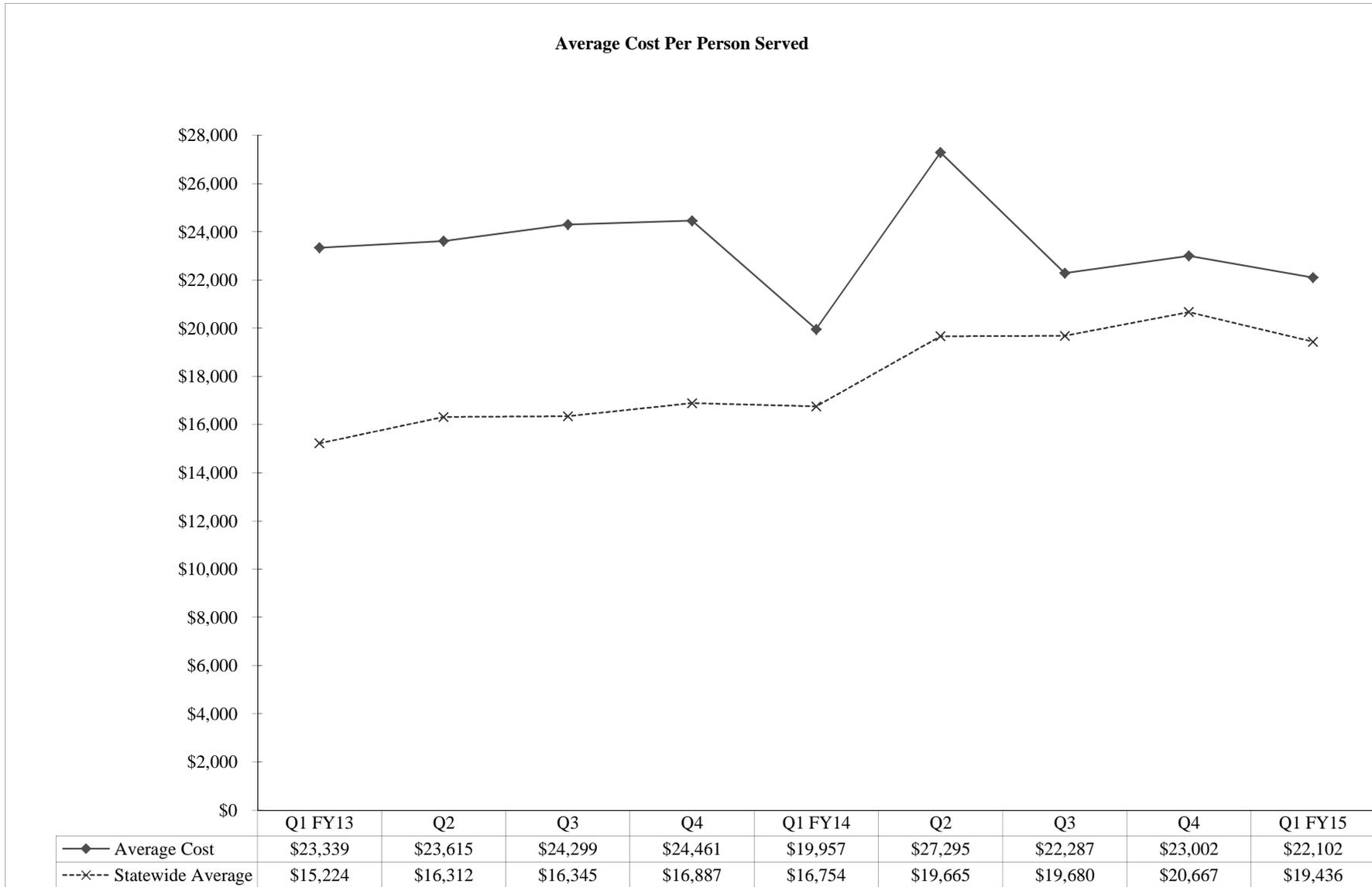
**FM -1 Average Cost Per Patient Served
Terrell State Hospital**

Average Cost Per Person Served



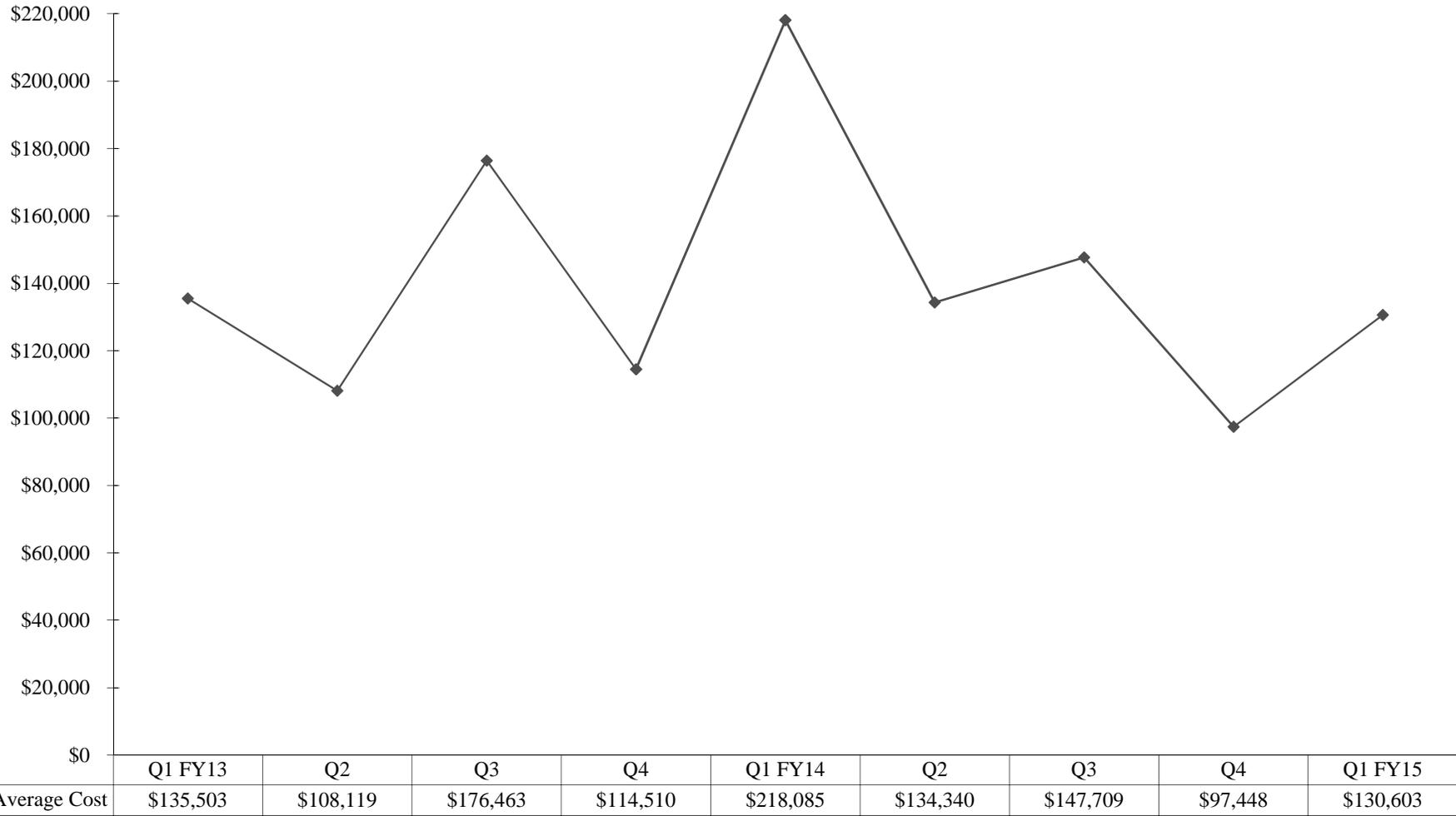
Source: CARE Report HC022330,
Financial Statistical Report-Fiscal Services;
DSHS Budgeting Forecasting Dept.

**FM -1 Average Cost Per Patient Served
Waco Center for Youth**



**FM -1 Average Cost Per Patient Served
Texas Center for Infectious Disease**

Average Cost Per Person Served



Source: CARE Report HC022330,
Financial Statistical Report-Fiscal Services;
DSHS Budgeting Forecasting Dept.

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Financial Measure

FM-2

Measure: Medicaid Value of Service Charted on GR Patients

Timeframe: Quarterly

Definition

Cost of state hospital services rendered to indigent persons/GR allocation per month.

Data Source

Charge Report from Hospital's Internal Billing System [Avatar PM] (for persons identified as not having a payor source other than GR).

Date Display and Chart Description

Table displays quarterly data points for charges in a given month

Purpose

Measure uncompensated cost for GR allocated persons.

**FM - 2 Medicaid Value of Service Charted on GR Patients
All MH Hospitals**

FY15Q1 Indigent Served

| Fac # | Count of Patients | GR |
|--------------|--------------------------|---------------|
| ASH | 367 | \$ 7,100,535 |
| BSH | 172 | \$ 5,087,025 |
| EPPC | 148 | \$ 2,667,148 |
| KSH | 122 | \$ 5,747,887 |
| NTSH | 503 | \$ 15,313,320 |
| RGSC | 204 | \$ 2,644,182 |
| RSH | 267 | \$ 10,034,355 |
| SASH | 270 | \$ 7,533,246 |
| Total | 2,053 | \$ 56,127,698 |
| TSH | 498 | \$ 7,107,108 |
| WCFY | 46 | \$ 1,721,872 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Financial Measure

FM-3

Measure: Revenue Versus Budget

Timeframe: Quarterly

Definition

The state hospital collections for Medicaid, Medicare, Private Sources, and Others – Stimulus Payments per month.

Data Source

Collections are reported from the hospitals' internal billing system and reported utilizing the HHSC DADS/ DSHS CRS Avatar PM.

Date Display and Chart Description

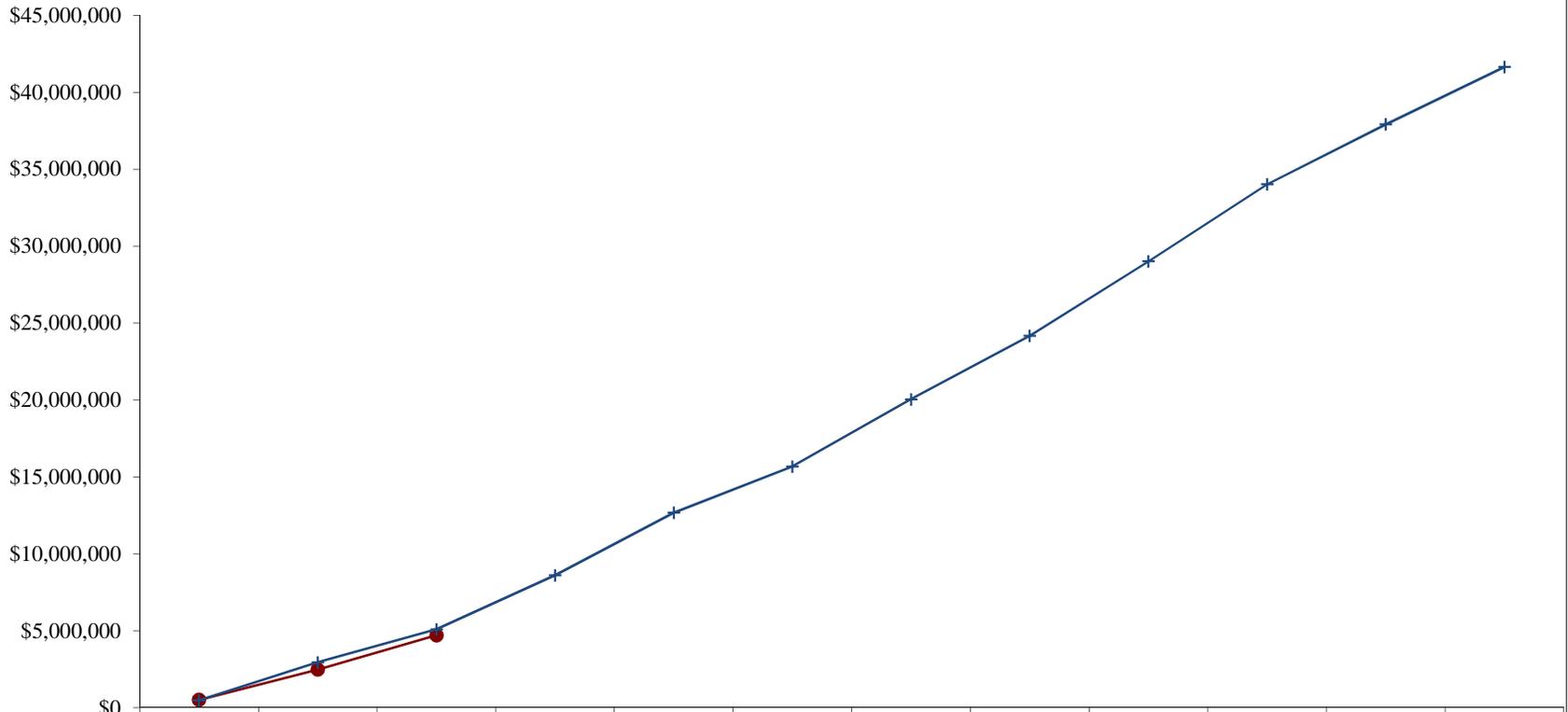
Chart with monthly data points of revenue collection for current and previous fiscal year for individual state hospitals and system-wide. Chart also shows revenue for previous year collected in current year.

Purpose

Monitoring the revenue collections.

FM - 3 Revenue Collection
All MH Facilities

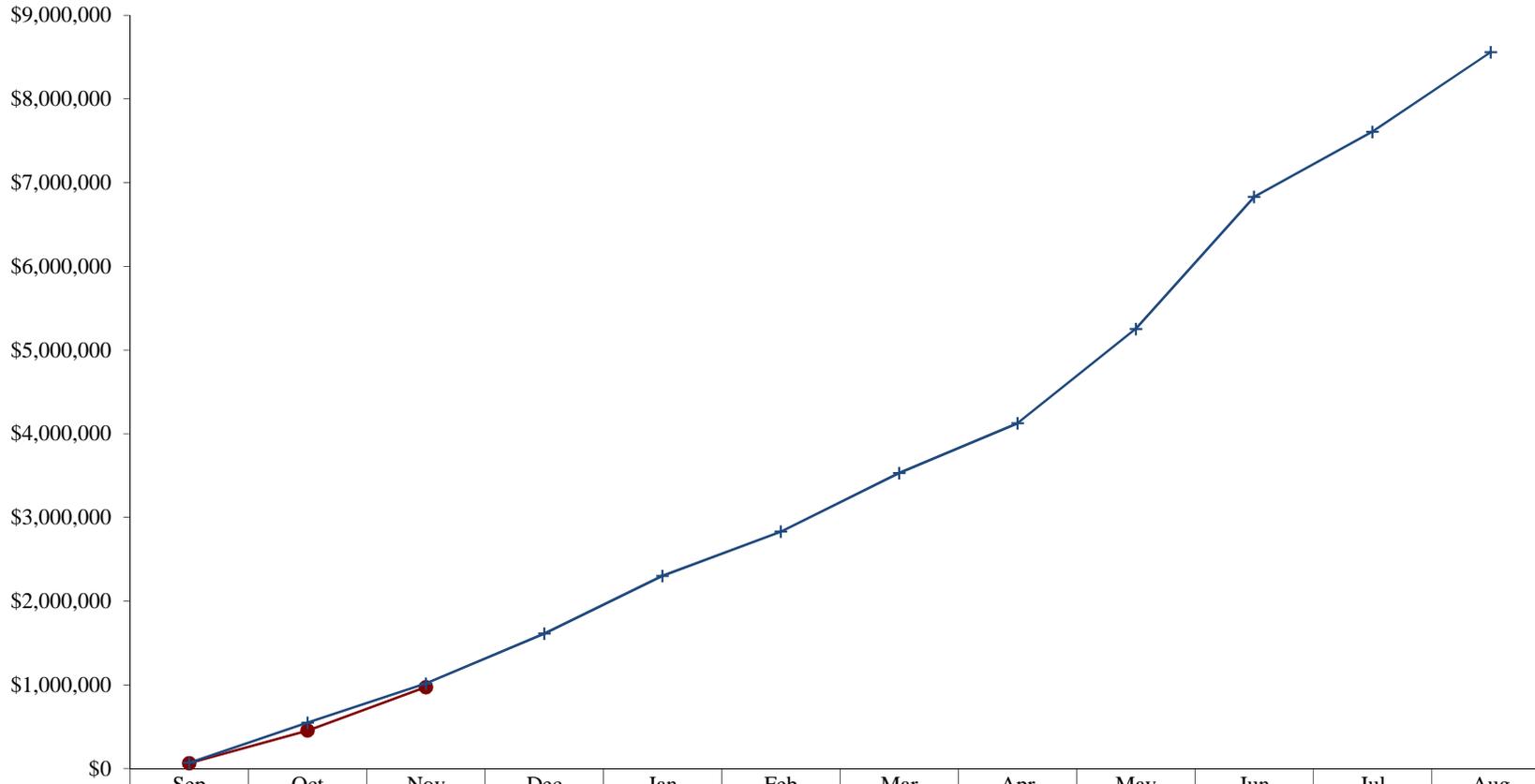
Revenue Collection



| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|----------------------------|-------------|-------------|-------------|-------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| Total | \$506,867 | \$1,976,651 | \$2,226,409 | | | | | | | | | |
| Medicaid | \$4,165 | \$810,612 | \$720,885 | | | | | | | | | |
| Medicare | \$501,513 | \$1,023,033 | \$1,245,256 | | | | | | | | | |
| Private Source | \$1,189 | \$143,006 | \$259,979 | | | | | | | | | |
| Others - Stimulus Payments | \$0 | \$0 | \$288 | | | | | | | | | |
| ● FY15TD Total | \$506,867 | \$2,483,518 | \$4,709,927 | | | | | | | | | |
| + FY14 Total Collections | \$483,265 | \$2,958,257 | \$5,101,842 | \$8,613,132 | \$12,682,559 | \$15,684,569 | \$20,050,651 | \$24,166,278 | \$29,018,369 | \$34,014,768 | \$37,920,881 | \$41,646,356 |
| FY14 Collections in FY15 | \$3,158,845 | \$2,498,444 | \$720,609 | | | | | | | | | |

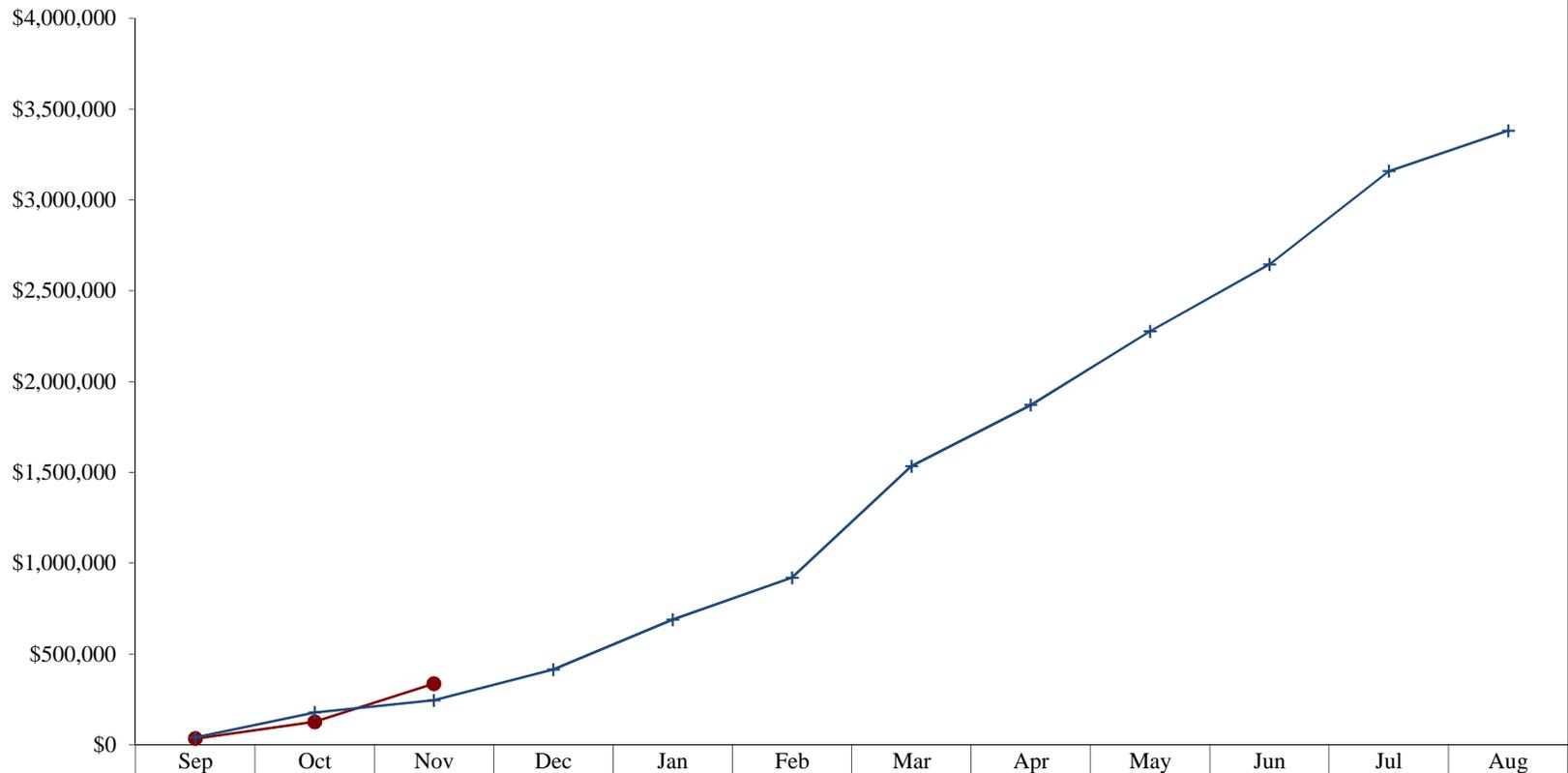
FM - 3 Revenue Collection
Austin State Hospital

Revenue Collection



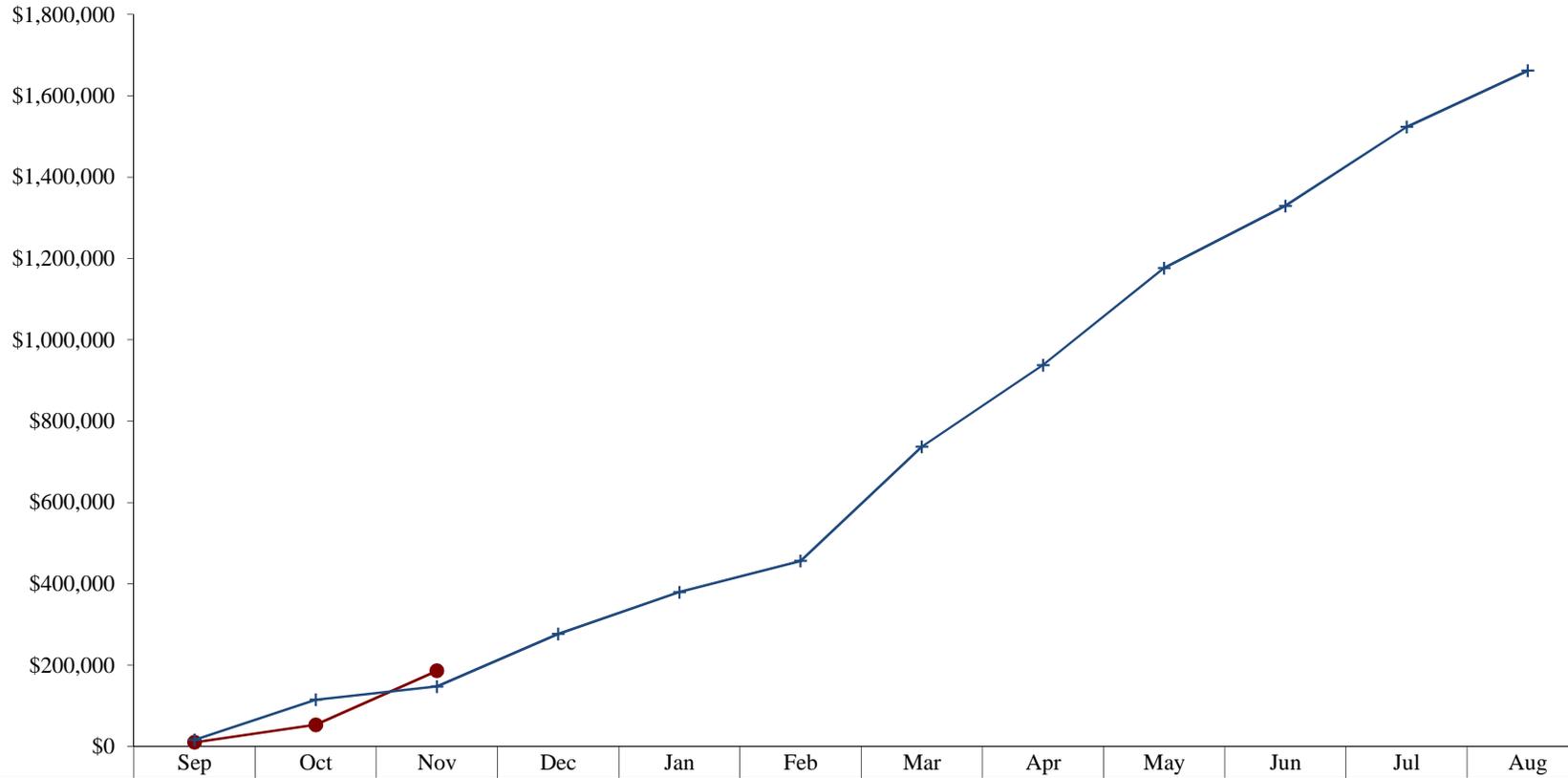
FM - 3 Revenue Collection
Big Spring State Hospital

Revenue Collection



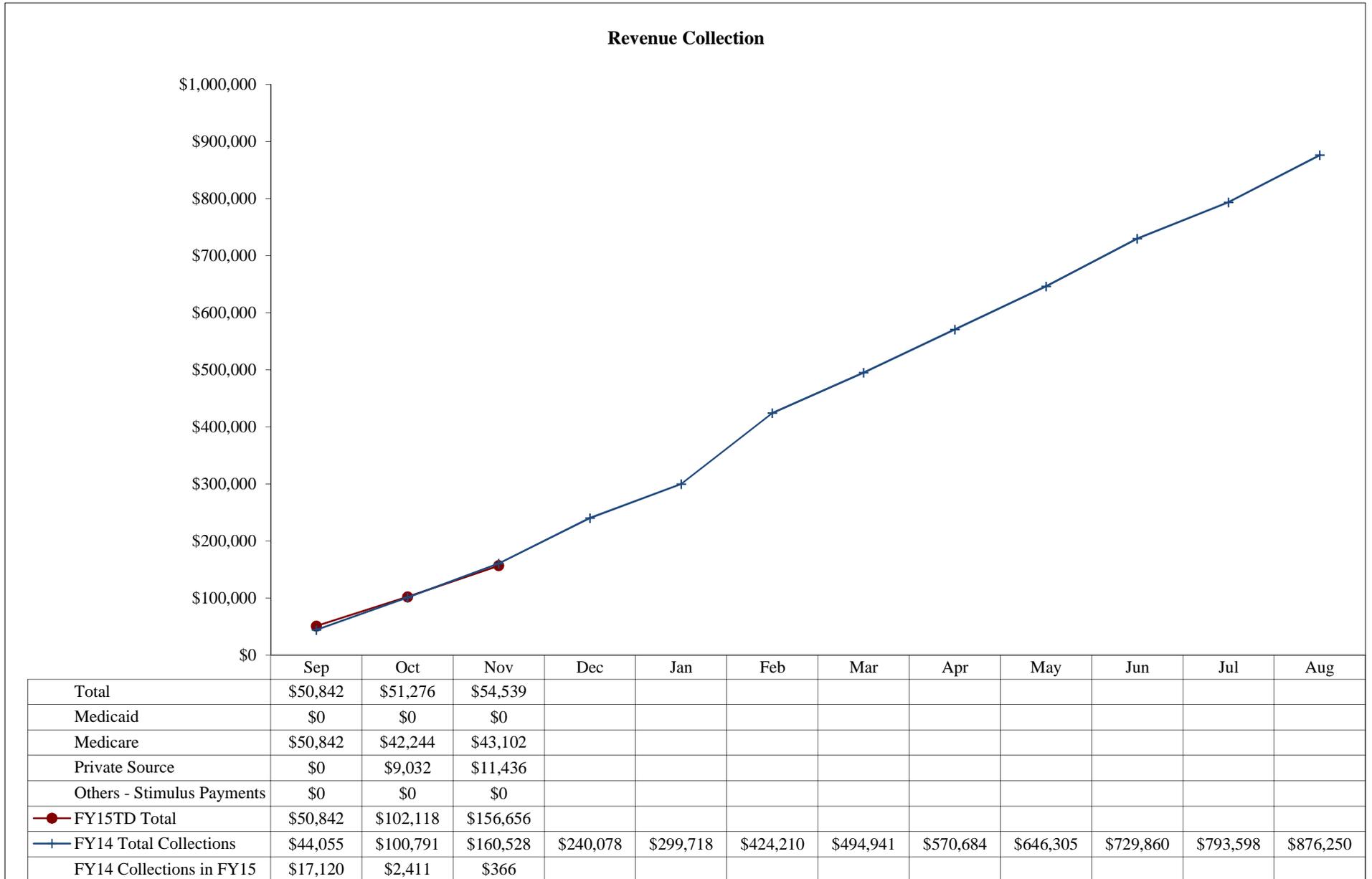
FM - 3 Revenue Collection
El Paso Psychiatric Center

Revenue Collection

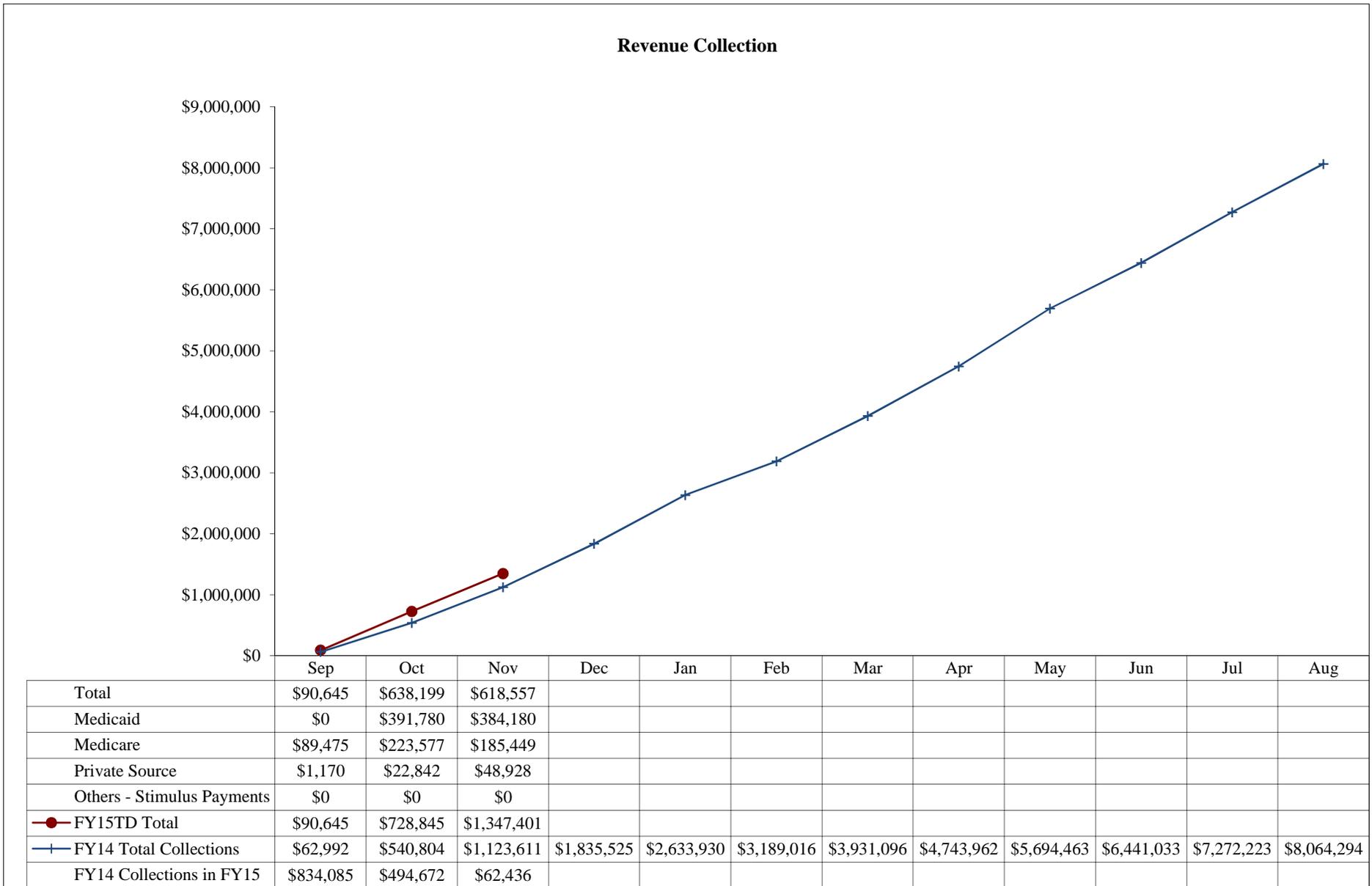


| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|----------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-------------|-------------|-------------|-------------|
| Total | \$10,367 | \$42,758 | \$133,013 | | | | | | | | | |
| Medicaid | \$2,668 | \$20,090 | \$45,222 | | | | | | | | | |
| Medicare | \$7,699 | \$19,700 | \$74,230 | | | | | | | | | |
| Private Source | \$0 | \$2,968 | \$13,562 | | | | | | | | | |
| Others - Stimulus Payments | \$0 | \$0 | \$0 | | | | | | | | | |
| ● FY15TD Total | \$10,367 | \$53,124 | \$186,138 | | | | | | | | | |
| + FY14 Total Collections | \$16,345 | \$115,003 | \$147,589 | \$276,590 | \$379,402 | \$456,141 | \$736,940 | \$937,864 | \$1,176,543 | \$1,329,136 | \$1,523,504 | \$1,662,092 |
| FY14 Collections in FY15 | \$134,667 | \$114,122 | \$114,243 | | | | | | | | | |

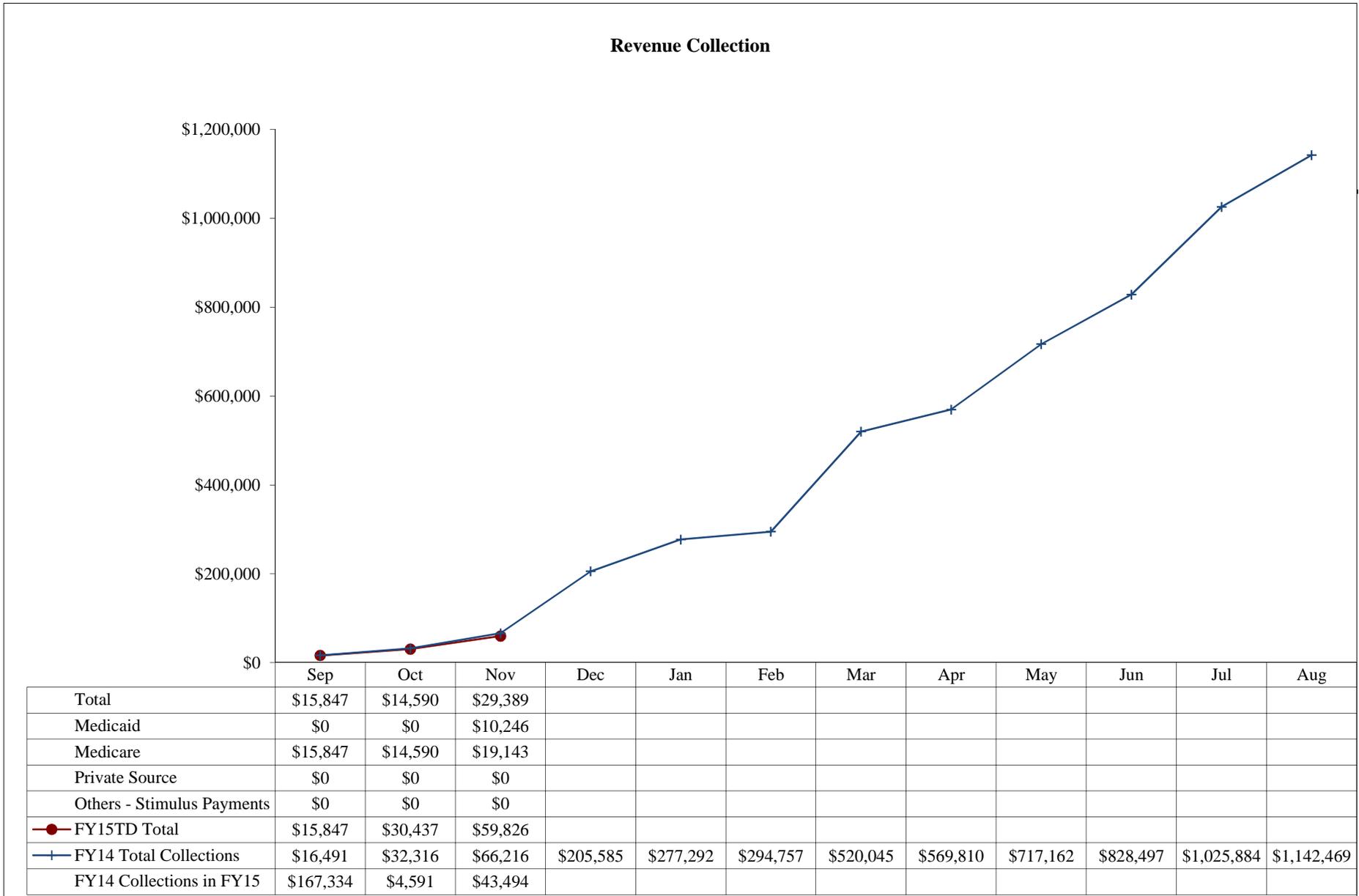
FM - 3 Revenue Collection
Kerrville State Hospital



FM - 3 Revenue Collection
North Texas State Hospital

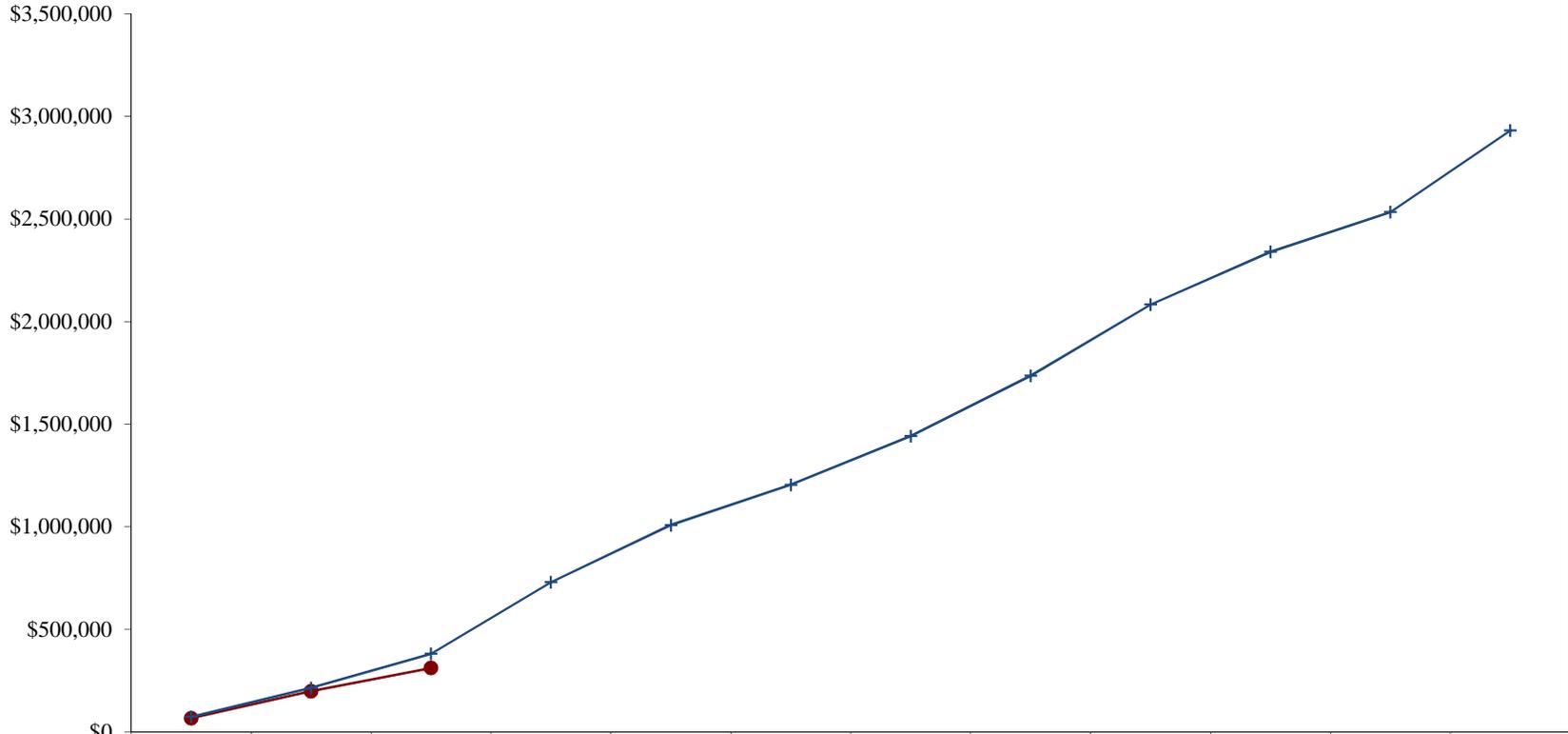


FM - 3 Revenue Collection
Rio Grande State Center



FM - 3 Revenue Collection
Rusk State Hospital

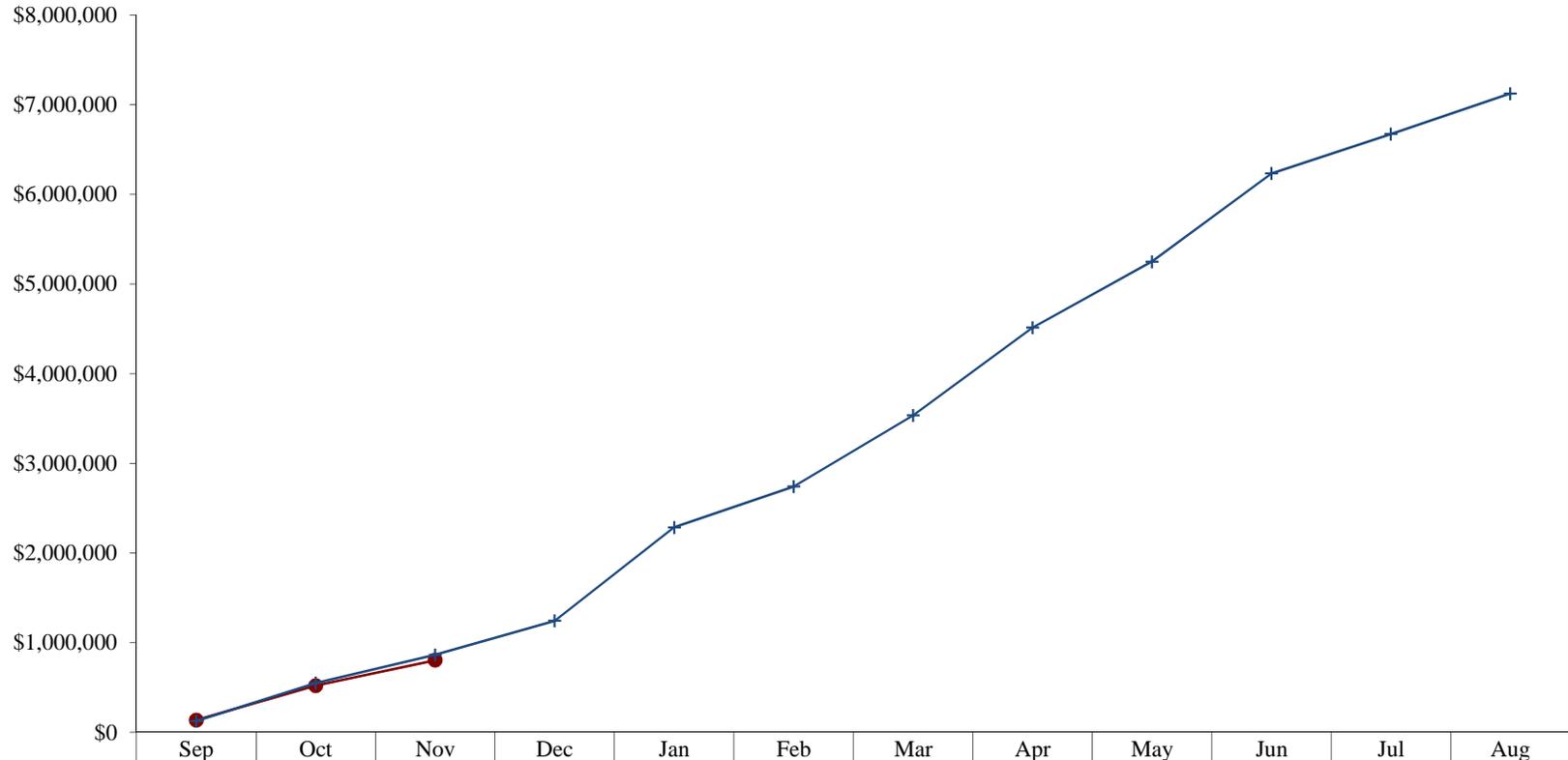
Revenue Collection



| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|----------------------------|-----------|-----------|-----------|-----------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Total | \$66,957 | \$130,876 | \$113,120 | | | | | | | | | |
| Medicaid | \$0 | \$35,287 | \$0 | | | | | | | | | |
| Medicare | \$66,957 | \$67,527 | \$59,117 | | | | | | | | | |
| Private Source | \$0 | \$28,063 | \$54,003 | | | | | | | | | |
| Others - Stimulus Payments | \$0 | \$0 | \$0 | | | | | | | | | |
| ● FY15TD Total | \$66,957 | \$197,834 | \$310,953 | | | | | | | | | |
| + FY14 Total Collections | \$73,313 | \$214,171 | \$380,678 | \$729,573 | \$1,007,730 | \$1,204,859 | \$1,441,991 | \$1,735,669 | \$2,082,918 | \$2,340,239 | \$2,533,667 | \$2,931,209 |
| FY14 Collections in FY15 | \$276,000 | \$108,450 | \$743 | | | | | | | | | |

FM - 3 Revenue Collection
San Antonio State Hospital

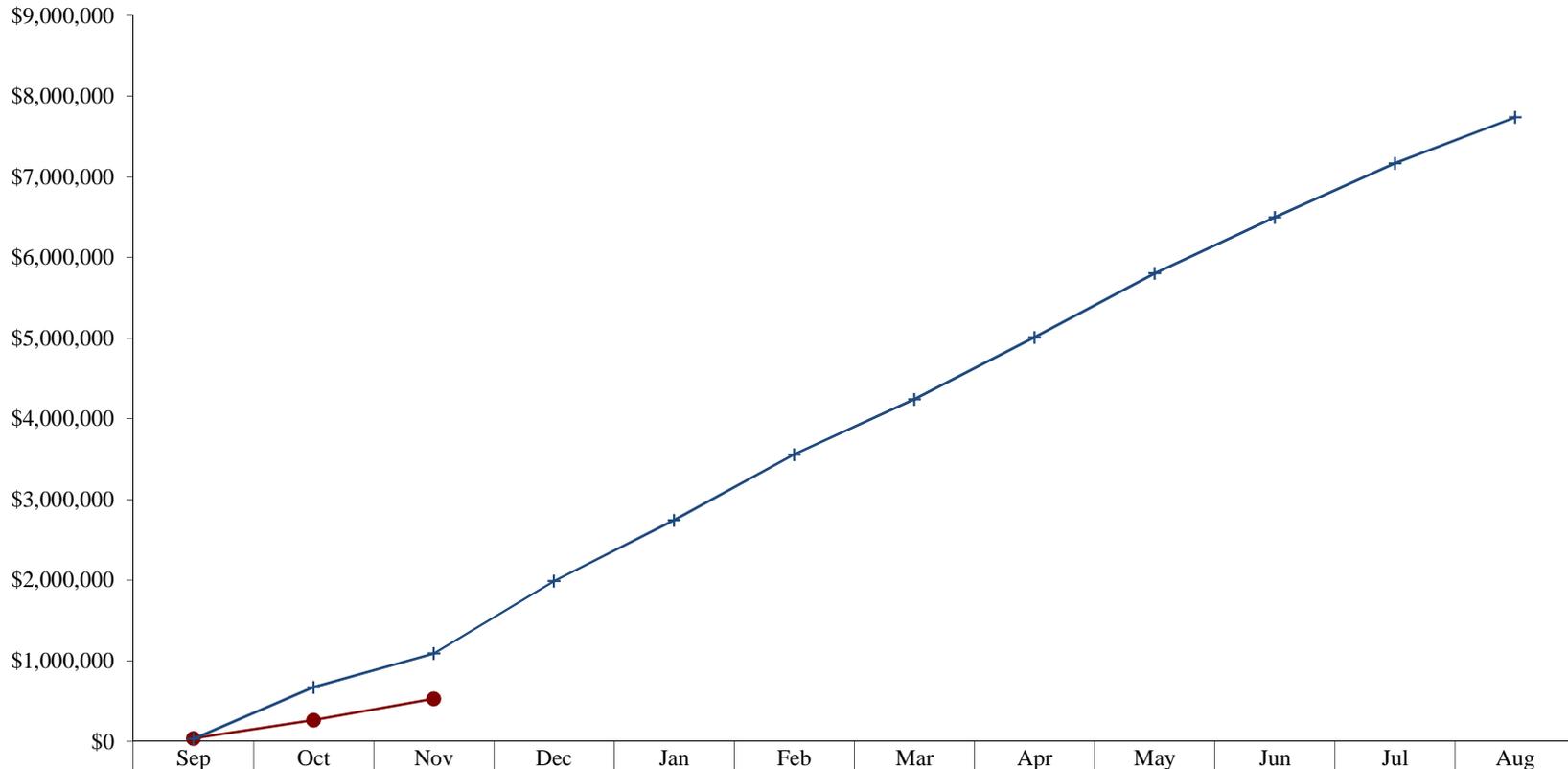
Revenue Collection



| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|----------------------------|-----------|-----------|-----------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Total | \$137,060 | \$385,920 | \$282,905 | | | | | | | | | |
| Medicaid | \$0 | \$96,389 | \$83,293 | | | | | | | | | |
| Medicare | \$137,060 | \$239,695 | \$147,414 | | | | | | | | | |
| Private Source | \$0 | \$49,836 | \$52,198 | | | | | | | | | |
| Others - Stimulus Payments | \$0 | \$0 | \$0 | | | | | | | | | |
| ● FY15TD Total | \$137,060 | \$522,980 | \$805,885 | | | | | | | | | |
| + FY14 Total Collections | \$127,654 | \$550,902 | \$866,082 | \$1,244,279 | \$2,286,656 | \$2,740,892 | \$3,534,975 | \$4,513,373 | \$5,248,781 | \$6,233,957 | \$6,673,128 | \$7,124,761 |
| FY14 Collections in FY15 | \$568,281 | \$990,727 | \$205,885 | | | | | | | | | |

FM - 3 Revenue Collection
Terrell State Hospital

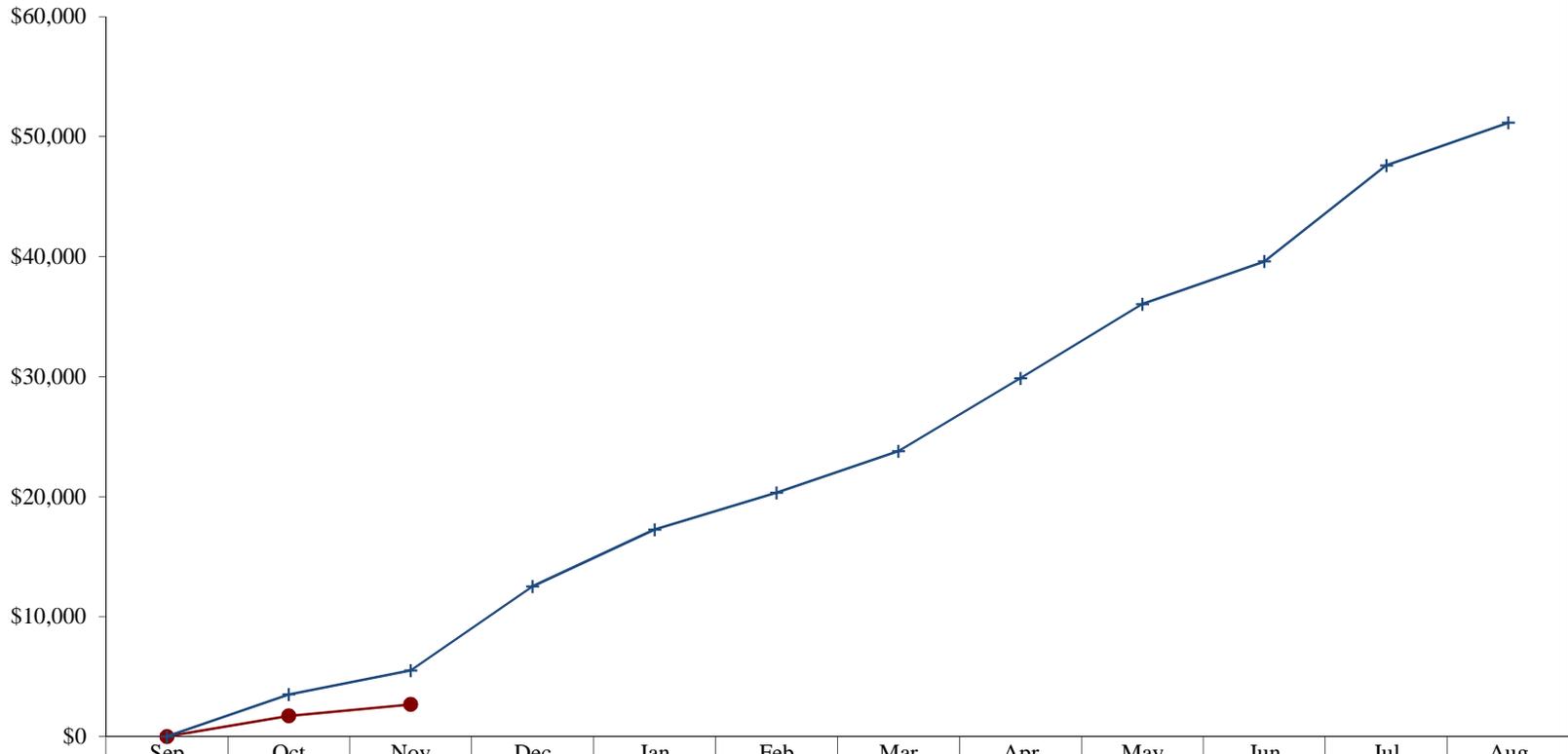
Revenue Collection



| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|----------------------------|-----------|-----------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Total | \$37,603 | \$228,330 | \$264,895 | | | | | | | | | |
| Medicaid | \$0 | \$129,178 | \$61,615 | | | | | | | | | |
| Medicare | \$37,603 | \$91,023 | \$165,395 | | | | | | | | | |
| Private Source | \$0 | \$8,129 | \$37,784 | | | | | | | | | |
| Others - Stimulus Payments | \$0 | \$0 | \$100 | | | | | | | | | |
| ● FY15TD Total | \$37,603 | \$265,933 | \$530,828 | | | | | | | | | |
| + FY14 Total Collections | \$32,765 | \$674,208 | \$1,091,378 | \$1,989,600 | \$2,744,236 | \$3,557,958 | \$4,242,527 | \$5,011,493 | \$5,803,169 | \$6,498,253 | \$7,167,789 | \$7,736,180 |
| FY14 Collections in FY15 | \$342,309 | \$271,545 | \$124,164 | | | | | | | | | |

FM - 3 Revenue Collection
Waco Center For Youth

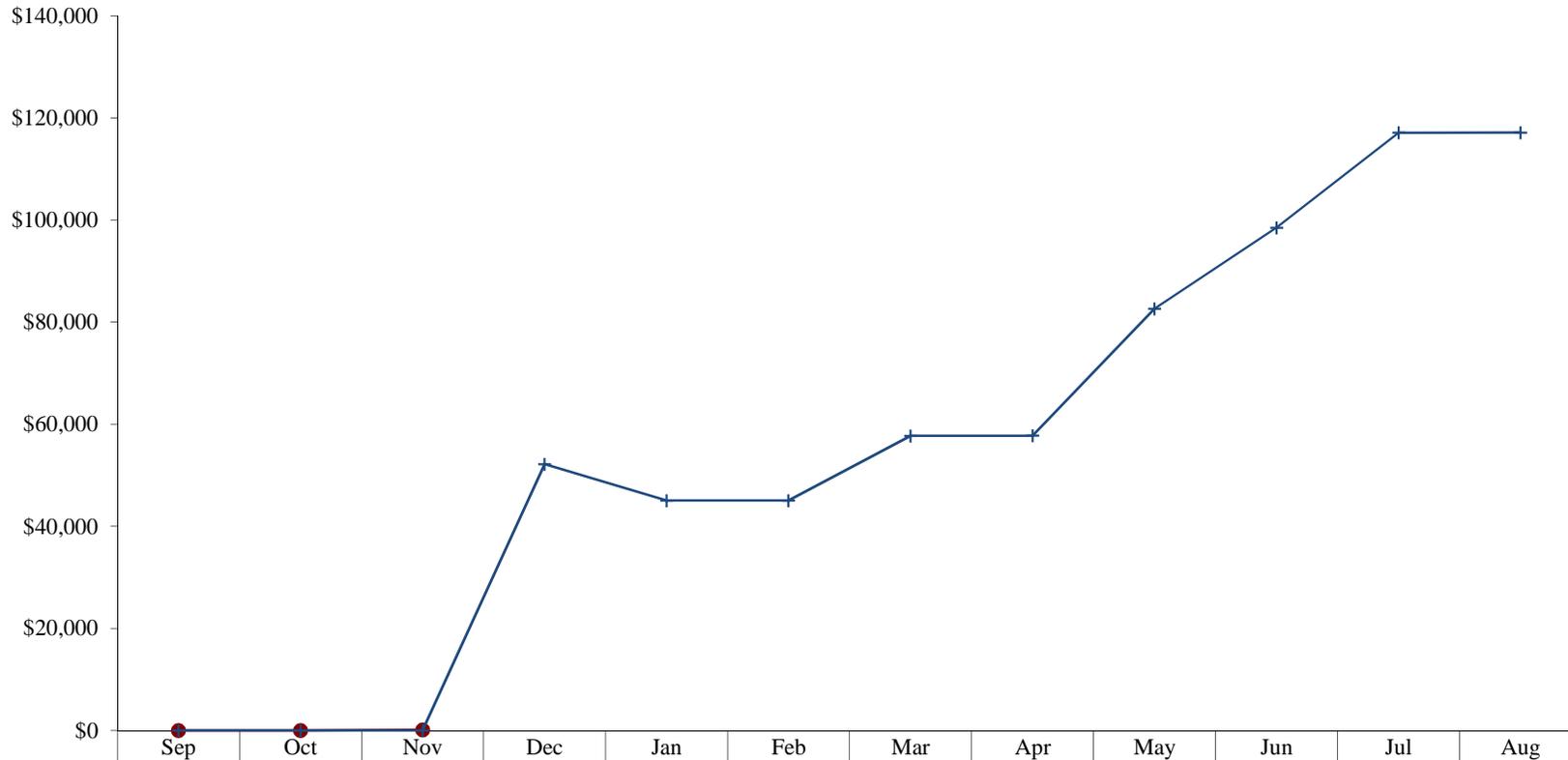
Revenue Collection



| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|----------------------------|---------|---------|---------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Total | \$5 | \$1,722 | \$951 | | | | | | | | | |
| Medicaid | \$0 | \$0 | \$0 | | | | | | | | | |
| Medicare | \$0 | \$0 | \$0 | | | | | | | | | |
| Private Source | \$5 | \$1,722 | \$951 | | | | | | | | | |
| Others - Stimulus Payments | \$0 | \$0 | \$0 | | | | | | | | | |
| FY15TD Total | \$5 | \$1,727 | \$2,678 | | | | | | | | | |
| FY14 Total Collections | \$0 | \$3,509 | \$5,512 | \$12,514 | \$17,249 | \$20,321 | \$23,787 | \$29,868 | \$36,041 | \$39,594 | \$47,594 | \$51,153 |
| FY14 Collections in FY15 | \$3,646 | \$2,271 | \$68 | | | | | | | | | |

FM - 3 Revenue Collection
Texas Center for Infectious Disease

Revenue Collection



| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|----------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------|-----------|
| Total | \$0 | \$0 | \$124 | | | | | | | | | |
| Medicaid | \$0 | \$0 | \$0 | | | | | | | | | |
| Medicare | \$0 | \$0 | \$124 | | | | | | | | | |
| Private Source | \$0 | \$0 | \$0 | | | | | | | | | |
| Others - Stimulus Payments | \$0 | \$0 | \$0 | | | | | | | | | |
| FY15TD Total | \$0 | \$0 | \$124 | | | | | | | | | |
| FY14 Total Collections | \$0 | \$0 | \$0 | \$52,186 | \$45,079 | \$45,083 | \$57,741 | \$57,760 | \$82,657 | \$98,507 | \$117,111 | \$117,143 |
| FY14 Collections in FY15 | \$54,073 | \$41,919 | \$49,586 | | | | | | | | | |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Financial Measure

FM-4

Measure: Outside Medical Costs per 1,000 Bed Days

Timeframe: Quarterly and Annual-to-Date

Definition

State hospital outside medical costs represents the average cost of outside medical services and outside medical stays per 1,000 bed days. Average daily census is computed by dividing the number of bed days in the component by the number of days during the time period. Absences are not included.

Data Source

Finance Report – Dashboard by Facility

724810 HospOutsideMedicalSvs

724809 HospOutsideMedicalStay

CARE Reports HC022175 & HC022185 (Unduplicated Clients Days by Account Units)

Date Display and Chart Description

Table displays the quarterly cost for outside medical cost for individual state hospitals and system-wide.

Purpose

Measures the outside medical cost.

FM - 4 Outside Medical Cost
All State Hospitals

Outside Medical Cost

| Facility | FY2014 | | | | | FY2015 | | | | |
|---------------|--------------------|--------------------|--------------------|--------------------|--------------------|------------------|------------|------------|------------|------------------|
| | Q1 | Q2 | Q3 | Q4 | FY | Q1 | Q2 | Q3 | Q4 | FY |
| ASH | \$296,834 | \$825,493 | \$829,167 | \$520,944 | \$2,472,438 | \$77,747 | | | | \$77,747 |
| BSSH | \$91,865 | \$133,754 | \$198,941 | \$128,118 | \$552,678 | \$35,284 | | | | \$35,284 |
| EPPC | \$47,924 | \$73,791 | \$69,856 | \$76,929 | \$268,500 | \$32,242 | | | | \$32,242 |
| KSH | \$186,817 | \$426,576 | \$283,290 | \$369,995 | \$1,266,678 | \$214,546 | | | | \$214,546 |
| NTSH | \$134,650 | \$312,268 | \$681,072 | \$442,906 | \$1,570,896 | \$80,934 | | | | \$80,934 |
| RGSC | \$54,513 | \$54,303 | \$122,543 | \$76,112 | \$307,471 | \$41,644 | | | | \$41,644 |
| RSH | \$311,514 | \$359,829 | \$540,669 | \$443,114 | \$1,655,126 | \$144,125 | | | | \$144,125 |
| SASH | \$129,917 | \$424,589 | \$387,705 | \$394,472 | \$1,336,683 | \$66,438 | | | | \$66,438 |
| TSH | \$55,445 | \$105,074 | \$154,966 | \$124,744 | \$440,229 | \$77,561 | | | | \$77,561 |
| WCFY | \$8,144 | \$23,480 | \$4,969 | \$26,910 | \$63,503 | \$0 | | | | \$0 |
| All SH | \$1,317,623 | \$2,739,157 | \$3,273,178 | \$2,604,244 | \$9,934,202 | \$770,521 | \$0 | \$0 | \$0 | \$770,521 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Financial Measure

FM-5

Measure: Percent MCO Patients Day Authorized for Current Week

Timeframe: Weekly

Definition

Percentage of Medicaid Managed Care covered individuals; authorized days in a given week.

Data Source

Medicaid MCO Authorization Report; State Hospital Internal Billing System/Medicaid Managed Care Auth. Form

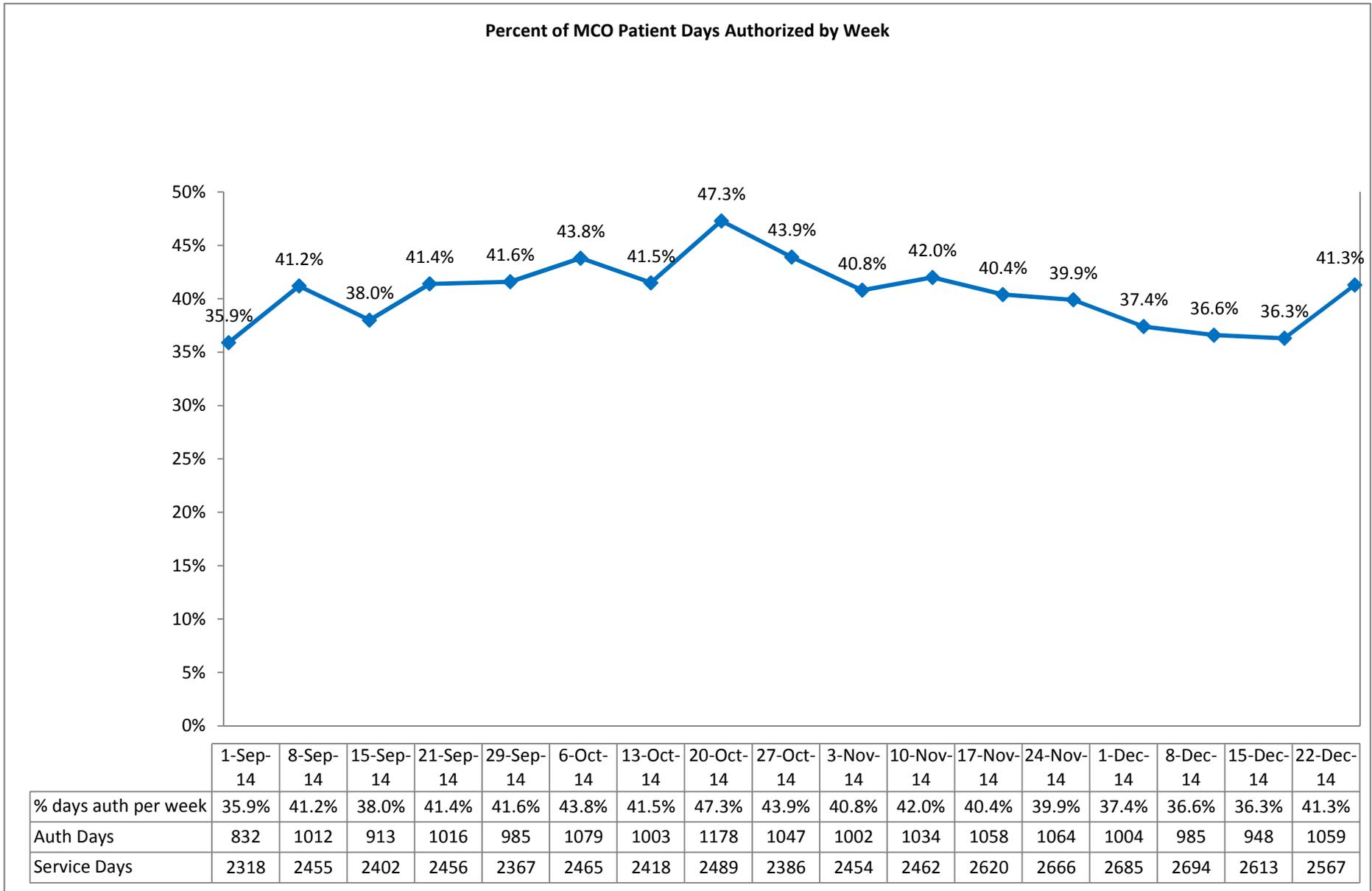
Date Display and Chart Description

Table displays weekly percentage of authorized days. Shows percentage over extended period of time by week.

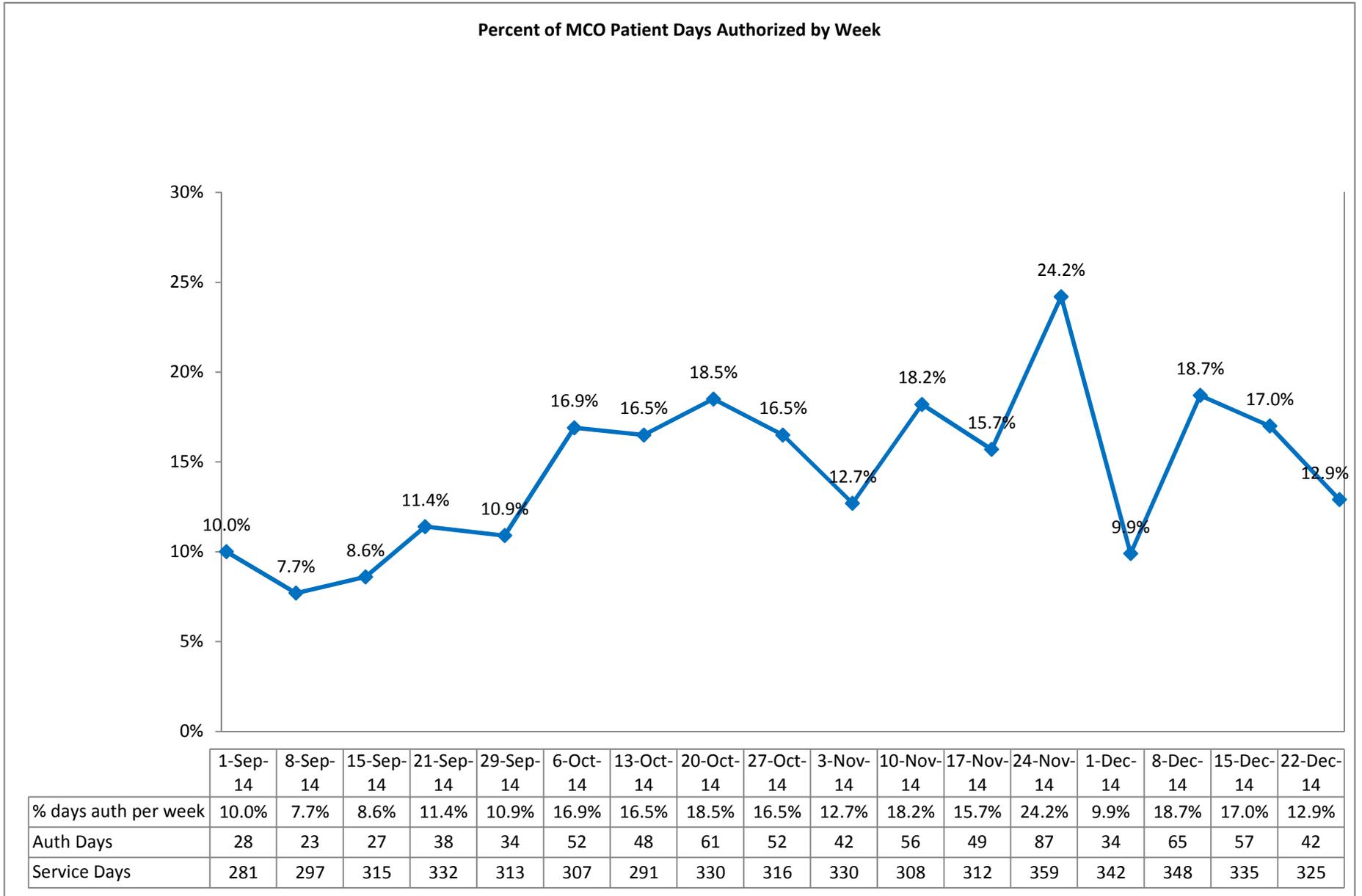
Purpose

Measure authorized Medicaid MCO days in a specified week/year.

**FM-5 Percent MCO Patient Dats Authorized for Current Week
All State MH Hospitals**

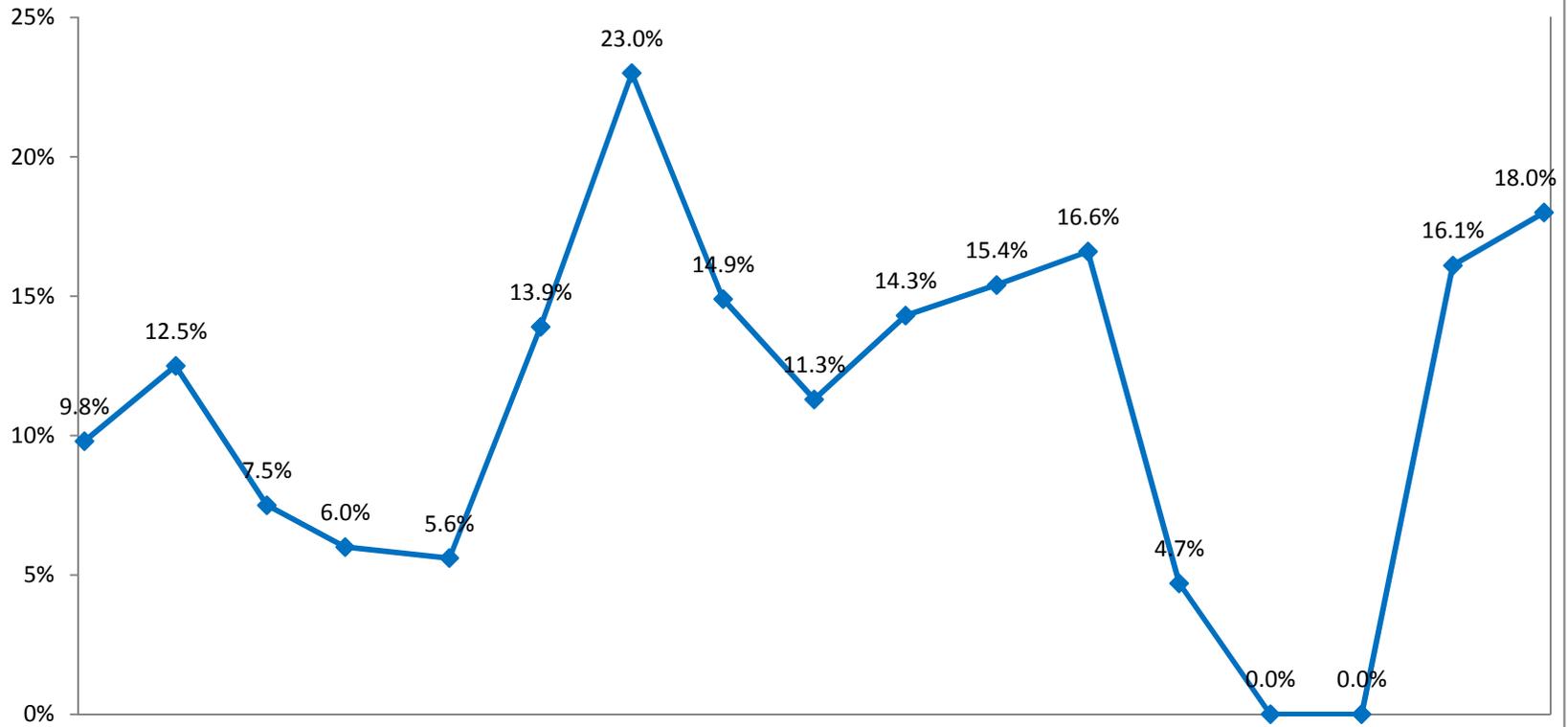


**FM-5 Percent MCO Patient Dats Authorized for Current Week
Austin State Hospital**

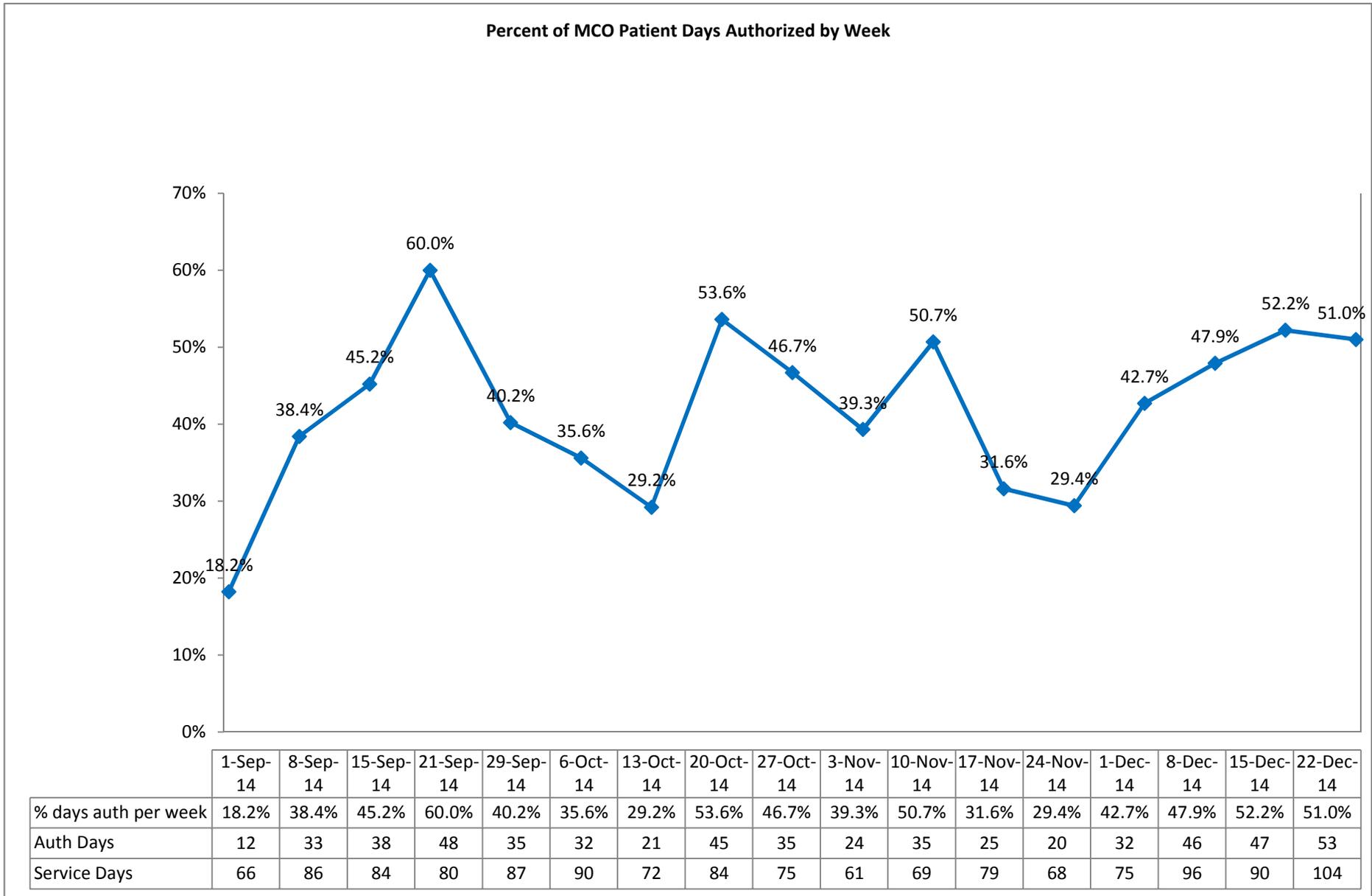


**FM-5 Percent MCO Patient Dats Authorized for Current Week
Big Spring State Hospital**

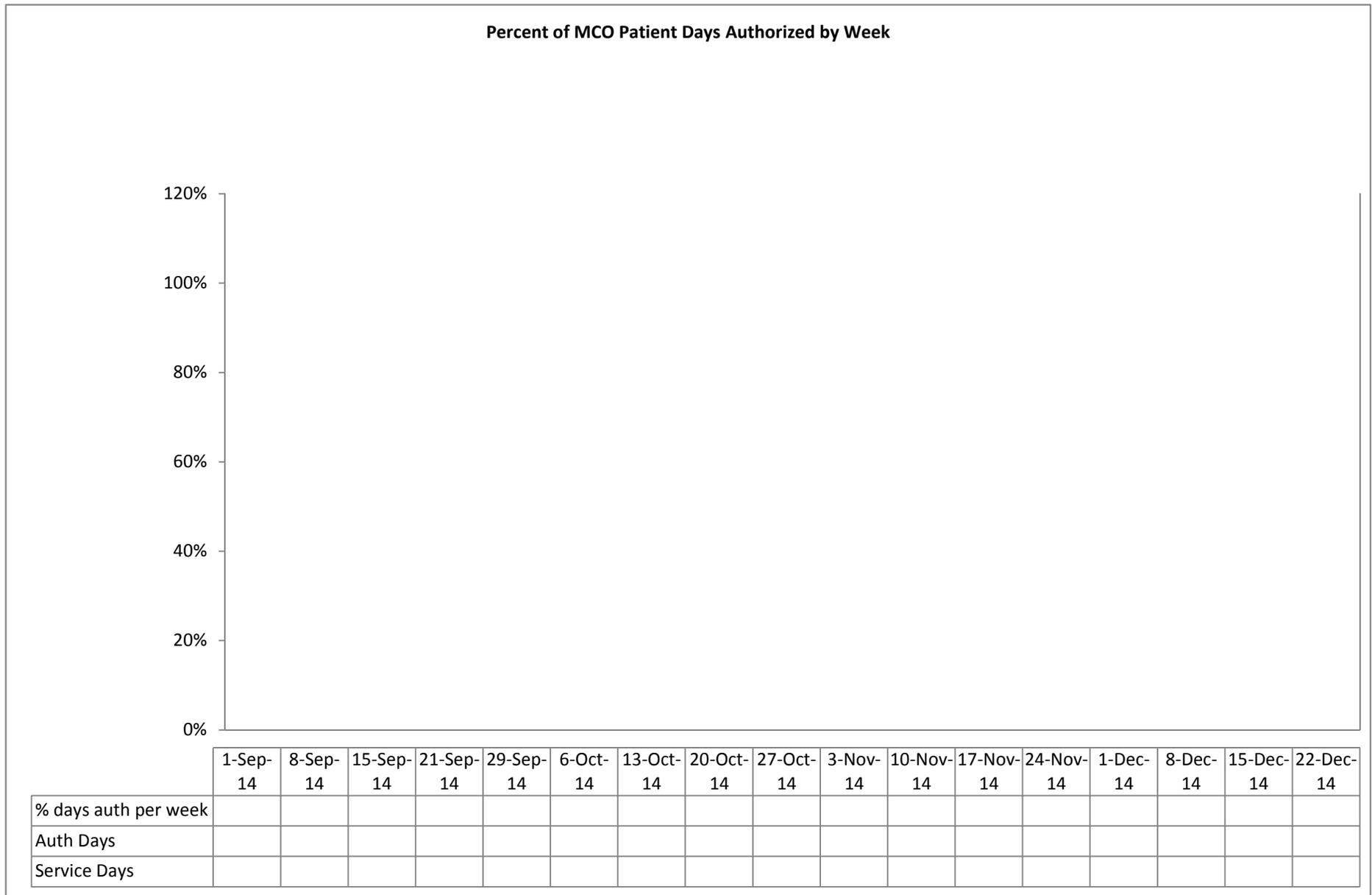
Percent of MCO Patient Days Authorized by Week



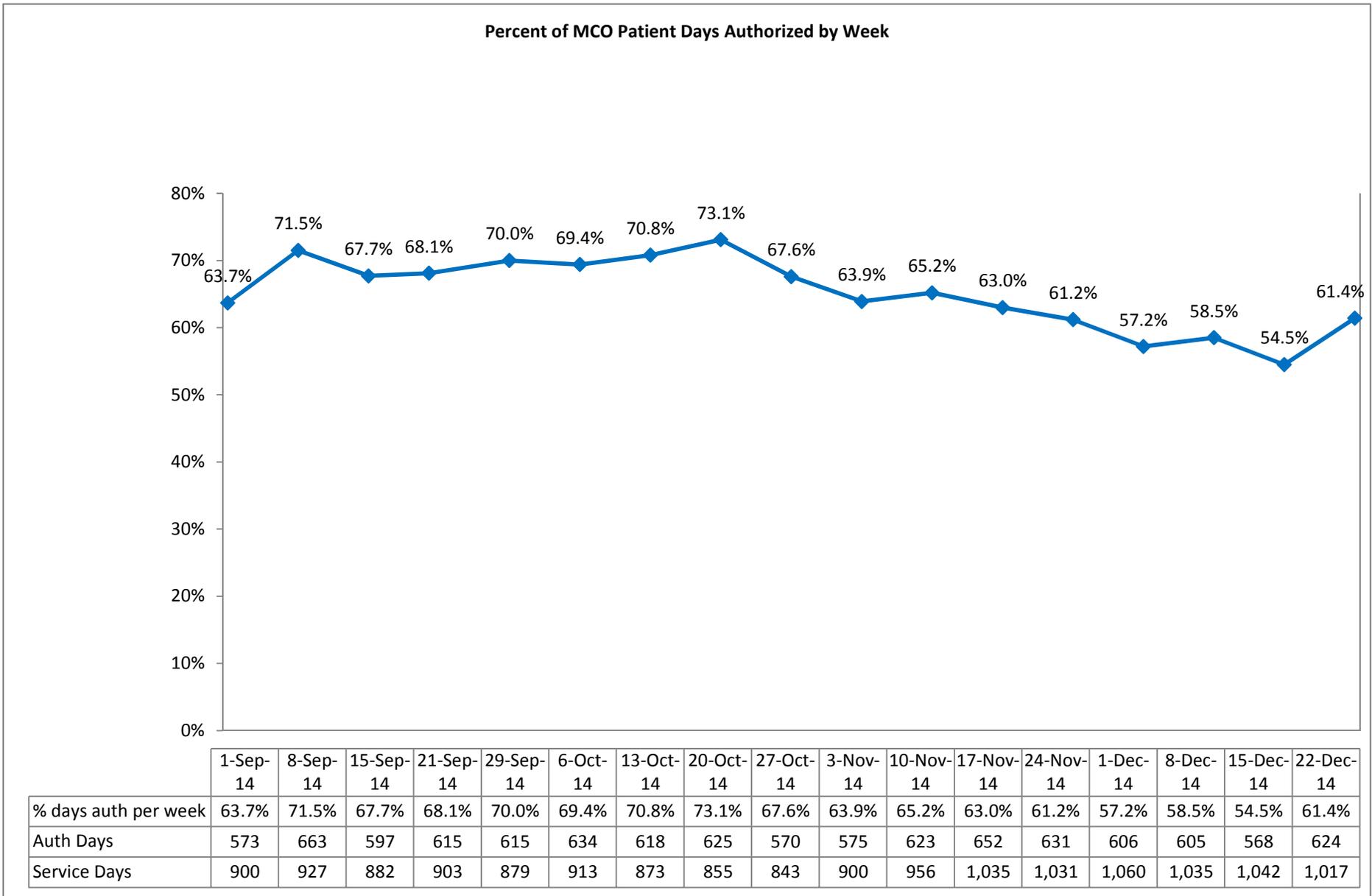
**FM-5 Percent MCO Patient Dats Authorized for Current Week
El Paso Psychiatric Center**



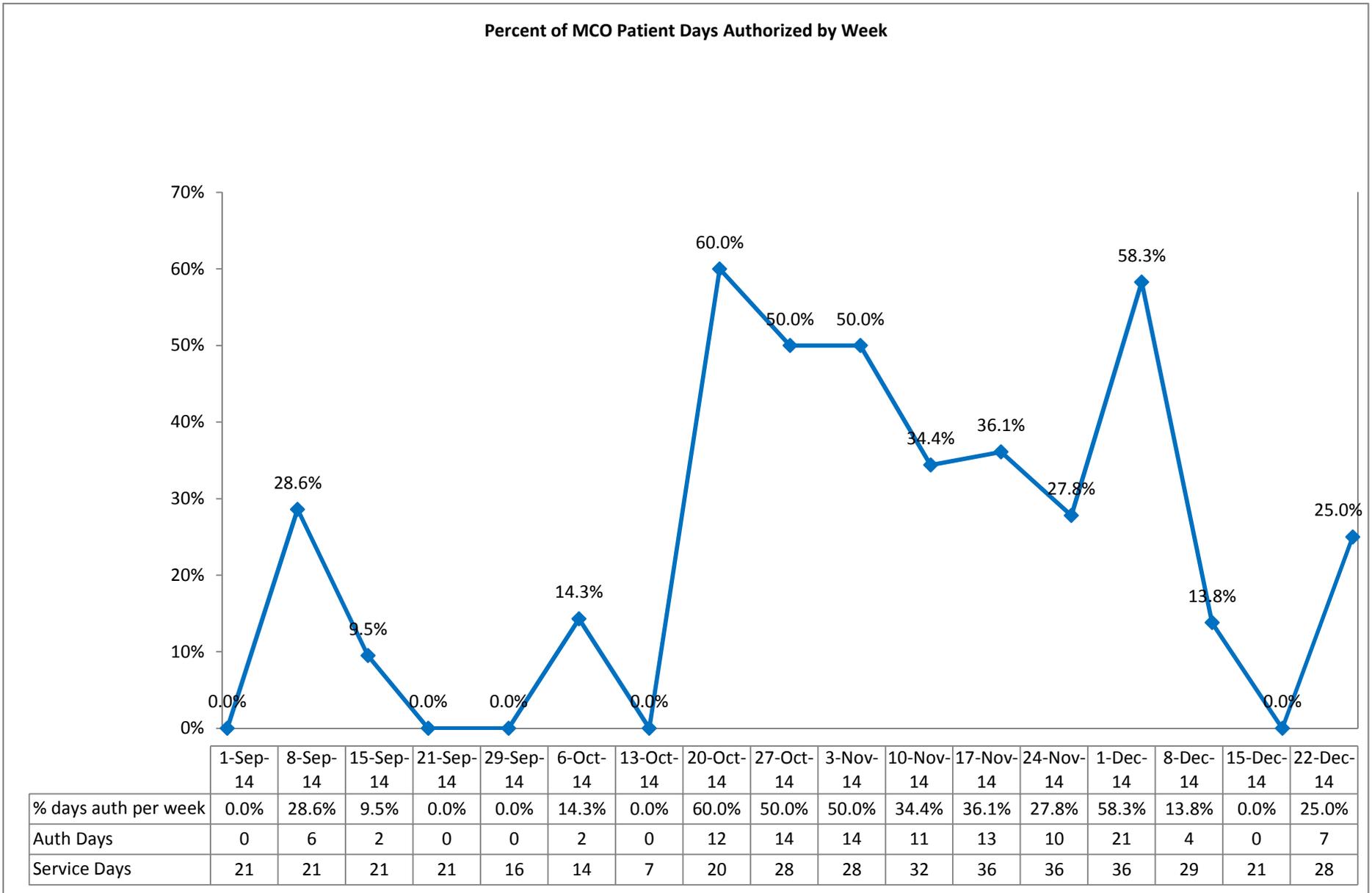
**FM-5 Percent MCO Patient Dats Authorized for Current Week
Kerrville State Hospital**



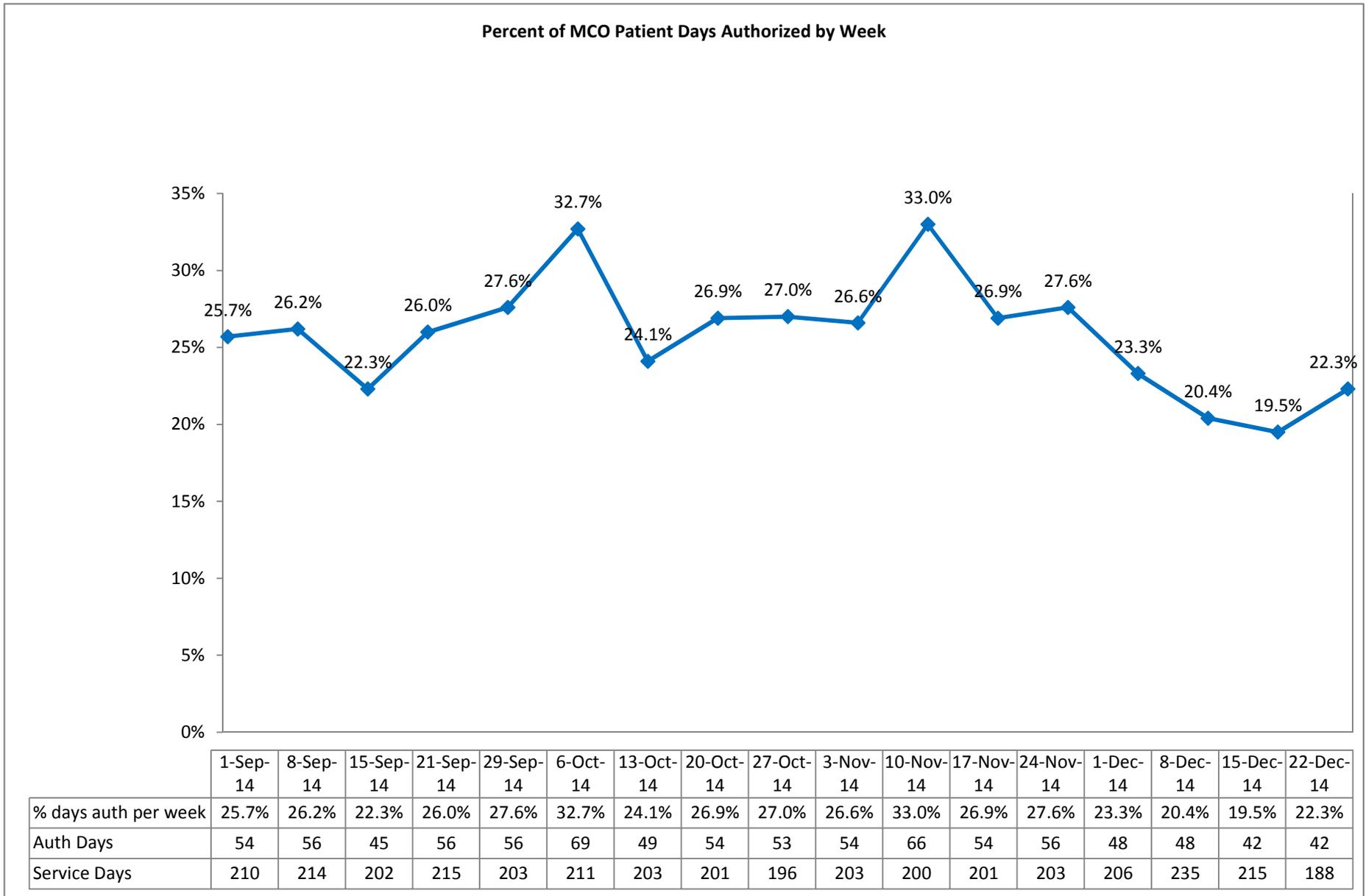
**FM-5 Percent MCO Patient Dats Authorized for Current Week
North Texas State Hospital**



**FM-5 Percent MCO Patient Dats Authorized for Current Week
Rio Grande State Center**

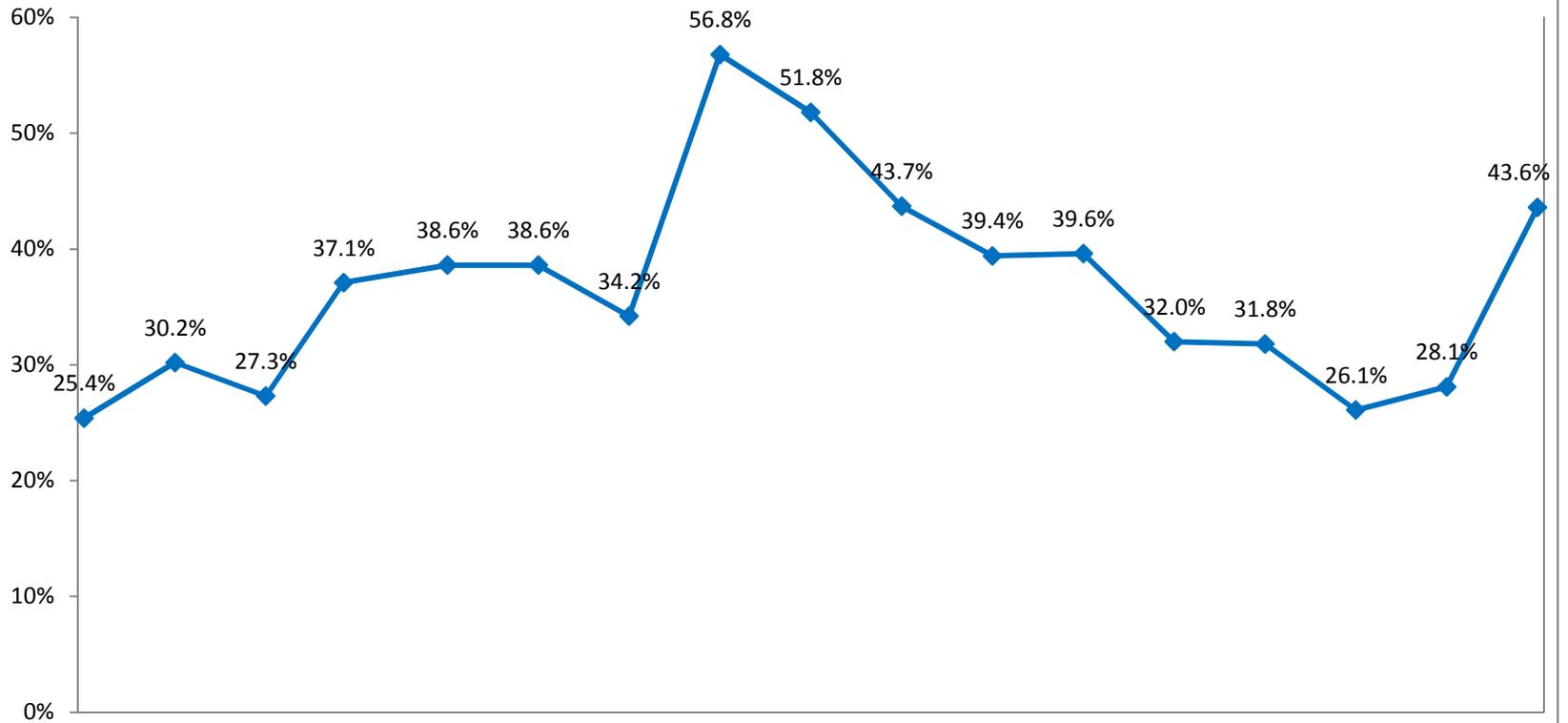


**FM-5 Percent MCO Patient Dats Authorized for Current Week
Rusk State Hospital**



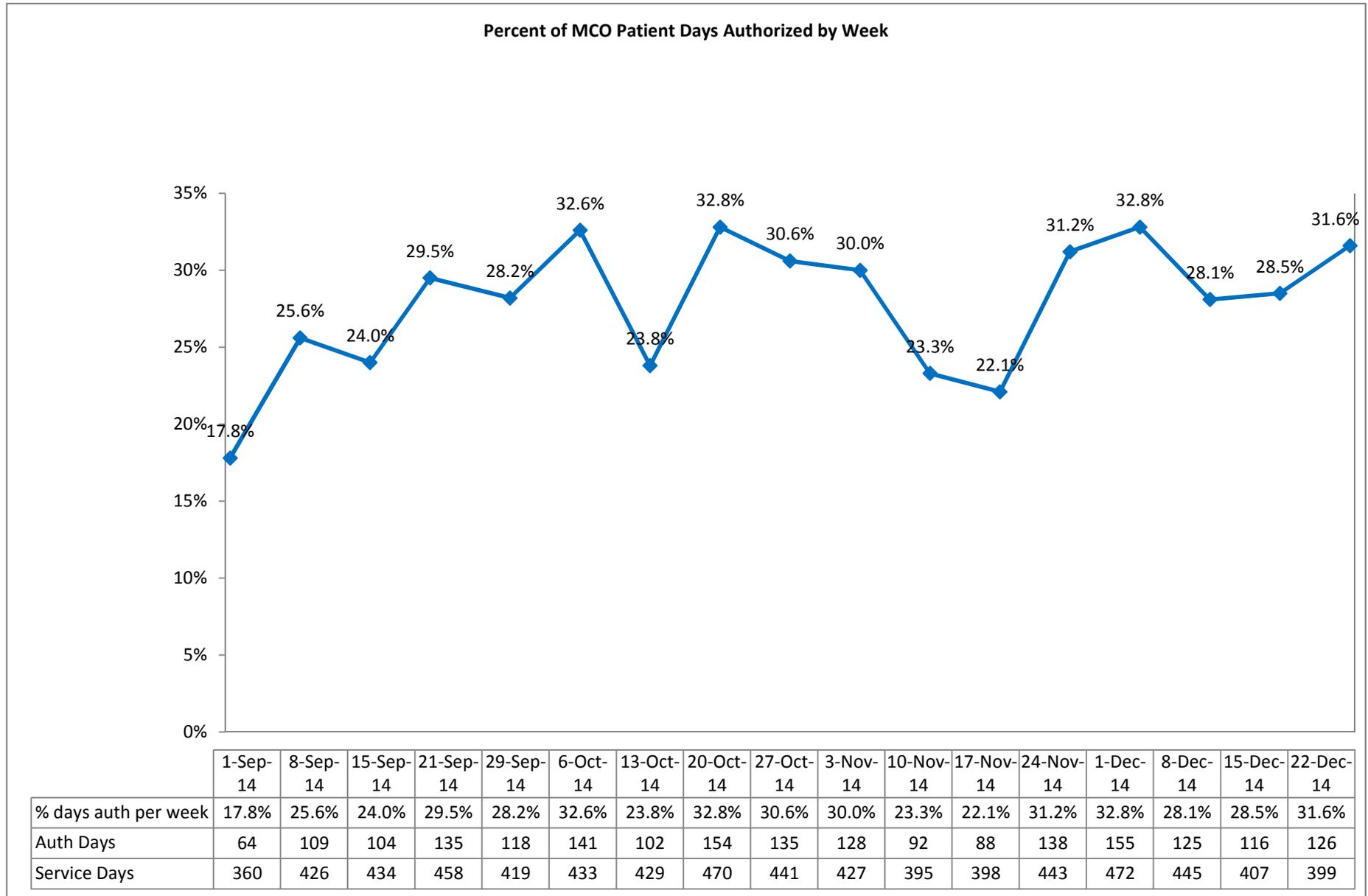
**FM-5 Percent MCO Patient Dats Authorized for Current Week
San Antonio State Hospital**

Percent of MCO Patient Days Authorized by Week

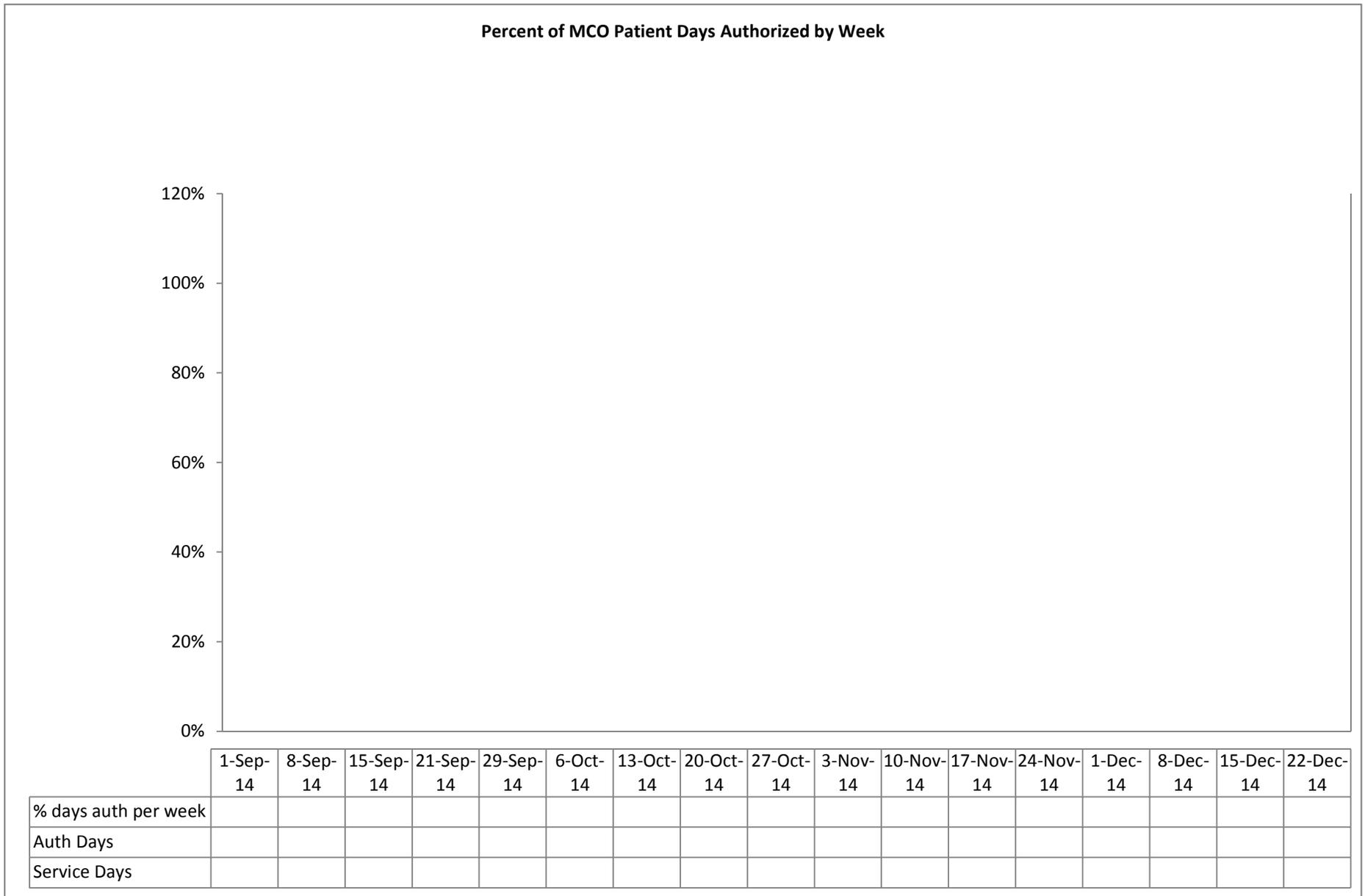


| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 21-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 | 24-Nov-14 | 1-Dec-14 | 8-Dec-14 | 15-Dec-14 | 22-Dec-14 |
|----------------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|----------|-----------|-----------|
| % days auth per week | 25.4% | 30.2% | 27.3% | 37.1% | 38.6% | 38.6% | 34.2% | 56.8% | 51.8% | 43.7% | 39.4% | 39.6% | 32.0% | 31.8% | 26.1% | 28.1% | 43.6% |
| Auth Days | 88 | 105 | 90 | 116 | 119 | 125 | 123 | 201 | 170 | 138 | 121 | 145 | 114 | 108 | 92 | 87 | 126 |
| Service Days | 347 | 348 | 330 | 313 | 308 | 324 | 360 | 354 | 328 | 316 | 307 | 366 | 356 | 340 | 352 | 310 | 289 |

**FM-5 Percent MCO Patient Dats Authorized for Current Week
Terrell State Hospital**



**FM-5 Percent MCO Patient Dats Authorized for Current Week
Waco Center for Youth**



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Financial Measure

FMO-6

Measure: Average Cost per Bed Day

Timeframe: Quarterly

Definition

The state hospital average cost per occupied bed day. The state hospital's average cost per occupied bed day per FY quarter is calculated. $\text{Appropriated Fund Cost (for LBB)} = \text{Total State Hospital Expense} + \text{Benefits} / \text{Total Bed Days}$.

Data Source

Financial Cost Summary Report

CARE Reports HC022175 & HC022185 (Unduplicated Clients Days by Account Units)

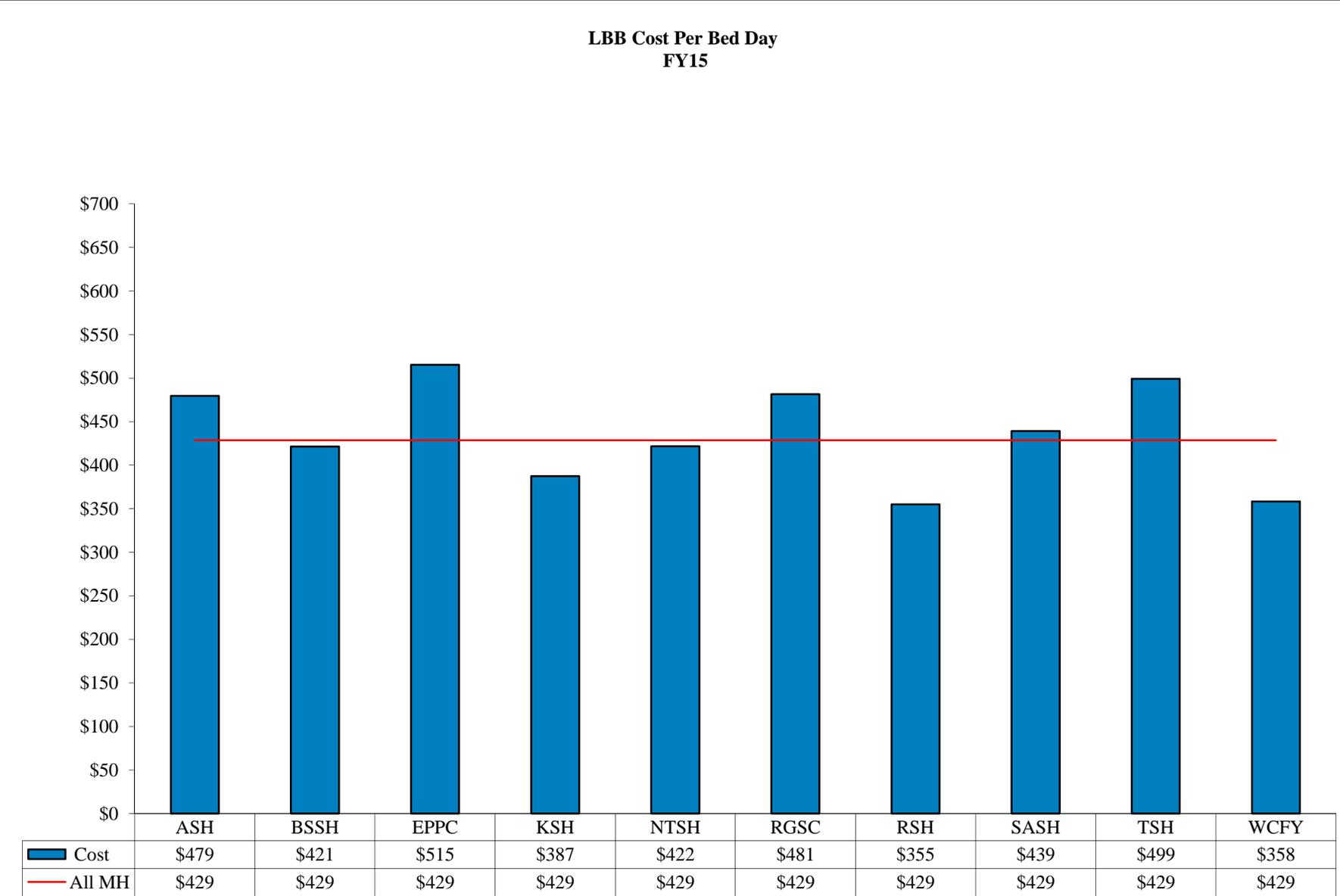
Date Display and Chart Description

Table shows LBB cost per bed day for FY quarter for individual state hospitals and systemwide. Chart with quarterly data points of LBB cost per bed day for FY quarter for individual state hospitals and systemwide.

Purpose

Monitor bed day cost.

FMO - 6 Cost Per Bed Day
All State MH Hospitals - FY15 (As of November 30, 2014)

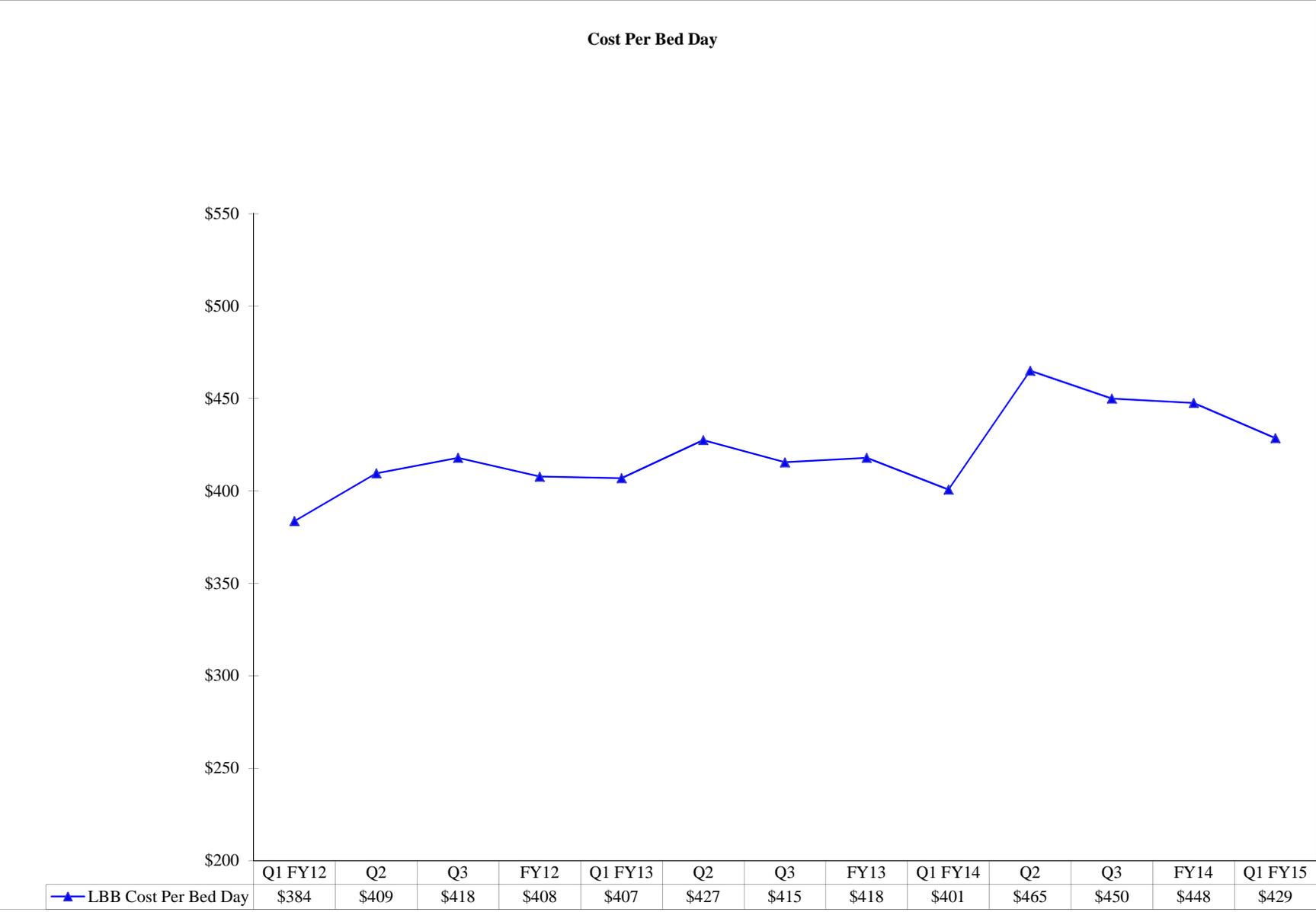


FMO - 6 Cost Per Bed Day
All State Hospitals

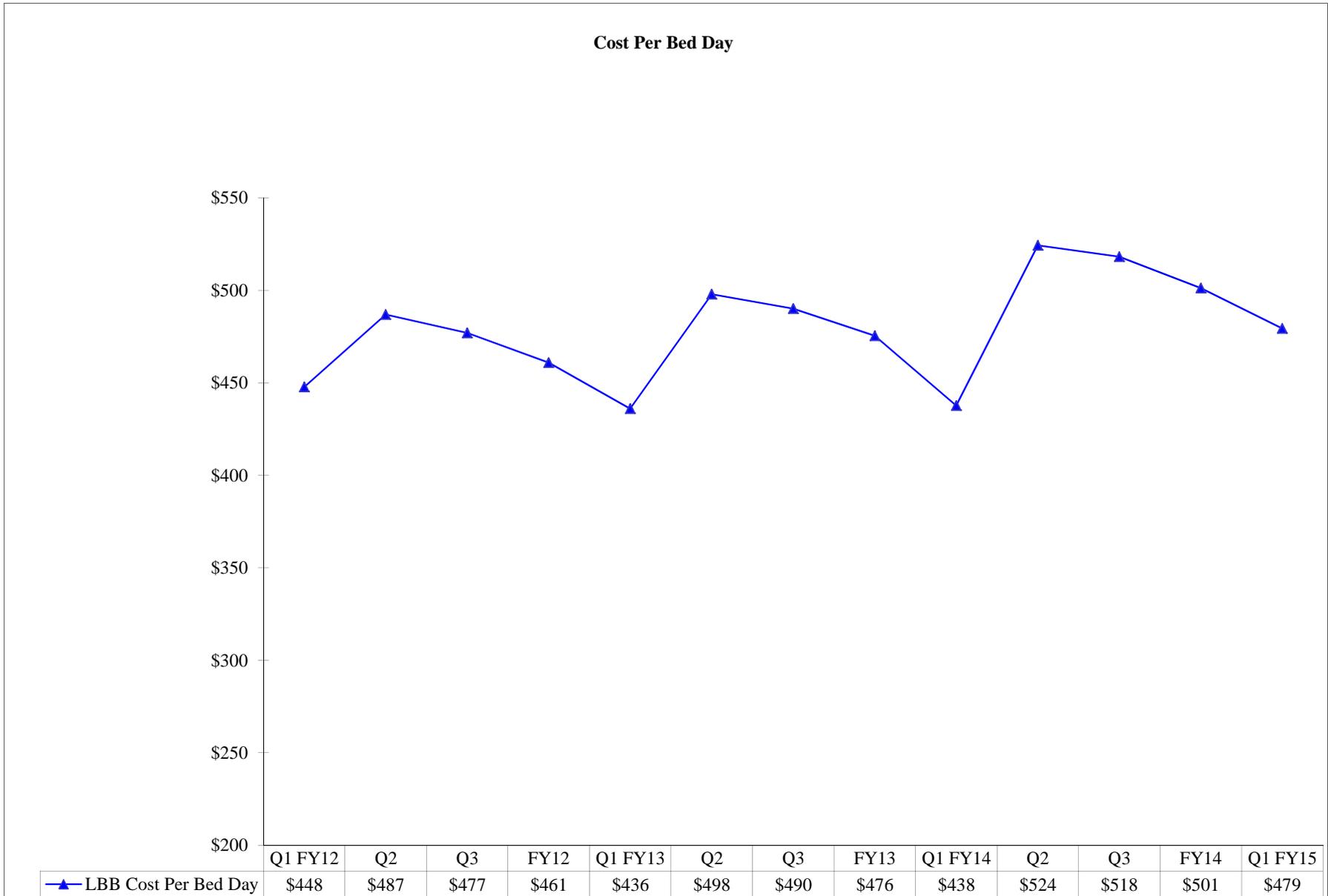
| | FY12 | | | | FY13 | | | | FY14 | | | | FY15 | | | |
|--|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----|----|----|
| | Q1 | Q2 | Q3 | FY | Q1 | Q2 | Q3 | FY | Q1 | Q2 | Q3 | FY | Q1 | Q2 | Q3 | FY |
| Austin State Hospital | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$448 | \$487 | \$477 | \$461 | \$436 | \$498 | \$490 | \$476 | \$438 | \$524 | \$518 | \$501 | \$479 | | | |
| Big Spring State Hospital | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$376 | \$417 | \$403 | \$398 | \$399 | \$407 | \$418 | \$416 | \$389 | \$447 | \$436 | \$437 | \$421 | | | |
| El Paso Psychiatric Center | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$485 | \$528 | \$501 | \$503 | \$474 | \$538 | \$536 | \$525 | \$523 | \$588 | \$536 | \$572 | \$515 | | | |
| Kerrville State Hospital | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$355 | \$392 | \$380 | \$376 | \$377 | \$377 | \$374 | \$379 | \$369 | \$408 | \$382 | \$395 | \$387 | | | |
| North Texas State Hospital | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$372 | \$399 | \$400 | \$389 | \$398 | \$384 | \$385 | \$393 | \$399 | \$469 | \$445 | \$440 | \$422 | | | |
| Rusk State Hospital | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$342 | \$372 | \$391 | \$371 | \$366 | \$383 | \$342 | \$371 | \$321 | \$362 | \$366 | \$360 | \$355 | | | |
| San Antonio State Hospital | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$392 | \$472 | \$453 | \$444 | \$440 | \$459 | \$454 | \$461 | \$416 | \$491 | \$491 | \$478 | \$439 | | | |
| Terrell State Hospital | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$375 | \$402 | \$392 | \$391 | \$391 | \$423 | \$405 | \$415 | \$459 | \$537 | \$499 | \$511 | \$499 | | | |
| Waco Center for Youth* | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$349 | \$397 | \$407 | \$387 | \$352 | \$435 | \$375 | \$396 | \$352 | \$421 | \$399 | \$402 | \$358 | | | |
| Rio Grande State Center (MH) | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$470 | \$516 | \$521 | \$513 | \$645 | \$853 | \$816 | \$540 | \$499 | \$524 | \$528 | \$511 | \$481 | | | |
| All State MH Hospitals | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$384 | \$409 | \$418 | \$408 | \$407 | \$427 | \$415 | \$418 | \$401 | \$465 | \$450 | \$448 | \$429 | | | |
| Texas Center for Infectious Disease | | | | | | | | | | | | | | | | |
| LBB Cost Per Bed Day | \$713 | \$685 | \$586 | \$656 | \$648 | \$741 | \$932 | \$787 | \$978 | \$850 | \$771 | \$811 | \$666 | | | |

LBB Cost Per Bed Day = Total Financial Expenses minus Benefits

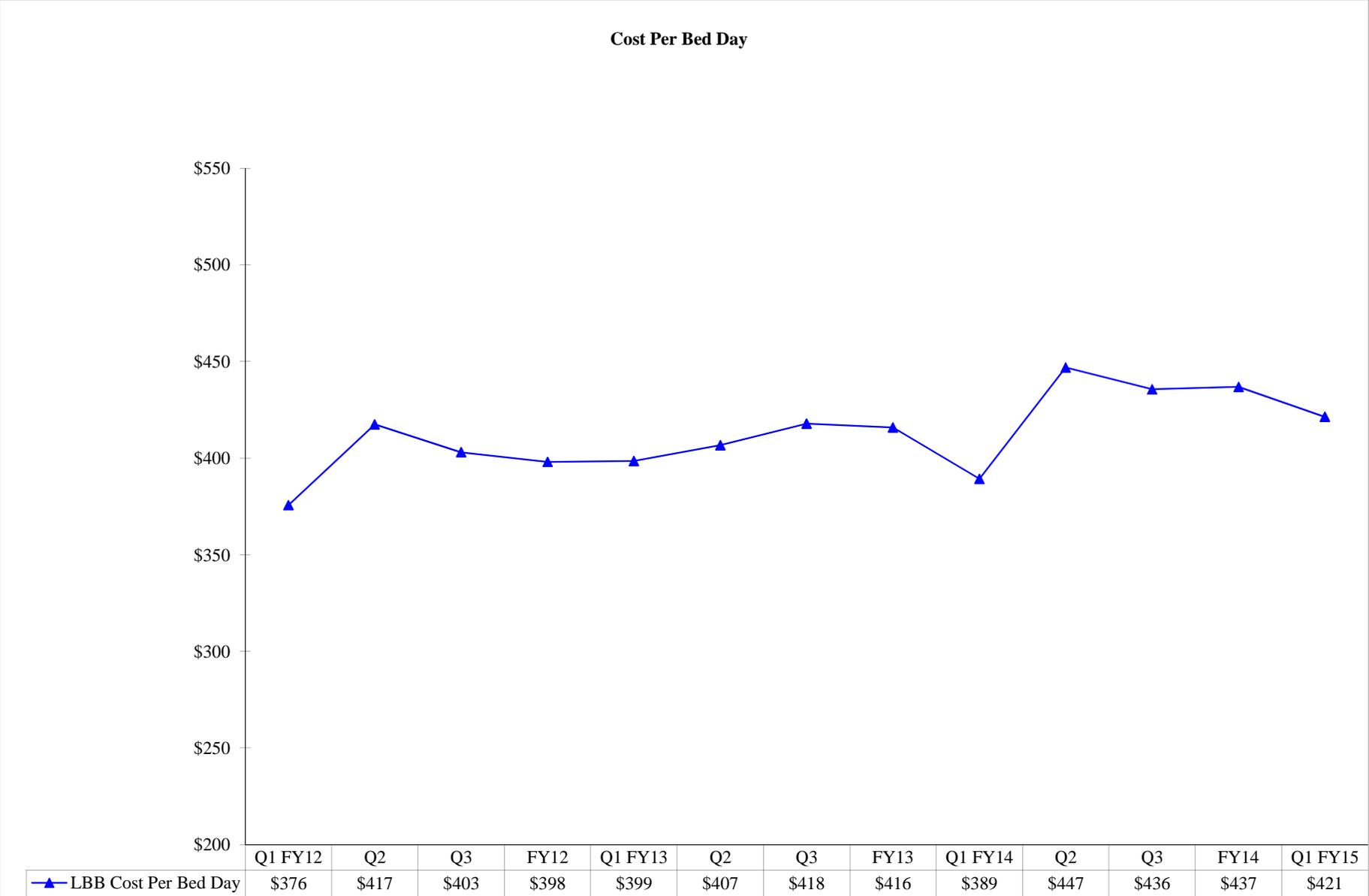
FMO - 6 Cost Per Bed Day
All State MH Hospitals



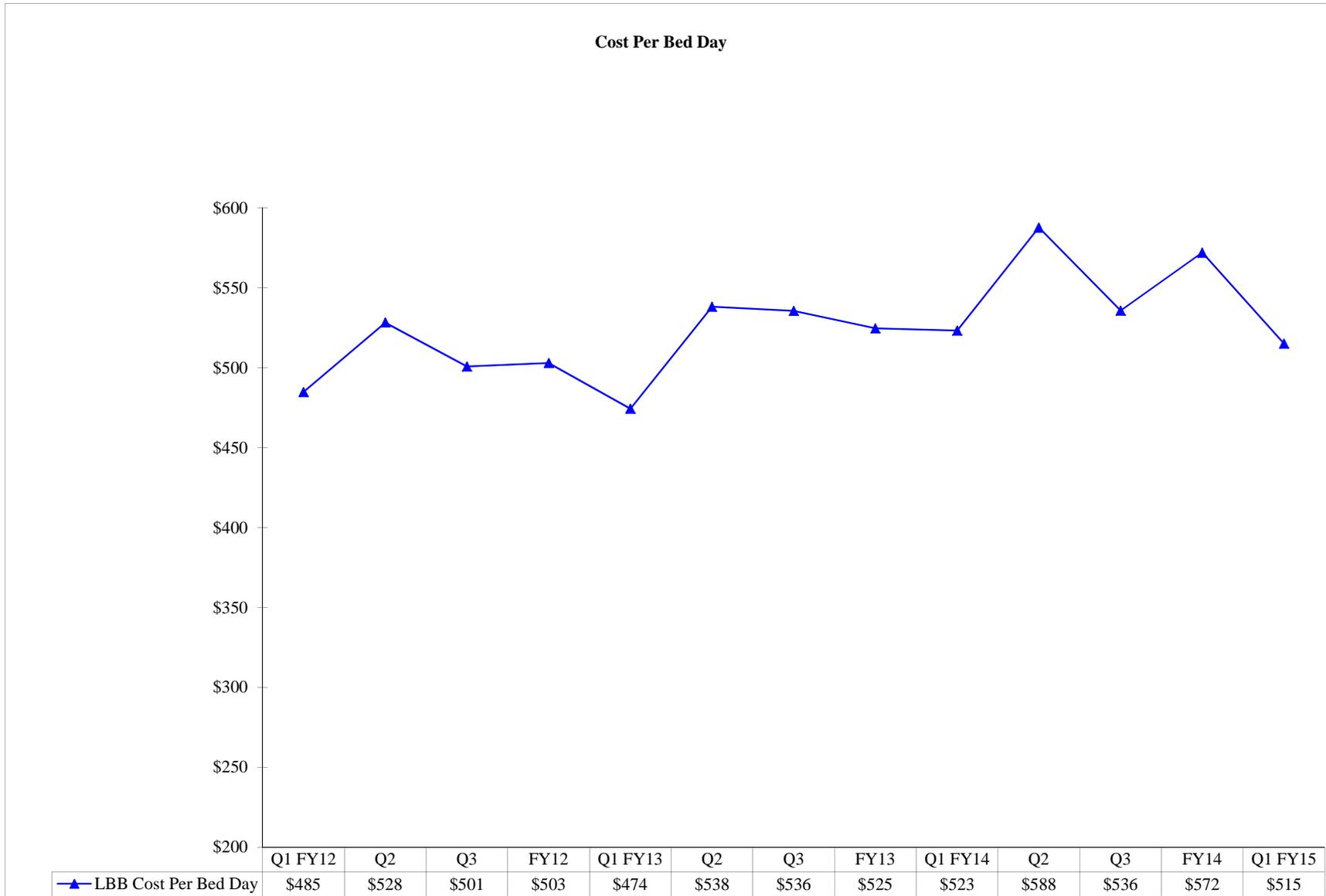
**FMO - 6 Cost Per Bed Day
Austin State Hospital**



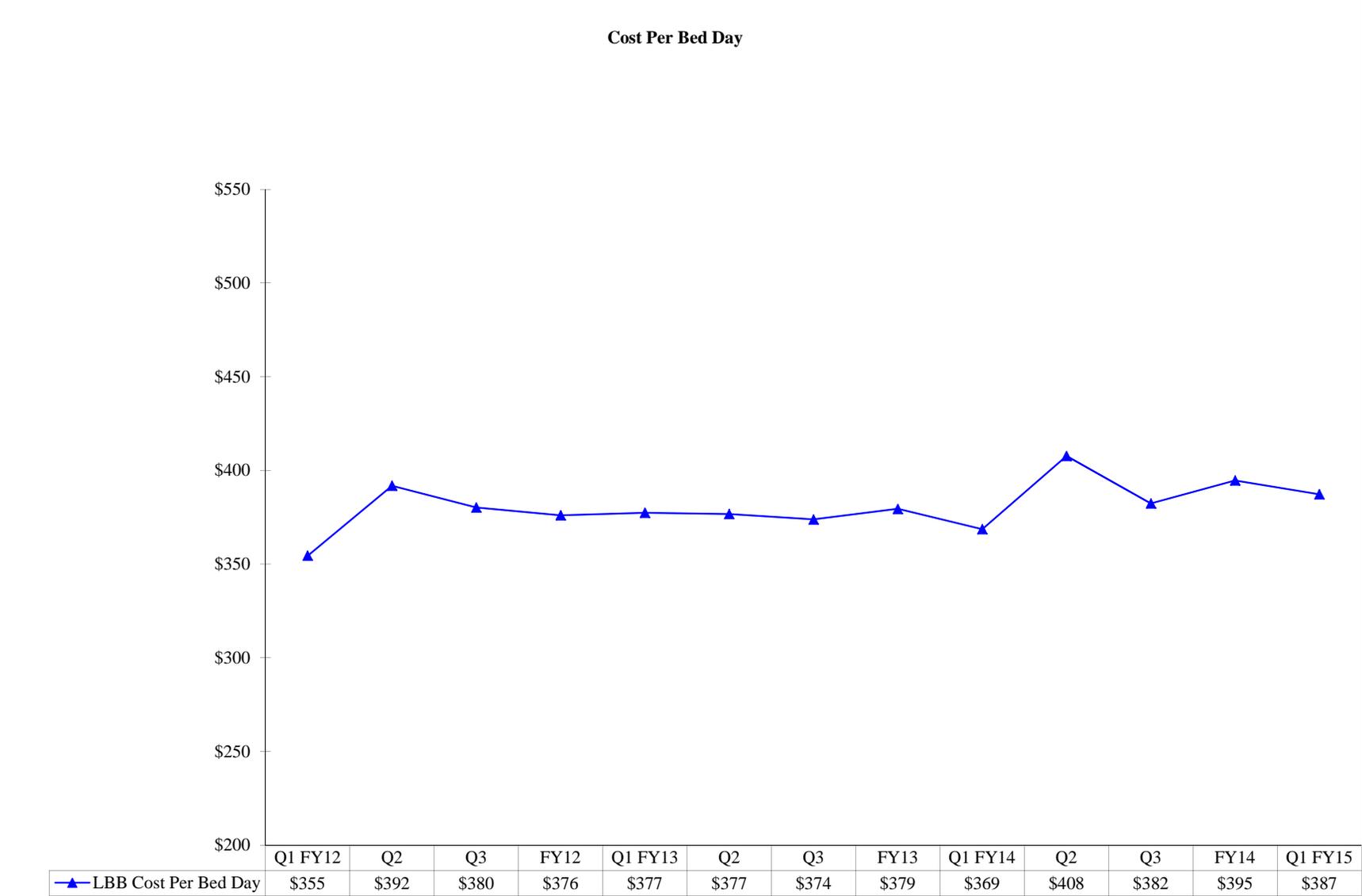
**FMO - 6 Cost Per Bed Day
Big Spring State Hospital**



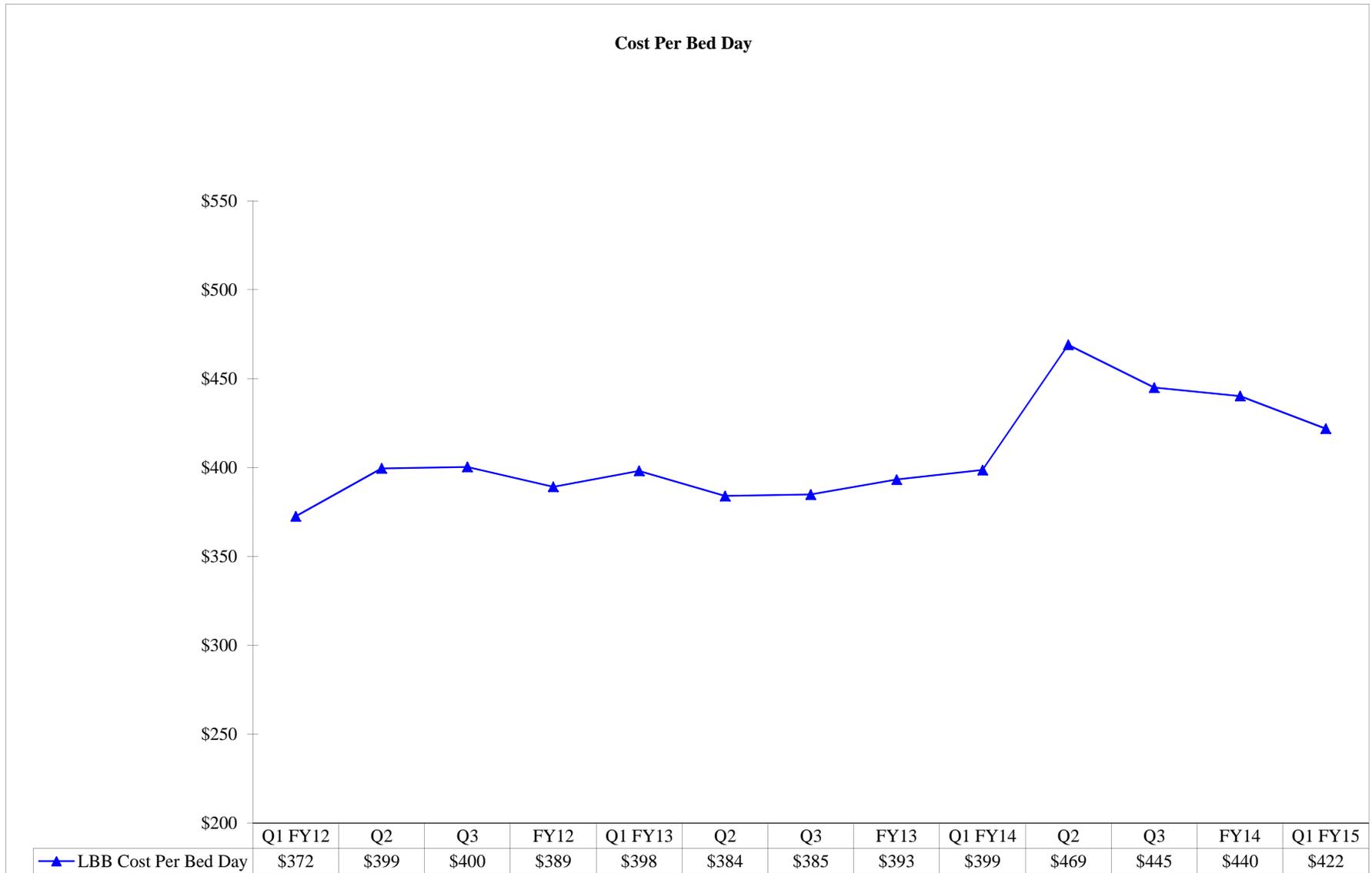
**FMO - 6 Cost Per Bed Day
El Paso Psychiatric Center**



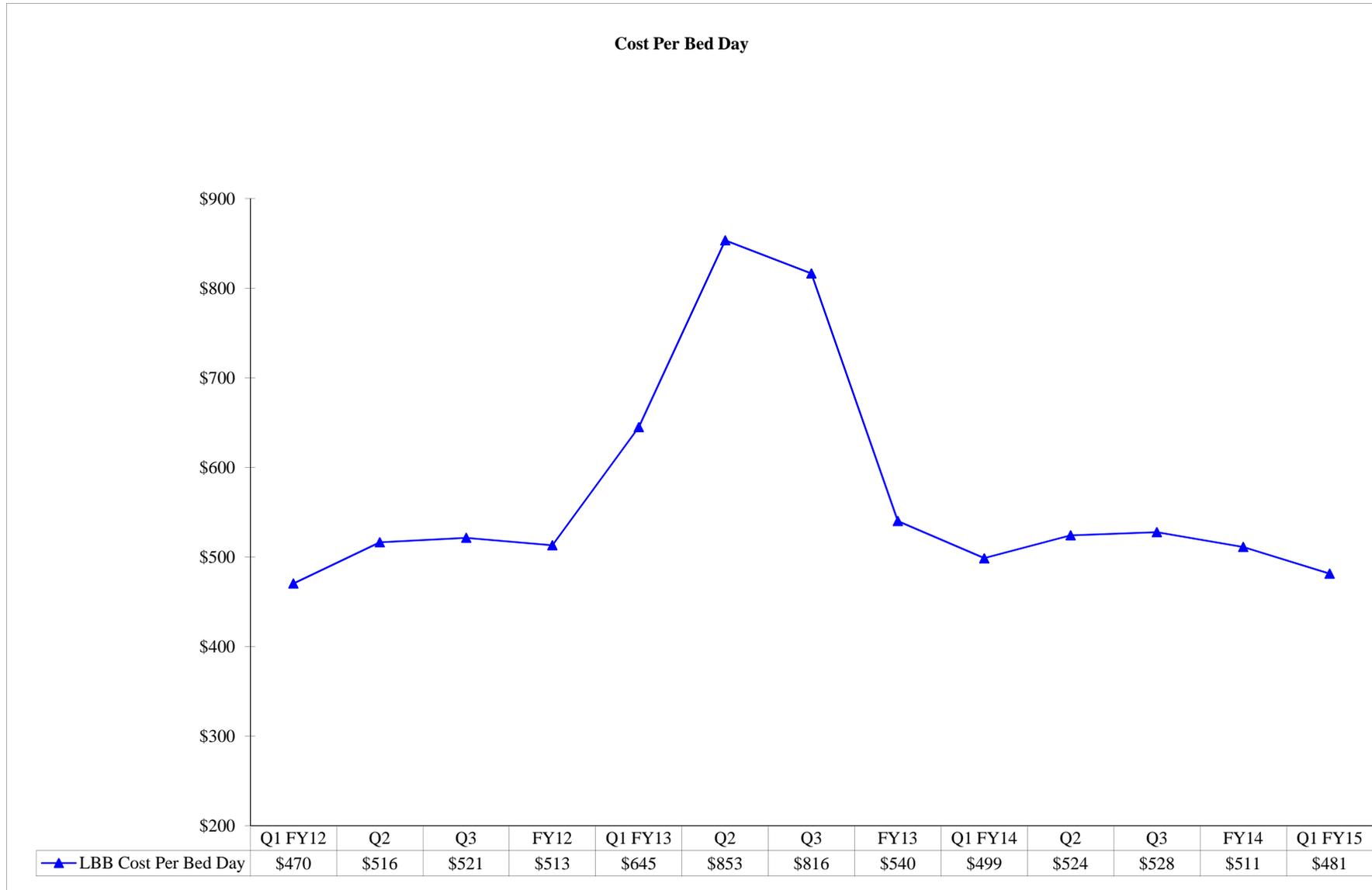
**FMO - 6 Cost Per Bed Day
Kerrville State Hospital**



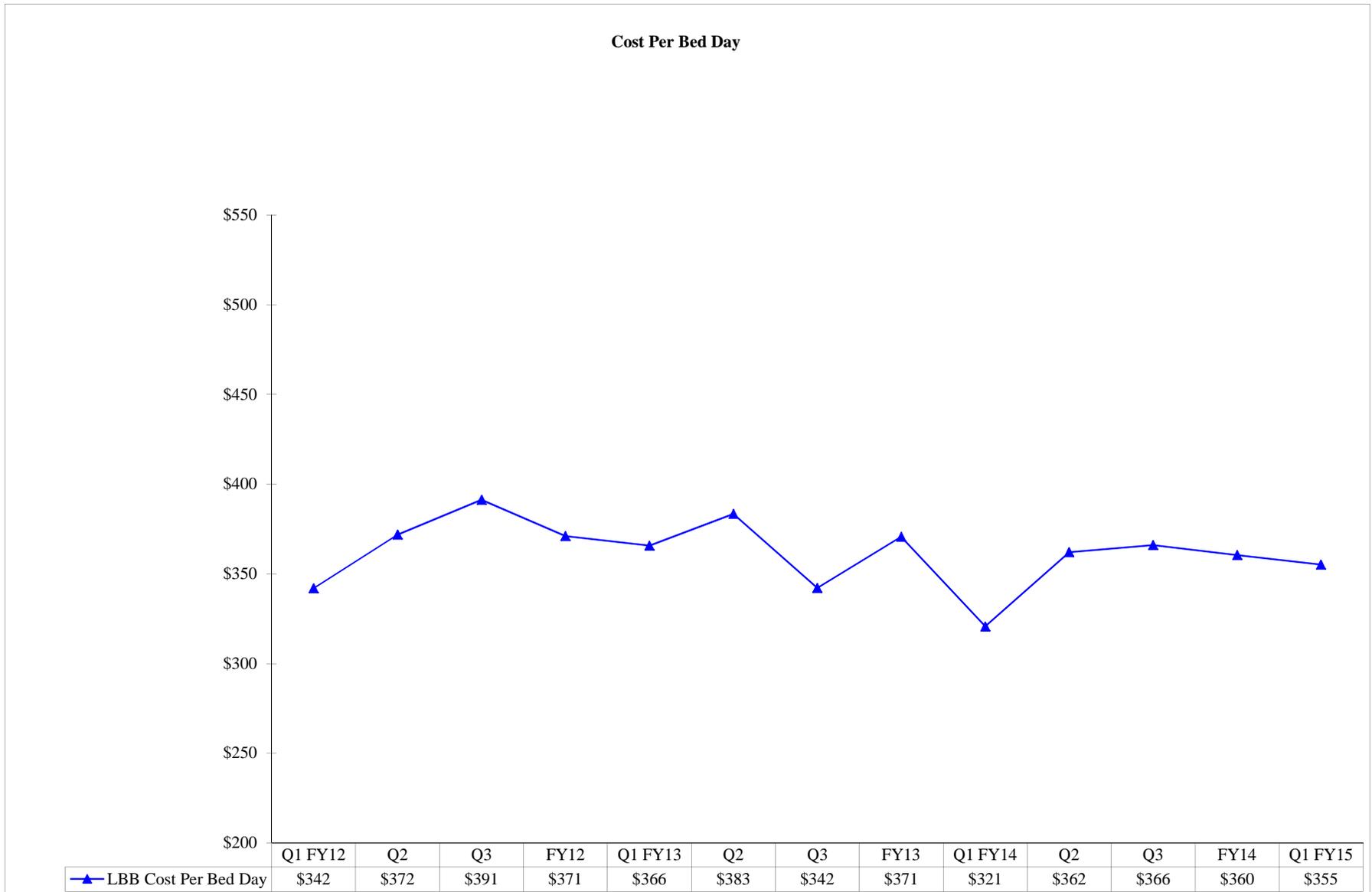
**FMO - 6 Cost Per Bed Day
North Texas State Hospital**



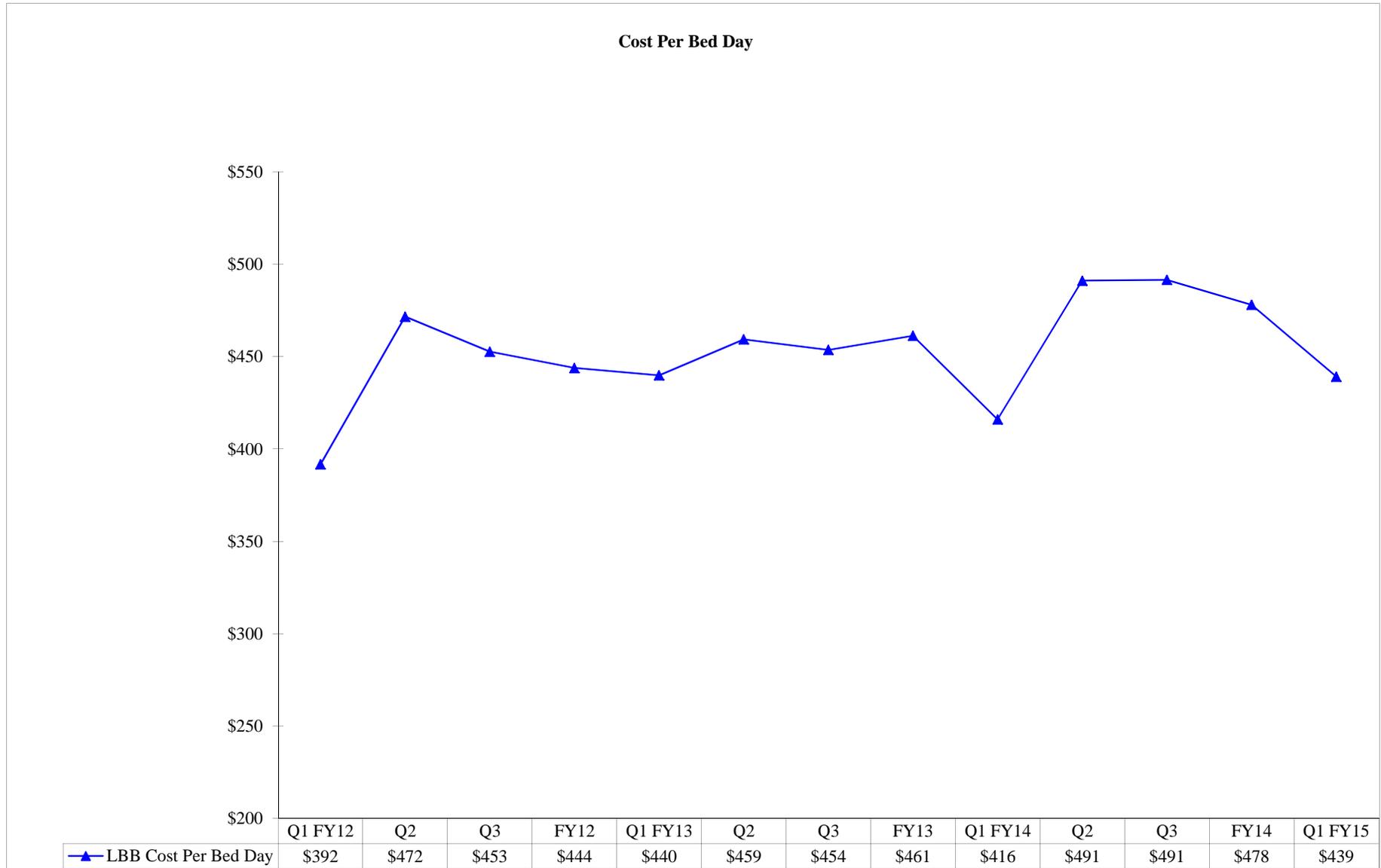
FMO - 6 Cost Per Bed Day
Rio Grande State Center (MH only)



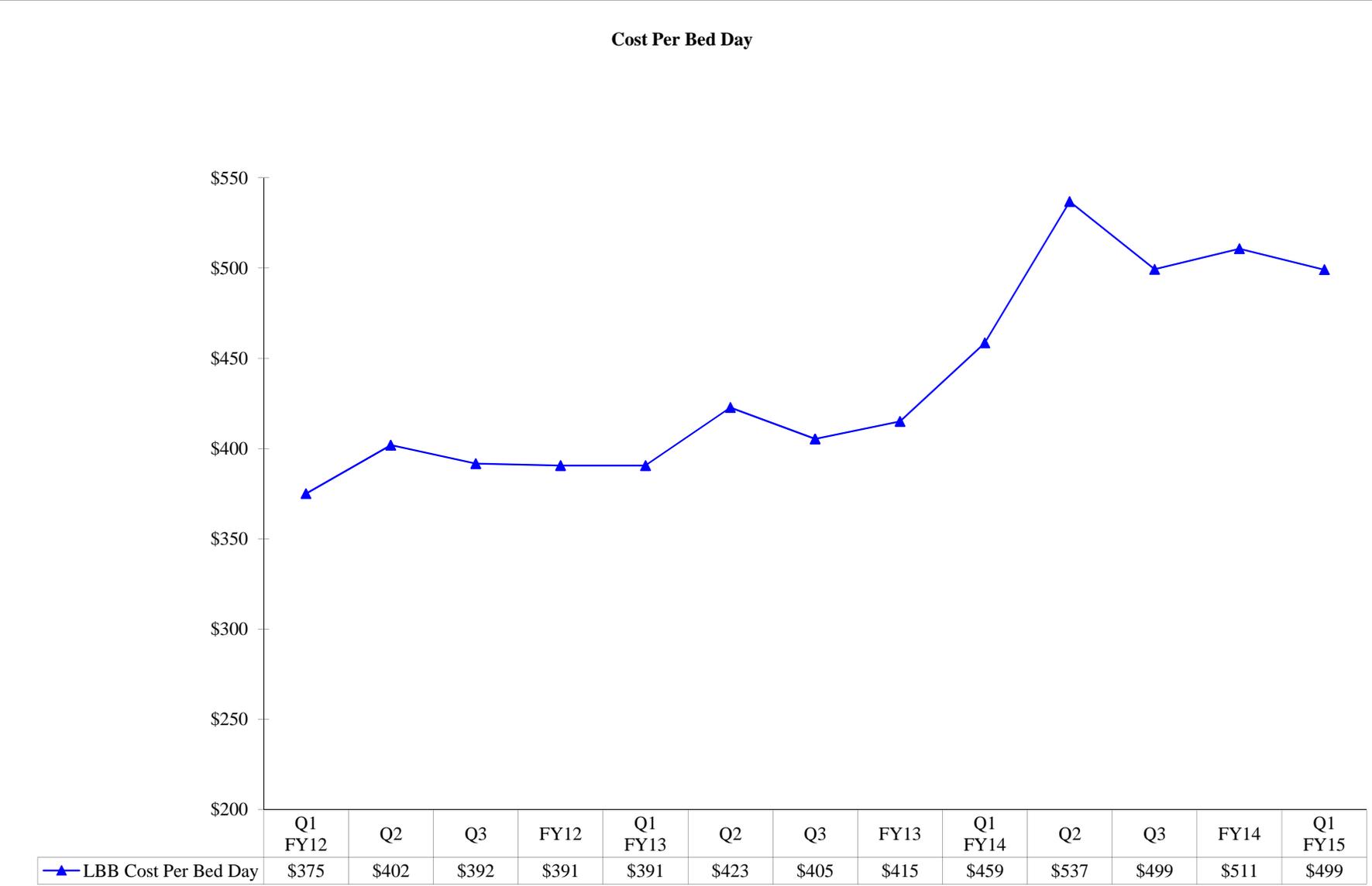
FMO - 6 Cost Per Bed Day
Rusk State Hospital



FMO - 6 Cost Per Bed Day
San Antonio State Hospital

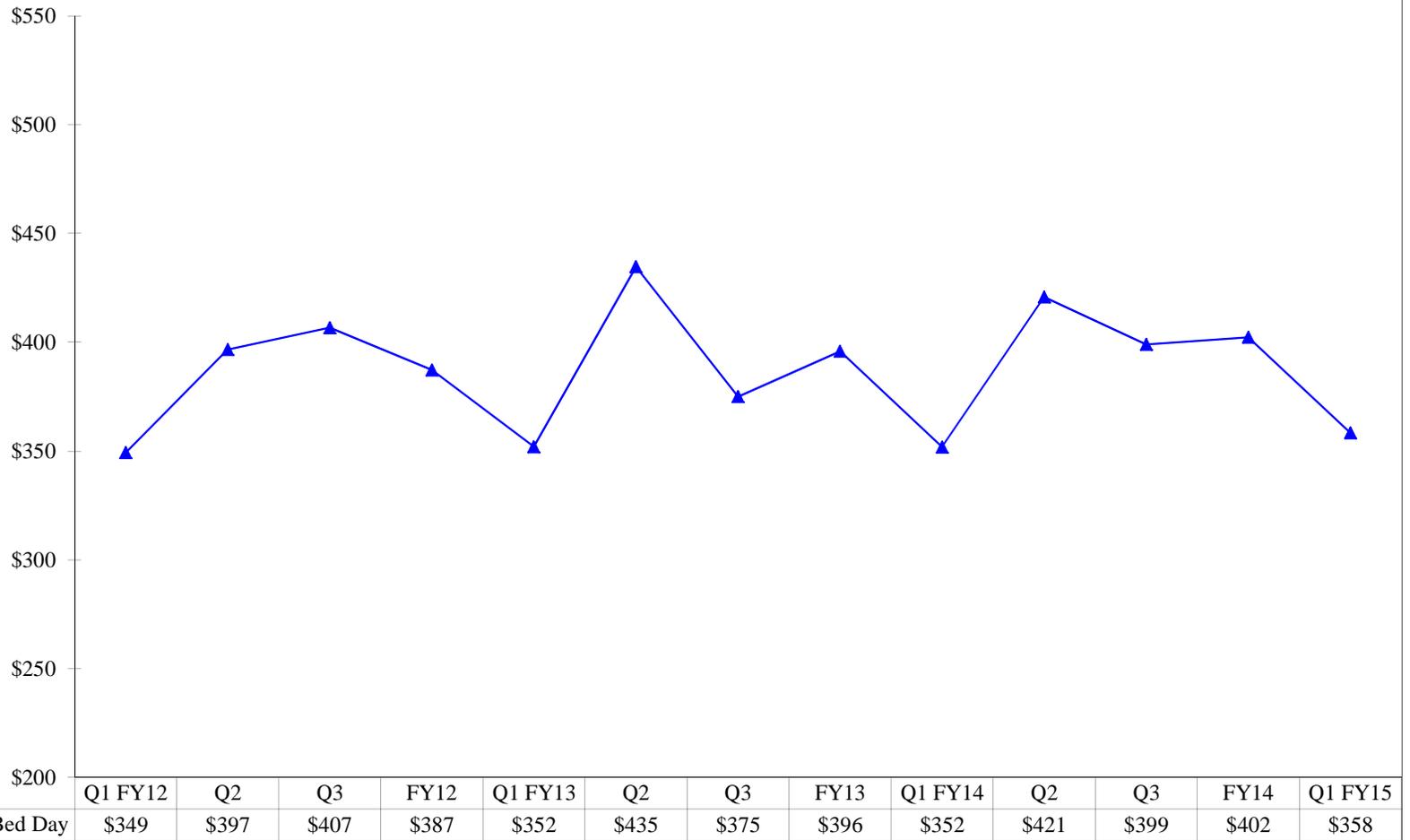


**FMO - 6 Cost Per Bed Day
Terrell State Hospital**

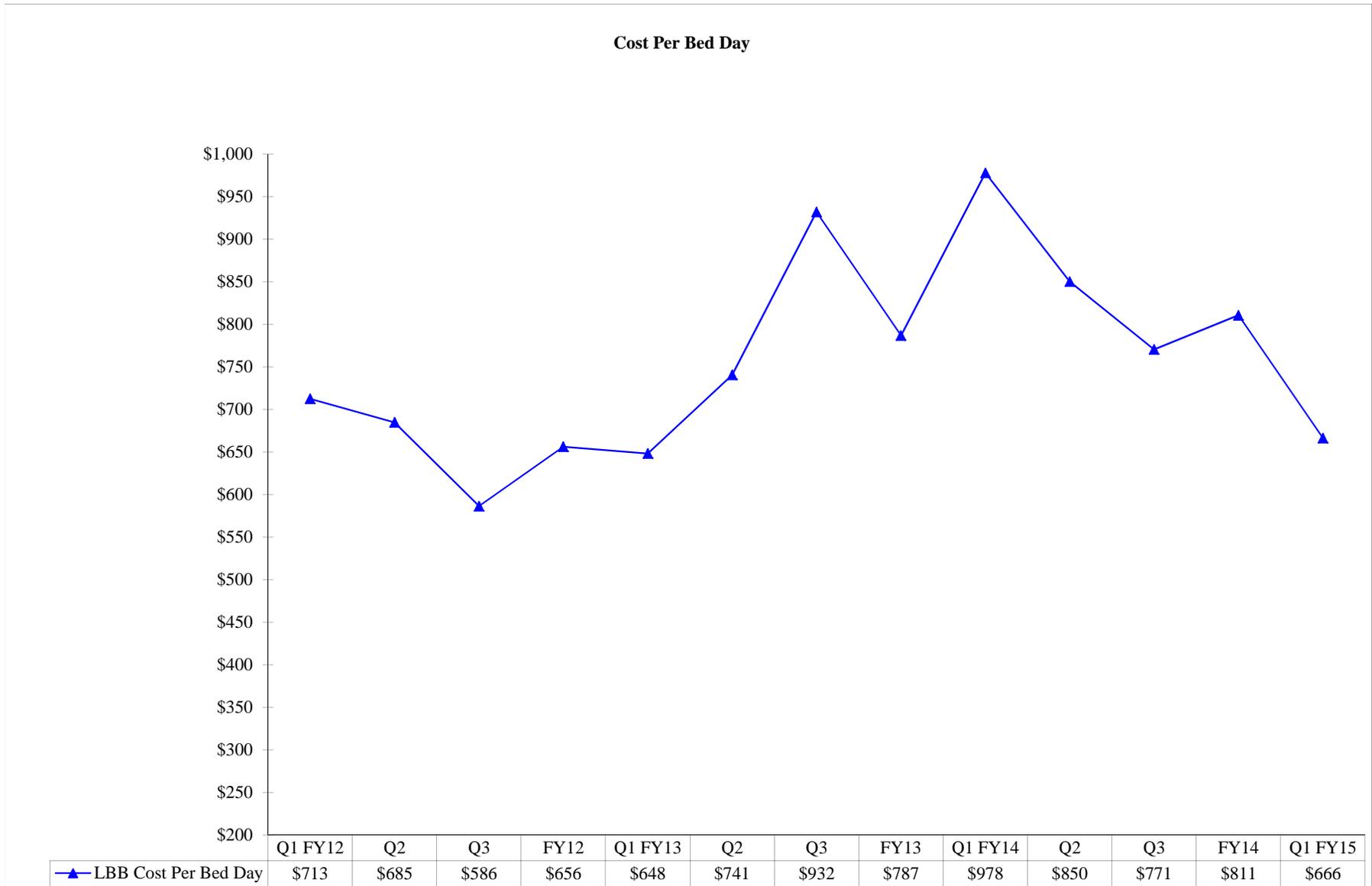


FMO - 6 Cost Per Bed Day
Waco Center for Youth

Cost Per Bed Day



FMO - 6 Cost Per Bed Day
Texas Center for Infectious Disease



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Indicator

COI-1

Measure: Patient Satisfaction

Timeframe: Monthly

Definition

Report adults and adolescents patient satisfaction with their care as represented by achieving an average score of 3.60 on the Mental Health Statistics Improvement Project (MHSIP) NRI Inpatient Consumer Survey. Report satisfaction surveys from child patients and their parent(s) or the legally authorized representative. Satisfaction with treatment and safe milieu provided in state psychiatric hospitals will be demonstrated by achieving the average score on the Patient Satisfaction Surveys (PSAT) (average score of “4” on the parent satisfaction survey and an average score of “1.7” on the children satisfaction survey). The MHSIP and PSAT systems give the frequency of response and the percent of total sample on the 5-point Likert scale for the overall score.

Data Source

MHSIP – SAP Business Objects Report (MHSIP ICS Score Analysis by Domain)

PSAT – ODS SharePoint Report

CARE Reports HC022175 & HC022185 (Unduplicated Clients Days by Account Units)

Date Display and Chart Description

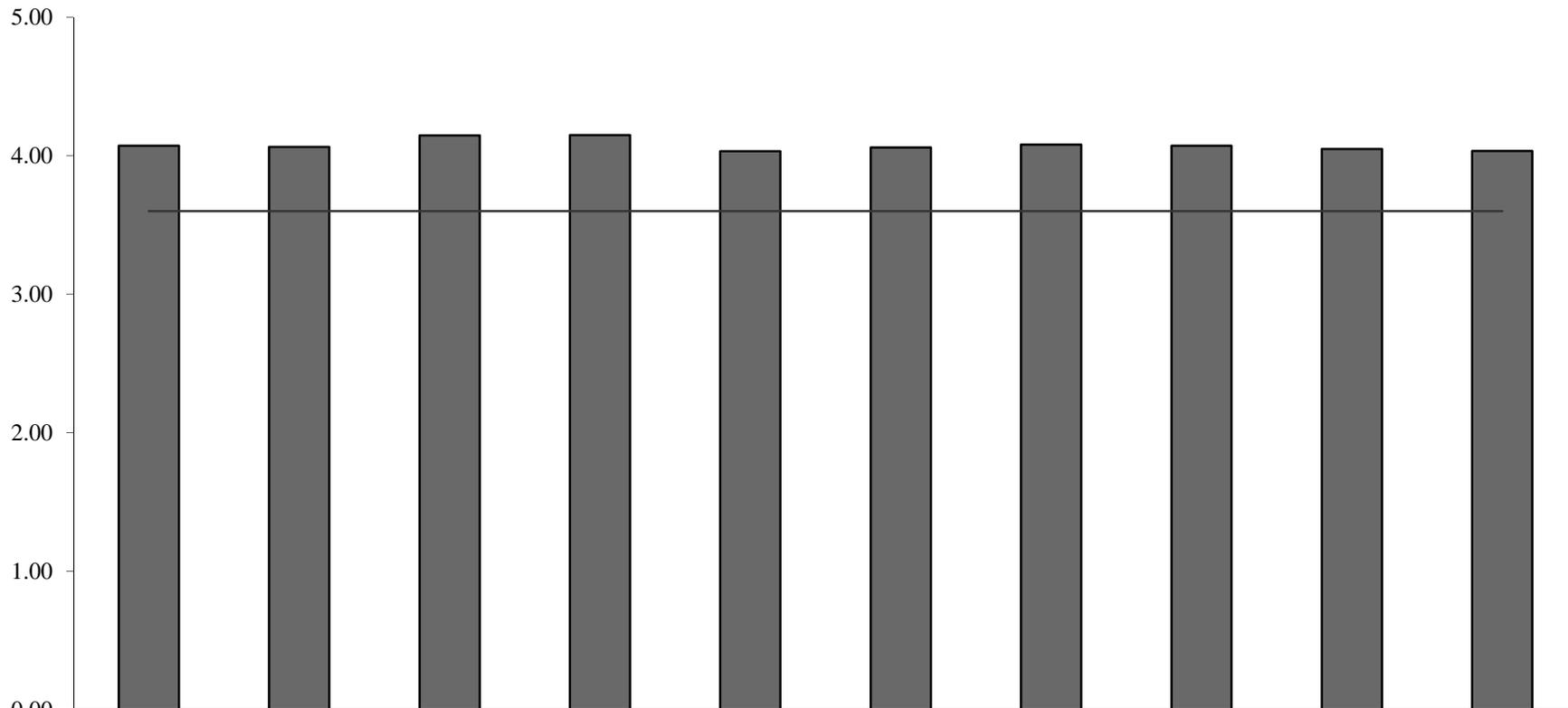
Bar charts showing MHSIP and PSAT scores for individual state hospitals. Control chart with monthly data points of MHSIP scores for individual state hospitals and system-wide. Line chart with monthly data points of PSAT scores for individual state hospitals and system-wide.

Purpose

Monitor patients, parents and legally authorized representatives satisfaction of hospital care.

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
All State MH Hospitals

Adults & Adolescents Survey
Q1 FY2015



■ Score

— Expectation

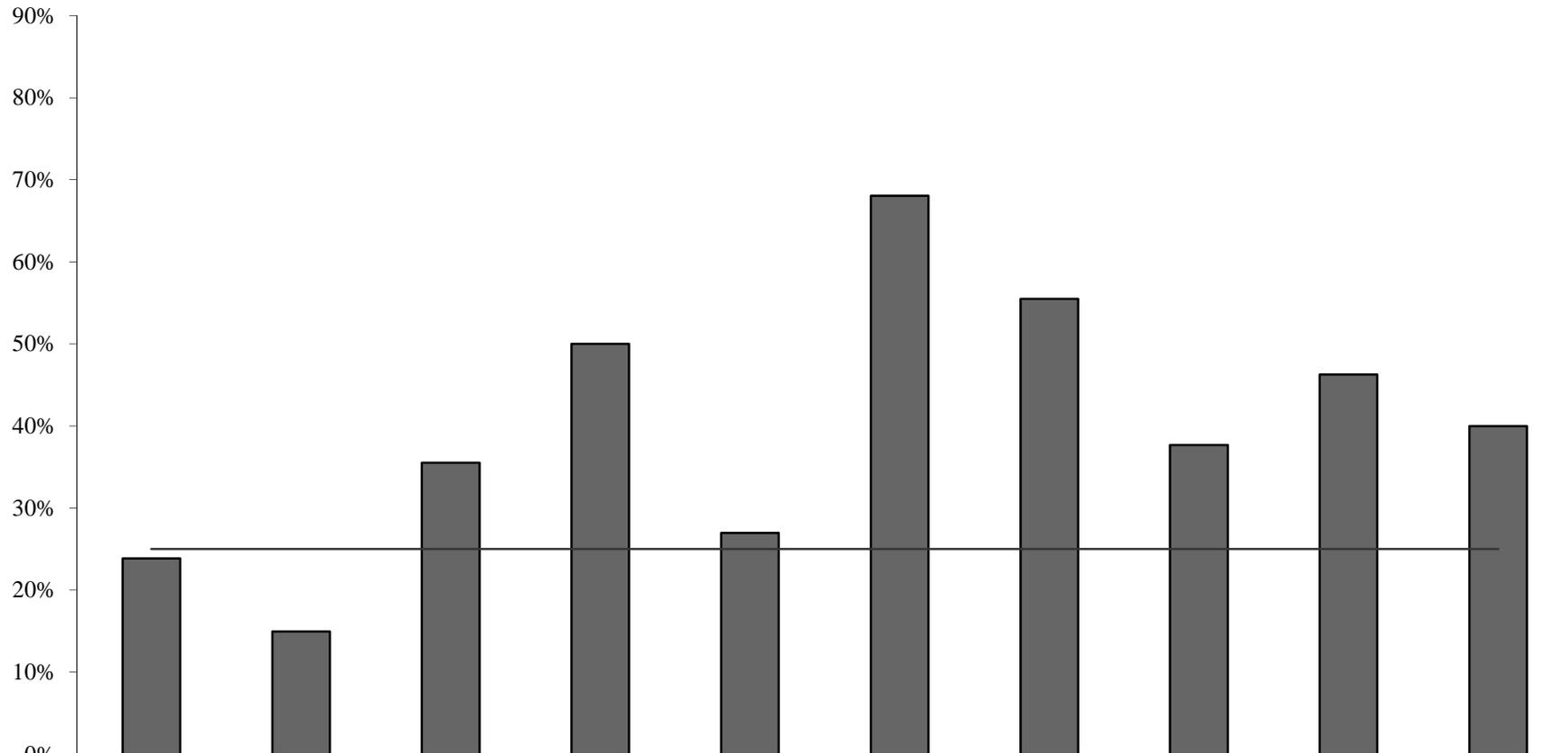
*WCFY - Adolescent Surveys Only

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

Chart: Office of Decision Support

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
All State MH Hospitals

**Percentage of Adult & Adolescent Surveys Completed
 Q1 FY15**



| | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | WCFY* |
|---------------|-----|------|------|-----|------|------|-----|------|-----|-------|
| Discharges | 453 | 147 | 214 | 14 | 471 | 169 | 137 | 337 | 497 | 35 |
| Surveys | 108 | 22 | 76 | 7 | 127 | 115 | 76 | 127 | 230 | 14 |
| █ % Surveyed | 24% | 15% | 36% | 50% | 27% | 68% | 55% | 38% | 46% | 40% |
| — Expectation | 25% | 25% | 25% | 25% | 25% | 25% | 25% | 25% | 25% | 25% |

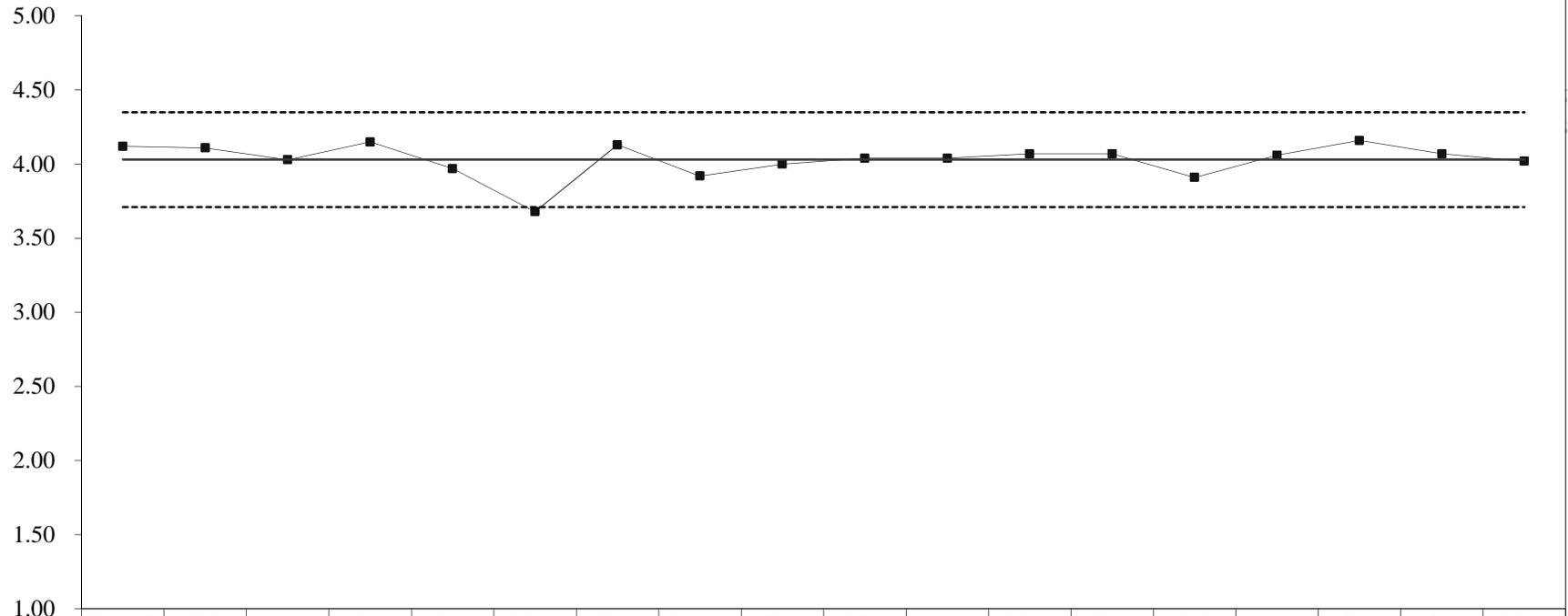
*WCFY - Adolescent Surveys Only

**KSH - Provide surveys on request & offer them to annual reviews.

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
All State MH Hospitals

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)

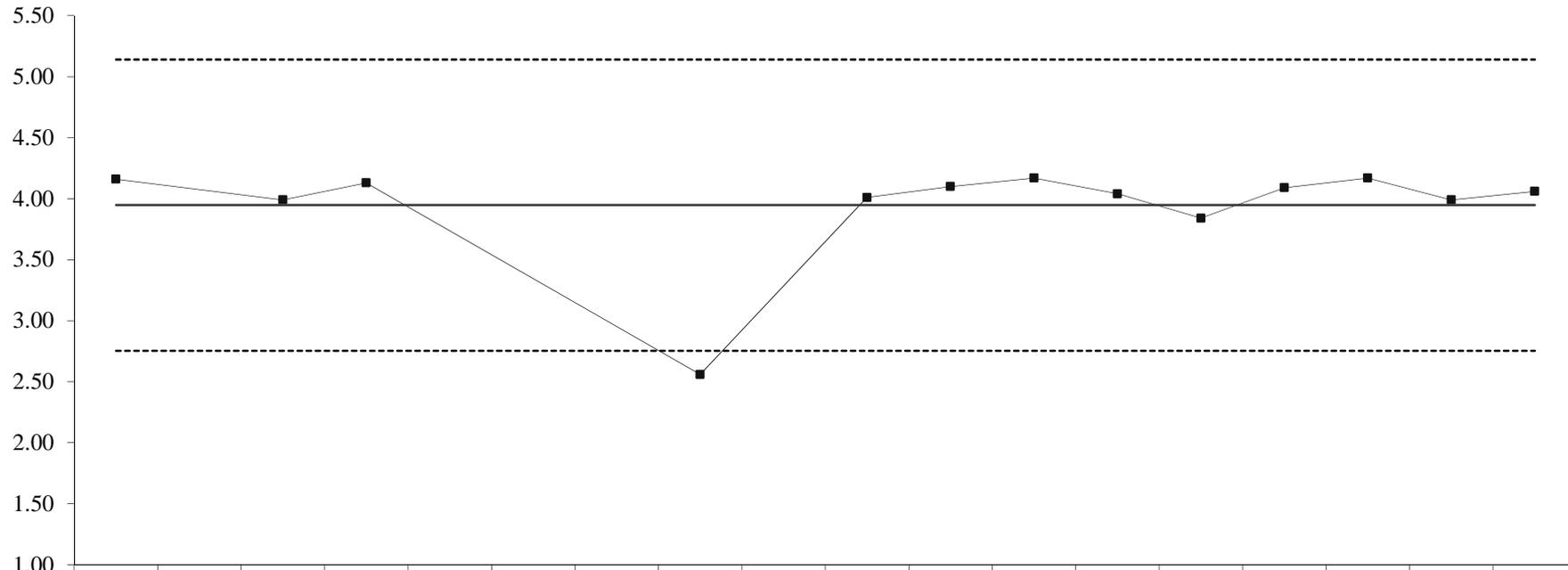


| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|-------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| —■— Score | 4.12 | 4.11 | 4.03 | 4.15 | 3.97 | 3.68 | 4.13 | 3.92 | 4.00 | 4.04 | 4.04 | 4.07 | 4.07 | 3.91 | 4.06 | 4.16 | 4.07 | 4.02 |
| Surveys | 376 | 356 | 293 | 278 | 290 | 182 | 217 | 239 | 264 | 343 | 323 | 339 | 300 | 372 | 307 | 315 | 322 | 265 |
| Discharges | 1095 | 1204 | 1189 | 10313 | 1131 | 899 | 874 | 950 | 927 | 890 | 910 | 882 | 863 | 987 | 891 | 836 | 926 | 712 |
| % Sampled | 34% | 30% | 25% | 3% | 26% | 20% | 25% | 25% | 28% | 39% | 35% | 38% | 35% | 38% | 34% | 38% | 35% | 37% |
| ----- UCL | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 | 4.35 |
| ———— Avg | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 |
| ----- LCL | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 | 3.71 |

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
Austin State Hospital

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)



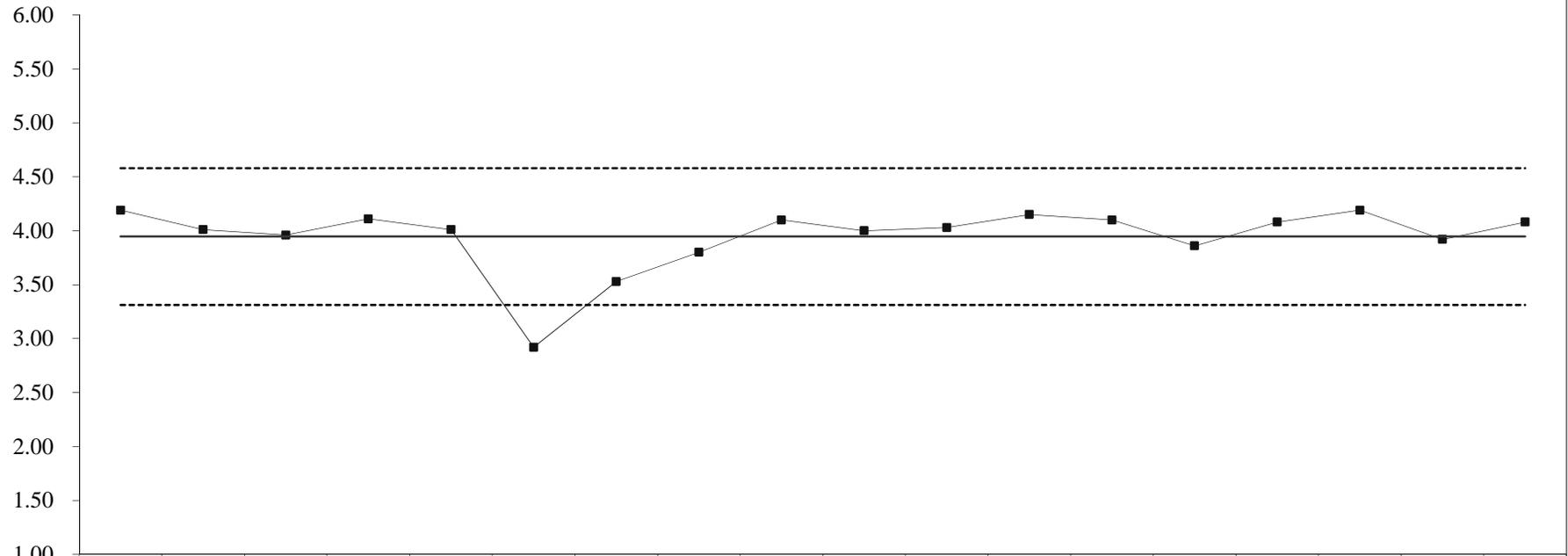
| | Jun-13 | Jul* | Aug | Sep | Oct* | Nov* | Dec* | Jan-14 | Feb* | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| —■— Score | 4.16 | | 3.99 | 4.13 | | | | 2.56 | | 4.01 | 4.10 | 4.17 | 4.04 | 3.84 | 4.09 | 4.17 | 3.99 | 4.06 |
| Surveys | 37 | 0 | 40 | 9 | 0 | 0 | 0 | 1 | | 87 | 38 | 55 | 43 | 39 | 52 | 48 | 33 | 27 |
| Discharges | 252 | 307 | 292 | 262 | 248 | 244 | 231 | 223 | | 203 | 190 | 180 | 161 | 190 | 172 | 153 | 158 | 142 |
| % Sampled | 15% | 0% | 14% | 3% | 0% | 0% | 0% | 0% | 0% | 43% | 20% | 31% | 27% | 21% | 30% | 31% | 21% | 19% |
| ----- UCL | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 | 5.14 |
| ———— Avg | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 |
| ----- LCL | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 | 2.75 |

*No Survey Done

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
Big Spring State Hospital

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)

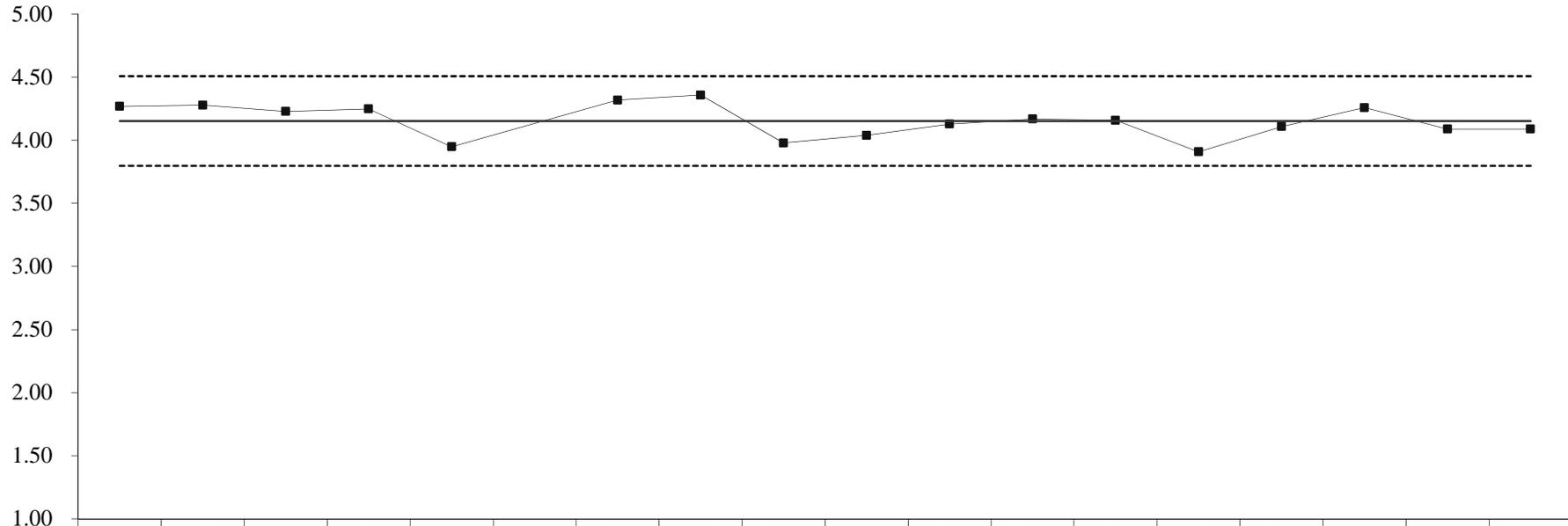


| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| —■— Score | 4.19 | 4.01 | 3.96 | 4.11 | 4.01 | 2.92 | 3.53 | 3.80 | 4.10 | 4.00 | 4.03 | 4.15 | 4.10 | 3.86 | 4.08 | 4.19 | 3.92 | 4.08 |
| Surveys | 8 | 4 | 5 | 8 | 10 | 6 | 8 | 2 | 5 | 4 | 6 | 9 | 6 | 11 | 8 | 7 | 7 | 8 |
| Discharges | 43 | 58 | 66 | 53 | 60 | 40 | 56 | 43 | 32 | 42 | 42 | 63 | 43 | 41 | 49 | 45 | 60 | 42 |
| % Sampled | 19% | 7% | 8% | 15% | 17% | 15% | 14% | 5% | 16% | 10% | 14% | 14% | 14% | 27% | 16% | 16% | 12% | 19% |
| ----- UCL | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 | 4.58 |
| ———— Avg | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 |
| ----- LCL | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 | 3.31 |

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
El Paso Psychiatric Center

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)

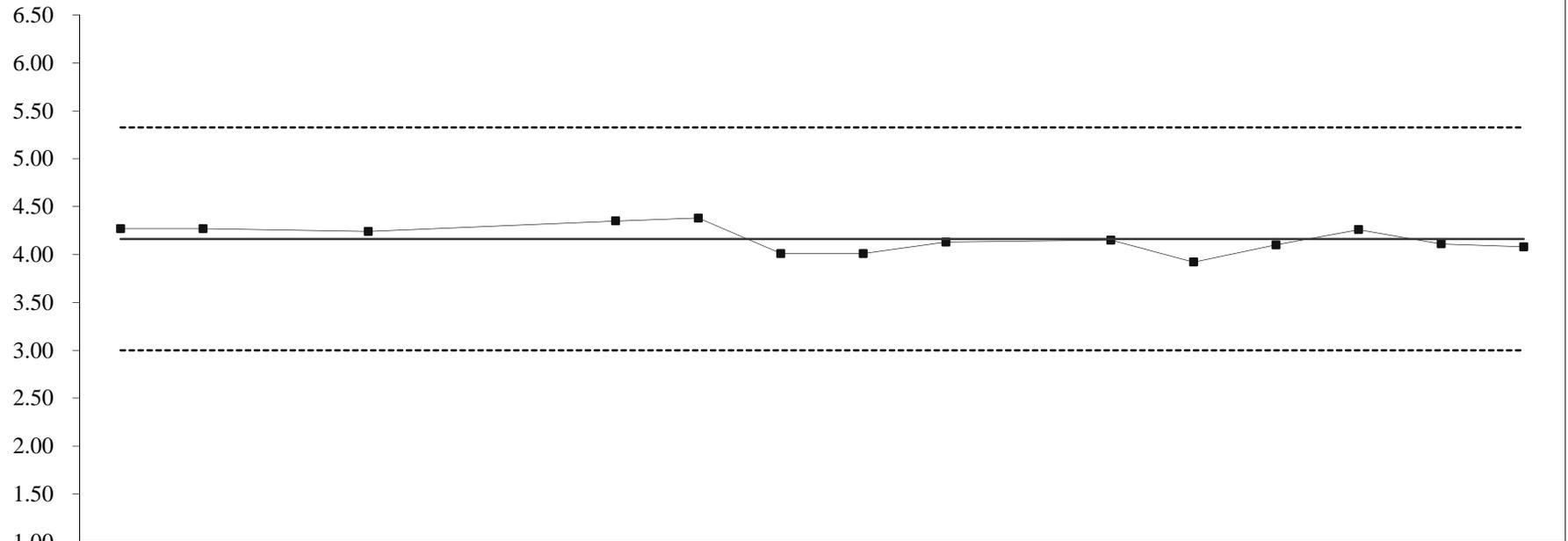


| | Jun-13 | Jul | Aug | Sep | Oct | Nov* | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Score | 4.27 | 4.28 | 4.23 | 4.25 | 3.95 | | 4.32 | 4.36 | 3.98 | 4.04 | 4.13 | 4.17 | 4.16 | 3.91 | 4.11 | 4.26 | 4.09 | 4.09 |
| Surveys | 26 | 29 | 30 | 34 | 33 | 0 | 22 | 21 | 23 | 24 | 28 | 24 | 26 | 25 | 19 | 22 | 30 | 24 |
| Discharges | 90 | 93 | 108 | 95 | 87 | 80 | 74 | 72 | 77 | 79 | 93 | 74 | 83 | 86 | 84 | 76 | 80 | 58 |
| % Sampled | 55% | 31% | 28% | 55% | 38% | 0% | 55% | 29% | 30% | 30% | 30% | 32% | 31% | 29% | 23% | 29% | 38% | 41% |
| UCL | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 | 4.51 |
| Avg | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 | 4.15 |
| LCL | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 |

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
Kerrville State Hospital

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)



| | Jun-13 | Jul | Aug* | Sep | Oct* | Nov* | Dec | Jan-14 | Feb | Mar | Apr | May* | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| —■— Score | 4.27 | 4.27 | | 4.24 | | | 4.35 | 4.38 | 4.01 | 4.01 | 4.13 | | 4.15 | 3.92 | 4.10 | 4.26 | 4.11 | 4.08 |
| Surveys | 1 | 2 | 0 | 4 | 0 | 0 | 2 | 2 | 1 | 2 | 4 | | 3 | 6 | 4 | 3 | 3 | 1 |
| Discharges | 8 | 6 | 5 | 12 | 15 | 4 | 2 | 3 | 5 | 3 | 8 | 4 | 9 | 11 | 8 | 6 | 4 | 4 |
| % Sampled | 13% | 33% | 0% | 33% | 0% | 0% | 100% | 67% | 20% | 67% | 50% | 0% | 33% | 55% | 50% | 50% | 75% | 25% |
| ----- UCL | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 | 5.33 |
| —— Avg | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 | 4.16 |
| ----- LCL | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |

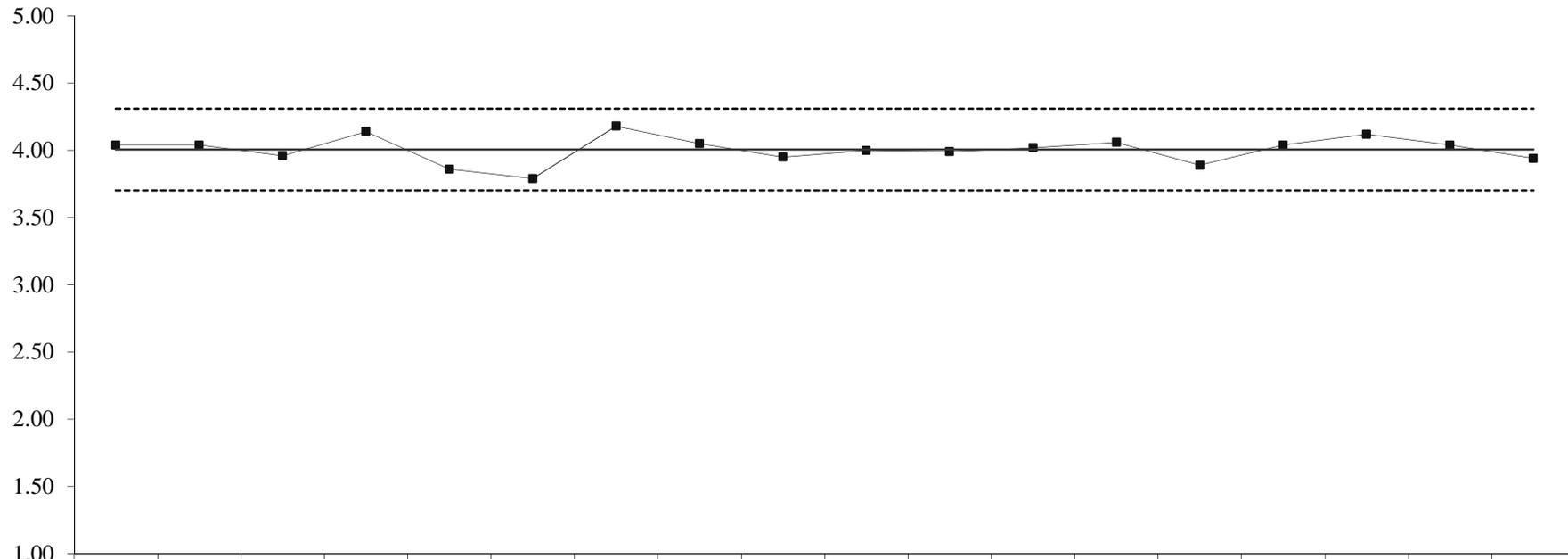
KSH provides surveys on request and offer them to annual reviews.

*No Survey Done

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
North Texas State Hospital

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)

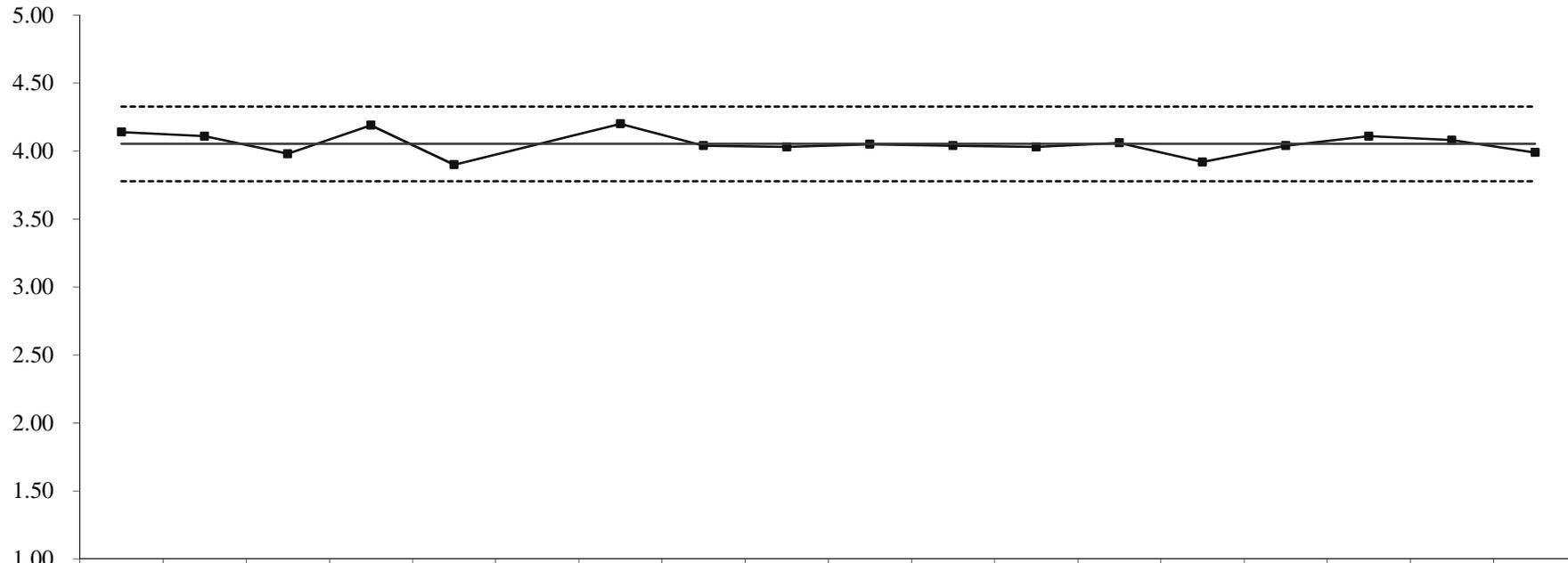


| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| —■— Score | 4.04 | 4.04 | 3.96 | 4.14 | 3.86 | 3.79 | 4.18 | 4.05 | 3.95 | 4.00 | 3.99 | 4.02 | 4.06 | 3.89 | 4.04 | 4.12 | 4.04 | 3.94 |
| Surveys | 36 | 32 | 28 | 20 | 47 | 21 | 39 | 34 | 29 | 37 | 51 | 41 | 36 | 72 | 32 | 46 | 45 | 36 |
| Discharges | 199 | 188 | 192 | 168 | 193 | 133 | 137 | 167 | 130 | 136 | 165 | 151 | 173 | 162 | 156 | 164 | 163 | 144 |
| % Sampled | 18% | 17% | 15% | 12% | 24% | 16% | 28% | 20% | 22% | 27% | 31% | 27% | 21% | 44% | 21% | 28% | 28% | 25% |
| ----- UCL | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 | 4.31 |
| ——— Avg | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 | 4.01 |
| ----- LCL | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 | 3.70 |

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
Rio Grande State Center

Adults & Adolescents will be Satisfied With Care
(Expectation is Average Score ≥ 3.60)

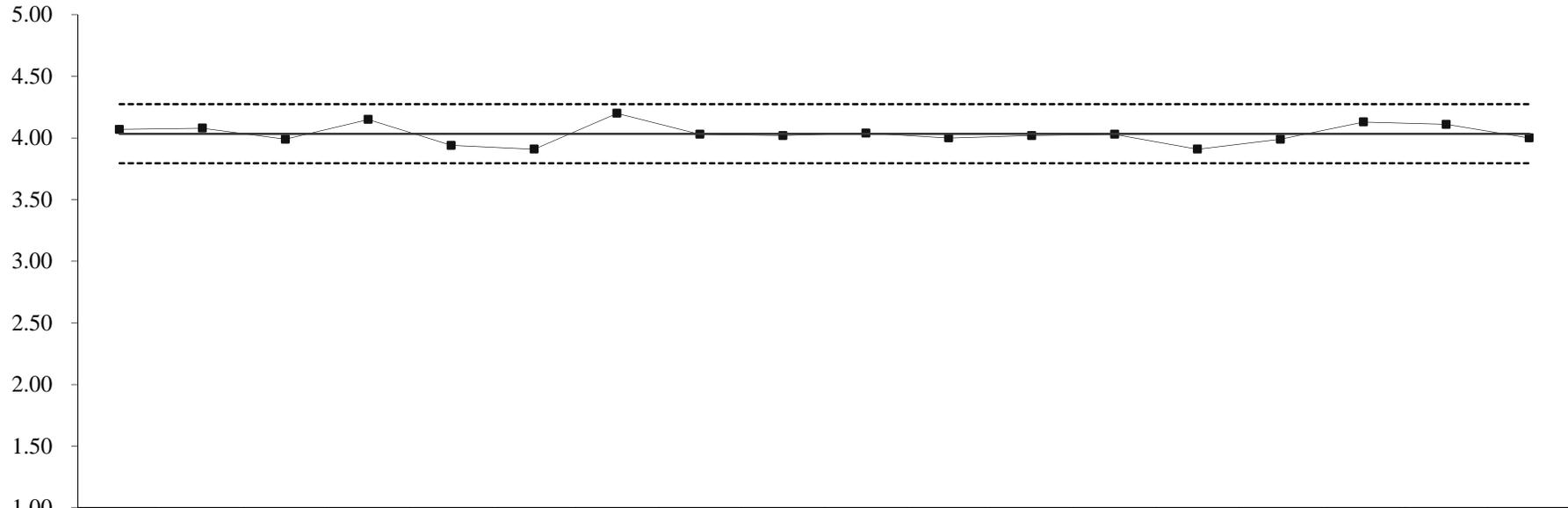


| | Jun-13 | Jul | Aug | Sep | Oct | Nov* | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul* | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| —■— Score | 4.14 | 4.11 | 3.98 | 4.19 | 3.90 | | 4.20 | 4.04 | 4.03 | 4.05 | 4.04 | 4.03 | 4.06 | 3.92 | 4.04 | 4.11 | 4.08 | 3.99 |
| Surveys | 56 | 43 | 25 | 45 | 20 | 0 | 7 | 19 | 29 | 46 | 38 | 34 | 2 | 52 | 25 | 44 | 45 | 26 |
| Discharges | 91 | 75 | 74 | 81 | 80 | 44 | 30 | 44 | 40 | 56 | 54 | 51 | 43 | 72 | 56 | 62 | 65 | 42 |
| % Sampled | 62% | 57% | 34% | 56% | 25% | 0% | 23% | 43% | 73% | 82% | 70% | 67% | 5% | 72% | 45% | 71% | 69% | 62% |
| ----- UCL | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 | 4.33 |
| ———— Avg | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 | 4.05 |
| ----- LCL | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 | 3.78 |

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
Rusk State Hospital

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)

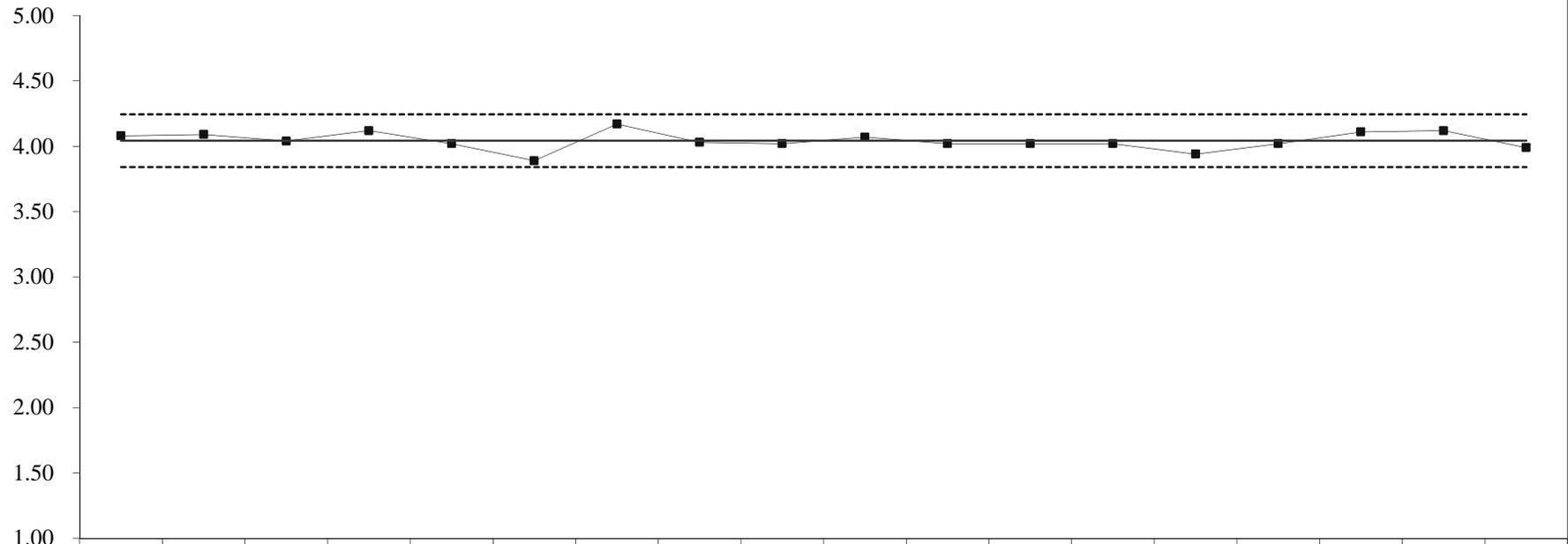


| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| —■— Score | 4.07 | 4.08 | 3.99 | 4.15 | 3.94 | 3.91 | 4.20 | 4.03 | 4.02 | 4.04 | 4.00 | 4.02 | 4.03 | 3.91 | 3.99 | 4.13 | 4.11 | 4.00 |
| Surveys | 37 | 45 | 36 | 26 | 32 | 17 | 26 | 26 | 34 | 38 | 40 | 37 | 37 | 35 | 41 | 25 | 19 | 32 |
| Discharges | 63 | 71 | 64 | 43 | 43 | 32 | 42 | 42 | 57 | 65 | 53 | 61 | 57 | 83 | 59 | 44 | 47 | 46 |
| % Sampled | 59% | 63% | 56% | 60% | 74% | 53% | 62% | 62% | 60% | 58% | 75% | 61% | 65% | 42% | 69% | 57% | 40% | 70% |
| ----- UCL | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 | 4.27 |
| ——— Avg | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 | 4.03 |
| ----- LCL | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 | 3.80 |

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
San Antonio State Hospital

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)

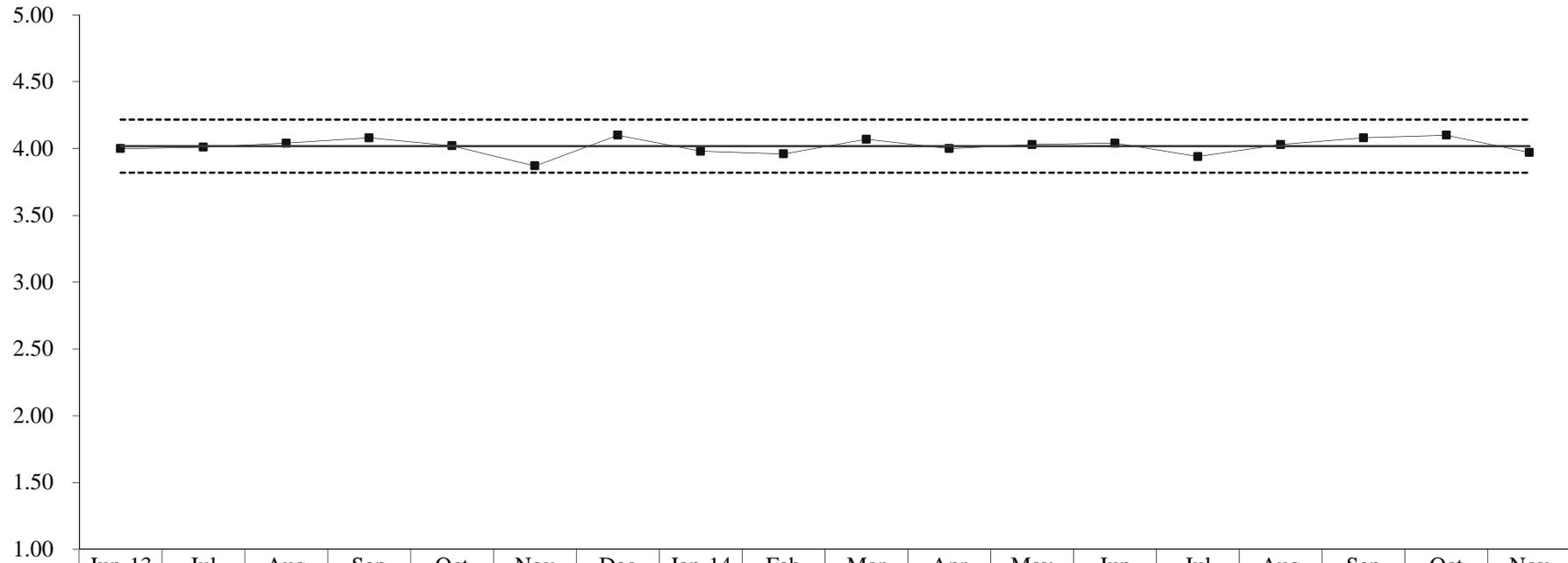


| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Score | 4.08 | 4.09 | 4.04 | 4.12 | 4.02 | 3.89 | 4.17 | 4.03 | 4.02 | 4.07 | 4.02 | 4.02 | 4.02 | 3.94 | 4.02 | 4.11 | 4.12 | 3.99 |
| Surveys | 58 | 70 | 46 | 56 | 51 | 57 | 46 | 60 | 54 | 52 | 35 | 47 | 34 | 41 | 53 | 37 | 61 | 29 |
| Discharges | 135 | 151 | 175 | 141 | 168 | 130 | 141 | 151 | 159 | 148 | 107 | 110 | 92 | 142 | 107 | 112 | 144 | 81 |
| % Sampled | 43% | 46% | 26% | 40% | 30% | 44% | 33% | 40% | 34% | 35% | 33% | 43% | 37% | 29% | 50% | 33% | 42% | 36% |
| UCL | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 | 4.24 |
| Avg | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 | 4.04 |
| LCL | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 | 3.84 |

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
Terrell State Hospital

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)

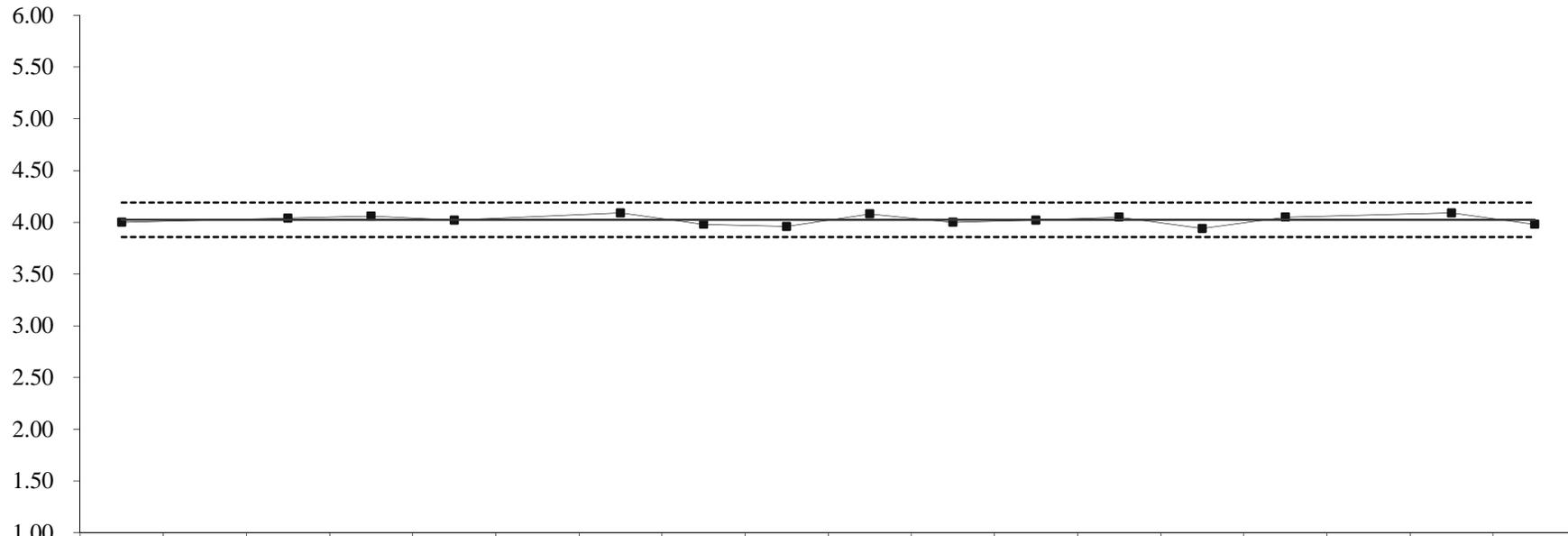


| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Score | 4.00 | 4.01 | 4.04 | 4.08 | 4.02 | 3.87 | 4.10 | 3.98 | 3.96 | 4.07 | 4.00 | 4.03 | 4.04 | 3.94 | 4.03 | 4.08 | 4.10 | 3.97 |
| Surveys | 116 | 131 | 77 | 69 | 95 | 81 | 65 | 71 | 85 | 42 | 71 | 83 | 101 | 80 | 70 | 83 | 68 | 79 |
| Discharges | 204 | 238 | 200 | 160 | 218 | 183 | 156 | 196 | 183 | 147 | 178 | 172 | 184 | 181 | 184 | 166 | 193 | 138 |
| % Sampled | 57% | 55% | 39% | 43% | 44% | 44% | 42% | 36% | 46% | 29% | 40% | 48% | 55% | 44% | 38% | 50% | 35% | 57% |
| UCL | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 | 4.22 |
| Avg | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 |
| LCL | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 | 3.82 |

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1 Patient Satisfaction
Adults and Adolescents will be Satisfied with Care
Waco Center for Youth

Adults & Adolescents will be Satisfied with Care
(Expectation is Average Score ≥ 3.60)



| | Jun-13 | Jul* | Aug | Sep | Oct | Nov* | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| —■— Score | 4.00 | | 4.04 | 4.06 | 4.02 | | 4.09 | 3.98 | 3.96 | 4.08 | 4.00 | 4.02 | 4.05 | 3.94 | 4.05 | | 4.09 | 3.98 |
| Surveys | 1 | 0 | 6 | 7 | 2 | 0 | 2 | 3 | 4 | 11 | 12 | 9 | 12 | 11 | 3 | 0 | 11 | 3 |
| Discharges | 10 | 17 | 13 | 16 | 19 | 9 | 5 | 9 | 13 | 11 | 20 | 16 | 18 | 19 | 16 | 8 | 12 | 15 |
| % Sampled | | | | 44% | 11% | 0% | 40% | 33% | 31% | 100% | 60% | 56% | 67% | 58% | 19% | 0% | 92% | 20% |
| ----- UCL | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 | 4.19 |
| ———— Avg | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 | 4.02 |
| ----- LCL | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 | 3.86 |

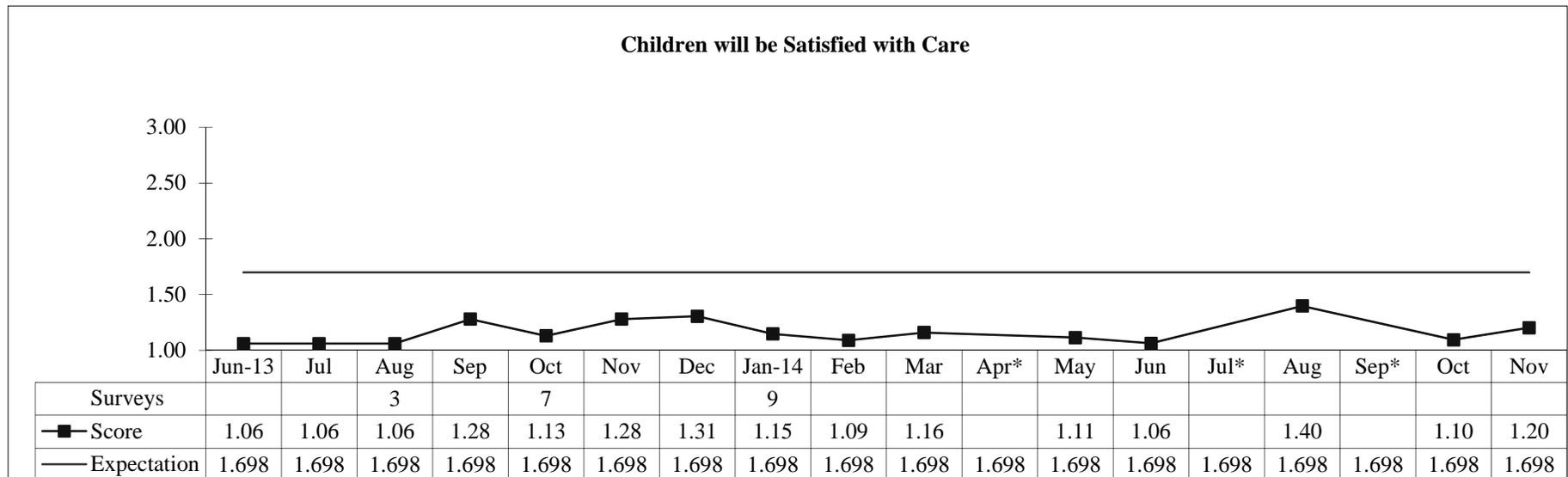
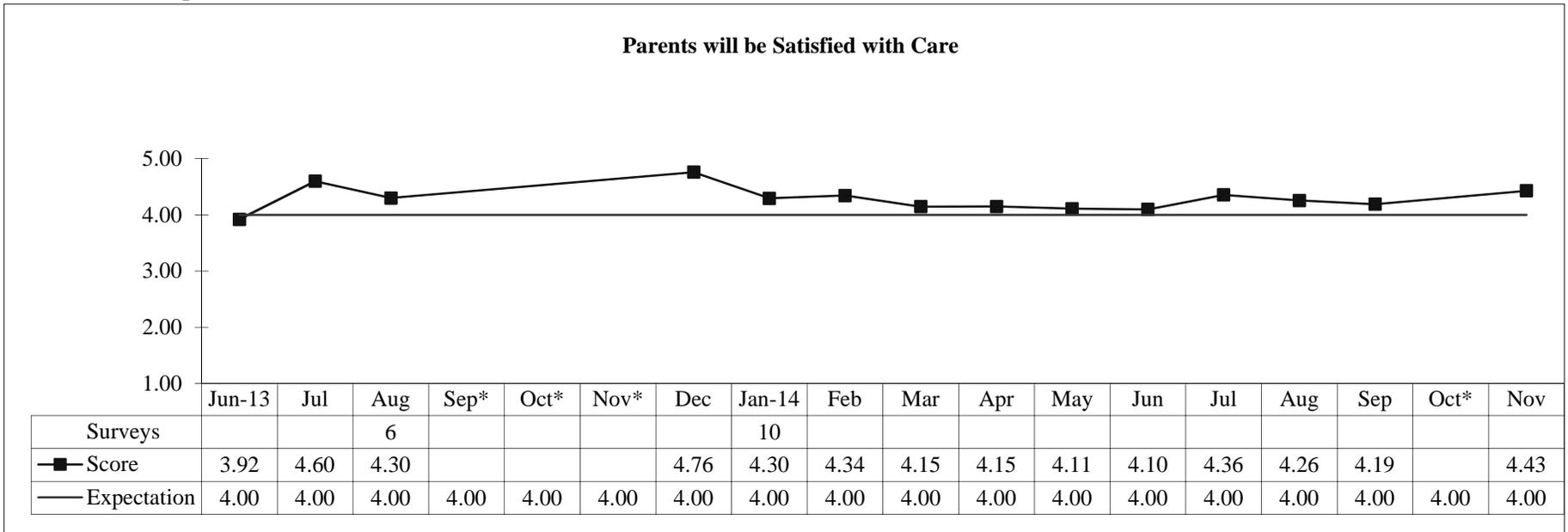
*No Survey Done

Source: CARE Report HC022020;
 Crystal Reports: Facility MHSIP ICS Score Analysis by Domain
 and MHSIP ICS Summary

CQI - 1

Children and Parents will be Satisfied with Treatment and Safe Milieu

All State MH Hospitals



PSAT software is not compatible to Windows 2010. Hospitals started entering PSAT in SharePoint March 2013.

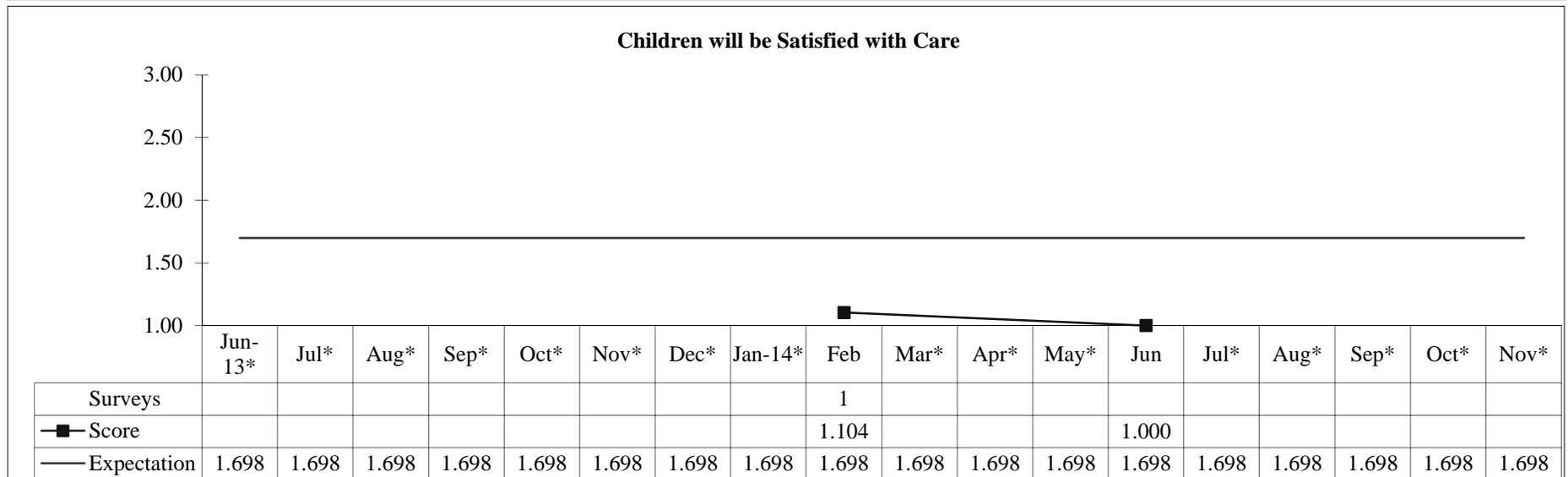
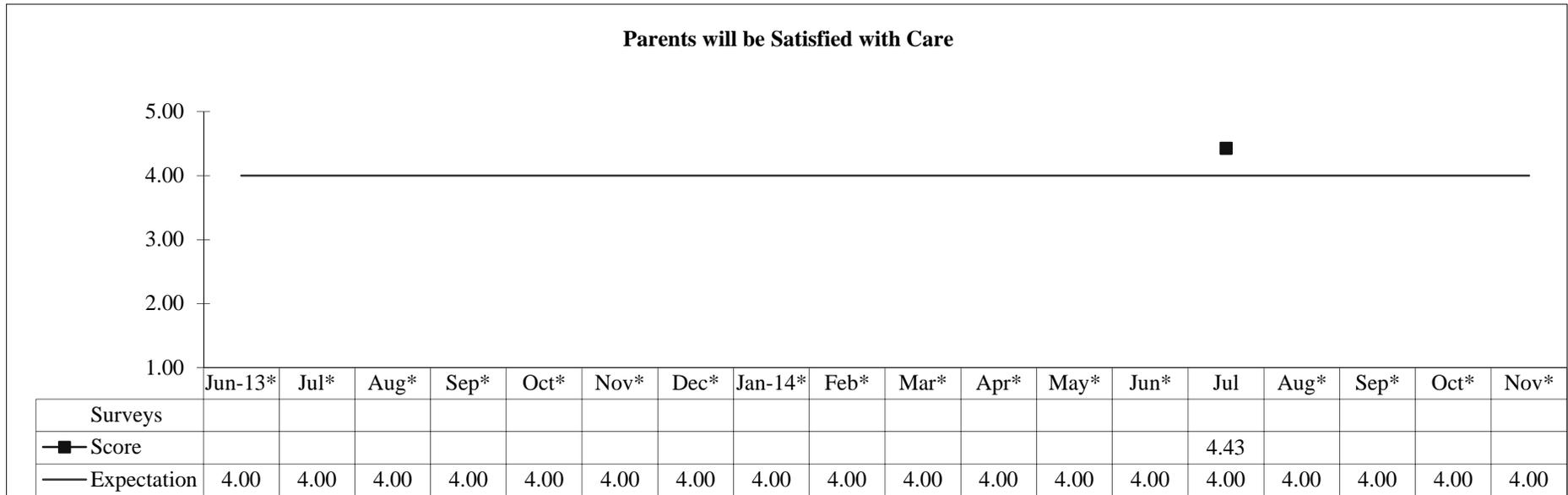
Chart: Office of Decision Support

Source: SharePoint Report - PSAT

CQI - 1

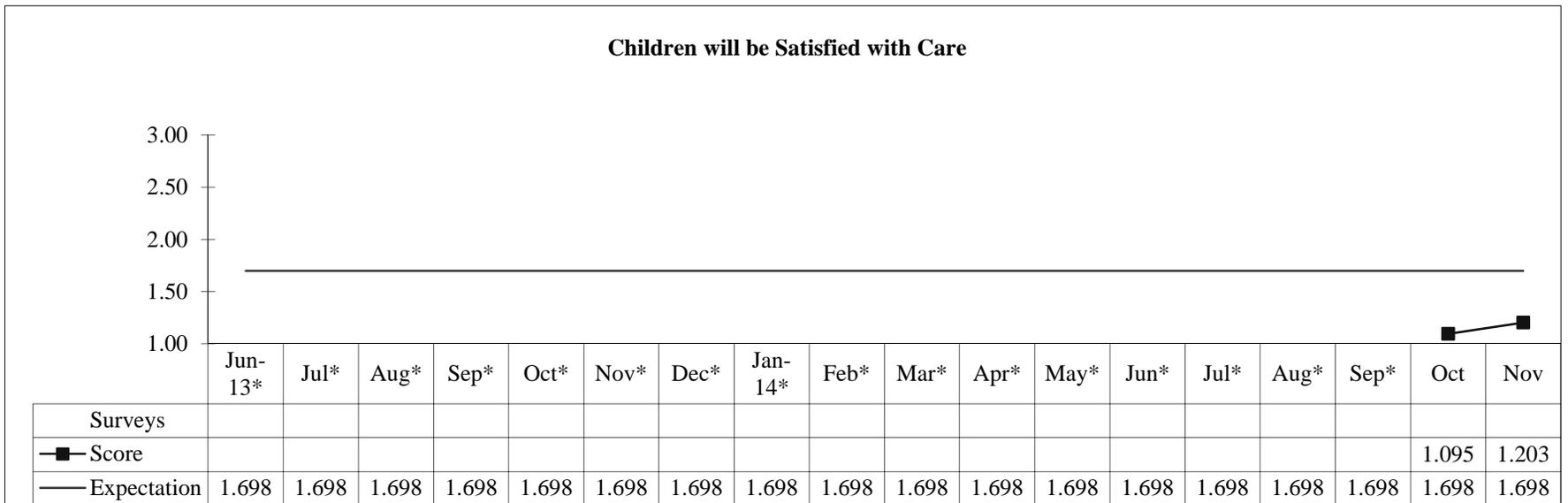
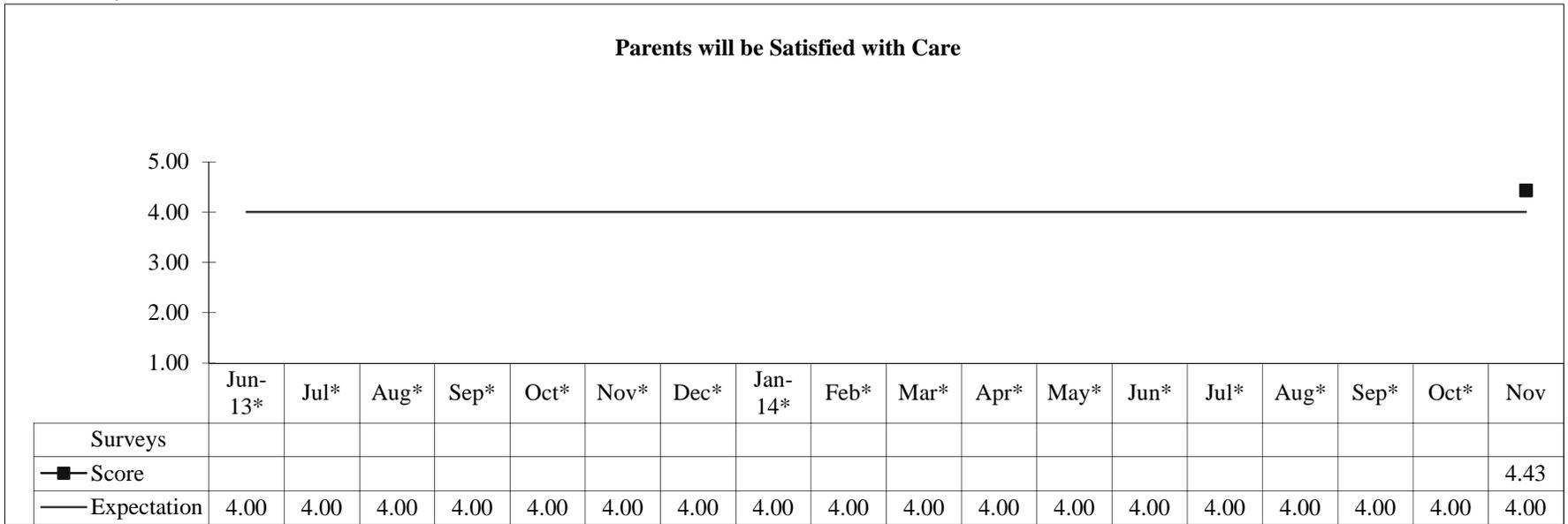
Children and Parents will be Satisfied with Treatment and Safe Milieu

Austin State Hospital



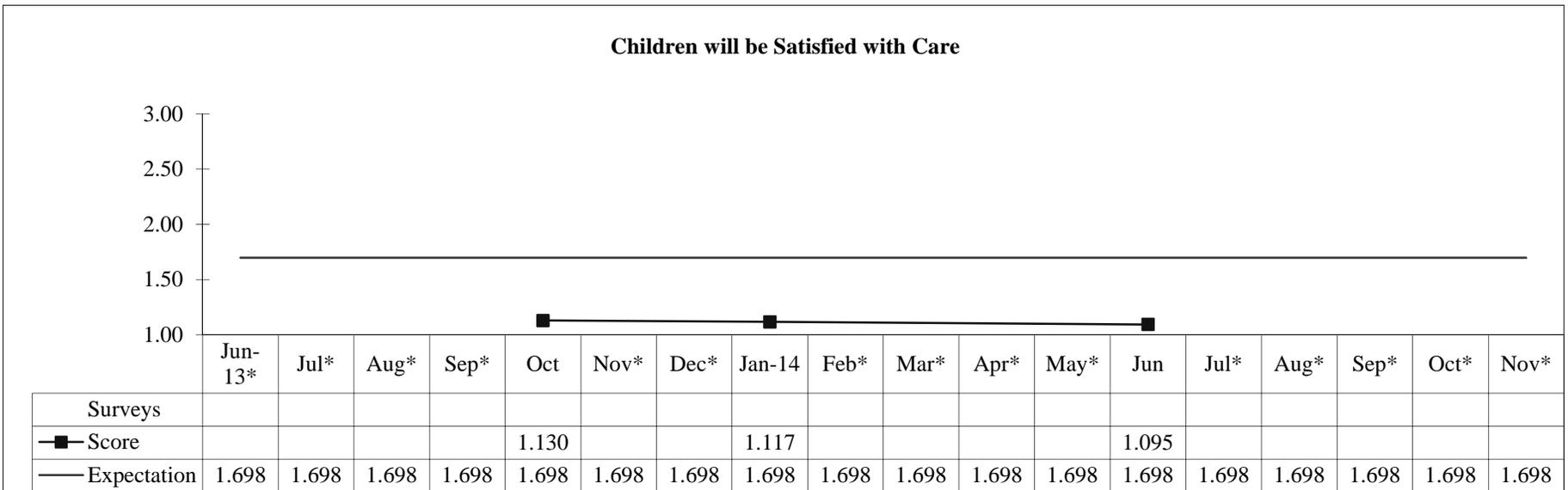
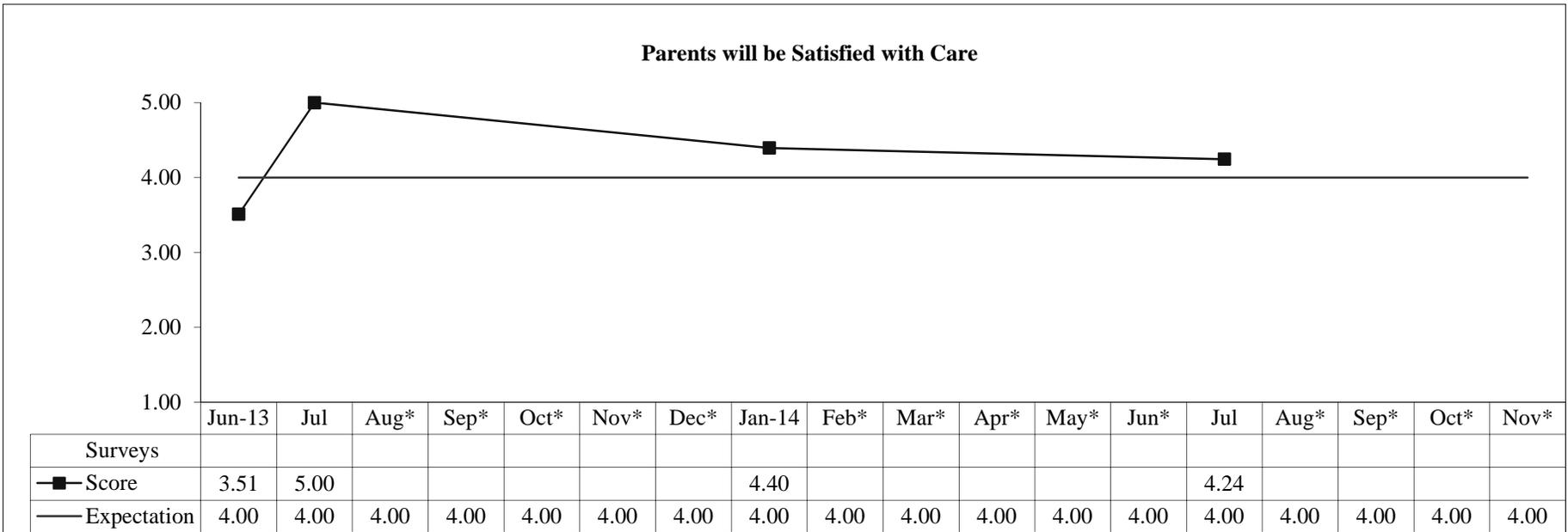
*No surveys submitted

CQI - 1
Children and Parents will be Satisfied with Treatment and Safe Milieu
El Paso Psychiatric Center



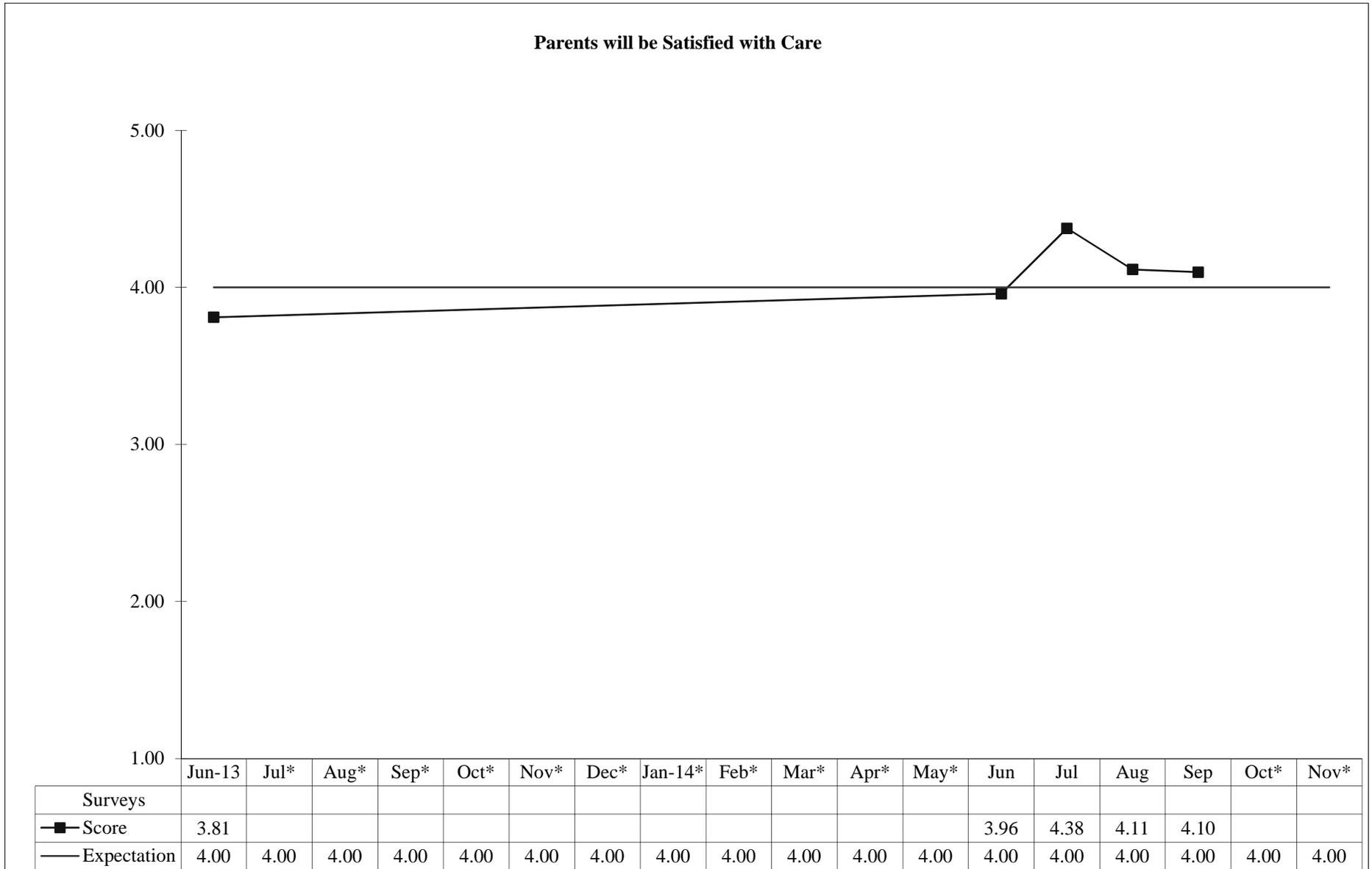
*No surveys submitted

CQI - 1
Children and Parents will be Satisfied with Treatment and Safe Milieu
North Texas State Hospital



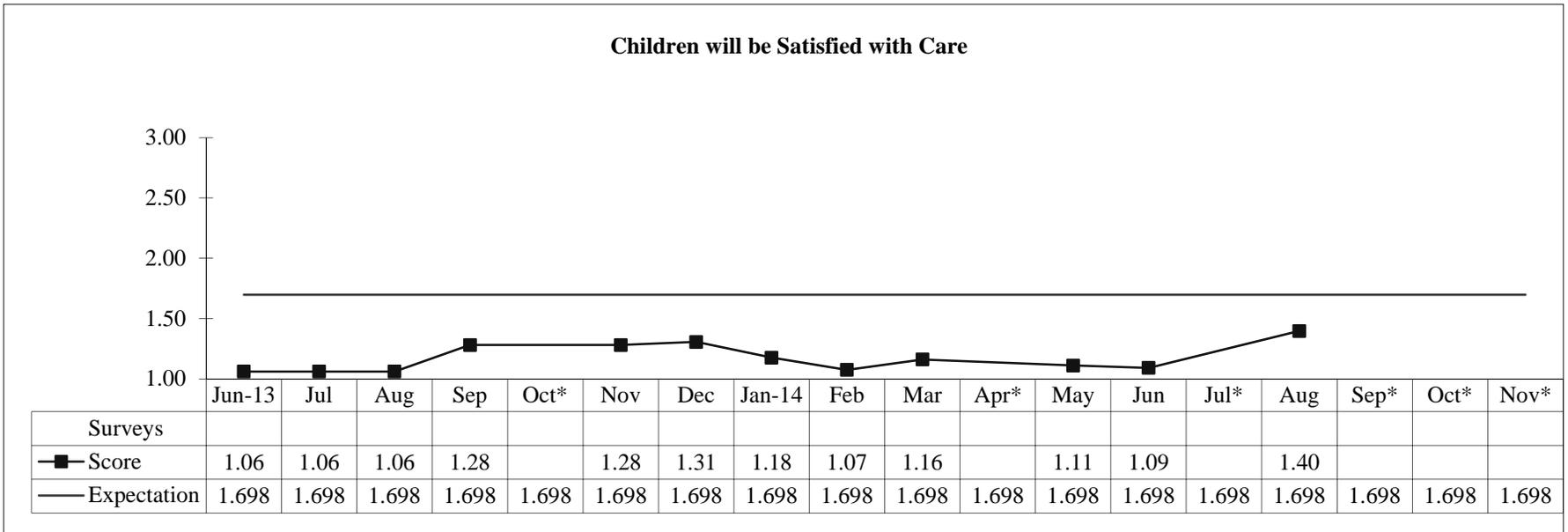
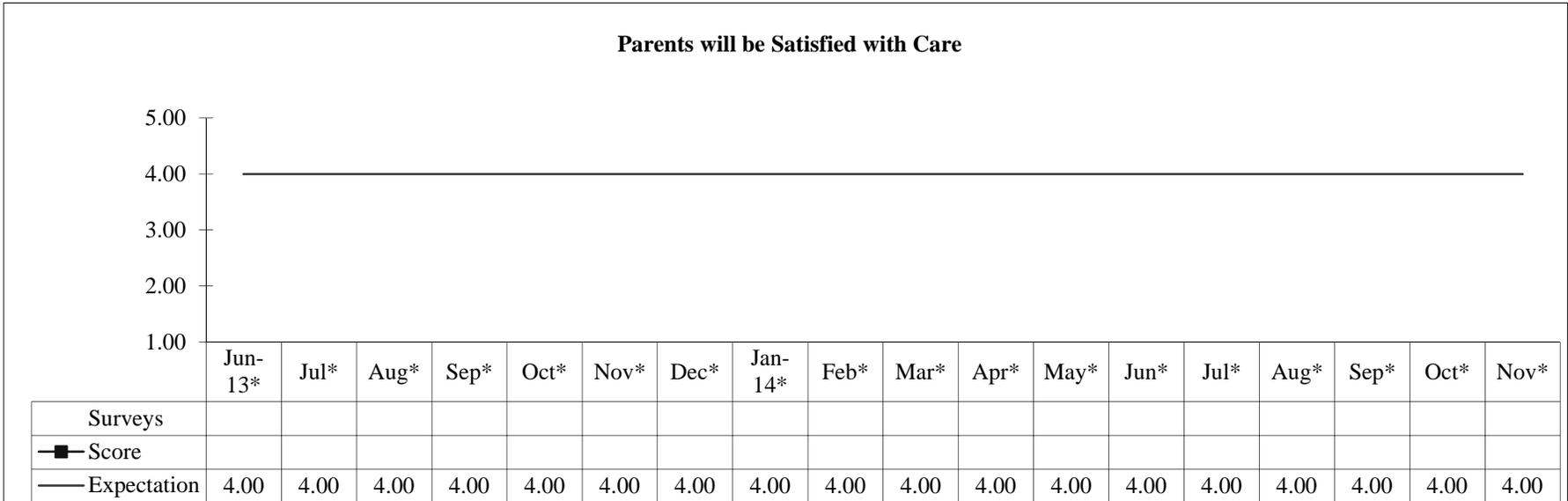
*No surveys submitted

CQI - 1
Children and Parents will be Satisfied with Treatment and Safe Milieu
San Antonio State Hospital



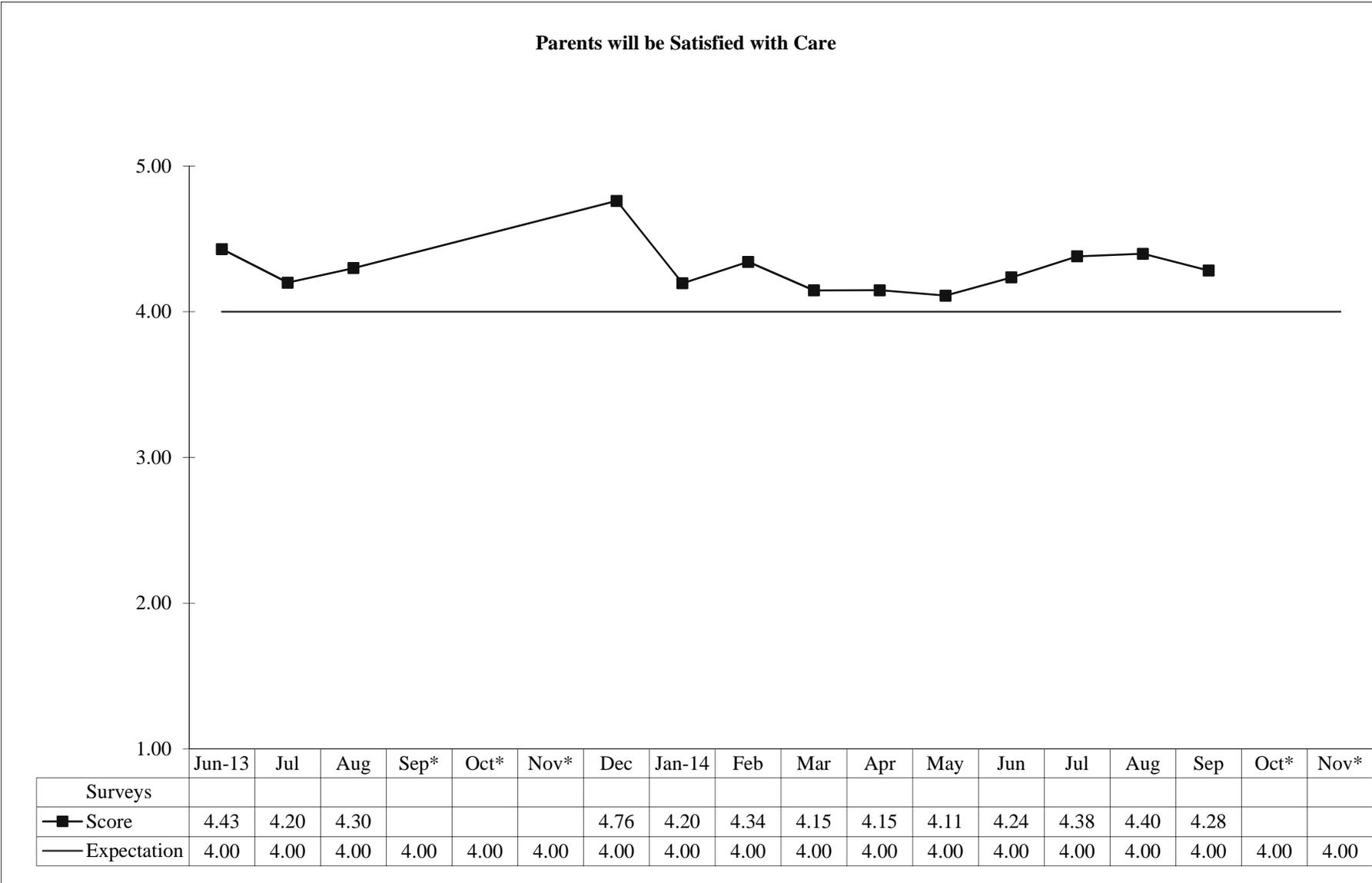
*No surveys submitted

CQI - 1
Children and Parents will be Satisfied with Treatment and Safe Milieu
Terrell State Hospital



*No surveys submitted

CQI - 1
Children and Parents will be Satisfied with Treatment and Safe Milieu
Waco Center for Youth



*No surveys submitted

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Indicator

COIO-2

Measure: Patient Complaints & Grievances

Timeframe: Quarterly

Definition

Total number of complaints and grievances from state hospitals per quarter regarding property, respect, discharge, medication, treatment team planning and other category will be tracked and analyzed. A grievance is an issue, concerning a patient's treatment, including discharge planning, not satisfactorily resolved by a member of the treatment team, the Patient Rights Office, or other administrative staff.

Data Source

Facility Report (Complaints and Grievances)

CARE Reports HC022175 & HC022185 (Unduplicated Clients Days by Account Units)

Date Display and Chart Description

Table shows quarterly numbers of complaints and grievances and rate per 1,000 bed days for individual state hospitals and system-wide. Table shows FYTD numbers of complaints and grievances and rate per 1,000 bed days for the individual state hospitals and system-wide.

Purpose

Monitor patient complaints and grievances.

**CQIO - 2 Patient Complaints & Grievances
All State Hospitals - Q1 FY15**

| Complaints | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | TCID | WCFY | System Total |
|---------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|---------------------|
| Property | 14 | 18 | 10 | 1 | 18 | 0 | 12 | 10 | 29 | 0 | 3 | 115 |
| Per 1,000 Bed Days | 0.60 | 1.09 | 1.66 | 0.06 | 0.35 | 0.00 | 0.42 | 0.40 | 1.32 | 0.00 | 0.45 | 0.56 |
| Respect | 14 | 18 | 5 | 3 | 16 | 3 | 27 | 7 | 7 | 1 | 16 | 117 |
| Per 1,000 Bed Days | 0.60 | 1.09 | 0.83 | 0.17 | 0.31 | 0.63 | 0.94 | 0.28 | 0.32 | 0.29 | 2.43 | 0.57 |
| Discharge | 24 | 8 | 0 | 0 | 32 | 2 | 18 | 7 | 6 | 0 | 1 | 98 |
| Per 1,000 Bed Days | 1.03 | 0.48 | 0.00 | 0.00 | 0.62 | 0.42 | 0.63 | 0.28 | 0.27 | 0.00 | 0.15 | 0.48 |
| Medication | 13 | 11 | 2 | 2 | 36 | 1 | 6 | 5 | 16 | 0 | 4 | 96 |
| Per 1,000 Bed Days | 0.56 | 0.67 | 0.33 | 0.11 | 0.70 | 0.21 | 0.21 | 0.20 | 0.73 | 0.00 | 0.61 | 0.47 |
| Treatment Team/Planning | 17 | 20 | 28 | 1 | 18 | 1 | 6 | 38 | 15 | 0 | 4 | 148 |
| Per 1,000 Bed Days | 0.73 | 1.21 | 4.66 | 0.06 | 0.35 | 0.21 | 0.21 | 1.51 | 0.69 | 0.00 | 0.61 | 0.72 |
| HIPAA | 2 | 1 | 0 | 0 | 2 | 0 | 4 | 3 | 0 | 0 | 0 | 12 |
| Per 1,000 Bed Days | 0.09 | 0.06 | 0.00 | 0.00 | 0.04 | 0.00 | 0.14 | 0.12 | 0.00 | 0.00 | 0.00 | 0.06 |
| Others | 72 | 4 | 13 | 10 | 60 | 4 | 69 | 133 | 46 | 1 | 82 | 494 |
| Per 1,000 Bed Days | 3.08 | 0.24 | 2.16 | 0.57 | 1.16 | 0.84 | 2.41 | 5.28 | 2.10 | 0.29 | 12.44 | 2.40 |
| Total | 156 | 80 | 58 | 17 | 182 | 11 | 142 | 203 | 119 | 2 | 110 | 1080 |
| Per 1,000 Bed Days | 6.68 | 4.84 | 9.64 | 0.96 | 3.53 | 2.30 | 4.96 | 8.06 | 5.44 | 0.59 | 16.68 | 5.25 |

**CQIO - 2 Patient Complaints & Grievances
All State Hospitals - Q1 FY15**

| Grievances | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | TCID | WCFY | System Total |
|---------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|---------------------|
| Property | 0 | 1 | 0 | 1 | 7 | 0 | 0 | 1 | 0 | 0 | 0 | 10 |
| Per 1,000 Bed Days | 0.00 | 0.06 | 0.00 | 0.06 | 0.14 | 0.00 | 0.00 | 0.04 | 0.00 | 0.00 | 0.00 | 0.05 |
| Respect | 0 | 0 | 0 | 1 | 12 | 0 | 2 | 0 | 0 | 0 | 0 | 15 |
| Per 1,000 Bed Days | 0.00 | 0.00 | 0.00 | 0.06 | 0.23 | 0.00 | 0.07 | 0.00 | 0.00 | 0.00 | 0.00 | 0.07 |
| Discharge | 24 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 24 |
| Per 1,000 Bed Days | 1.03 | 0.00 | 0.12 |
| Medication | 11 | 0 | 0 | 0 | 7 | 0 | 1 | 0 | 0 | 0 | 0 | 19 |
| Per 1,000 Bed Days | 0.47 | 7.00 | 0.00 | 0.00 | 0.14 | 0.00 | 0.03 | 0.00 | 0.00 | 0.00 | 0.00 | 0.09 |
| Treatment Team/Planning | 11 | 0 | 0 | 0 | 2 | 0 | 0 | 2 | 0 | 0 | 0 | 15 |
| Per 1,000 Bed Days | 0.47 | 0.00 | 0.00 | 0.00 | 0.04 | 0.00 | 0.00 | 0.08 | 0.00 | 0.00 | 0.00 | 0.07 |
| HIPAA | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 0 | 0 | 0 | 0 | 5 |
| Per 1,000 Bed Days | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.17 | 0.00 | 0.00 | 0.00 | 0.00 | 0.02 |
| Others | 4 | 0 | 0 | 2 | 19 | 0 | 4 | 1 | 0 | 0 | 0 | 30 |
| Per 1,000 Bed Days | 0.17 | 0.00 | 0.00 | 0.11 | 0.37 | 0.00 | 0.14 | 0.04 | 0.00 | 0.00 | 0.00 | 0.15 |
| Total | 50 | 1 | 0 | 4 | 47 | 0 | 12 | 4 | 0 | 0 | 0 | 118 |
| Per 1,000 Bed Days | 2.14 | 0.06 | 0.00 | 0.23 | 0.91 | 0.00 | 0.42 | 0.16 | 0.00 | 0.00 | 0.00 | 0.57 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Indicator

COIO-3

Indicator: Identify, Collect, Aggregate and Analyze Medication Errors

Timeframe: Monthly

Definition

The number of state hospital medication errors as documented on the Medication Error Information Report form per month.

Data Source

ODS Medication Errors by Category Report

CARE Reports HC022175 & HC022185 (Unduplicated Clients Days by Account Units)

Date Display and Chart Description

Chart with the number of medication errors causing no patient harm; causing patient harm; and causing patient death for individual state hospitals and system-wide. Chart with the number of medication errors YTD, in each category, chart with monthly data points, for the total number of variances for individual state hospitals and system-wide. Chart shows number of medication errors and rate (per 1000 bed days) for individual hospitals and system-wide.

Purpose

Monitor medication errors.

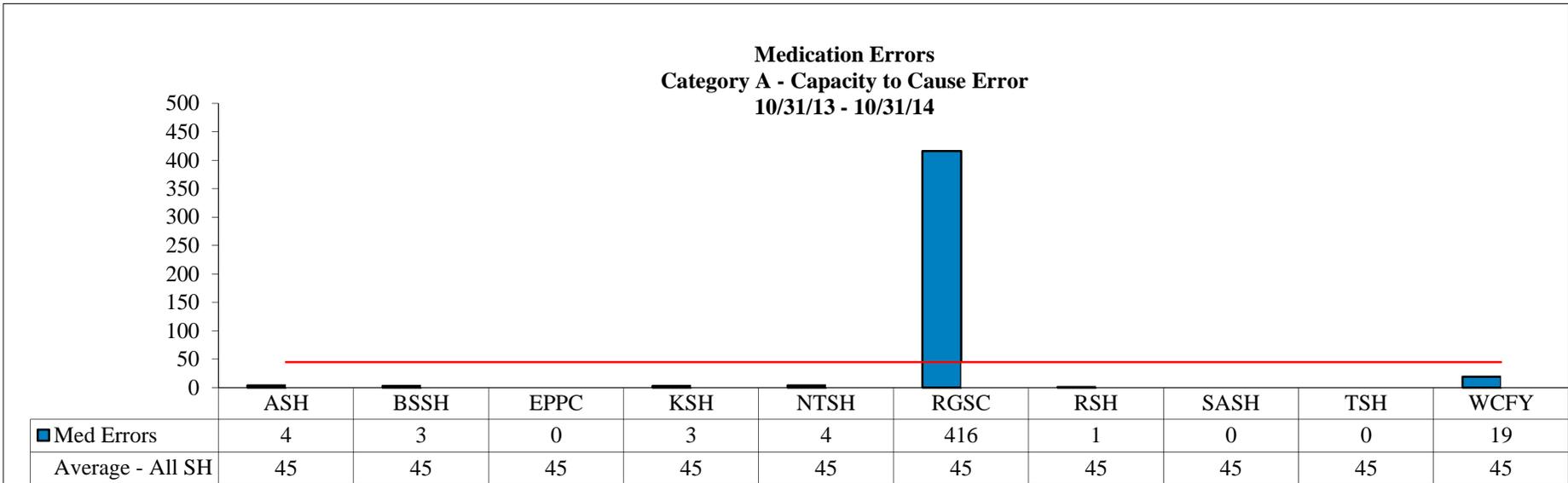
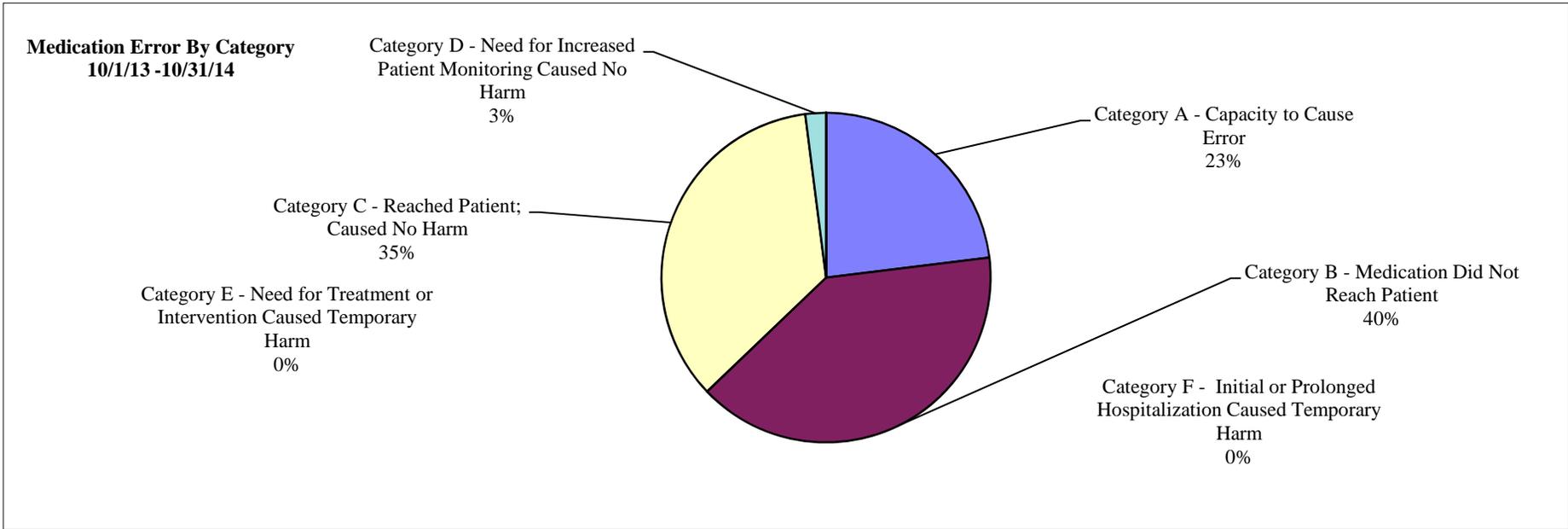
**CQIO - 3 Medication Variance Data
All State Hospitals**

| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct |
|-----------------------------------|--------|-------|-------|-------|--------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| AUSTIN STATE HOSPITAL | | | | | | | | | | | | | | |
| Medication Errors | 9 | 7 | 8 | 6 | 6 | 4 | 7 | 5 | 7 | 5 | 13 | 19 | 27 | 16 |
| Bed Days in Month | 8081 | 8762 | 8340 | 8127 | 8338 | 7517 | 7998 | 8017 | 8095 | 7488 | 7880 | 7935 | 7792 | 8013 |
| Med Errors/1000 Bed Days | 1.11 | 0.80 | 0.96 | 0.74 | 0.72 | 0.53 | 0.88 | 0.62 | 0.86 | 0.67 | 1.65 | 2.39 | 3.47 | 2.00 |
| BIG SPRING STATE HOSPITAL | | | | | | | | | | | | | | |
| Medication Errors | 9 | 9 | 9 | 9 | 10 | 5 | 2 | 8 | 6 | 8 | 4 | 16 | 13 | 15 |
| Bed Days in Month | 5956 | 6038 | 5861 | 6014 | 5891 | 5448 | 5974 | 5732 | 5900 | 5408 | 5457 | 5468 | 5234 | 5668 |
| Falls/1000 Bed Days | 1.51 | 1.49 | 1.54 | 1.50 | 1.70 | 0.92 | 0.33 | 1.40 | 1.02 | 1.48 | 0.73 | 2.93 | 2.48 | 2.65 |
| EL PASO PSYCHIATRIC CENTER | | | | | | | | | | | | | | |
| Medication Errors | 4 | 4 | 1 | 3 | 1 | 3 | 2 | 0 | 3 | 5 | 3 | 5 | 5 | 6 |
| Bed Days in Month | 1996 | 1983 | 1883 | 2187 | 2098 | 1904 | 2096 | 1948 | 2105 | 1945 | 1943 | 2031 | 1875 | 2146 |
| Med Errors/1000 Bed Days | 2.00 | 2.02 | 0.53 | 1.37 | 0.48 | 1.58 | 0.95 | 0.00 | 1.43 | 2.57 | 1.54 | 2.46 | 2.67 | 2.80 |
| KERRVILLE STATE HOSPITAL | | | | | | | | | | | | | | |
| Medication Errors | 39 | 43 | 41 | 36 | 30 | 35 | 48 | 32 | 29 | 33 | 33 | 37 | 47 | 36 |
| Bed Days in Month | 5939 | 5823 | 5645 | 5925 | 6014 | 5600 | 6214 | 5879 | 6100 | 5834 | 5951 | 5919 | 5784 | 6019 |
| Med Errors/1000 Bed Days | 6.57 | 7.38 | 7.26 | 6.08 | 4.99 | 6.25 | 7.72 | 5.44 | 4.75 | 5.66 | 5.55 | 6.25 | 8.13 | 5.98 |
| NORTH TEXAS STATE HOSPITAL | | | | | | | | | | | | | | |
| Medication Errors | 14 | 21 | 12 | 10 | 14 | 4 | 27 | 16 | 17 | 18 | 16 | 24 | 19 | 10 |
| Bed Days in Month | 17389 | 17257 | 16429 | 16623 | 16518 | 14537 | 16654 | 16705 | 17801 | 16948 | 17171 | 17823 | 17016 | 17554 |
| Med Errors/1000 Bed Days | 0.81 | 1.22 | 0.73 | 0.60 | 0.85 | 0.28 | 1.62 | 0.96 | 0.96 | 1.06 | 0.93 | 1.35 | 1.12 | 0.57 |
| RIO GRANDE STATE CENTER | | | | | | | | | | | | | | |
| Medication Errors | 100 | 77 | 72 | 5 | 3 | 19 | 30 | 13 | 31 | 114 | 73 | 26 | 7 | 17 |
| Bed Days in Month | 1526 | 1512 | 1467 | 1559 | 1570 | 1395 | 1596 | 1564 | 1537 | 1623 | 1619 | 1595 | 1576 | 1660 |
| Med Errors/1000 Bed Days | 65.53 | 50.93 | 49.08 | 3.21 | 1.91 | 13.62 | 18.80 | 8.31 | 20.17 | 70.24 | 45.09 | 16.30 | 4.44 | 10.24 |
| RUSK STATE HOSPITAL | | | | | | | | | | | | | | |
| Medication Errors | 2 | 1 | 5 | 1 | 3 | 7 | 3 | 12 | 6 | 9 | 11 | 14 | 15 | 4 |
| Bed Days in Month | 10657 | 10961 | 10459 | 10579 | 10702 | 9868 | 10140 | 9916 | 10775 | 10310 | 9768 | 9760 | 9428 | 9828 |
| Med Errors/1000 Bed Days | 0.19 | 0.09 | 0.48 | 0.09 | 0.28 | 0.71 | 0.30 | 1.21 | 0.56 | 0.87 | 1.13 | 1.43 | 1.59 | 0.41 |
| SAN ANTONIO STATE HOSPITAL | | | | | | | | | | | | | | |
| Medication Errors | 7 | 0 | 4 | 2 | 2 | 3 | 4 | 2 | 6 | 3 | 3 | 2 | 4 | 3 |
| Bed Days in Month | 7947 | 8764 | 8536 | 8349 | 8456 | 7840 | 8434 | 7832 | 8184 | 7883 | 8344 | 8335 | 8284 | 8705 |
| Med Errors/1000 Bed Days | 0.88 | 0.00 | 0.47 | 0.24 | 0.24 | 0.38 | 0.47 | 0.26 | 0.73 | 0.38 | 0.36 | 0.24 | 0.48 | 0.34 |
| TERRELL STATE HOSPITAL | | | | | | | | | | | | | | |
| Medication Errors | 5 | 3 | 21 | 15 | 4 | 27 | 34 | 19 | 18 | 10 | 23 | 12 | 8 | 6 |
| Bed Days in Month | 7260 | 7613 | 7525 | 7335 | 7462 | 6719 | 7540 | 7384 | 7750 | 7179 | 7525 | 7465 | 7227 | 7675 |
| Med Errors/1000 Bed Days | 0.69 | 0.39 | 2.79 | 2.04 | 0.54 | 4.02 | 4.51 | 2.57 | 2.32 | 1.39 | 3.06 | 1.61 | 1.11 | 0.78 |

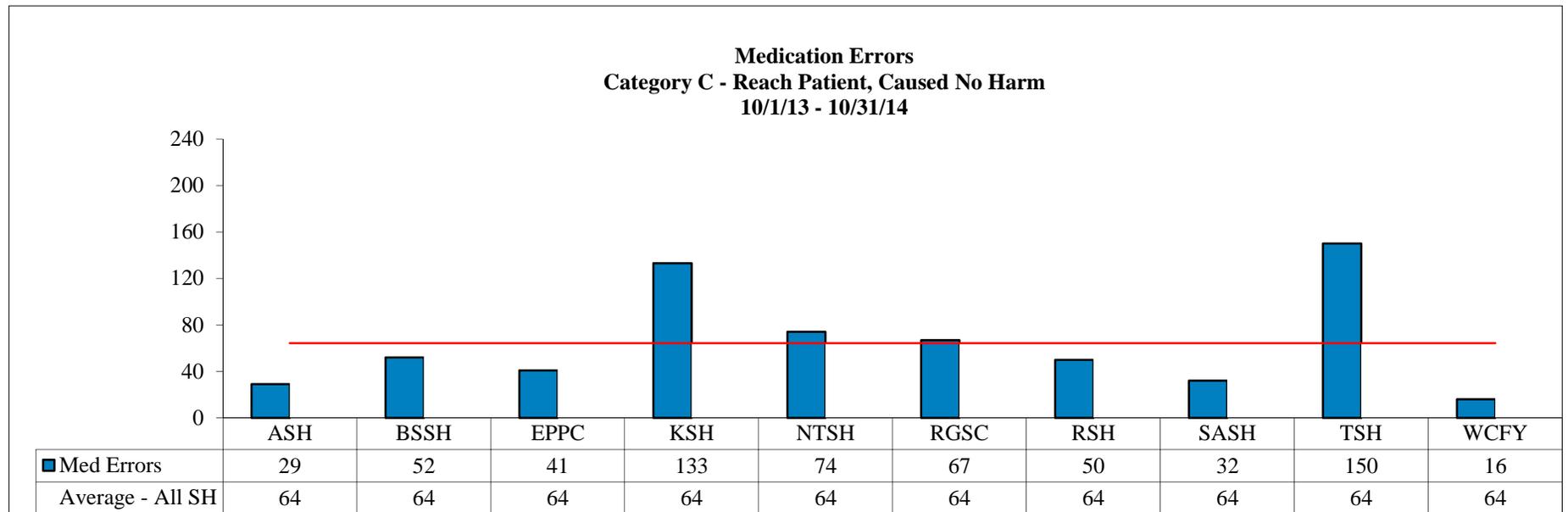
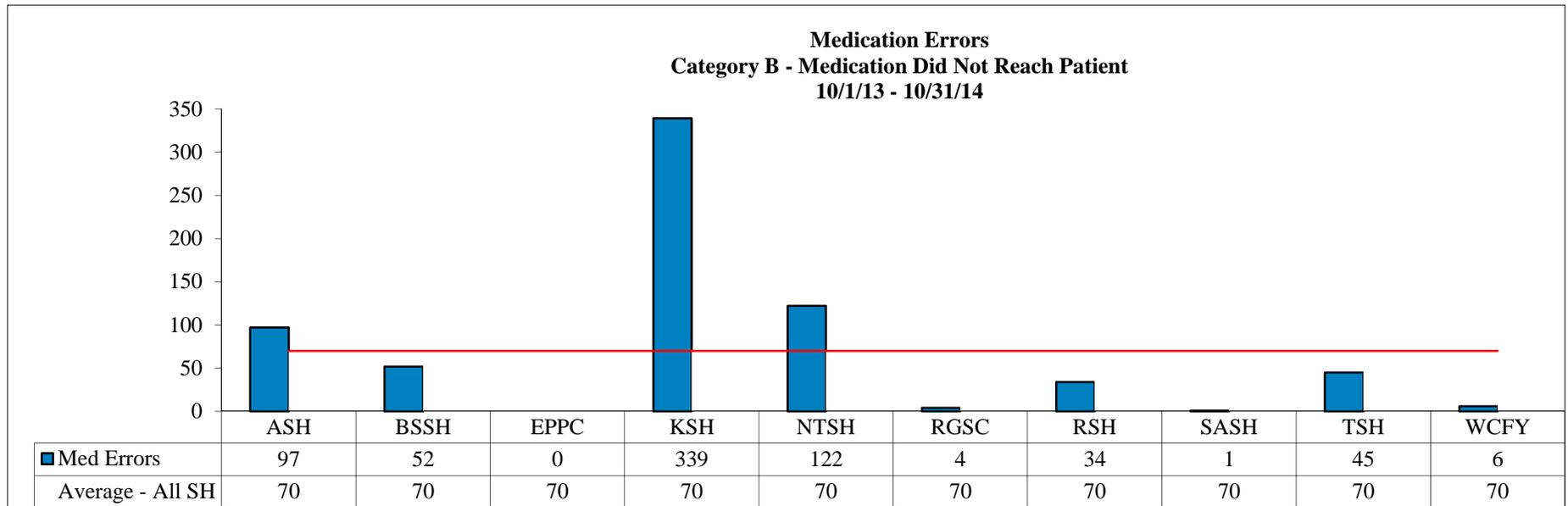
CQIO - 3 Medication Variance Data
All State Hospitals

| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct |
|--|--------|-------|-------|-------|--------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| WACO CENTER FOR YOUTH | | | | | | | | | | | | | | |
| Medication Errors | 6 | 0 | 0 | 10 | 1 | 1 | 13 | 2 | 4 | 3 | 1 | 0 | 3 | 3 |
| Bed Days in Month | 2278 | 2253 | 2214 | 2312 | 2327 | 2104 | 2248 | 2290 | 2236 | 2173 | 2208 | 2196 | 2182 | 2310 |
| Med Errors/1000 Bed Days | 2.63 | 0.00 | 0.00 | 4.33 | 0.43 | 0.48 | 5.78 | 0.87 | 1.79 | 1.38 | 0.45 | 0.00 | 1.37 | 1.30 |
| TEXAS CENTER FOR INFECTIOUS DISEASE | | | | | | | | | | | | | | |
| Medication Errors | 6 | 6 | 6 | 1 | 1 | 2 | 2 | 3 | 1 | 6 | 3 | | 5 | 9 |
| Bed Days in Month | 1067 | 1081 | 1045 | 1002 | 922 | 853 | 1030 | 1043 | 1140 | 1138 | 1168 | 1180 | 1134 | 1150 |
| Med Errors/1000 Bed Days | 5.62 | 5.55 | 5.74 | 1.00 | 1.08 | 2.34 | 1.94 | 2.88 | 0.88 | 5.27 | 2.57 | 0.00 | 4.41 | 7.83 |
| ALL STATE HOSPITALS | | | | | | | | | | | | | | |
| Medication Errors | 201 | 171 | 179 | 98 | 75 | 110 | 172 | 112 | 128 | 214 | 183 | 155 | 153 | 125 |
| Bed Days in Month | 70096 | 72047 | 69404 | 70012 | 70298 | 63785 | 69924 | 68310 | 71623 | 67929 | 69034 | 69707 | 67532 | 70728 |
| Med Errors/1000 Bed Days | 2.87 | 2.37 | 2.58 | 1.40 | 1.07 | 1.72 | 2.46 | 1.64 | 1.79 | 3.15 | 2.65 | 2.22 | 2.27 | 1.77 |

CQIO - 3 Medication Variance Data
All State MH Hospitals

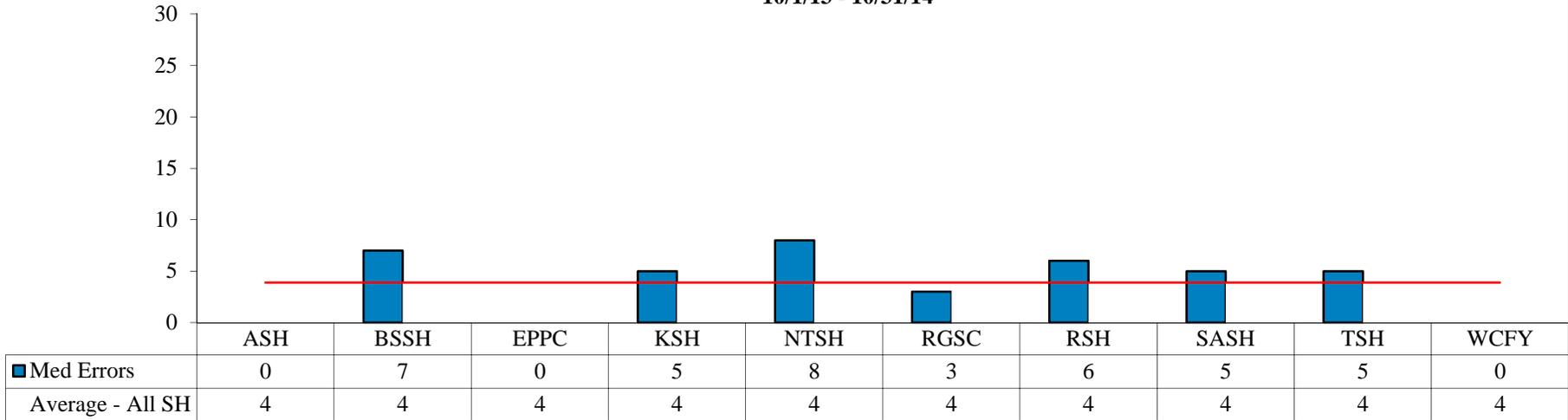


**CQIO - 3 Medication Variance Data
All State MH Hospitals**

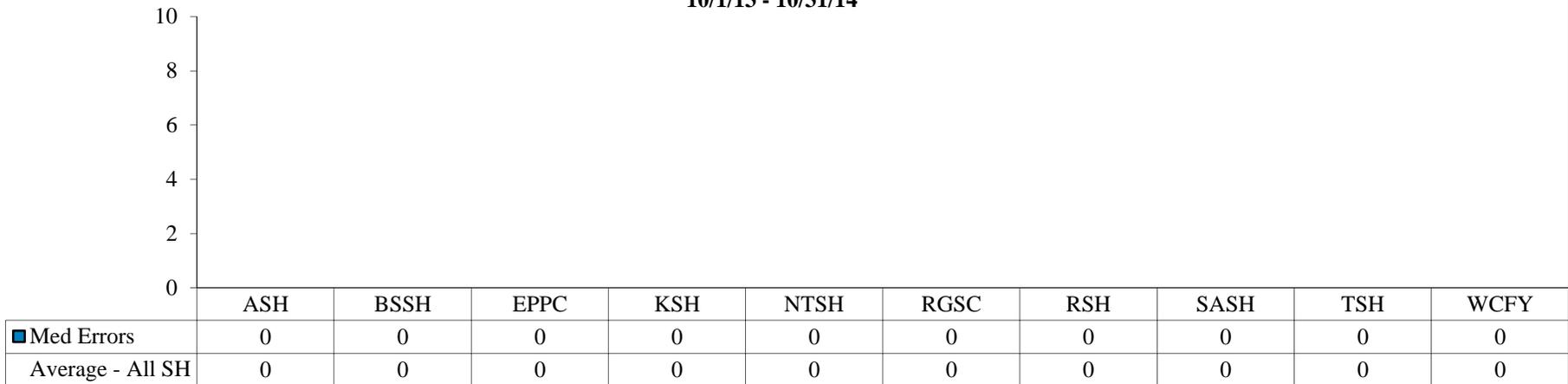


CQIO - 3 Medication Variance Data
All State MH Hospitals

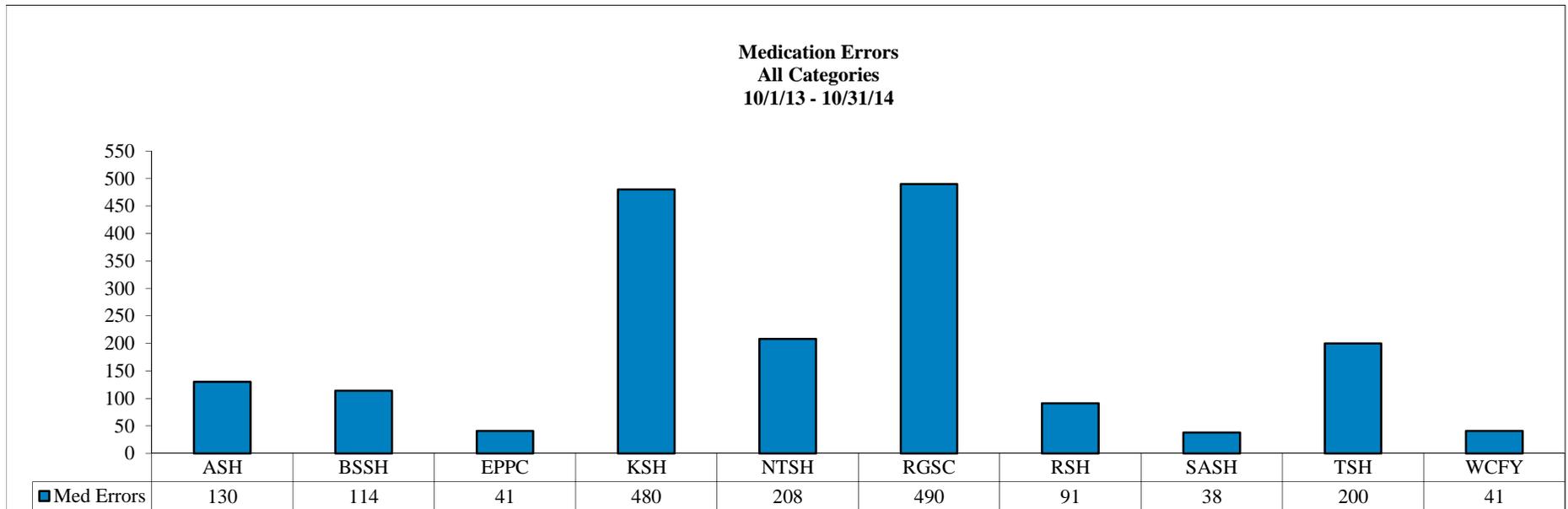
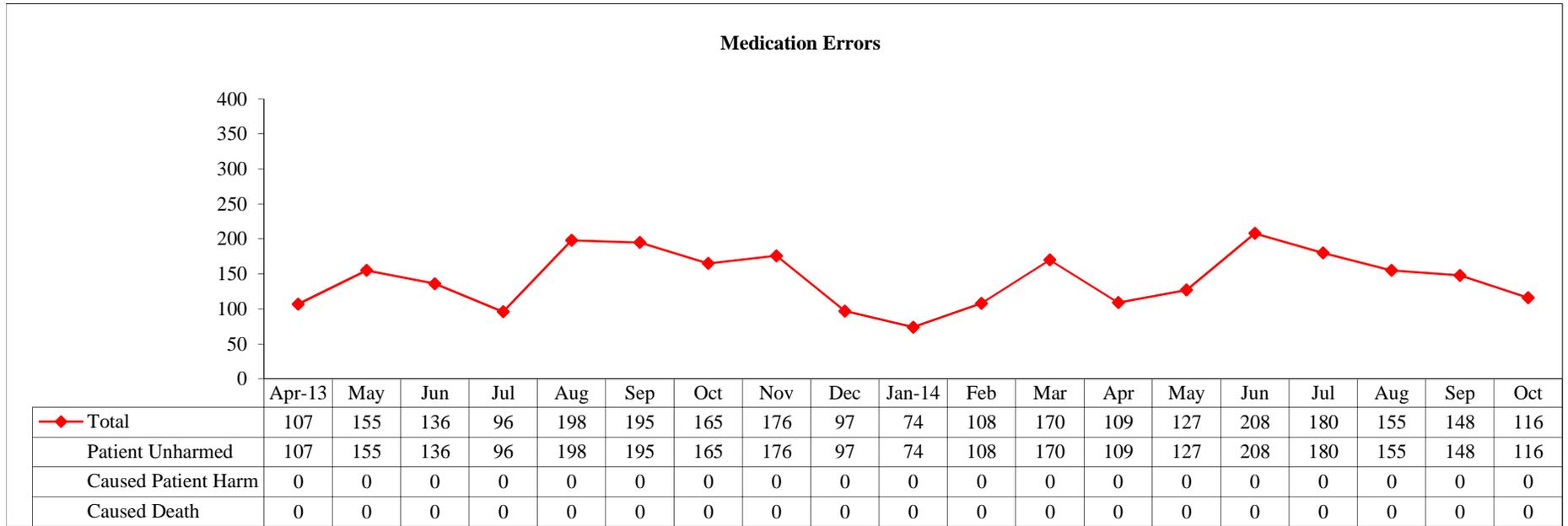
Medication Errors
Category D - Need for Increased Patient Monitoring: Caused No Harm
10/1/13 - 10/31/14



Medication Errors
Category E - Need for Treatment or Intervention: Caused Temporary Harm
Category F - Initial or Prolonged Hospitalization: Caused Temporary Harm
10/1/13 - 10/31/14

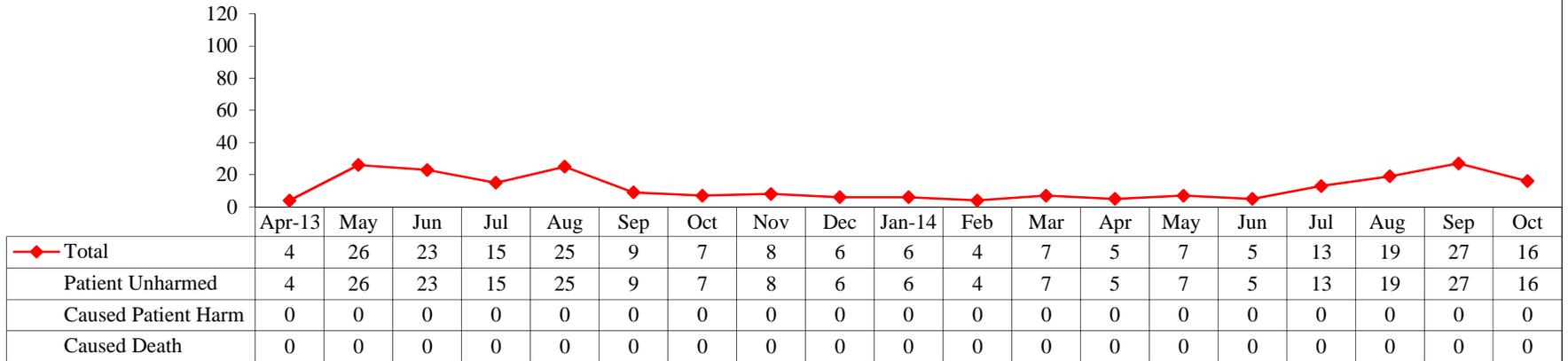


**CQIO - 3 Medication Variance Data
All State MH Hospitals**

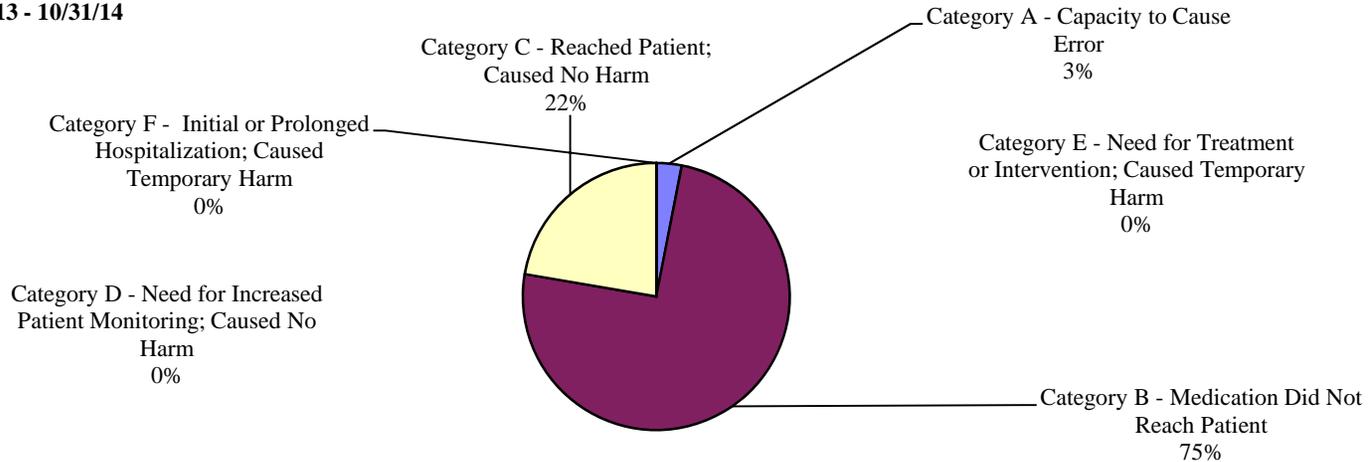


**CQIO - 3 Medication Variance Data
Austin State Hospital**

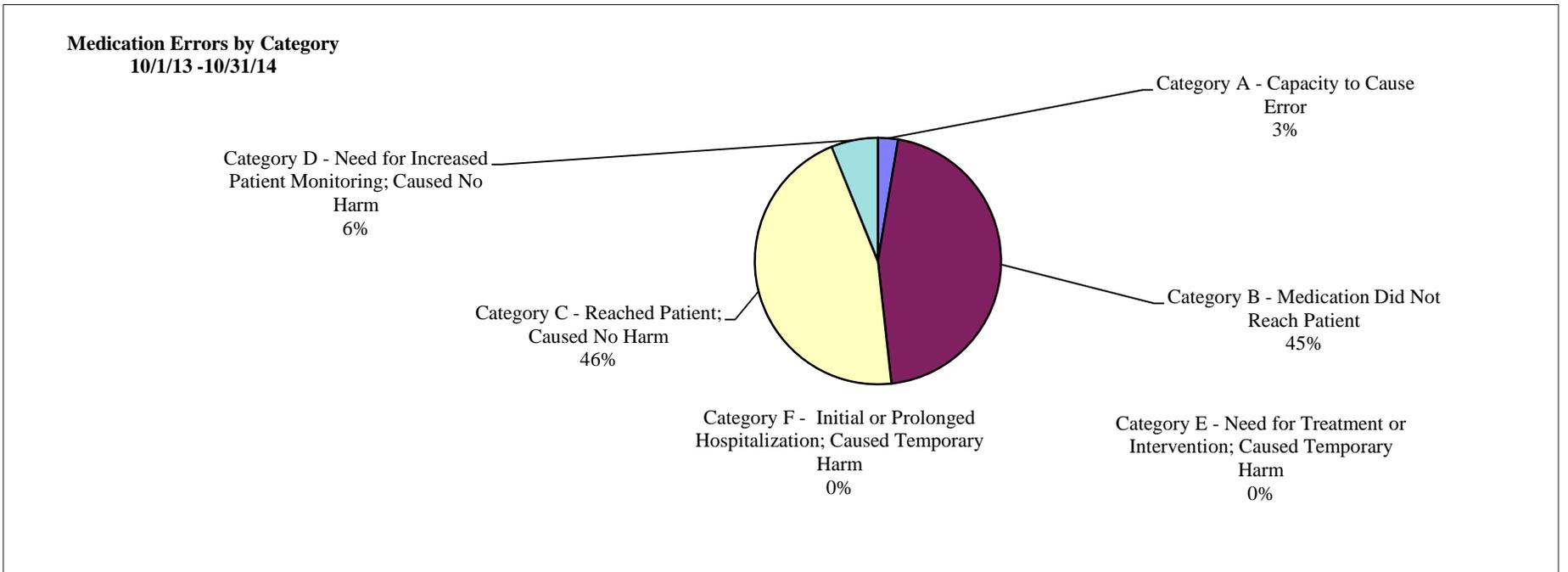
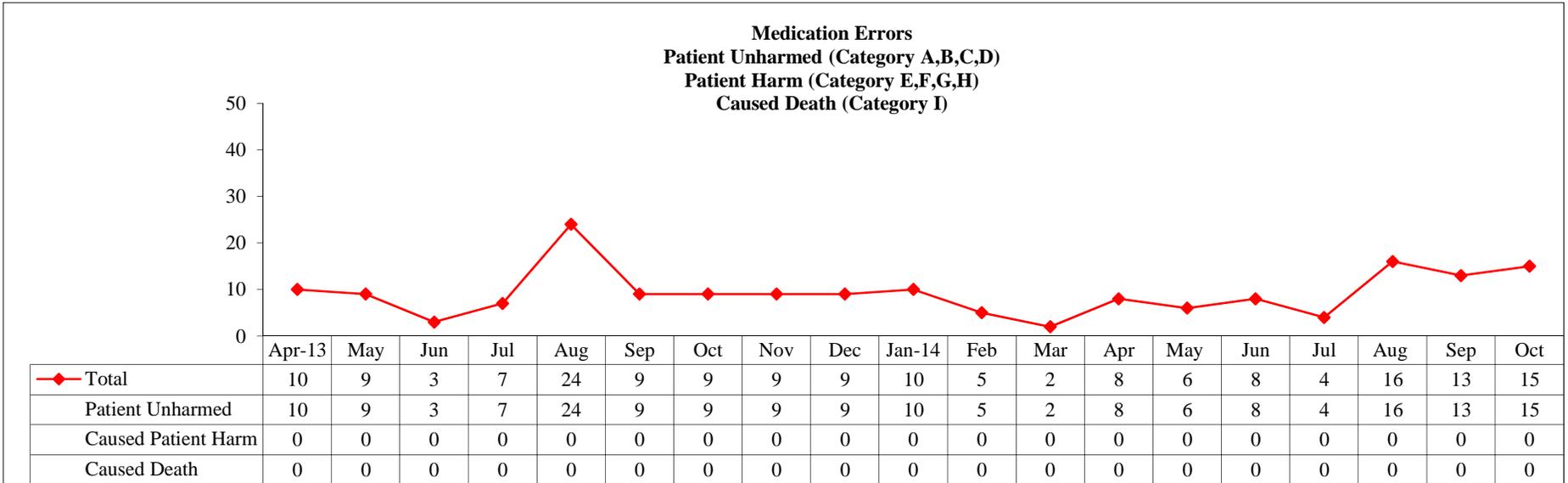
**Medication Errors
Patient Unharmed (Category A,B,C,D)
Patient Harm (Category E,F,G,H)
Caused Death (Category I)**



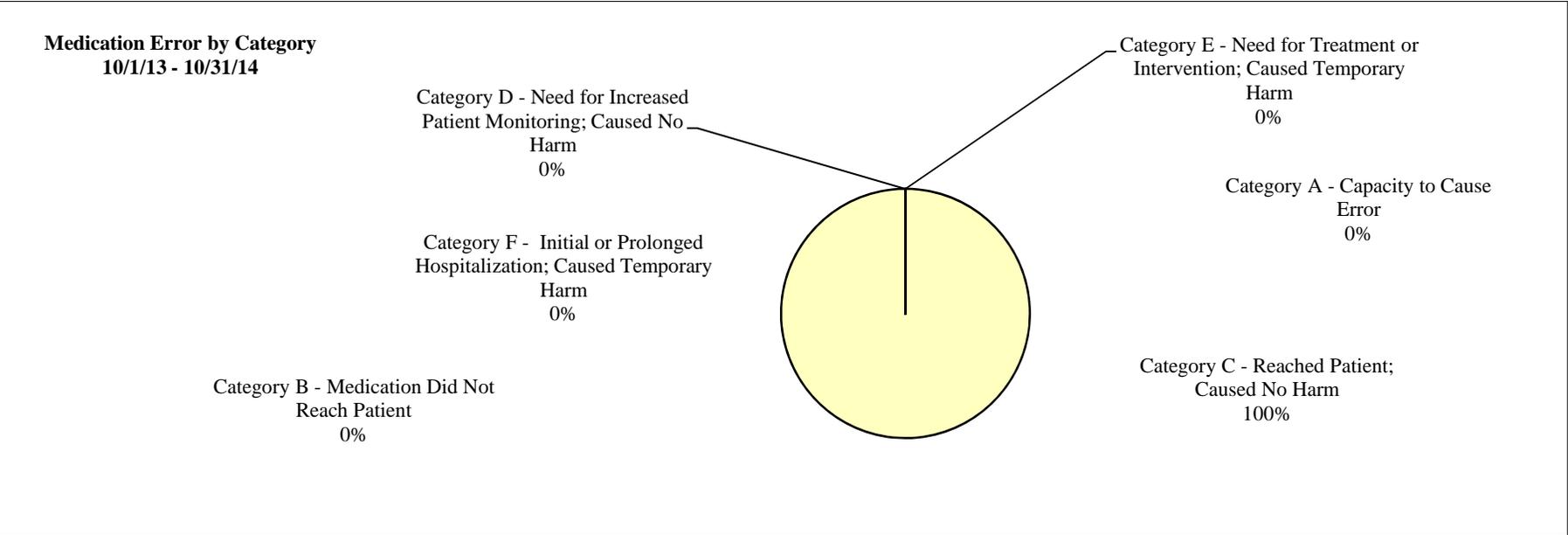
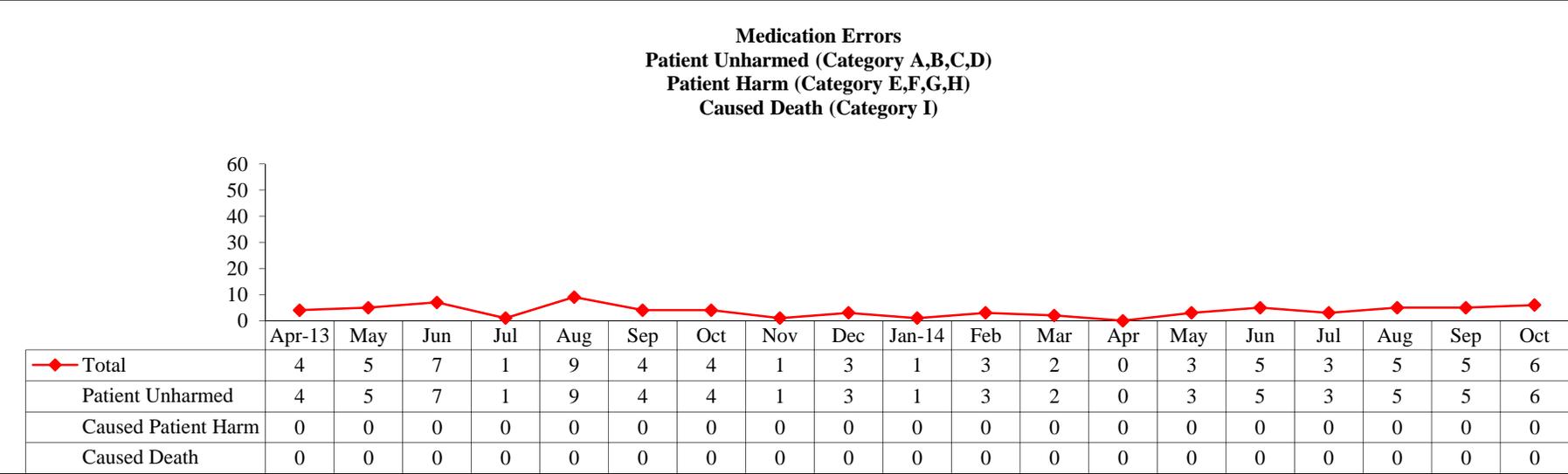
**Medication Error by Category
10/1/13 - 10/31/14**



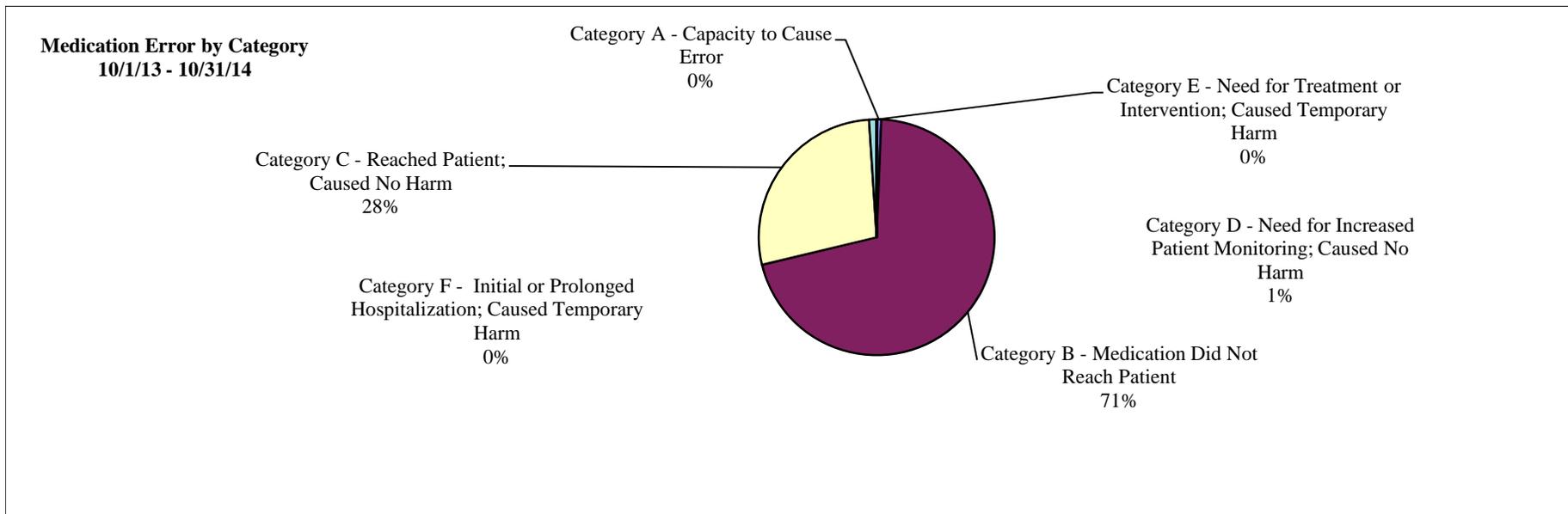
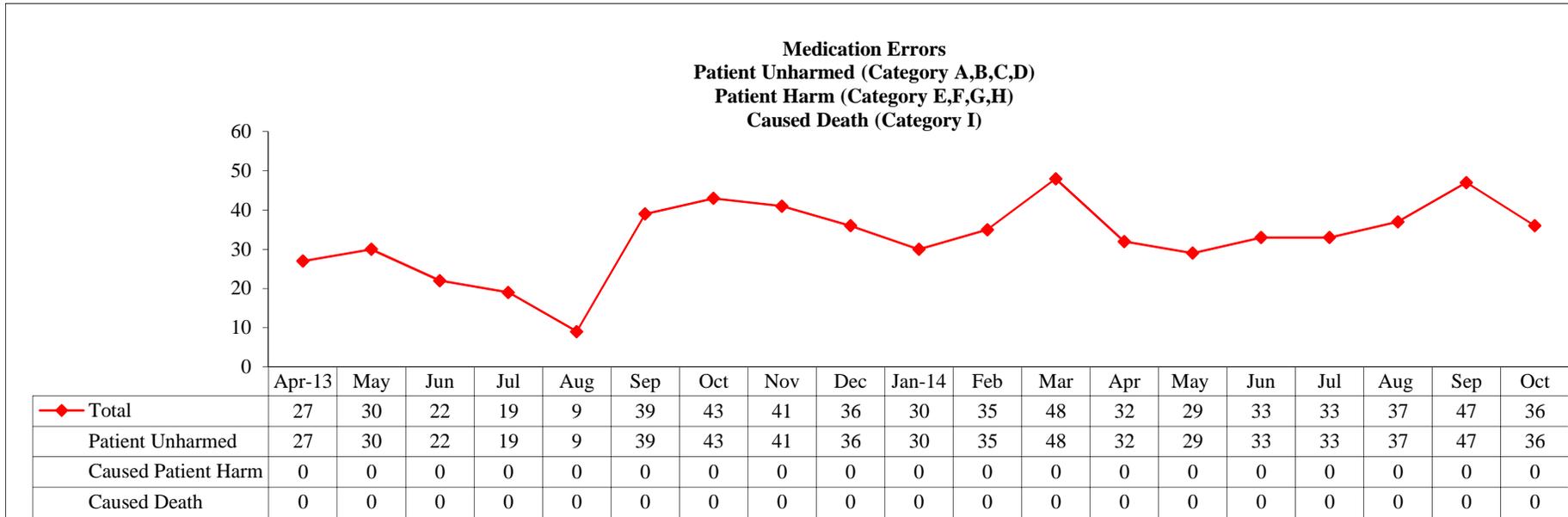
CQIO - 3 Medication Variance Data
Big Spring State Hospital



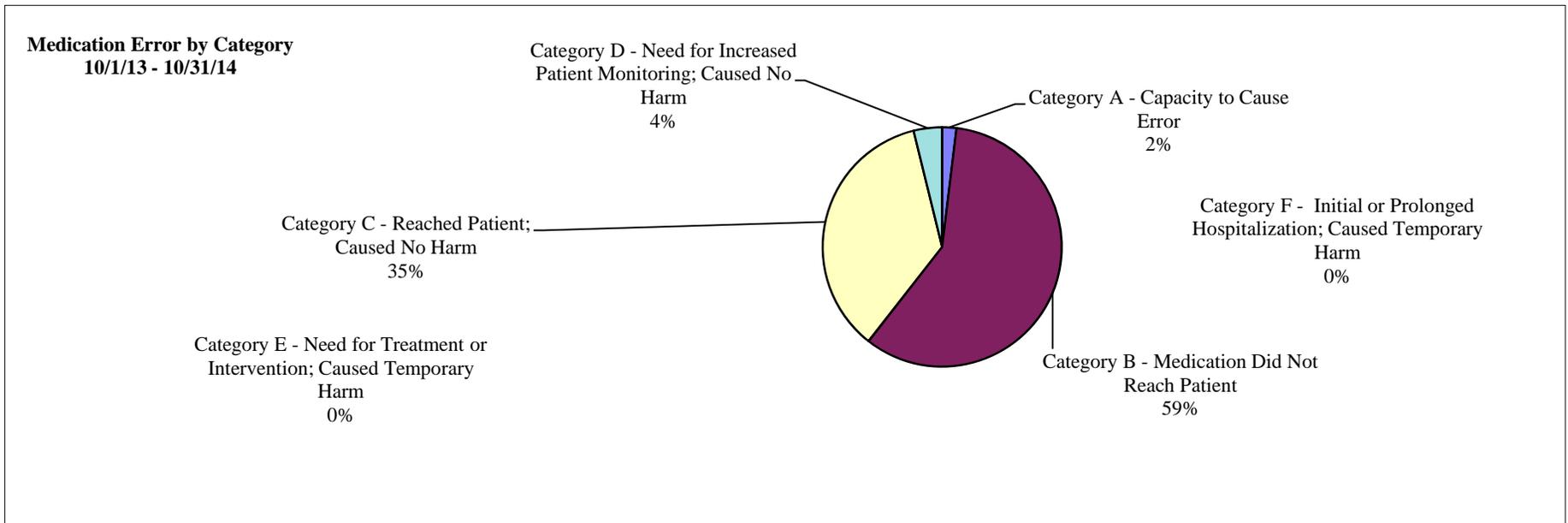
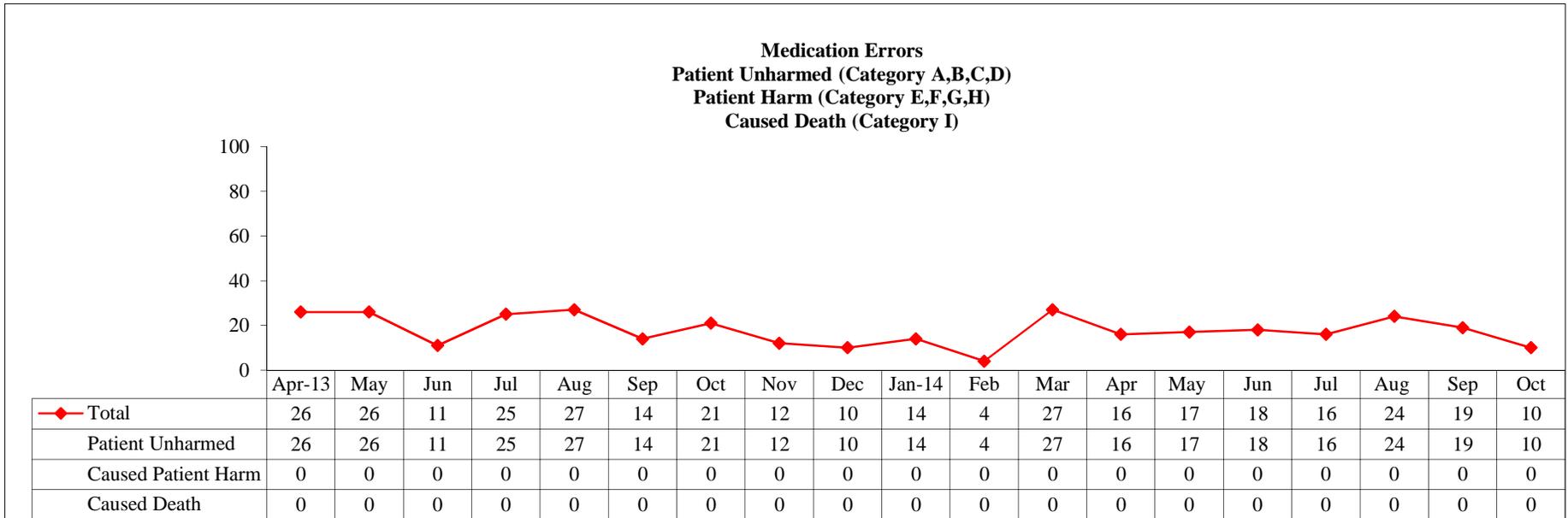
**CQIO - 3 Medication Variance Data
El Paso Psychiatric Center**



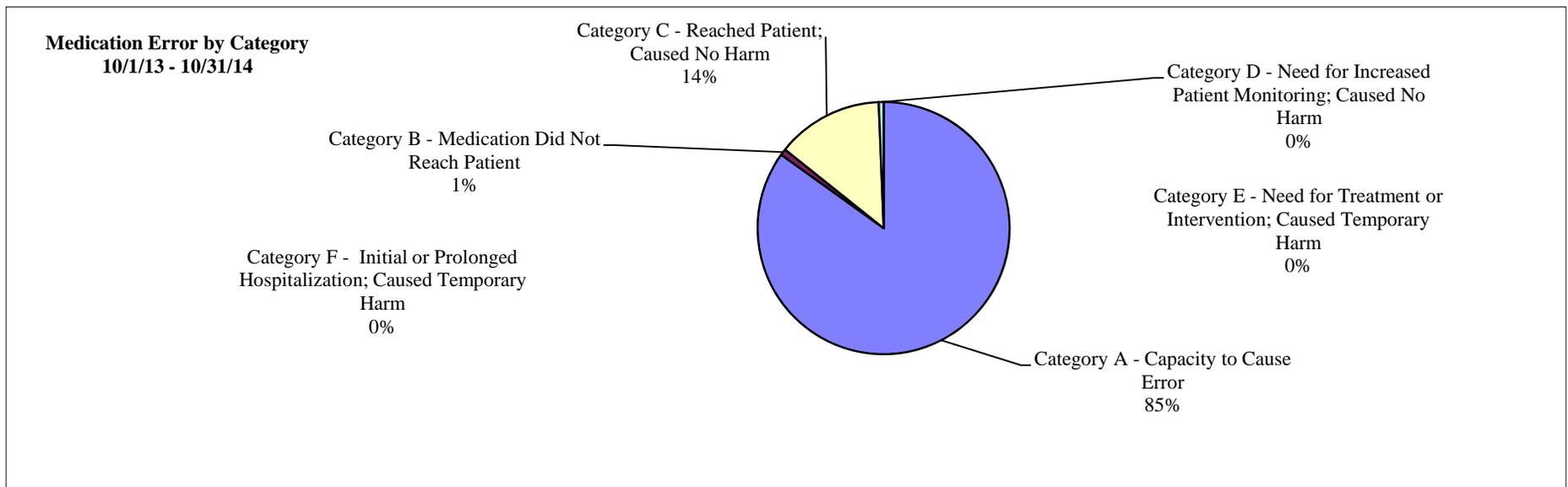
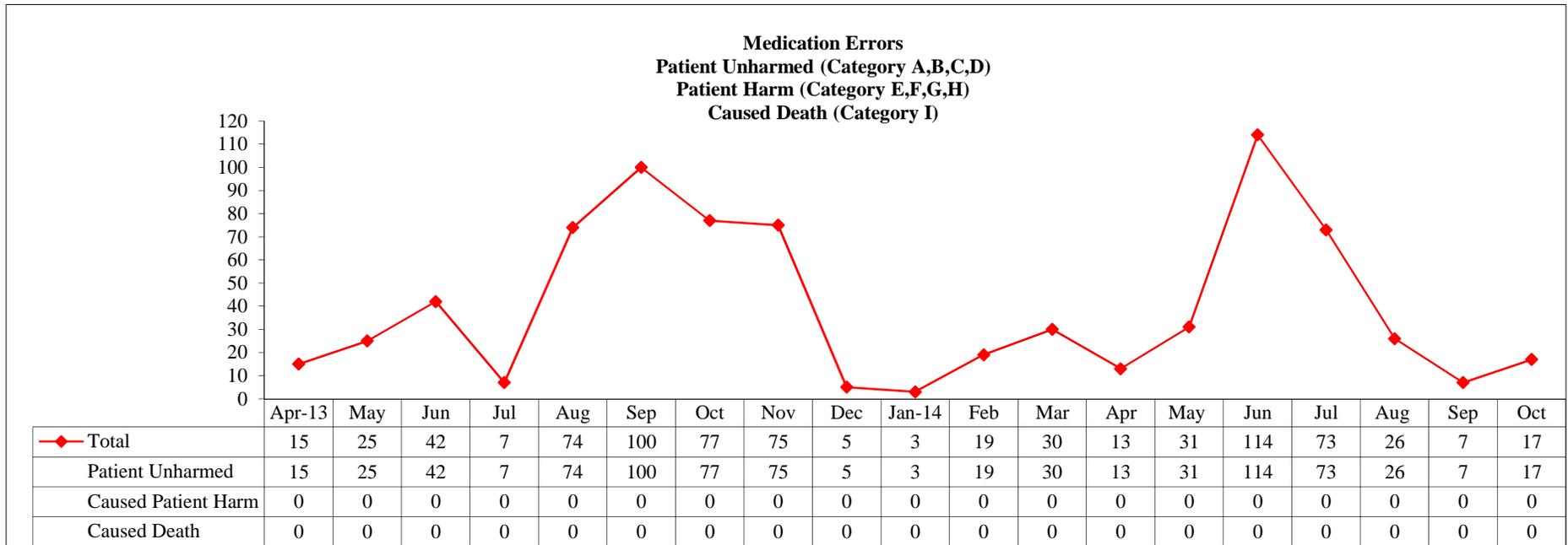
**CQIO - 3 Medication Variance Data
Kerrville State Hospital**



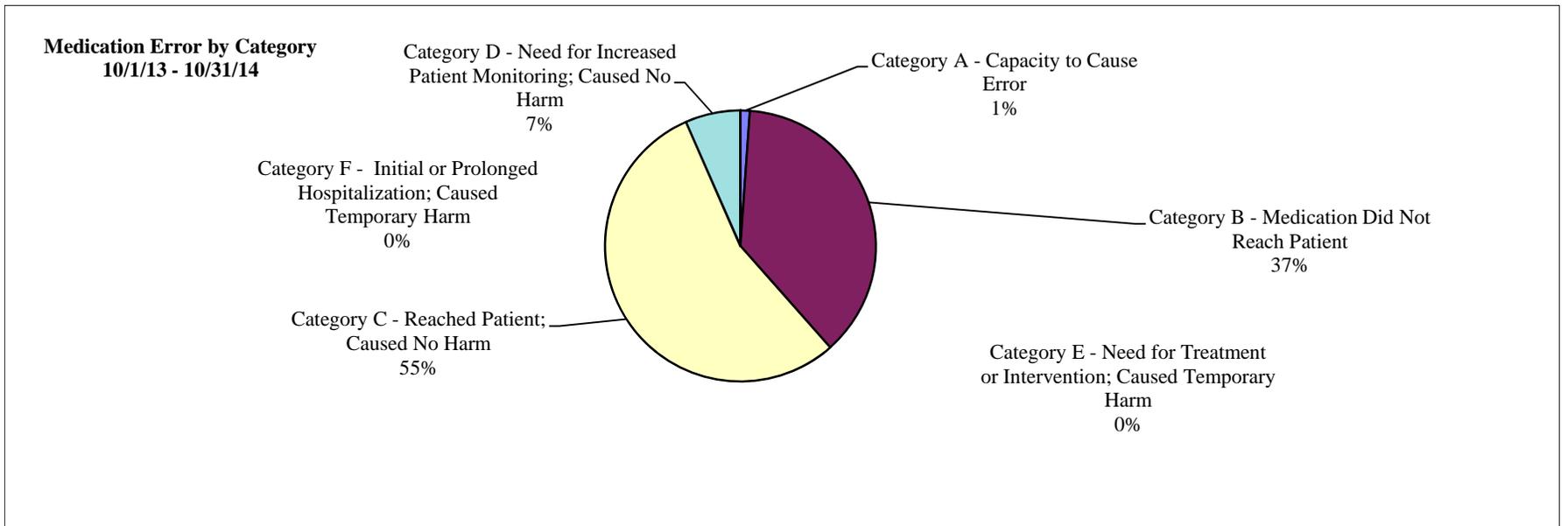
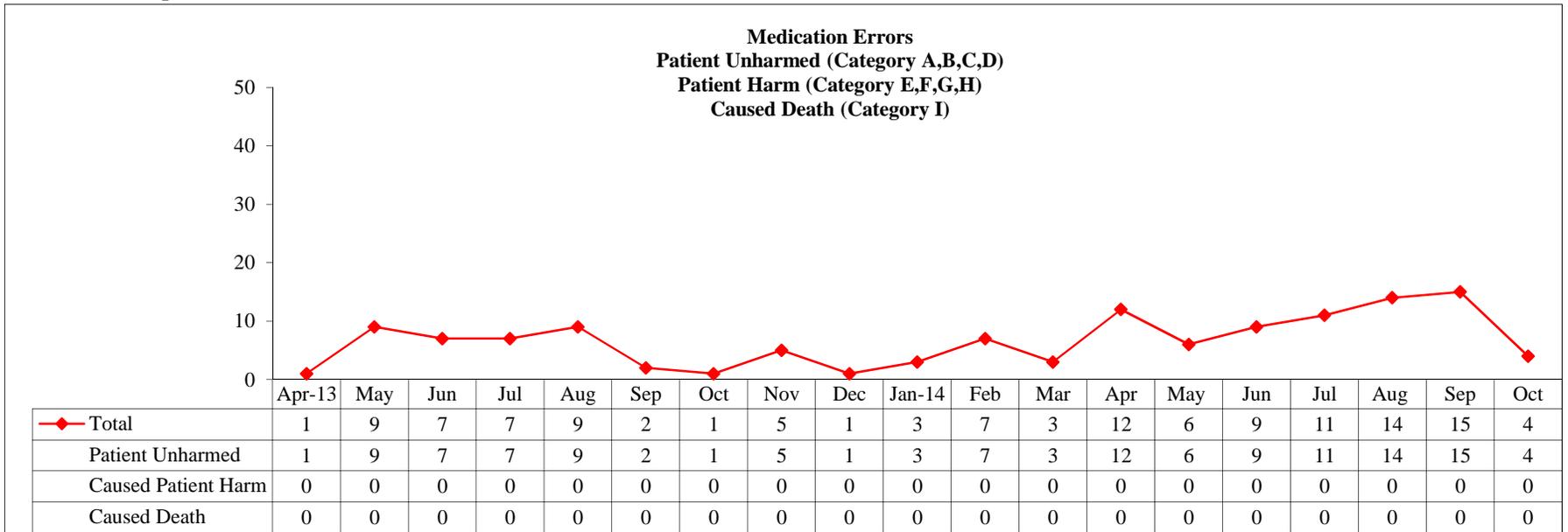
**CQIO - 3 Medication Variance Data
North Texas State Hospital**



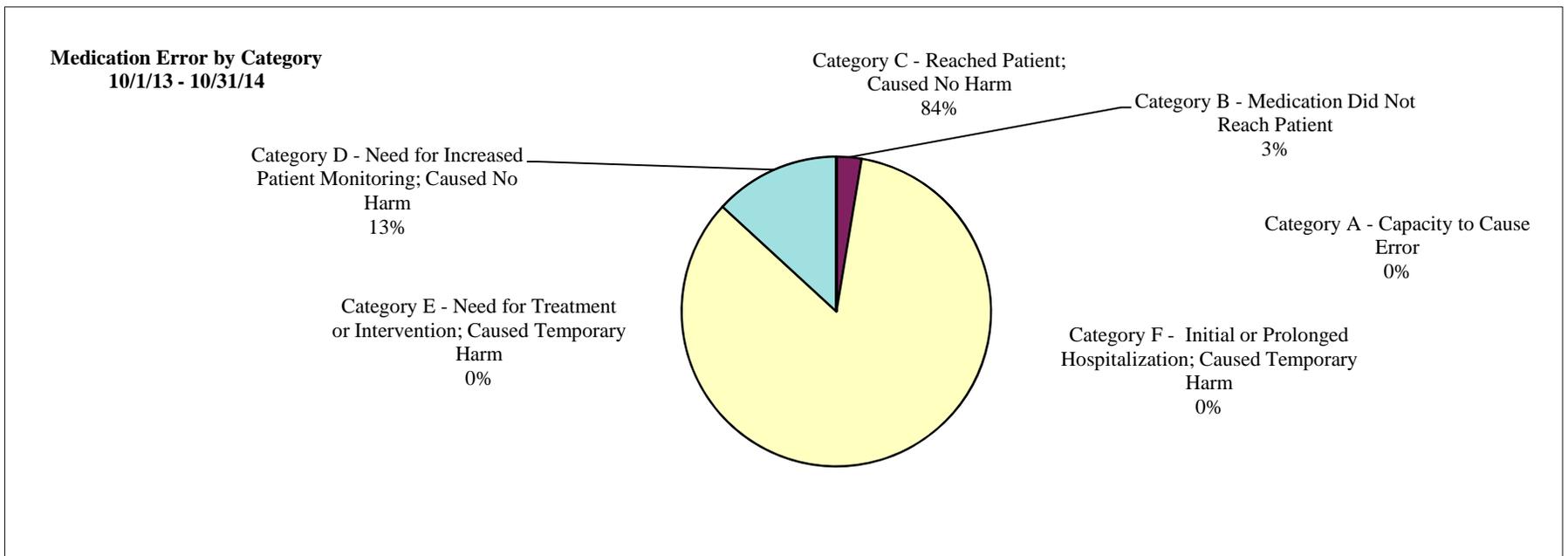
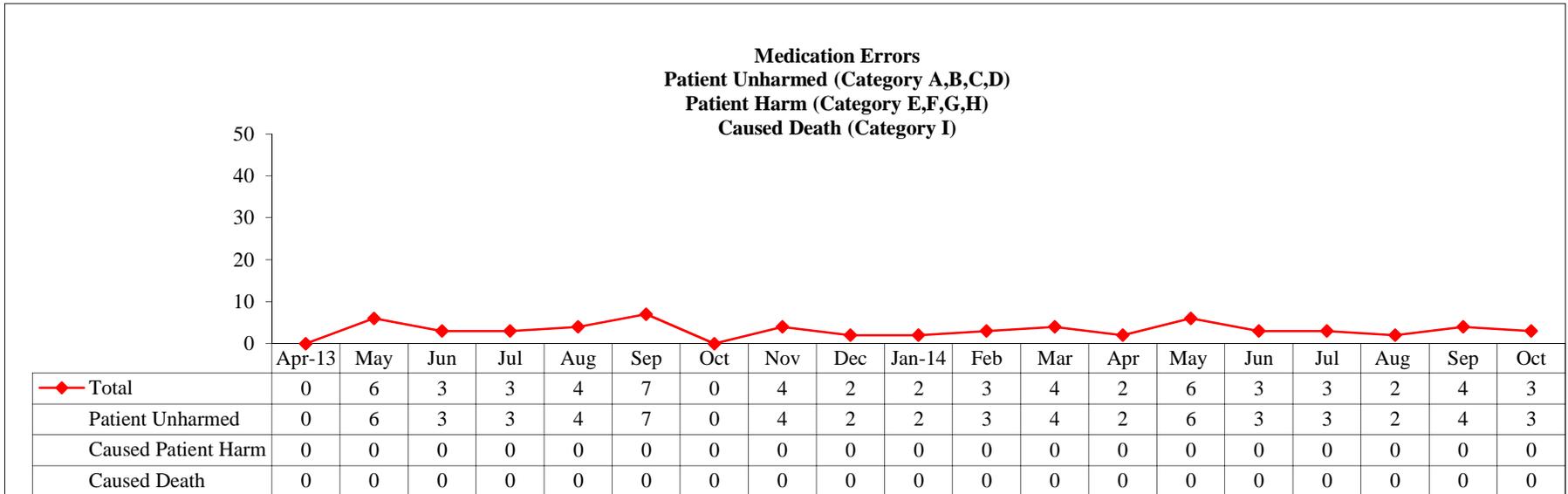
**CQIO - 3 Medication Variance Data
Rio Grande State Center**



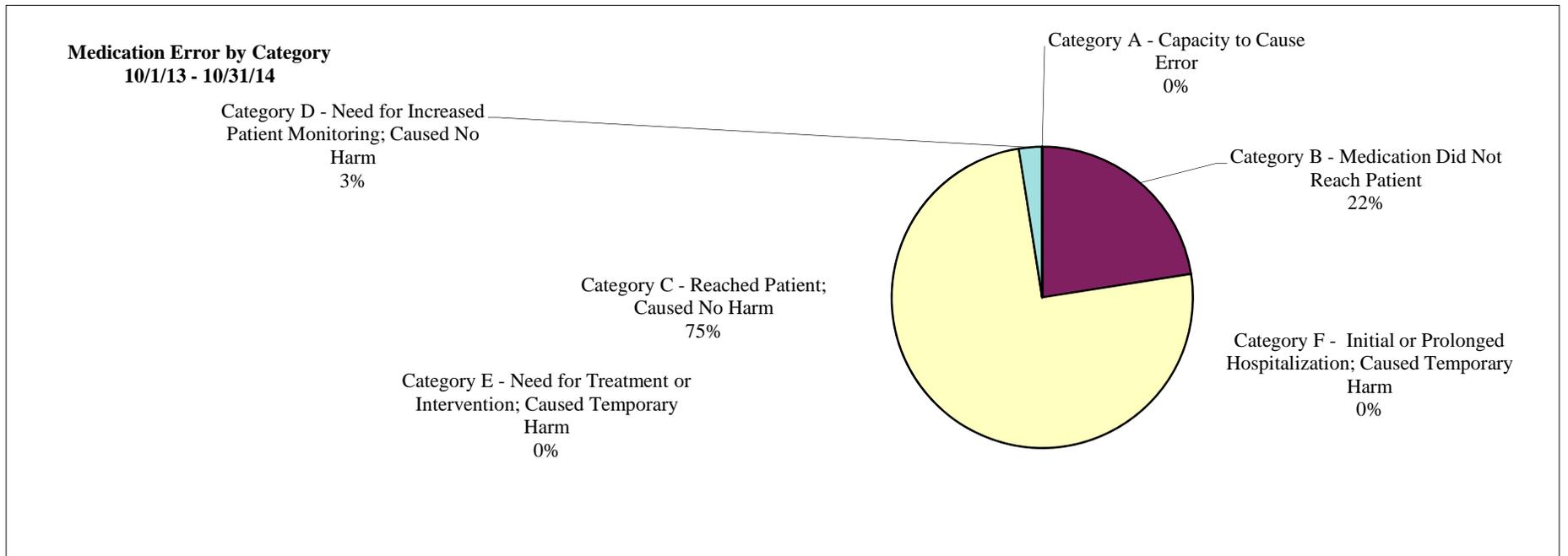
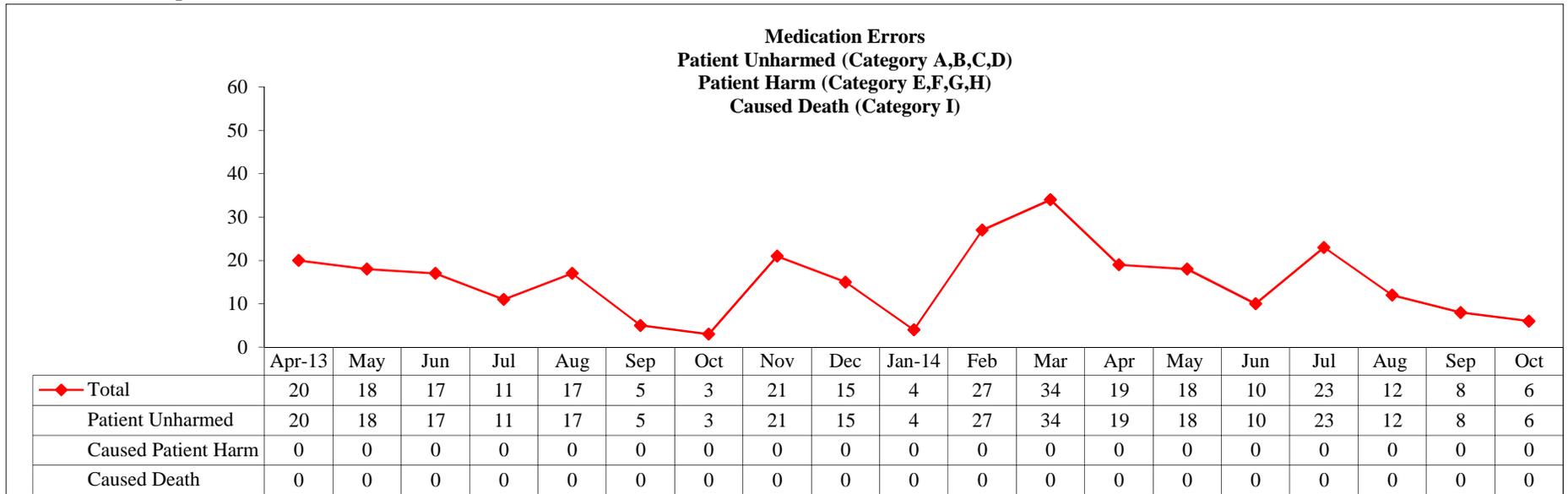
CQIO - 3 Medication Variance Data
Rusk State Hospital



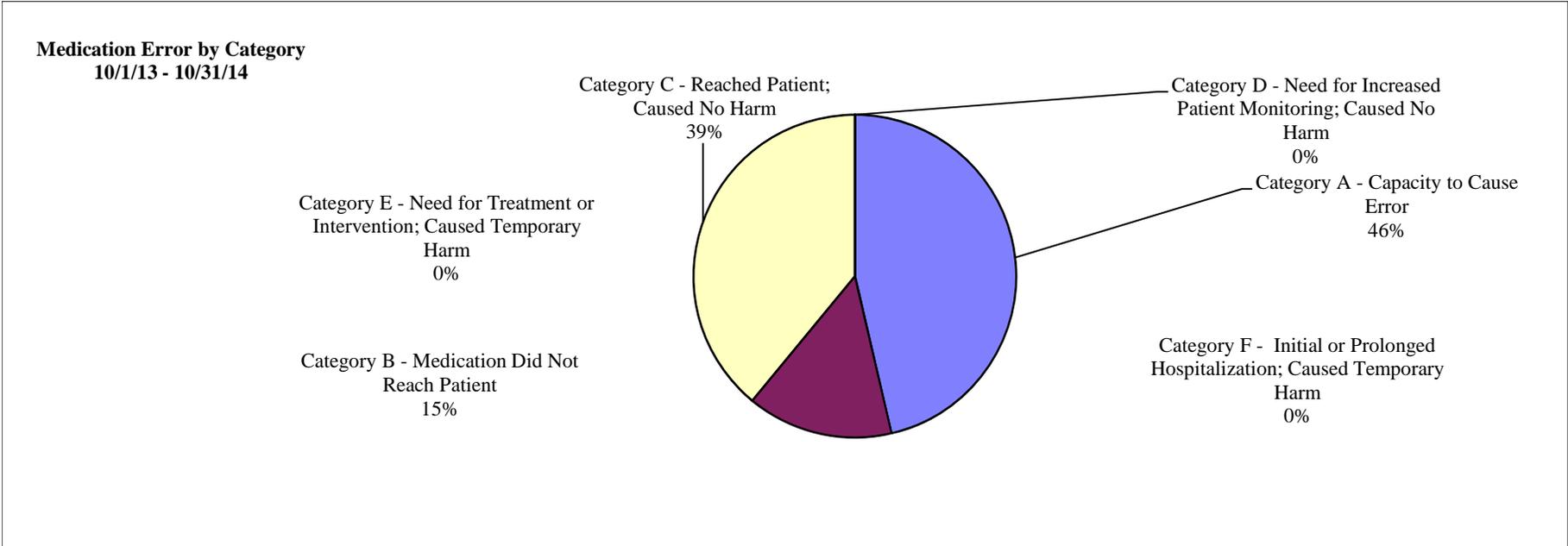
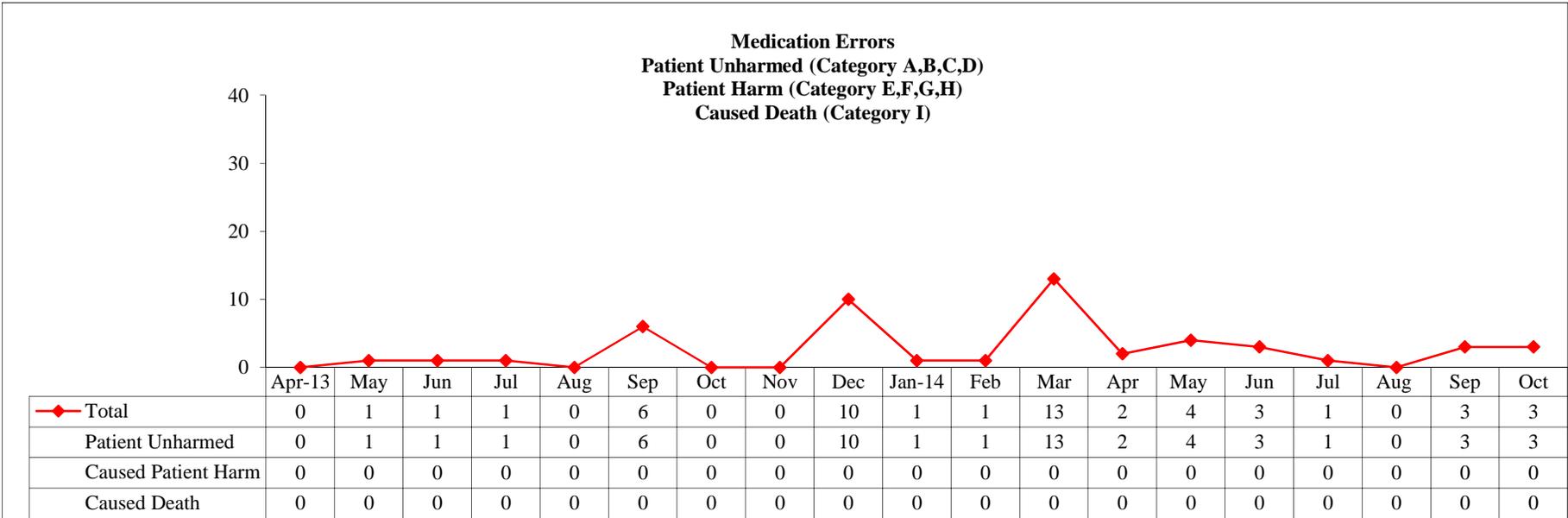
**CQIO - 3 Medication Variance Data
San Antonio State Hospital**



**CQIO - 3 Medication Variance Data
Terrell State Hospital**



**CQIO - 3 Medication Variance Data
Waco Center for Youth**



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Indicator

COIO-4

Indicator: Maintain Workers' Compensation Claim Expense per FTE at or below the State Hospital System Average Claims Cost Per FTE for the Prior Fiscal Year.

Timeframe: Monthly

Definition

Total workers compensation claim expenses per FTE filed for FY2015 will not exceed the state hospital system average claims cost per FTE for FY2014.

Data Source

State Office of Risk Management Report (HHSC Workers' Compensation Management Report)

Date Display and Chart Description

Chart with monthly data points of claim expenses and monthly data points of cost per FTE for individual state hospitals and system-wide.

Purpose

Monitor the workers compensation claims.

**CQIO - 4 Workers Compensation
All State Hospitals**

Worker's Compensation Monthly Expenditures

\$450,000
\$400,000
\$350,000
\$300,000
\$250,000
\$200,000
\$150,000
\$100,000
\$50,000
\$0

| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| —■— Monthly Expend. | \$323,950 | \$387,923 | \$225,250 | | | | | | | | | |
| FYTD Expend. | \$323,950 | \$711,874 | \$937,124 | \$937,124 | \$937,124 | \$937,124 | \$937,124 | \$937,124 | \$937,124 | \$937,124 | \$937,124 | \$937,124 |

Average Monthly Cost Per FTE

\$50.00
\$40.00
\$30.00
\$20.00
\$10.00
\$0.00

| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| — Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| —■— Avg Monthly Cost Per FTE | \$41.84 | \$49.40 | \$28.70 | | | | | | | | | |

**CQIO - 4 Workers Compensation
Austin State Hospital**

Worker's Compensation Monthly Expenditures

\$100,000
\$90,000
\$80,000
\$70,000
\$60,000
\$50,000
\$40,000
\$30,000
\$20,000
\$10,000
\$0

| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-------------------|----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| ■ Monthly Expend. | \$74,900 | \$73,228 | \$34,367 | | | | | | | | | |
| FYTD Expend. | \$74,900 | \$148,128 | \$182,495 | \$182,495 | \$182,495 | \$182,495 | \$182,495 | \$182,495 | \$182,495 | \$182,495 | \$182,495 | \$182,495 |

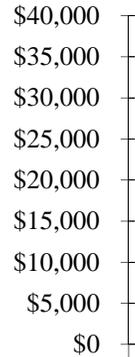
Average Monthly Cost Per FTE

\$100.00
\$90.00
\$80.00
\$70.00
\$60.00
\$50.00
\$40.00
\$30.00
\$20.00
\$10.00
\$0.00

| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| — Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| ■ Avg Month Cost Per FTE | \$91.01 | \$88.12 | \$41.21 | | | | | | | | | |

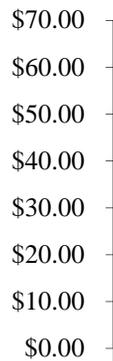
**CQIO - 4 Workers Compensation
Big Spring State Hospital**

Worker's Compensation Monthly Expenditures



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Monthly Expend. | \$36,643 | \$16,059 | \$15,636 | | | | | | | | | |
| FYTD Expend. | \$36,643 | \$52,701 | \$68,338 | \$68,338 | \$68,338 | \$68,338 | \$68,338 | \$68,338 | \$68,338 | \$68,338 | \$68,338 | \$68,338 |

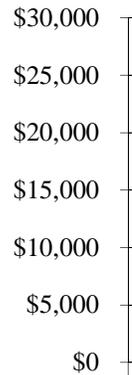
Average Monthly Cost Per FTE



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| Avg Month Cost Per FTE | \$64.51 | \$29.41 | \$28.48 | | | | | | | | | |

**CQIO - 4 Workers Compensation
El Paso Psychiatric Center**

Worker's Compensation Monthly Expenditures



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| —■— Monthly Expend. | \$11,501 | \$10,422 | \$13,917 | | | | | | | | | |
| FYTD Expend. | \$11,501 | \$21,922 | \$35,840 | \$35,840 | \$35,840 | \$35,840 | \$35,840 | \$35,840 | \$35,840 | \$35,840 | \$35,840 | \$35,840 |

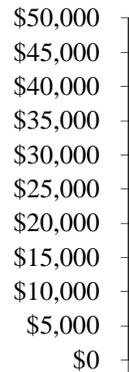
Average Monthly Cost Per FTE



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| — Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| —■— Avg Month Cost Per FTE | \$46.37 | \$41.85 | \$56.57 | | | | | | | | | |

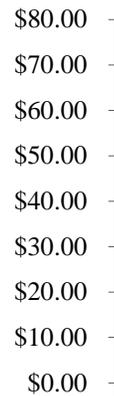
**CQIO - 4 Workers Compensation
Kerrville State Hospital**

Worker's Compensation Monthly Expenditures



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Monthly Expend. | \$22,574 | \$41,851 | \$15,244 | | | | | | | | | |
| FYTD Expend. | \$22,574 | \$64,426 | \$79,669 | \$79,669 | \$79,669 | \$79,669 | \$79,669 | \$79,669 | \$79,669 | \$79,669 | \$79,669 | \$79,669 |

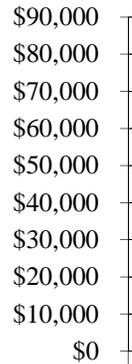
Average Monthly Cost Per FTE



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| Avg Month Cost Per FTE | \$41.88 | \$76.79 | \$28.02 | | | | | | | | | |

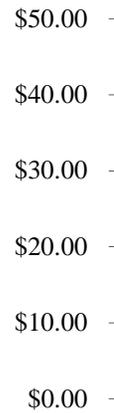
**CQIO - 4 Workers Compensation
North Texas State Hospital**

Worker's Compensation Monthly Expenditures



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-------------------|----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| ■ Monthly Expend. | \$46,009 | \$73,933 | \$44,073 | | | | | | | | | |
| FYTD Expend. | \$46,009 | \$119,942 | \$164,015 | \$164,015 | \$164,015 | \$164,015 | \$164,015 | \$164,015 | \$164,015 | \$164,015 | \$164,015 | \$164,015 |

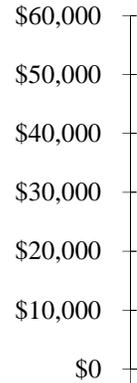
Average Monthly Cost Per FTE



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| — Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| ■ Avg Month Cost Per FTE | \$22.55 | \$35.82 | \$21.31 | | | | | | | | | |

CQIO - 4 Workers Compensation
Rio Grande State Center

Worker's Compensation Monthly Expenditures



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------|----------|----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Monthly Expend. | \$17,187 | \$53,151 | \$34,114 | | | | | | | | | |
| FYTD Expend. | \$17,187 | \$70,338 | \$104,452 | \$104,452 | \$104,452 | \$104,452 | \$104,452 | \$104,452 | \$104,452 | \$104,452 | \$104,452 | \$104,452 |

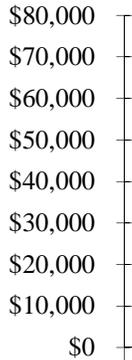
Average Monthly Cost Per FTE



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------------------|---------|----------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| Avg Month Cost Per FTE | \$34.51 | \$103.81 | \$65.86 | | | | | | | | | |

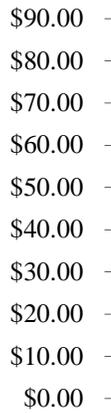
**CQIO - 4 Workers Compensation
Rusk State Hospital**

Worker's Compensation Monthly Expenditures



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| —■— Monthly Expend. | \$34,500 | \$25,507 | \$16,976 | | | | | | | | | |
| FYTD Expend. | \$34,500 | \$60,007 | \$76,983 | \$76,983 | \$76,983 | \$76,983 | \$76,983 | \$76,983 | \$76,983 | \$76,983 | \$76,983 | \$76,983 |

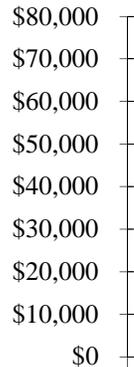
Average Monthly Cost Per FTE



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| — Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| —■— Avg Month Cost Per FTE | \$36.62 | \$27.05 | \$17.93 | | | | | | | | | |

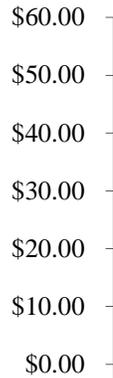
**CQIO - 4 Workers Compensation
San Antonio State Hospital**

Worker's Compensation Monthly Expenditures



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| —■— Monthly Expend. | \$29,148 | \$42,535 | \$18,914 | | | | | | | | | |
| FYTD Expend. | \$29,148 | \$71,683 | \$90,597 | \$90,597 | \$90,597 | \$90,597 | \$90,597 | \$90,597 | \$90,597 | \$90,597 | \$90,597 | \$90,597 |

Average Monthly Cost Per FTE



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| — Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| —■— Avg Month Cost Per FTE | \$34.62 | \$49.63 | \$22.10 | | | | | | | | | |

**CQIO - 4 Workers Compensation
Terrell State Hospital**

Worker's Compensation Monthly Expenditures

\$80,000
\$70,000
\$60,000
\$50,000
\$40,000
\$30,000
\$20,000
\$10,000
\$0

| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-------------------|----------|----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| ■ Monthly Expend. | \$40,533 | \$39,885 | \$24,556 | | | | | | | | | |
| FYTD Expend. | \$40,533 | \$80,419 | \$104,975 | \$104,975 | \$104,975 | \$104,975 | \$104,975 | \$104,975 | \$104,975 | \$104,975 | \$104,975 | \$104,975 |

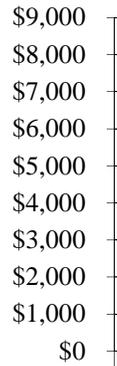
Average Monthly Cost Per FTE

\$80.00
\$70.00
\$60.00
\$50.00
\$40.00
\$30.00
\$20.00
\$10.00
\$0.00

| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| — Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| ■ Avg Month Cost Per FTE | \$46.86 | \$43.26 | \$27.19 | | | | | | | | | |

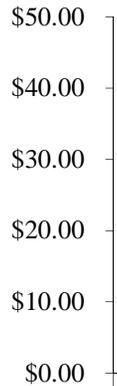
**CQIO - 4 Workers Compensation
Waco Center for Youth**

Worker's Compensation Monthly Expenditures



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------|---------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Monthly Expend. | \$8,852 | \$7,700 | \$4,894 | | | | | | | | | |
| FYTD Expend. | \$8,852 | \$16,551 | \$21,446 | \$21,446 | \$21,446 | \$21,446 | \$21,446 | \$21,446 | \$21,446 | \$21,446 | \$21,446 | \$21,446 |

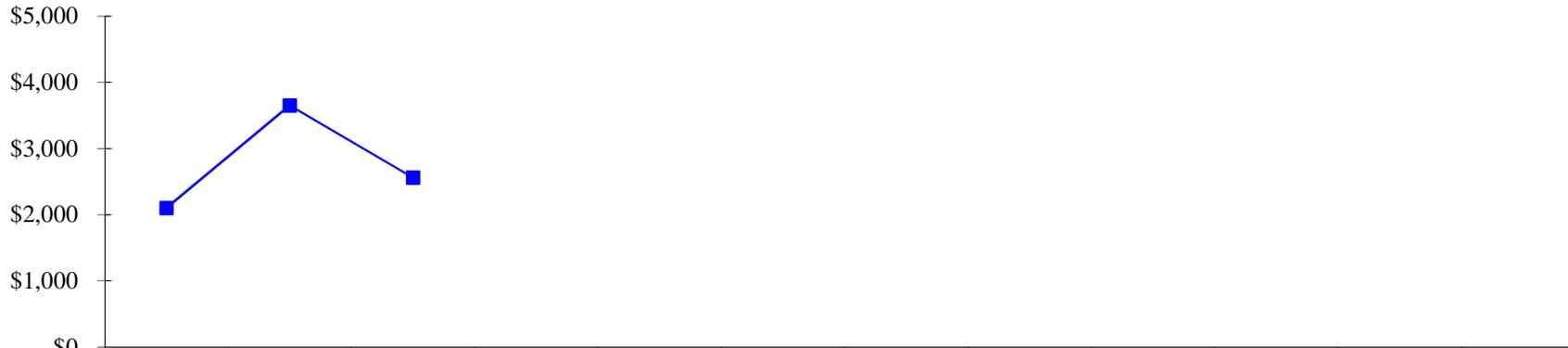
Average Monthly Cost Per FTE



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| Avg Month Cost Per FTE | \$41.56 | \$34.68 | \$21.85 | | | | | | | | | |

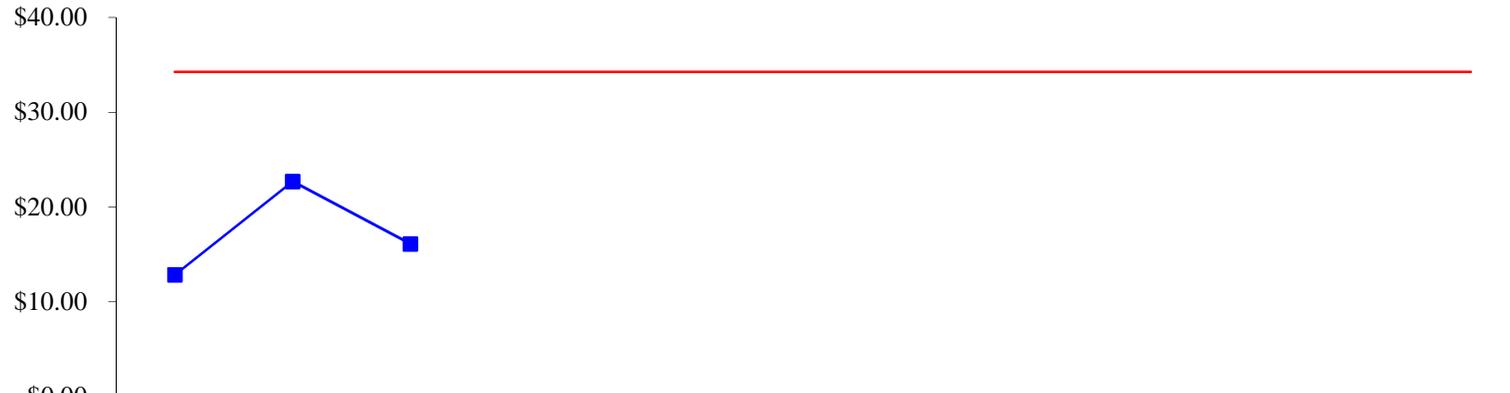
**CQIO - 4 Workers Compensation
Texas Center for Infectious Disease**

Worker's Compensation Monthly Expenditures



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-----------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| Monthly Expend. | \$2,103 | \$3,653 | \$2,560 | | | | | | | | | |
| FYTD Expend. | \$2,103 | \$5,756 | \$8,316 | \$8,316 | \$8,316 | \$8,316 | \$8,316 | \$8,316 | \$8,316 | \$8,316 | \$8,316 | \$8,316 |

Average Monthly Cost Per FTE



| | Sep-14 | Oct | Nov | Dec | Jan-15 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| Avg Monthly Cost Per FTE Target | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 | \$34.25 |
| Avg Month Cost Per FTE | \$12.82 | \$22.69 | \$16.10 | | | | | | | | | |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Indicator

COIO-5

Indicator: Patient Injured During Restraint or Seclusion

Timeframe: Quarterly

Definition

Patient injuries documented on the Client Injury Assessment per FY quarter resulted from restraint or seclusion (per 1,000 bed days).

Data Source

ODS Ad Hoc Report (Patient Injuries)

Date Display and Chart Description

Table shows quarterly number of injuries by restraint or seclusion by treatment for individual state hospitals and system-wide. Bar chart with total FYTD client injuries resulted from restraint or seclusion per 1,000 bed days.

Purpose

Monitor patients' injuries during restraint or seclusion.

CQIO - 5 Client Injuries Resulted From Restraint and Seclusion

All State MH Hospitals - FY2015

| Hospital | Q1 | | | | | | | Q2 | | | | | | | Q3 | | | | | | | Q4 | | | | | | |
|-------------------------------|-----|-------|-----------|--------|------------------|-------|------------|-----|-------|-----------|--------|------------------|-------|-------|-----|-------|-----------|--------|------------------|-------|-------|-----|-------|-----------|--------|------------------|-------|-------|
| | N/A | No Tx | First Aid | Med Tx | Hospital-ization | Fatal | Total | N/A | No Tx | First Aid | Med Tx | Hospital-ization | Fatal | Total | N/A | No Tx | First Aid | Med Tx | Hospital-ization | Fatal | Total | N/A | No Tx | First Aid | Med Tx | Hospital-ization | Fatal | Total |
| All State MH Hospitals | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Restraint | 1 | 73 | 52 | 3 | 0 | 0 | 129 | | | | | | | | | | | | | | | | | | | | | |
| Seclusion | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | |
| Total | 1 | 73 | 52 | 3 | 0 | 0 | 129 | | | | | | | | | | | | | | | | | | | | | |
| Per 1000 Beddays | | | | | | | 0.6 | | | | | | | | | | | | | | | | | | | | | |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Indicator

COIO-6

Indicator: Analyze and Evaluate Patient Falls

Timeframe: Quarterly

Definition

Patient injuries documented on the Client Injury Assessment per FY quarter. Number of fall injuries for all falls reported on the client injury report.

Data Source

ODS Ad Hoc Report (Patient Injuries Caused by Falls)

Date Display and Chart Description

Chart shows quarterly number of fall injuries and rate (per 1,000 bed days) for individual state hospitals and system-wide.

Purpose

Monitor patients' injuries caused by falls.

**CQIO - 6 Rate of Falls
All State Hospitals**

| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|----------------------------|--------|-------|-------|-------|--------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| ALL STATE HOSPITALS | | | | | | | | | | | | | | | |
| All Falls | 144 | 133 | 140 | 115 | 105 | 99 | 122 | 124 | 115 | 123 | 125 | 123 | 142 | 140 | 116 |
| Bed Days in Month | 70096 | 72047 | 69404 | 70012 | 70298 | 63785 | 69924 | 68310 | 71623 | 67929 | 69034 | 69707 | 67532 | 70728 | 67388 |
| Falls/1000 Bed Days | 2.05 | 1.85 | 2.02 | 1.64 | 1.49 | 1.55 | 1.74 | 1.82 | 1.61 | 1.81 | 1.81 | 1.76 | 2.10 | 1.98 | 1.72 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Indicator

CQIO-7

Indicator: Unauthorized Departures

Timeframe: Monthly

Definition

The state hospital rate of unauthorized departure assignments documented on the state hospital elopement report form per 1,000 bed days per month. An unauthorized departure means any person who is a patient at a state hospital who is off campus without authorization or is missing and cannot be located. A person who is voluntarily admitted to a state hospital and departs is not considered an unauthorized departure.

Data Source

Care Report HC022835 (Unauthorized Departures)

Date Display and Chart Description

Table shows number of UD incidents, number of UD persons and bed days in a month for individual state hospitals and system-wide. Control chart with monthly data points of UDs per 1,000 bed days for individual state hospitals and system-wide.

Purpose

Monitor unauthorized departures

CQIO - 7 Rate for Elopements
All State Hospitals - Previous 12 Months

| ALL MH HOSPITALS | Dec-13 | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-----------------------------------|--------|--------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| Unauthorized Departures Incidents | 24 | 19 | 24 | 22 | 27 | 33 | 28 | 25 | 29 | 19 | 22 | 20 |
| Unauthorized Departures Persons | 20 | 18 | 21 | 22 | 24 | 32 | 27 | 22 | 28 | 17 | 20 | 20 |
| Bed Days in Month | 68992 | 69389 | 62949 | 68914 | 67256 | 70503 | 66781 | 67905 | 68558 | 66410 | 69589 | 66291 |
| Incidents/1000 Bed Days | 0.35 | 0.27 | 0.38 | 0.32 | 0.40 | 0.47 | 0.42 | 0.37 | 0.42 | 0.29 | 0.32 | 0.30 |

**. FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Indicator

CQIO-8

Indicator: Conduct Regularly Scheduled Assessments of Facility Support Systems through the FSPI Process

Timeframe: Quarterly

Definition

The state hospital performs the self-assessment once per fiscal year according to the schedule.

Data Source

CPI-API Software Report (FSPI Quarterly Score Report)

Date Display and Chart Description

Table and chart shows the assessment score for individual state hospitals and system-wide.

Purpose

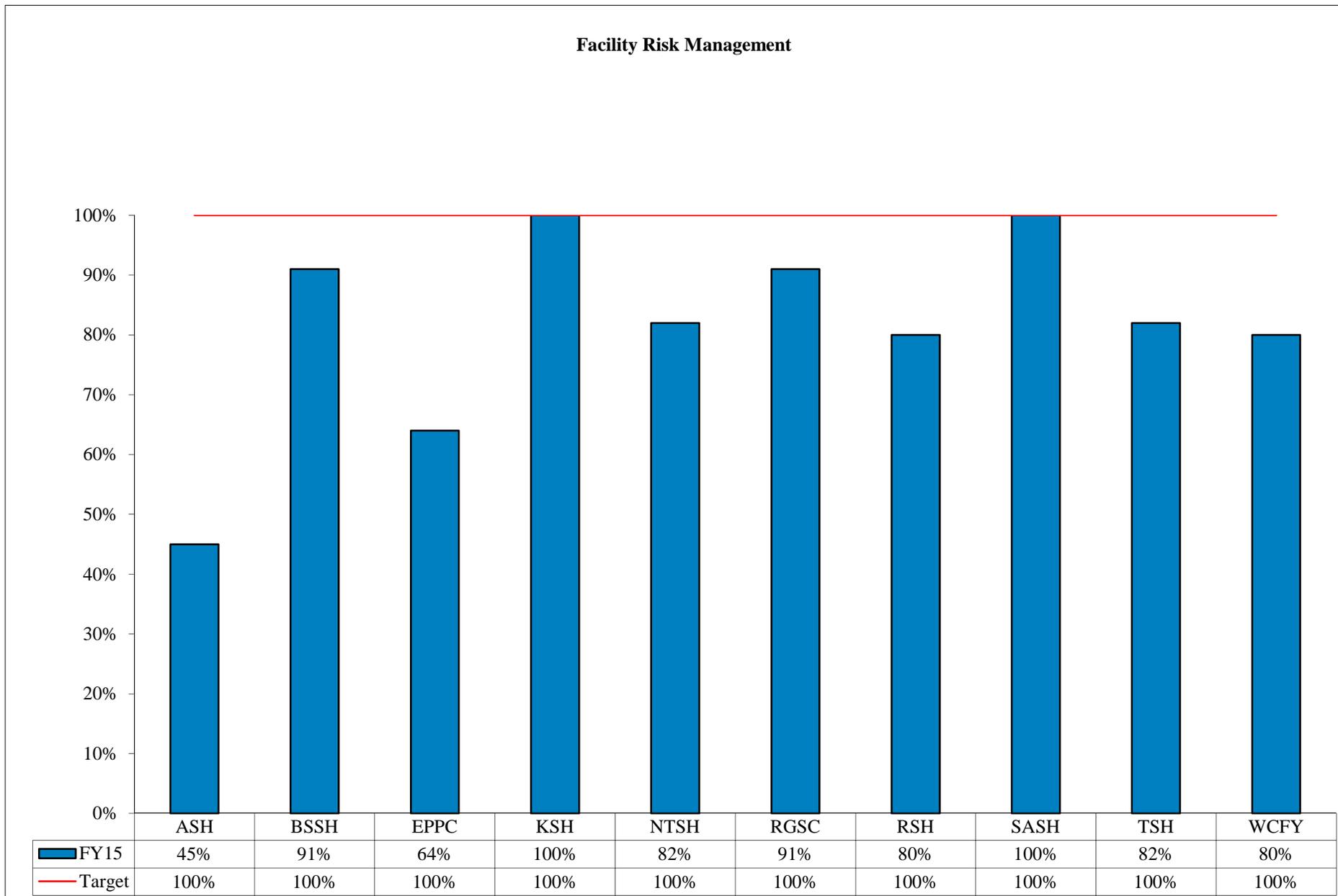
Monitor hospital's self-assessment scores.

CQIO - 8 Facility Support Performance Indicators
All State Hospitals - FY2015

| | Q1 | Q2 | | Q3 | Q4 |
|-------------------------------------|--------------------------|---------------------------|-----------------------------------|----------------------------|---------------------|
| | Facility Risk Management | Procurement Card Controls | Competency Training & Development | Facility Plant Maintenance | Community Relations |
| Compliance Target | 100% | 100% | 100% | 100% | 100% |
| State Hospital Totals | 82% | | | | |
| Austin State Hospital | 45% | | | | |
| Big Spring State Hospital | 91% | | | | |
| El Paso Psychiatric Center | 64% | | | | |
| Kerrville State Hospital | 100% | | | | |
| North Texas State Hospital | 82% | | | | |
| Rio Grande State Center | 91% | | | | |
| Rusk State Hospital | 80% | | | | |
| San Antonio State Hospital | 100% | | | | |
| Terrell State Hospital | 82% | | | | |
| Waco Center For Youth | 80% | | | | |
| Texas Center for Infectious Disease | CF | | | | |

*CF = Contract Facility

CQIO - 8 Facility Support Performance Indicators
All State Hospitals - FY2015
Facility Risk Management



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COM-1

Measure: Internal and External CPI Scores by Month and Review Type

Timeframe: Monthly

Definition

Data Source

CPI-MH Software Report

Date Display and Chart Description

Purpose

Monitor hospital's self-assessment scores.

CQM - 1 Internal CPI Scores by Review Type

###

Austin State Hospital (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 19 | 4 | 46.0% | 27 | 54.0% | 50 | 6 | 10.7% |
| 2 | 42 | 5 | 83.9% | 9 | 16.1% | 56 | 0 | 0.0% |
| 3 | 56 | 0 | 100.0% | 0 | 0.0% | 56 | 0 | 0.0% |
| 4 | 56 | 0 | 100.0% | 0 | 0.0% | 56 | 0 | 0.0% |
| 5 | 36 | 0 | 97.3% | 1 | 2.7% | 37 | 19 | 33.9% |
| 6 | 56 | 0 | 100.0% | 0 | 0.0% | 56 | 0 | 0.0% |
| 7 | 56 | 0 | 100.0% | 0 | 0.0% | 56 | 0 | 0.0% |
| 8 | 56 | 0 | 100.0% | 0 | 0.0% | 56 | 0 | 0.0% |
| 9 | 23 | 0 | 92.0% | 2 | 8.0% | 25 | 31 | 55.4% |
| 10 | 38 | 4 | 82.4% | 9 | 17.6% | 51 | 5 | 8.9% |
| 11 | 12 | 0 | 92.3% | 1 | 7.7% | 13 | 43 | 76.8% |
| 12 | 13 | 0 | 92.9% | 1 | 7.1% | 14 | 42 | 75.0% |
| 13 | 53 | 2 | 98.2% | 1 | 1.8% | 56 | 0 | 0.0% |
| 14 | 51 | 0 | 91.1% | 5 | 8.9% | 56 | 0 | 0.0% |
| 15 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 41 | 73.2% |
| | 582 | 15 | 91.4% | 56 | 8.6% | 653 | 187 | 22.3% |

CQM - 1 Internal CPI Scores by Review Type

Austin State Hospital (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| 1 | 69 | 0 | 100.0% | 0 | 0.0% | 69 | 0 | 0.0% |
| 2 | 55 | 0 | 83.3% | 11 | 16.7% | 66 | 3 | 4.3% |
| 3 | 56 | 0 | 84.8% | 10 | 15.2% | 66 | 3 | 4.3% |
| 4 | 33 | 0 | 68.8% | 15 | 31.3% | 48 | 21 | 30.4% |
| 5 | 52 | 1 | 85.5% | 9 | 14.5% | 62 | 7 | 10.1% |
| 6 | 31 | 2 | 91.7% | 3 | 8.3% | 36 | 33 | 47.8% |
| 7 | 22 | 2 | 82.8% | 5 | 17.2% | 29 | 40 | 58.0% |
| 8 | 3 | 0 | 20.0% | 12 | 80.0% | 15 | 54 | 78.3% |
| 9 | 33 | 0 | 47.8% | 36 | 52.2% | 69 | 0 | 0.0% |
| 10 | 22 | 14 | 52.2% | 33 | 47.8% | 69 | 0 | 0.0% |
| 11 | 2 | 0 | 13.3% | 13 | 86.7% | 15 | 54 | 78.3% |
| 12 | 35 | 6 | 59.4% | 28 | 40.6% | 69 | 0 | 0.0% |
| 13 | 28 | 0 | 40.6% | 41 | 59.4% | 69 | 0 | 0.0% |
| 14 | 32 | 1 | 47.8% | 36 | 52.2% | 69 | 0 | 0.0% |
| 15 | 28 | 0 | 46.7% | 32 | 53.3% | 60 | 9 | 13.0% |
| 16 | 22 | 0 | 38.6% | 35 | 61.4% | 57 | 12 | 17.4% |
| 17 | 9 | 1 | 76.9% | 3 | 23.1% | 13 | 56 | 81.2% |
| 18 | 37 | 0 | 88.1% | 5 | 11.9% | 42 | 27 | 39.1% |
| 19 | 34 | 1 | 83.3% | 7 | 16.7% | 42 | 27 | 39.1% |
| 20 | 51 | 5 | 82.4% | 12 | 17.6% | 68 | 1 | 1.4% |
| 21 | 2 | 0 | 50.0% | 2 | 50.0% | 4 | 65 | 94.2% |
| 22 | 51 | 0 | 73.9% | 18 | 26.1% | 69 | 0 | 0.0% |
| 23 | 40 | 2 | 80.8% | 10 | 19.2% | 52 | 17 | 24.6% |
| | 747 | 35 | 67.5% | 376 | 32.5% | 1158 | 429 | 27.0% |

CQM - 1 Internal CPI Scores by Review Type

Austin State Hospital (FY2015 - 1st Quarter)

Physician Documentation Physician Documentation Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 36 | 0 | 94.7% | 2 | 5.3% | 38 | 0 | 0.0% |
| 2 | 33 | 3 | 94.7% | 2 | 5.3% | 38 | 0 | 0.0% |
| 3 | 33 | 3 | 94.7% | 2 | 5.3% | 38 | 0 | 0.0% |
| 4 | 36 | 0 | 94.7% | 2 | 5.3% | 38 | 0 | 0.0% |
| 5 | 37 | 0 | 97.4% | 1 | 2.6% | 38 | 0 | 0.0% |
| 6 | 37 | 0 | 97.4% | 1 | 2.6% | 38 | 0 | 0.0% |
| 7 | 36 | 0 | 97.3% | 1 | 2.7% | 37 | 1 | 2.6% |
| 8 | 28 | 2 | 85.7% | 5 | 14.3% | 35 | 3 | 7.9% |
| 9 | 35 | 0 | 92.1% | 3 | 7.9% | 38 | 0 | 0.0% |
| 10 | 30 | 0 | 96.8% | 1 | 3.2% | 31 | 7 | 18.4% |
| 11 | 37 | 0 | 97.4% | 1 | 2.6% | 38 | 0 | 0.0% |
| 12 | 32 | 2 | 91.9% | 3 | 8.1% | 37 | 1 | 2.6% |
| 13 | 25 | 8 | 86.8% | 5 | 13.2% | 38 | 0 | 0.0% |
| 14 | 35 | 2 | 97.4% | 1 | 2.6% | 38 | 0 | 0.0% |
| 15 | 7 | 0 | 87.5% | 1 | 12.5% | 8 | 30 | 78.9% |
| 16 | 17 | 2 | 86.4% | 3 | 13.6% | 22 | 16 | 42.1% |
| 17 | 24 | 1 | 89.3% | 3 | 10.7% | 28 | 10 | 26.3% |
| 18 | 21 | 1 | 91.7% | 2 | 8.3% | 24 | 14 | 36.8% |
| | 539 | 24 | 93.5% | 39 | 6.5% | 602 | 82 | 12.0% |

CQM - 1 Internal CPI Scores by Review Type

Austin State Hospital (FY2015 - 1st Quarter)

Psychoactive Medications

Psychoactive Medications

Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % | No | % | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|--------------|------------------|----------------|--------------|
| 1 | 33 | 1 | 94.4% | 2 | 5.6% | 36 | 3 | 7.7% |
| 2 | 31 | 0 | 88.6% | 4 | 11.4% | 35 | 4 | 10.3% |
| 3 | 30 | 0 | 90.9% | 3 | 9.1% | 33 | 6 | 15.4% |
| 4 | 22 | 0 | 81.5% | 5 | 18.5% | 27 | 12 | 30.8% |
| 5 | 17 | 0 | 89.5% | 2 | 10.5% | 19 | 20 | 51.3% |
| 6 | 13 | 0 | 76.5% | 4 | 23.5% | 17 | 22 | 56.4% |
| 7 | 12 | 0 | 85.7% | 2 | 14.3% | 14 | 25 | 64.1% |
| 8 | 10 | 0 | 90.9% | 1 | 9.1% | 11 | 28 | 71.8% |
| 9 | 11 | 0 | 84.6% | 2 | 15.4% | 13 | 26 | 66.7% |
| 10 | 28 | 0 | 93.3% | 2 | 6.7% | 30 | 9 | 23.1% |
| 11 | 33 | 0 | 91.7% | 3 | 8.3% | 36 | 3 | 7.7% |
| 12 | 19 | 0 | 82.6% | 4 | 17.4% | 23 | 16 | 41.0% |
| | 259 | 1 | 88.4% | 34 | 11.6% | 294 | 174 | 37.2% |

CQM - 1 Internal CPI Scores by Review Type

###

Big Spring State Hospital (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|----------|-----------------|------------------|----------------|--------------|
| 1 | 15 | 14 | 100.0% | 0 | 0.0% | 29 | 4 | 12.1% |
| 2 | 32 | 0 | 97.0% | 1 | 3.0% | 33 | 0 | 0.0% |
| 3 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 4 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 5 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 6 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 7 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 8 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 9 | 14 | 0 | 100.0% | 0 | 0.0% | 14 | 19 | 57.6% |
| 10 | 21 | 8 | 100.0% | 0 | 0.0% | 29 | 4 | 12.1% |
| 11 | 0 | 0 | | 0 | | 0 | 33 | |
| 12 | 13 | 0 | 92.9% | 1 | 7.1% | 14 | 19 | 57.6% |
| 13 | 24 | 9 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 14 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 15 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| | 383 | 31 | 99.5% | 2 | 0.5% | 416 | 79 | 16.0% |

CQM - 1 Internal CPI Scores by Review Type

Big Spring State Hospital (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| 1 | 30 | 0 | 93.8% | 2 | 6.3% | 32 | 1 | 3.0% |
| 2 | 32 | 0 | 100.0% | 0 | 0.0% | 32 | 1 | 3.0% |
| 3 | 29 | 0 | 90.6% | 3 | 9.4% | 32 | 1 | 3.0% |
| 4 | 27 | 0 | 93.1% | 2 | 6.9% | 29 | 4 | 12.1% |
| 5 | 15 | 1 | 84.2% | 3 | 15.8% | 19 | 14 | 42.4% |
| 6 | 6 | 0 | 40.0% | 9 | 60.0% | 15 | 18 | 54.5% |
| 7 | 11 | 0 | 68.8% | 5 | 31.3% | 16 | 17 | 51.5% |
| 8 | 11 | 0 | 78.6% | 3 | 21.4% | 14 | 19 | 57.6% |
| 9 | 16 | 0 | 48.5% | 17 | 51.5% | 33 | 0 | 0.0% |
| 10 | 28 | 0 | 84.8% | 5 | 15.2% | 33 | 0 | 0.0% |
| 11 | 0 | 0 | 0.0% | 2 | 100.0% | 2 | 31 | 93.9% |
| 12 | 16 | 0 | 48.5% | 17 | 51.5% | 33 | 0 | 0.0% |
| 13 | 5 | 0 | 15.2% | 28 | 84.8% | 33 | 0 | 0.0% |
| 14 | 16 | 1 | 51.5% | 16 | 48.5% | 33 | 0 | 0.0% |
| 15 | 25 | 0 | 96.2% | 1 | 3.8% | 26 | 7 | 21.2% |
| 16 | 22 | 0 | 81.5% | 5 | 18.5% | 27 | 6 | 18.2% |
| 17 | 8 | 0 | 88.9% | 1 | 11.1% | 9 | 24 | 72.7% |
| 18 | 17 | 0 | 77.3% | 5 | 22.7% | 22 | 11 | 33.3% |
| 19 | 13 | 1 | 63.6% | 8 | 36.4% | 22 | 11 | 33.3% |
| 20 | 26 | 7 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 21 | 0 | 0 | | 0 | | 0 | 33 | |
| 22 | 11 | 1 | 36.4% | 21 | 63.6% | 33 | 0 | 0.0% |
| 23 | 13 | 19 | 100.0% | 0 | 0.0% | 32 | 1 | 3.0% |
| | 377 | 30 | 72.7% | 153 | 27.3% | 560 | 199 | 26.2% |

CQM - 1 Internal CPI Scores by Review Type

Big Spring State Hospital (FY2015 - 1st Quarter)

Physician Documentation

Physician Documentation

Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|----------|-----------------|------------------|----------------|--------------|
| 1 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 2 | 30 | 3 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 3 | 31 | 2 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 4 | 32 | 0 | 97.0% | 1 | 3.0% | 33 | 0 | 0.0% |
| 5 | 32 | 0 | 97.0% | 1 | 3.0% | 33 | 0 | 0.0% |
| 6 | 30 | 0 | 90.9% | 3 | 9.1% | 33 | 0 | 0.0% |
| 7 | 31 | 0 | 100.0% | 0 | 0.0% | 31 | 2 | 6.1% |
| 8 | 30 | 1 | 100.0% | 0 | 0.0% | 31 | 2 | 6.1% |
| 9 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 10 | 31 | 1 | 100.0% | 0 | 0.0% | 32 | 1 | 3.0% |
| 11 | 33 | 0 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 12 | 30 | 2 | 100.0% | 0 | 0.0% | 32 | 1 | 3.0% |
| 13 | 26 | 7 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 14 | 32 | 1 | 100.0% | 0 | 0.0% | 33 | 0 | 0.0% |
| 15 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 24 | 72.7% |
| 16 | 17 | 3 | 95.2% | 1 | 4.8% | 21 | 12 | 36.4% |
| 17 | 17 | 0 | 94.4% | 1 | 5.6% | 18 | 15 | 45.5% |
| 18 | 13 | 0 | 100.0% | 0 | 0.0% | 13 | 20 | 60.6% |
| | 490 | 20 | 98.6% | 7 | 1.4% | 517 | 77 | 13.0% |

CQM - 1 Internal CPI Scores by Review Type

Big Spring State Hospital (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % | No | % | Total Applicable | Not Applicable | % |
|-----------------|------------|-------------------------|--------------|-----------|-------------|-------------------------|-----------------------|--------------|
| 1 | 30 | 1 | 96.9% | 1 | 3.1% | 32 | 1 | 3.0% |
| 2 | 32 | 0 | 100.0% | 0 | 0.0% | 32 | 1 | 3.0% |
| 3 | 32 | 0 | 100.0% | 0 | 0.0% | 32 | 1 | 3.0% |
| 4 | 21 | 0 | 100.0% | 0 | 0.0% | 21 | 12 | 36.4% |
| 5 | 12 | 0 | 92.3% | 1 | 7.7% | 13 | 20 | 60.6% |
| 6 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 18 | 54.5% |
| 7 | 14 | 0 | 100.0% | 0 | 0.0% | 14 | 19 | 57.6% |
| 8 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 18 | 54.5% |
| 9 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 23 | 69.7% |
| 10 | 32 | 0 | 100.0% | 0 | 0.0% | 32 | 1 | 3.0% |
| 11 | 32 | 0 | 100.0% | 0 | 0.0% | 32 | 1 | 3.0% |
| 12 | 16 | 1 | 94.4% | 1 | 5.6% | 18 | 15 | 45.5% |
| | 261 | 2 | 98.9% | 3 | 1.1% | 266 | 130 | 32.8% |

CQM - 1 Internal CPI Scores by Review Type



El Paso Psychiatric Center (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|-------------|
| 1 | 14 | 0 | 93.3% | 1 | 6.7% | 15 | 1 | 6.3% |
| 2 | 8 | 1 | 56.3% | 7 | 43.8% | 16 | 0 | 0.0% |
| 3 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 4 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 5 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 6 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 7 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 8 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 9 | 13 | 0 | 100.0% | 0 | 0.0% | 13 | 3 | 18.8% |
| 10 | 12 | 1 | 81.3% | 3 | 18.8% | 16 | 0 | 0.0% |
| 11 | 0 | 0 | | 0 | | 0 | 16 | |
| 12 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 1 | 6.3% |
| 13 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 14 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 15 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 1 | 6.3% |
| | 205 | 2 | 95.0% | 11 | 5.0% | 218 | 22 | 9.2% |

CQM - 1 Internal CPI Scores by Review Type

El Paso Psychiatric Center (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| 1 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 2 | 14 | 0 | 100.0% | 0 | 0.0% | 14 | 2 | 12.5% |
| 3 | 14 | 0 | 100.0% | 0 | 0.0% | 14 | 2 | 12.5% |
| 4 | 7 | 0 | 63.6% | 4 | 36.4% | 11 | 5 | 31.3% |
| 5 | 7 | 0 | 43.8% | 9 | 56.3% | 16 | 0 | 0.0% |
| 6 | 0 | 0 | | 0 | | 0 | 16 | |
| 7 | 0 | 0 | | 0 | | 0 | 16 | |
| 8 | 1 | 0 | 20.0% | 4 | 80.0% | 5 | 11 | 68.8% |
| 9 | 9 | 0 | 56.3% | 7 | 43.8% | 16 | 0 | 0.0% |
| 10 | 6 | 0 | 37.5% | 10 | 62.5% | 16 | 0 | 0.0% |
| 11 | 1 | 0 | 12.5% | 7 | 87.5% | 8 | 8 | 50.0% |
| 12 | 8 | 0 | 50.0% | 8 | 50.0% | 16 | 0 | 0.0% |
| 13 | 1 | 0 | 6.3% | 15 | 93.8% | 16 | 0 | 0.0% |
| 14 | 14 | 0 | 87.5% | 2 | 12.5% | 16 | 0 | 0.0% |
| 15 | 9 | 0 | 81.8% | 2 | 18.2% | 11 | 5 | 31.3% |
| 16 | 3 | 0 | 27.3% | 8 | 72.7% | 11 | 5 | 31.3% |
| 17 | 3 | 0 | 100.0% | 0 | 0.0% | 3 | 13 | 81.3% |
| 18 | 8 | 0 | 80.0% | 2 | 20.0% | 10 | 6 | 37.5% |
| 19 | 4 | 0 | 40.0% | 6 | 60.0% | 10 | 6 | 37.5% |
| 20 | 7 | 1 | 50.0% | 8 | 50.0% | 16 | 0 | 0.0% |
| 21 | 1 | 0 | 100.0% | 0 | 0.0% | 1 | 15 | 93.8% |
| 22 | 0 | 0 | 0.0% | 16 | 100.0% | 16 | 0 | 0.0% |
| 23 | 11 | 0 | 91.7% | 1 | 8.3% | 12 | 4 | 25.0% |
| | 144 | 1 | 57.1% | 109 | 42.9% | 254 | 114 | 31.0% |

CQM - 1 Internal CPI Scores by Review Type

El Paso Psychiatric Center (FY2015 - 1st Quarter)

Physician Documentation

Physician Documentation

Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 2 | 15 | 0 | 93.8% | 1 | 6.3% | 16 | 0 | 0.0% |
| 3 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 4 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 5 | 15 | 0 | 93.8% | 1 | 6.3% | 16 | 0 | 0.0% |
| 6 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 7 | 13 | 0 | 92.9% | 1 | 7.1% | 14 | 2 | 12.5% |
| 8 | 11 | 0 | 100.0% | 0 | 0.0% | 11 | 5 | 31.3% |
| 9 | 15 | 0 | 93.8% | 1 | 6.3% | 16 | 0 | 0.0% |
| 10 | 11 | 0 | 100.0% | 0 | 0.0% | 11 | 5 | 31.3% |
| 11 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 12 | 15 | 0 | 93.8% | 1 | 6.3% | 16 | 0 | 0.0% |
| 13 | 12 | 1 | 81.3% | 3 | 18.8% | 16 | 0 | 0.0% |
| 14 | 15 | 0 | 93.8% | 1 | 6.3% | 16 | 0 | 0.0% |
| 15 | 2 | 0 | 100.0% | 0 | 0.0% | 2 | 14 | 87.5% |
| 16 | 12 | 0 | 100.0% | 0 | 0.0% | 12 | 4 | 25.0% |
| 17 | 10 | 0 | 90.9% | 1 | 9.1% | 11 | 5 | 31.3% |
| 18 | 12 | 0 | 100.0% | 0 | 0.0% | 12 | 4 | 25.0% |
| | 238 | 1 | 96.0% | 10 | 4.0% | 249 | 39 | 13.5% |

CQM - 1 Internal CPI Scores by Review Type

El Paso Psychiatric Center (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|----------|-----------------|------------------|----------------|--------------|
| 1 | 13 | 2 | 93.8% | 1 | 6.3% | 16 | 0 | 0.0% |
| 2 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 3 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 0 | 0.0% |
| 4 | 13 | 0 | 100.0% | 0 | 0.0% | 13 | 3 | 18.8% |
| 5 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 7 | 43.8% |
| 6 | 6 | 0 | 100.0% | 0 | 0.0% | 6 | 10 | 62.5% |
| 7 | 4 | 0 | 100.0% | 0 | 0.0% | 4 | 12 | 75.0% |
| 8 | 5 | 0 | 100.0% | 0 | 0.0% | 5 | 11 | 68.8% |
| 9 | 5 | 0 | 100.0% | 0 | 0.0% | 5 | 11 | 68.8% |
| 10 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 1 | 6.3% |
| 11 | 15 | 0 | 93.8% | 1 | 6.3% | 16 | 0 | 0.0% |
| 12 | 7 | 0 | 87.5% | 1 | 12.5% | 8 | 8 | 50.0% |
| | 124 | 2 | 97.7% | 3 | 2.3% | 129 | 63 | 32.8% |

CQM - 1 Internal CPI Scores by Review Type



Kerrville State Hospital (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 28 | 0 | 87.5% | 4 | 12.5% | 32 | 4 | 11.1% |
| 2 | 36 | 0 | 100.0% | 0 | 0.0% | 36 | 0 | 0.0% |
| 3 | 36 | 0 | 100.0% | 0 | 0.0% | 36 | 0 | 0.0% |
| 4 | 36 | 0 | 100.0% | 0 | 0.0% | 36 | 0 | 0.0% |
| 5 | 23 | 0 | 100.0% | 0 | 0.0% | 23 | 13 | 36.1% |
| 6 | 36 | 0 | 100.0% | 0 | 0.0% | 36 | 0 | 0.0% |
| 7 | 34 | 0 | 94.4% | 2 | 5.6% | 36 | 0 | 0.0% |
| 8 | 35 | 0 | 97.2% | 1 | 2.8% | 36 | 0 | 0.0% |
| 9 | 2 | 0 | 100.0% | 0 | 0.0% | 2 | 34 | 94.4% |
| 10 | 27 | 0 | 84.4% | 5 | 15.6% | 32 | 4 | 11.1% |
| 11 | 2 | 0 | 100.0% | 0 | 0.0% | 2 | 34 | 94.4% |
| 12 | 7 | 0 | 100.0% | 0 | 0.0% | 7 | 29 | 80.6% |
| 13 | 22 | 14 | 100.0% | 0 | 0.0% | 36 | 0 | 0.0% |
| 14 | 36 | 0 | 100.0% | 0 | 0.0% | 36 | 0 | 0.0% |
| 15 | 24 | 0 | 92.3% | 2 | 7.7% | 26 | 10 | 27.8% |
| | 384 | 14 | 96.6% | 14 | 3.4% | 412 | 128 | 23.7% |

CQM - 1 Internal CPI Scores by Review Type

Kerrville State Hospital (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|-----------------|------------|-------------------------|--------------------|------------|------------------------|-------------------------|-----------------------|--------------|
| 1 | 29 | 0 | 80.6% | 7 | 19.4% | 36 | 0 | 0.0% |
| 2 | 35 | 0 | 97.2% | 1 | 2.8% | 36 | 0 | 0.0% |
| 3 | 33 | 0 | 91.7% | 3 | 8.3% | 36 | 0 | 0.0% |
| 4 | 27 | 0 | 81.8% | 6 | 18.2% | 33 | 3 | 8.3% |
| 5 | 26 | 0 | 96.3% | 1 | 3.7% | 27 | 9 | 25.0% |
| 6 | 21 | 0 | 80.8% | 5 | 19.2% | 26 | 10 | 27.8% |
| 7 | 26 | 1 | 90.0% | 3 | 10.0% | 30 | 6 | 16.7% |
| 8 | 8 | 1 | 75.0% | 3 | 25.0% | 12 | 24 | 66.7% |
| 9 | 18 | 0 | 50.0% | 18 | 50.0% | 36 | 0 | 0.0% |
| 10 | 26 | 2 | 77.8% | 8 | 22.2% | 36 | 0 | 0.0% |
| 11 | 6 | 0 | 50.0% | 6 | 50.0% | 12 | 24 | 66.7% |
| 12 | 23 | 3 | 72.2% | 10 | 27.8% | 36 | 0 | 0.0% |
| 13 | 11 | 3 | 38.9% | 22 | 61.1% | 36 | 0 | 0.0% |
| 14 | 23 | 1 | 66.7% | 12 | 33.3% | 36 | 0 | 0.0% |
| 15 | 23 | 0 | 88.5% | 3 | 11.5% | 26 | 10 | 27.8% |
| 16 | 21 | 1 | 81.5% | 5 | 18.5% | 27 | 9 | 25.0% |
| 17 | 24 | 0 | 100.0% | 0 | 0.0% | 24 | 12 | 33.3% |
| 18 | 17 | 0 | 81.0% | 4 | 19.0% | 21 | 15 | 41.7% |
| 19 | 17 | 0 | 77.3% | 5 | 22.7% | 22 | 14 | 38.9% |
| 20 | 34 | 1 | 97.2% | 1 | 2.8% | 36 | 0 | 0.0% |
| 21 | 3 | 0 | 100.0% | 0 | 0.0% | 3 | 33 | 91.7% |
| 22 | 26 | 1 | 75.0% | 9 | 25.0% | 36 | 0 | 0.0% |
| 23 | 26 | 2 | 93.3% | 2 | 6.7% | 30 | 6 | 16.7% |
| | 503 | 16 | 79.5% | 134 | 20.5% | 653 | 175 | 21.1% |

CQM - 1 Internal CPI Scores by Review Type

Kerrville State Hospital (FY2015 - 1st Quarter)

Physician Documentation

Physician Documentation

Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|----------|-----------------|------------------|----------------|--------------|
| 1 | 31 | 0 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 2 | 26 | 5 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 3 | 28 | 3 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 4 | 31 | 0 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 5 | 31 | 0 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 6 | 31 | 0 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 7 | 31 | 0 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 8 | 30 | 0 | 100.0% | 0 | 0.0% | 30 | 1 | 3.2% |
| 9 | 31 | 0 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 10 | 23 | 0 | 100.0% | 0 | 0.0% | 23 | 8 | 25.8% |
| 11 | 31 | 0 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 12 | 29 | 2 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 13 | 28 | 3 | 100.0% | 0 | 0.0% | 31 | 0 | 0.0% |
| 14 | 30 | 0 | 96.8% | 1 | 3.2% | 31 | 0 | 0.0% |
| 15 | 9 | 0 | 90.0% | 1 | 10.0% | 10 | 21 | 67.7% |
| 16 | 4 | 2 | 60.0% | 4 | 40.0% | 10 | 21 | 67.7% |
| 17 | 7 | 1 | 80.0% | 2 | 20.0% | 10 | 21 | 67.7% |
| 18 | 3 | 0 | 75.0% | 1 | 25.0% | 4 | 27 | 87.1% |
| | 434 | 16 | 98.0% | 9 | 2.0% | 459 | 99 | 17.7% |

CQM - 1 Internal CPI Scores by Review Type

Kerrville State Hospital (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|-----------------|------------|-------------------------|--------------------|-----------|------------------------|-------------------------|-----------------------|--------------|
| 1 | 25 | 0 | 89.3% | 3 | 10.7% | 28 | 3 | 9.7% |
| 2 | 30 | 0 | 100.0% | 0 | 0.0% | 30 | 1 | 3.2% |
| 3 | 29 | 0 | 100.0% | 0 | 0.0% | 29 | 2 | 6.5% |
| 4 | 20 | 0 | 95.2% | 1 | 4.8% | 21 | 10 | 32.3% |
| 5 | 13 | 0 | 100.0% | 0 | 0.0% | 13 | 18 | 58.1% |
| 6 | 17 | 0 | 100.0% | 0 | 0.0% | 17 | 14 | 45.2% |
| 7 | 19 | 0 | 100.0% | 0 | 0.0% | 19 | 12 | 38.7% |
| 8 | 1 | 0 | 100.0% | 0 | 0.0% | 1 | 30 | 96.8% |
| 9 | 1 | 0 | 100.0% | 0 | 0.0% | 1 | 30 | 96.8% |
| 10 | 29 | 0 | 96.7% | 1 | 3.3% | 30 | 1 | 3.2% |
| 11 | 29 | 1 | 100.0% | 0 | 0.0% | 30 | 1 | 3.2% |
| 12 | 24 | 0 | 100.0% | 0 | 0.0% | 24 | 7 | 22.6% |
| | 237 | 1 | 97.9% | 5 | 2.1% | 243 | 129 | 34.7% |

CQM - 1 Internal CPI Scores by Review Type



North Texas State Hospital (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| 1 | 49 | 10 | 81.9% | 13 | 18.1% | 72 | 16 | 18.2% |
| 2 | 63 | 1 | 72.7% | 24 | 27.3% | 88 | 0 | 0.0% |
| 3 | 81 | 0 | 92.0% | 7 | 8.0% | 88 | 0 | 0.0% |
| 4 | 83 | 0 | 94.3% | 5 | 5.7% | 88 | 0 | 0.0% |
| 5 | 41 | 0 | 77.4% | 12 | 22.6% | 53 | 35 | 39.8% |
| 6 | 85 | 0 | 96.6% | 3 | 3.4% | 88 | 0 | 0.0% |
| 7 | 86 | 0 | 97.7% | 2 | 2.3% | 88 | 0 | 0.0% |
| 8 | 87 | 0 | 98.9% | 1 | 1.1% | 88 | 0 | 0.0% |
| 9 | 20 | 0 | 90.9% | 2 | 9.1% | 22 | 66 | 75.0% |
| 10 | 43 | 5 | 94.1% | 3 | 5.9% | 51 | 37 | 42.0% |
| 11 | 14 | 0 | 87.5% | 2 | 12.5% | 16 | 72 | 81.8% |
| 12 | 14 | 2 | 45.7% | 19 | 54.3% | 35 | 53 | 60.2% |
| 13 | 68 | 13 | 92.0% | 7 | 8.0% | 88 | 0 | 0.0% |
| 14 | 83 | 0 | 94.3% | 5 | 5.7% | 88 | 0 | 0.0% |
| 15 | 27 | 0 | 77.1% | 8 | 22.9% | 35 | 53 | 60.2% |
| | 844 | 31 | 88.6% | 113 | 11.4% | 988 | 332 | 25.2% |

CQM - 1 Internal CPI Scores by Review Type

North Texas State Hospital (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|-------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| 1 | 74 | 0 | 88.1% | 10 | 11.9% | 84 | 4 | 4.5% |
| 2 | 78 | 0 | 92.9% | 6 | 7.1% | 84 | 4 | 4.5% |
| 3 | 71 | 0 | 86.6% | 11 | 13.4% | 82 | 6 | 6.8% |
| 4 | 57 | 0 | 81.4% | 13 | 18.6% | 70 | 18 | 20.5% |
| 5 | 49 | 1 | 68.5% | 23 | 31.5% | 73 | 15 | 17.0% |
| 6 | 24 | 1 | 34.7% | 47 | 65.3% | 72 | 16 | 18.2% |
| 7 | 29 | 1 | 57.7% | 22 | 42.3% | 52 | 36 | 40.9% |
| 8 | 26 | 1 | 58.7% | 19 | 41.3% | 46 | 42 | 47.7% |
| 9 | 39 | 0 | 44.3% | 49 | 55.7% | 88 | 0 | 0.0% |
| 10 | 59 | 7 | 75.0% | 22 | 25.0% | 88 | 0 | 0.0% |
| 11 | 10 | 0 | 71.4% | 4 | 28.6% | 14 | 74 | 84.1% |
| 12 | 54 | 6 | 68.2% | 28 | 31.8% | 88 | 0 | 0.0% |
| 13 | 22 | 3 | 28.4% | 63 | 71.6% | 88 | 0 | 0.0% |
| 14 | 29 | 4 | 37.5% | 55 | 62.5% | 88 | 0 | 0.0% |
| 15 | 57 | 0 | 85.1% | 10 | 14.9% | 67 | 21 | 23.9% |
| 16 | 52 | 2 | 78.3% | 15 | 21.7% | 69 | 19 | 21.6% |
| 17 | 47 | 1 | 94.1% | 3 | 5.9% | 51 | 37 | 42.0% |
| 18 | 47 | 4 | 76.1% | 16 | 23.9% | 67 | 21 | 23.9% |
| 19 | 51 | 3 | 81.8% | 12 | 18.2% | 66 | 22 | 25.0% |
| 20 | 76 | 0 | 95.0% | 4 | 5.0% | 80 | 8 | 9.1% |
| 21 | 11 | 0 | 55.0% | 9 | 45.0% | 20 | 68 | 77.3% |
| 22 | 32 | 4 | 40.9% | 52 | 59.1% | 88 | 0 | 0.0% |
| 23 | 64 | 2 | 88.0% | 9 | 12.0% | 75 | 13 | 14.8% |
| | 1058 | 40 | 68.6% | 502 | 31.4% | 1600 | 424 | 20.9% |

CQM - 1 Internal CPI Scores by Review Type

North Texas State Hospital (FY2015 - 1st Quarter)

Physician Documentation

Physician Documentation

Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|-------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 71 | 1 | 97.3% | 2 | 2.7% | 74 | 0 | 0.0% |
| 2 | 66 | 8 | 100.0% | 0 | 0.0% | 74 | 0 | 0.0% |
| 3 | 65 | 8 | 98.6% | 1 | 1.4% | 74 | 0 | 0.0% |
| 4 | 74 | 0 | 100.0% | 0 | 0.0% | 74 | 0 | 0.0% |
| 5 | 74 | 0 | 100.0% | 0 | 0.0% | 74 | 0 | 0.0% |
| 6 | 70 | 0 | 94.6% | 4 | 5.4% | 74 | 0 | 0.0% |
| 7 | 71 | 1 | 98.6% | 1 | 1.4% | 73 | 1 | 1.4% |
| 8 | 67 | 0 | 95.7% | 3 | 4.3% | 70 | 4 | 5.4% |
| 9 | 73 | 0 | 98.6% | 1 | 1.4% | 74 | 0 | 0.0% |
| 10 | 43 | 0 | 74.1% | 15 | 25.9% | 58 | 16 | 21.6% |
| 11 | 71 | 0 | 95.9% | 3 | 4.1% | 74 | 0 | 0.0% |
| 12 | 62 | 6 | 93.2% | 5 | 6.8% | 73 | 1 | 1.4% |
| 13 | 64 | 4 | 91.9% | 6 | 8.1% | 74 | 0 | 0.0% |
| 14 | 72 | 2 | 100.0% | 0 | 0.0% | 74 | 0 | 0.0% |
| 15 | 22 | 0 | 100.0% | 0 | 0.0% | 22 | 52 | 70.3% |
| 16 | 31 | 3 | 70.8% | 14 | 29.2% | 48 | 26 | 35.1% |
| 17 | 42 | 1 | 100.0% | 0 | 0.0% | 43 | 31 | 41.9% |
| 18 | 35 | 0 | 97.2% | 1 | 2.8% | 36 | 38 | 51.4% |
| | 1073 | 34 | 95.2% | 56 | 4.8% | 1163 | 169 | 12.7% |

CQM - 1 Internal CPI Scores by Review Type

North Texas State Hospital (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|-----------------|------------|-------------------------|--------------------|-----------|------------------------|-------------------------|-----------------------|--------------|
| 1 | 54 | 1 | 85.9% | 9 | 14.1% | 64 | 3 | 4.5% |
| 2 | 64 | 0 | 97.0% | 2 | 3.0% | 66 | 1 | 1.5% |
| 3 | 63 | 0 | 98.4% | 1 | 1.6% | 64 | 3 | 4.5% |
| 4 | 44 | 0 | 97.8% | 1 | 2.2% | 45 | 22 | 32.8% |
| 5 | 28 | 0 | 96.6% | 1 | 3.4% | 29 | 38 | 56.7% |
| 6 | 25 | 0 | 96.2% | 1 | 3.8% | 26 | 41 | 61.2% |
| 7 | 23 | 0 | 95.8% | 1 | 4.2% | 24 | 43 | 64.2% |
| 8 | 18 | 0 | 81.8% | 4 | 18.2% | 22 | 45 | 67.2% |
| 9 | 16 | 0 | 94.1% | 1 | 5.9% | 17 | 50 | 74.6% |
| 10 | 66 | 0 | 100.0% | 0 | 0.0% | 66 | 1 | 1.5% |
| 11 | 67 | 0 | 100.0% | 0 | 0.0% | 67 | 0 | 0.0% |
| 12 | 49 | 0 | 96.1% | 2 | 3.9% | 51 | 16 | 23.9% |
| | 517 | 1 | 95.7% | 23 | 4.3% | 541 | 263 | 32.7% |

CQM - 1 Internal CPI Scores by Review Type



Rio Grande State Center (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 9 | 0 | 75.0% | 3 | 25.0% | 12 | 3 | 20.0% |
| 2 | 13 | 0 | 86.7% | 2 | 13.3% | 15 | 0 | 0.0% |
| 3 | 14 | 0 | 93.3% | 1 | 6.7% | 15 | 0 | 0.0% |
| 4 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 5 | 1 | 0 | 100.0% | 0 | 0.0% | 1 | 14 | 93.3% |
| 6 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 7 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 8 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 9 | 5 | 0 | 83.3% | 1 | 16.7% | 6 | 9 | 60.0% |
| 10 | 11 | 2 | 86.7% | 2 | 13.3% | 15 | 0 | 0.0% |
| 11 | 0 | 0 | | 0 | | 0 | 15 | |
| 12 | 0 | 0 | | 0 | | 0 | 15 | |
| 13 | 12 | 3 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 14 | 14 | 0 | 93.3% | 1 | 6.7% | 15 | 0 | 0.0% |
| 15 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| | 154 | 5 | 94.1% | 10 | 5.9% | 169 | 56 | 24.9% |

CQM - 1 Internal CPI Scores by Review Type

Rio Grande State Center (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 2 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 3 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 4 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 5 | 33.3% |
| 5 | 13 | 0 | 86.7% | 2 | 13.3% | 15 | 0 | 0.0% |
| 6 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 6 | 40.0% |
| 7 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 6 | 40.0% |
| 8 | 0 | 0 | 0.0% | 4 | 100.0% | 4 | 11 | 73.3% |
| 9 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 10 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 11 | 6 | 0 | 75.0% | 2 | 25.0% | 8 | 7 | 46.7% |
| 12 | 13 | 0 | 86.7% | 2 | 13.3% | 15 | 0 | 0.0% |
| 13 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 14 | 14 | 0 | 93.3% | 1 | 6.7% | 15 | 0 | 0.0% |
| 15 | 11 | 0 | 91.7% | 1 | 8.3% | 12 | 3 | 20.0% |
| 16 | 8 | 0 | 80.0% | 2 | 20.0% | 10 | 5 | 33.3% |
| 17 | 5 | 0 | 100.0% | 0 | 0.0% | 5 | 10 | 66.7% |
| 18 | 12 | 0 | 100.0% | 0 | 0.0% | 12 | 3 | 20.0% |
| 19 | 13 | 0 | 100.0% | 0 | 0.0% | 13 | 2 | 13.3% |
| 20 | 10 | 0 | 90.9% | 1 | 9.1% | 11 | 4 | 26.7% |
| 21 | 8 | 0 | 100.0% | 0 | 0.0% | 8 | 7 | 46.7% |
| 22 | 13 | 2 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 23 | 6 | 0 | 54.5% | 5 | 45.5% | 11 | 4 | 26.7% |
| | 250 | 2 | 92.6% | 20 | 7.4% | 272 | 73 | 21.2% |

CQM - 1 Internal CPI Scores by Review Type

Rio Grande State Center (FY2015 - 1st Quarter)

Physician Documentation

Physician Documentation

Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|-------------|
| 1 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 2 | 12 | 2 | 93.3% | 1 | 6.7% | 15 | 0 | 0.0% |
| 3 | 13 | 1 | 93.3% | 1 | 6.7% | 15 | 0 | 0.0% |
| 4 | 14 | 0 | 93.3% | 1 | 6.7% | 15 | 0 | 0.0% |
| 5 | 14 | 0 | 93.3% | 1 | 6.7% | 15 | 0 | 0.0% |
| 6 | 13 | 0 | 86.7% | 2 | 13.3% | 15 | 0 | 0.0% |
| 7 | 13 | 0 | 100.0% | 0 | 0.0% | 13 | 2 | 13.3% |
| 8 | 13 | 0 | 92.9% | 1 | 7.1% | 14 | 1 | 6.7% |
| 9 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 10 | 12 | 0 | 85.7% | 2 | 14.3% | 14 | 1 | 6.7% |
| 11 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 12 | 14 | 0 | 100.0% | 0 | 0.0% | 14 | 1 | 6.7% |
| 13 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 14 | 13 | 1 | 93.3% | 1 | 6.7% | 15 | 0 | 0.0% |
| 15 | 4 | 0 | 100.0% | 0 | 0.0% | 4 | 11 | 73.3% |
| 16 | 12 | 1 | 100.0% | 0 | 0.0% | 13 | 2 | 13.3% |
| 17 | 12 | 0 | 85.7% | 2 | 14.3% | 14 | 1 | 6.7% |
| 18 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 5 | 33.3% |
| | 229 | 5 | 95.1% | 12 | 4.9% | 246 | 24 | 8.9% |

CQM - 1 Internal CPI Scores by Review Type

Rio Grande State Center (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 14 | 1 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 2 | 13 | 0 | 86.7% | 2 | 13.3% | 15 | 0 | 0.0% |
| 3 | 13 | 0 | 92.9% | 1 | 7.1% | 14 | 1 | 6.7% |
| 4 | 11 | 0 | 78.6% | 3 | 21.4% | 14 | 1 | 6.7% |
| 5 | 7 | 0 | 87.5% | 1 | 12.5% | 8 | 7 | 46.7% |
| 6 | 2 | 0 | 100.0% | 0 | 0.0% | 2 | 13 | 86.7% |
| 7 | 2 | 0 | 100.0% | 0 | 0.0% | 2 | 13 | 86.7% |
| 8 | 5 | 0 | 83.3% | 1 | 16.7% | 6 | 9 | 60.0% |
| 9 | 5 | 0 | 100.0% | 0 | 0.0% | 5 | 10 | 66.7% |
| 10 | 13 | 0 | 100.0% | 0 | 0.0% | 13 | 2 | 13.3% |
| 11 | 15 | 0 | 100.0% | 0 | 0.0% | 15 | 0 | 0.0% |
| 12 | 7 | 0 | 77.8% | 2 | 22.2% | 9 | 6 | 40.0% |
| | 107 | 1 | 91.5% | 10 | 8.5% | 118 | 62 | 34.4% |

CQM - 1 Internal CPI Scores by Review Type



Rusk State Hospital (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 26 | 4 | 85.7% | 5 | 14.3% | 35 | 8 | 18.6% |
| 2 | 32 | 6 | 88.4% | 5 | 11.6% | 43 | 0 | 0.0% |
| 3 | 42 | 0 | 97.7% | 1 | 2.3% | 43 | 0 | 0.0% |
| 4 | 42 | 0 | 97.7% | 1 | 2.3% | 43 | 0 | 0.0% |
| 5 | 31 | 0 | 96.9% | 1 | 3.1% | 32 | 11 | 25.6% |
| 6 | 43 | 0 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 7 | 43 | 0 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 8 | 43 | 0 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 9 | 16 | 0 | 100.0% | 0 | 0.0% | 16 | 27 | 62.8% |
| 10 | 31 | 8 | 100.0% | 0 | 0.0% | 39 | 4 | 9.3% |
| 11 | 3 | 0 | 100.0% | 0 | 0.0% | 3 | 40 | 93.0% |
| 12 | 14 | 0 | 100.0% | 0 | 0.0% | 14 | 29 | 67.4% |
| 13 | 29 | 14 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 14 | 42 | 0 | 97.7% | 1 | 2.3% | 43 | 0 | 0.0% |
| 15 | 32 | 0 | 100.0% | 0 | 0.0% | 32 | 11 | 25.6% |
| | 469 | 32 | 97.3% | 14 | 2.7% | 515 | 130 | 20.2% |

CQM - 1 Internal CPI Scores by Review Type

Rusk State Hospital (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| 1 | 35 | 0 | 81.4% | 8 | 18.6% | 43 | 0 | 0.0% |
| 2 | 43 | 0 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 3 | 43 | 0 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 4 | 41 | 0 | 100.0% | 0 | 0.0% | 41 | 2 | 4.7% |
| 5 | 19 | 1 | 100.0% | 0 | 0.0% | 20 | 23 | 53.5% |
| 6 | 19 | 0 | 86.4% | 3 | 13.6% | 22 | 21 | 48.8% |
| 7 | 22 | 2 | 82.8% | 5 | 17.2% | 29 | 14 | 32.6% |
| 8 | 4 | 1 | 31.3% | 11 | 68.8% | 16 | 27 | 62.8% |
| 9 | 26 | 0 | 60.5% | 17 | 39.5% | 43 | 0 | 0.0% |
| 10 | 24 | 7 | 72.1% | 12 | 27.9% | 43 | 0 | 0.0% |
| 11 | 4 | 0 | 66.7% | 2 | 33.3% | 6 | 37 | 86.0% |
| 12 | 22 | 13 | 81.4% | 8 | 18.6% | 43 | 0 | 0.0% |
| 13 | 10 | 2 | 27.9% | 31 | 72.1% | 43 | 0 | 0.0% |
| 14 | 28 | 1 | 67.4% | 14 | 32.6% | 43 | 0 | 0.0% |
| 15 | 18 | 0 | 50.0% | 18 | 50.0% | 36 | 7 | 16.3% |
| 16 | 24 | 2 | 74.3% | 9 | 25.7% | 35 | 8 | 18.6% |
| 17 | 29 | 0 | 100.0% | 0 | 0.0% | 29 | 14 | 32.6% |
| 18 | 22 | 0 | 68.8% | 10 | 31.3% | 32 | 11 | 25.6% |
| 19 | 13 | 0 | 40.6% | 19 | 59.4% | 32 | 11 | 25.6% |
| 20 | 28 | 7 | 85.4% | 6 | 14.6% | 41 | 2 | 4.7% |
| 21 | 4 | 0 | 50.0% | 4 | 50.0% | 8 | 35 | 81.4% |
| 22 | 17 | 0 | 39.5% | 26 | 60.5% | 43 | 0 | 0.0% |
| 23 | 21 | 7 | 93.3% | 2 | 6.7% | 30 | 13 | 30.2% |
| | 516 | 43 | 73.2% | 205 | 26.8% | 764 | 225 | 22.8% |

CQM - 1 Internal CPI Scores by Review Type

Rusk State Hospital (FY2015 - 1st Quarter)

Physician Documentation

Physician Documentation

Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 43 | 0 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 2 | 36 | 6 | 97.7% | 1 | 2.3% | 43 | 0 | 0.0% |
| 3 | 34 | 8 | 97.7% | 1 | 2.3% | 43 | 0 | 0.0% |
| 4 | 43 | 0 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 5 | 42 | 0 | 97.7% | 1 | 2.3% | 43 | 0 | 0.0% |
| 6 | 42 | 0 | 97.7% | 1 | 2.3% | 43 | 0 | 0.0% |
| 7 | 39 | 2 | 97.6% | 1 | 2.4% | 42 | 1 | 2.3% |
| 8 | 35 | 2 | 94.9% | 2 | 5.1% | 39 | 4 | 9.3% |
| 9 | 36 | 7 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 10 | 38 | 1 | 100.0% | 0 | 0.0% | 39 | 4 | 9.3% |
| 11 | 41 | 0 | 95.3% | 2 | 4.7% | 43 | 0 | 0.0% |
| 12 | 13 | 1 | 32.6% | 29 | 67.4% | 43 | 0 | 0.0% |
| 13 | 31 | 12 | 100.0% | 0 | 0.0% | 43 | 0 | 0.0% |
| 14 | 14 | 1 | 34.9% | 28 | 65.1% | 43 | 0 | 0.0% |
| 15 | 5 | 0 | 100.0% | 0 | 0.0% | 5 | 38 | 88.4% |
| 16 | 3 | 1 | 100.0% | 0 | 0.0% | 4 | 39 | 90.7% |
| 17 | 7 | 0 | 100.0% | 0 | 0.0% | 7 | 36 | 83.7% |
| 18 | 3 | 1 | 100.0% | 0 | 0.0% | 4 | 39 | 90.7% |
| | 505 | 42 | 89.2% | 66 | 10.8% | 613 | 161 | 20.8% |

CQM - 1 Internal CPI Scores by Review Type

Rusk State Hospital (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 37 | 0 | 86.0% | 6 | 14.0% | 43 | 0 | 0.0% |
| 2 | 37 | 0 | 88.1% | 5 | 11.9% | 42 | 1 | 2.3% |
| 3 | 37 | 0 | 86.0% | 6 | 14.0% | 43 | 0 | 0.0% |
| 4 | 17 | 0 | 73.9% | 6 | 26.1% | 23 | 20 | 46.5% |
| 5 | 15 | 0 | 75.0% | 5 | 25.0% | 20 | 23 | 53.5% |
| 6 | 16 | 0 | 84.2% | 3 | 15.8% | 19 | 24 | 55.8% |
| 7 | 18 | 0 | 81.8% | 4 | 18.2% | 22 | 21 | 48.8% |
| 8 | 14 | 0 | 82.4% | 3 | 17.6% | 17 | 26 | 60.5% |
| 9 | 15 | 0 | 78.9% | 4 | 21.1% | 19 | 24 | 55.8% |
| 10 | 34 | 1 | 89.7% | 4 | 10.3% | 39 | 4 | 9.3% |
| 11 | 40 | 1 | 95.3% | 2 | 4.7% | 43 | 0 | 0.0% |
| 12 | 22 | 1 | 92.0% | 2 | 8.0% | 25 | 18 | 41.9% |
| | 302 | 3 | 85.9% | 50 | 14.1% | 355 | 161 | 31.2% |

CQM - 1 Internal CPI Scores by Review Type



San Antonio State Hospital (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| 1 | 32 | 12 | 83.0% | 9 | 17.0% | 53 | 14 | 20.9% |
| 2 | 53 | 4 | 85.1% | 10 | 14.9% | 67 | 0 | 0.0% |
| 3 | 66 | 0 | 98.5% | 1 | 1.5% | 67 | 0 | 0.0% |
| 4 | 23 | 0 | 34.3% | 44 | 65.7% | 67 | 0 | 0.0% |
| 5 | 14 | 0 | 70.0% | 6 | 30.0% | 20 | 47 | 70.1% |
| 6 | 67 | 0 | 100.0% | 0 | 0.0% | 67 | 0 | 0.0% |
| 7 | 63 | 0 | 94.0% | 4 | 6.0% | 67 | 0 | 0.0% |
| 8 | 67 | 0 | 100.0% | 0 | 0.0% | 67 | 0 | 0.0% |
| 9 | 30 | 0 | 75.0% | 10 | 25.0% | 40 | 27 | 40.3% |
| 10 | 42 | 8 | 76.9% | 15 | 23.1% | 65 | 2 | 3.0% |
| 11 | 2 | 0 | 18.2% | 9 | 81.8% | 11 | 56 | 83.6% |
| 12 | 10 | 0 | 76.9% | 3 | 23.1% | 13 | 54 | 80.6% |
| 13 | 40 | 17 | 85.1% | 10 | 14.9% | 67 | 0 | 0.0% |
| 14 | 64 | 0 | 95.5% | 3 | 4.5% | 67 | 0 | 0.0% |
| 15 | 7 | 0 | 100.0% | 0 | 0.0% | 7 | 60 | 89.6% |
| | 580 | 41 | 83.4% | 124 | 16.6% | 745 | 260 | 25.9% |

CQM - 1 Internal CPI Scores by Review Type

San Antonio State Hospital (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| 1 | 55 | 0 | 82.1% | 12 | 17.9% | 67 | 0 | 0.0% |
| 2 | 60 | 0 | 90.9% | 6 | 9.1% | 66 | 1 | 1.5% |
| 3 | 57 | 0 | 86.4% | 9 | 13.6% | 66 | 1 | 1.5% |
| 4 | 27 | 0 | 65.9% | 14 | 34.1% | 41 | 26 | 38.8% |
| 5 | 57 | 0 | 86.4% | 9 | 13.6% | 66 | 1 | 1.5% |
| 6 | 32 | 2 | 61.8% | 21 | 38.2% | 55 | 12 | 17.9% |
| 7 | 19 | 0 | 67.9% | 9 | 32.1% | 28 | 39 | 58.2% |
| 8 | 14 | 0 | 73.7% | 5 | 26.3% | 19 | 48 | 71.6% |
| 9 | 28 | 0 | 41.8% | 39 | 58.2% | 67 | 0 | 0.0% |
| 10 | 43 | 2 | 67.2% | 22 | 32.8% | 67 | 0 | 0.0% |
| 11 | 6 | 0 | 60.0% | 4 | 40.0% | 10 | 57 | 85.1% |
| 12 | 41 | 10 | 76.1% | 16 | 23.9% | 67 | 0 | 0.0% |
| 13 | 34 | 7 | 61.2% | 26 | 38.8% | 67 | 0 | 0.0% |
| 14 | 10 | 5 | 22.4% | 52 | 77.6% | 67 | 0 | 0.0% |
| 15 | 50 | 0 | 87.7% | 7 | 12.3% | 57 | 10 | 14.9% |
| 16 | 49 | 1 | 89.3% | 6 | 10.7% | 56 | 11 | 16.4% |
| 17 | 45 | 1 | 95.8% | 2 | 4.2% | 48 | 19 | 28.4% |
| 18 | 28 | 1 | 80.6% | 7 | 19.4% | 36 | 31 | 46.3% |
| 19 | 32 | 2 | 89.5% | 4 | 10.5% | 38 | 29 | 43.3% |
| 20 | 48 | 4 | 82.5% | 11 | 17.5% | 63 | 4 | 6.0% |
| 21 | 5 | 0 | 71.4% | 2 | 28.6% | 7 | 60 | 89.6% |
| 22 | 11 | 1 | 17.9% | 55 | 82.1% | 67 | 0 | 0.0% |
| 23 | 30 | 4 | 68.0% | 16 | 32.0% | 50 | 17 | 25.4% |
| | 781 | 40 | 69.9% | 354 | 30.1% | 1175 | 366 | 23.8% |

CQM - 1 Internal CPI Scores by Review Type

San Antonio State Hospital (FY2015 - 1st Quarter)

Physician Documentation Physician Documentation Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 67 | 0 | 100.0% | 0 | 0.0% | 67 | 0 | 0.0% |
| 2 | 67 | 0 | 100.0% | 0 | 0.0% | 67 | 0 | 0.0% |
| 3 | 65 | 2 | 100.0% | 0 | 0.0% | 67 | 0 | 0.0% |
| 4 | 67 | 0 | 100.0% | 0 | 0.0% | 67 | 0 | 0.0% |
| 5 | 67 | 0 | 100.0% | 0 | 0.0% | 67 | 0 | 0.0% |
| 6 | 64 | 0 | 95.5% | 3 | 4.5% | 67 | 0 | 0.0% |
| 7 | 52 | 4 | 91.8% | 5 | 8.2% | 61 | 6 | 9.0% |
| 8 | 40 | 4 | 91.7% | 4 | 8.3% | 48 | 19 | 28.4% |
| 9 | 56 | 5 | 91.0% | 6 | 9.0% | 67 | 0 | 0.0% |
| 10 | 44 | 1 | 95.7% | 2 | 4.3% | 47 | 20 | 29.9% |
| 11 | 67 | 0 | 100.0% | 0 | 0.0% | 67 | 0 | 0.0% |
| 12 | 57 | 2 | 92.2% | 5 | 7.8% | 64 | 3 | 4.5% |
| 13 | 46 | 14 | 89.6% | 7 | 10.4% | 67 | 0 | 0.0% |
| 14 | 60 | 6 | 98.5% | 1 | 1.5% | 67 | 0 | 0.0% |
| 15 | 9 | 0 | 90.0% | 1 | 10.0% | 10 | 57 | 85.1% |
| 16 | 31 | 1 | 97.0% | 1 | 3.0% | 33 | 34 | 50.7% |
| 17 | 40 | 1 | 89.1% | 5 | 10.9% | 46 | 21 | 31.3% |
| 18 | 34 | 1 | 100.0% | 0 | 0.0% | 35 | 32 | 47.8% |
| | 933 | 41 | 96.1% | 40 | 3.9% | 1014 | 192 | 15.9% |

CQM - 1 Internal CPI Scores by Review Type

San Antonio State Hospital (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|-----------------|------------|-------------------------|--------------------|-----------|------------------------|-------------------------|-----------------------|--------------|
| 1 | 54 | 4 | 87.9% | 8 | 12.1% | 66 | 1 | 1.5% |
| 2 | 63 | 0 | 96.9% | 2 | 3.1% | 65 | 2 | 3.0% |
| 3 | 62 | 0 | 96.9% | 2 | 3.1% | 64 | 3 | 4.5% |
| 4 | 42 | 0 | 95.5% | 2 | 4.5% | 44 | 23 | 34.3% |
| 5 | 25 | 0 | 89.3% | 3 | 10.7% | 28 | 39 | 58.2% |
| 6 | 16 | 0 | 84.2% | 3 | 15.8% | 19 | 48 | 71.6% |
| 7 | 12 | 0 | 80.0% | 3 | 20.0% | 15 | 52 | 77.6% |
| 8 | 35 | 0 | 94.6% | 2 | 5.4% | 37 | 30 | 44.8% |
| 9 | 23 | 0 | 85.2% | 4 | 14.8% | 27 | 40 | 59.7% |
| 10 | 53 | 6 | 92.2% | 5 | 7.8% | 64 | 3 | 4.5% |
| 11 | 63 | 1 | 95.5% | 3 | 4.5% | 67 | 0 | 0.0% |
| 12 | 25 | 3 | 96.6% | 1 | 3.4% | 29 | 38 | 56.7% |
| | 473 | 14 | 92.8% | 38 | 7.2% | 525 | 279 | 34.7% |

CQM - 1 Internal CPI Scores by Review Type



Terrell State Hospital (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 33 | 1 | 82.9% | 7 | 17.1% | 41 | 6 | 12.8% |
| 2 | 40 | 0 | 85.1% | 7 | 14.9% | 47 | 0 | 0.0% |
| 3 | 46 | 0 | 97.9% | 1 | 2.1% | 47 | 0 | 0.0% |
| 4 | 46 | 0 | 97.9% | 1 | 2.1% | 47 | 0 | 0.0% |
| 5 | 34 | 0 | 94.4% | 2 | 5.6% | 36 | 11 | 23.4% |
| 6 | 47 | 0 | 100.0% | 0 | 0.0% | 47 | 0 | 0.0% |
| 7 | 45 | 0 | 95.7% | 2 | 4.3% | 47 | 0 | 0.0% |
| 8 | 46 | 0 | 97.9% | 1 | 2.1% | 47 | 0 | 0.0% |
| 9 | 13 | 0 | 100.0% | 0 | 0.0% | 13 | 34 | 72.3% |
| 10 | 26 | 6 | 91.4% | 3 | 8.6% | 35 | 12 | 25.5% |
| 11 | 3 | 0 | 37.5% | 5 | 62.5% | 8 | 39 | 83.0% |
| 12 | 10 | 0 | 62.5% | 6 | 37.5% | 16 | 31 | 66.0% |
| 13 | 42 | 3 | 95.7% | 2 | 4.3% | 47 | 0 | 0.0% |
| 14 | 46 | 0 | 97.9% | 1 | 2.1% | 47 | 0 | 0.0% |
| 15 | 25 | 0 | 92.6% | 2 | 7.4% | 27 | 20 | 42.6% |
| | 502 | 10 | 92.8% | 40 | 7.2% | 552 | 153 | 21.7% |

CQM - 1 Internal CPI Scores by Review Type

Terrell State Hospital (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|-------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| 1 | 64 | 0 | 97.0% | 2 | 3.0% | 66 | 0 | 0.0% |
| 2 | 65 | 0 | 100.0% | 0 | 0.0% | 65 | 1 | 1.5% |
| 3 | 65 | 0 | 100.0% | 0 | 0.0% | 65 | 1 | 1.5% |
| 4 | 53 | 0 | 88.3% | 7 | 11.7% | 60 | 6 | 9.1% |
| 5 | 48 | 0 | 80.0% | 12 | 20.0% | 60 | 6 | 9.1% |
| 6 | 48 | 0 | 84.2% | 9 | 15.8% | 57 | 9 | 13.6% |
| 7 | 13 | 0 | 81.3% | 3 | 18.8% | 16 | 50 | 75.8% |
| 8 | 25 | 1 | 78.8% | 7 | 21.2% | 33 | 33 | 50.0% |
| 9 | 59 | 0 | 89.4% | 7 | 10.6% | 66 | 0 | 0.0% |
| 10 | 62 | 0 | 93.9% | 4 | 6.1% | 66 | 0 | 0.0% |
| 11 | 22 | 0 | 100.0% | 0 | 0.0% | 22 | 44 | 66.7% |
| 12 | 60 | 2 | 93.9% | 4 | 6.1% | 66 | 0 | 0.0% |
| 13 | 7 | 2 | 13.6% | 57 | 86.4% | 66 | 0 | 0.0% |
| 14 | 60 | 0 | 90.9% | 6 | 9.1% | 66 | 0 | 0.0% |
| 15 | 41 | 0 | 95.3% | 2 | 4.7% | 43 | 23 | 34.8% |
| 16 | 41 | 0 | 95.3% | 2 | 4.7% | 43 | 23 | 34.8% |
| 17 | 60 | 0 | 98.4% | 1 | 1.6% | 61 | 5 | 7.6% |
| 18 | 41 | 0 | 97.6% | 1 | 2.4% | 42 | 24 | 36.4% |
| 19 | 38 | 0 | 90.5% | 4 | 9.5% | 42 | 24 | 36.4% |
| 20 | 62 | 0 | 96.9% | 2 | 3.1% | 64 | 2 | 3.0% |
| 21 | 8 | 0 | 100.0% | 0 | 0.0% | 8 | 58 | 87.9% |
| 22 | 26 | 1 | 40.9% | 39 | 59.1% | 66 | 0 | 0.0% |
| 23 | 50 | 1 | 98.1% | 1 | 1.9% | 52 | 14 | 21.2% |
| | 1018 | 7 | 85.8% | 170 | 14.2% | 1195 | 323 | 21.3% |

CQM - 1 Internal CPI Scores by Review Type

Terrell State Hospital (FY2015 - 1st Quarter)

Physician Documentation

Physician Documentation

Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|-----------|-----------------|------------------|----------------|--------------|
| 1 | 33 | 1 | 100.0% | 0 | 0.0% | 34 | 0 | 0.0% |
| 2 | 33 | 0 | 97.1% | 1 | 2.9% | 34 | 0 | 0.0% |
| 3 | 32 | 2 | 100.0% | 0 | 0.0% | 34 | 0 | 0.0% |
| 4 | 34 | 0 | 100.0% | 0 | 0.0% | 34 | 0 | 0.0% |
| 5 | 33 | 0 | 97.1% | 1 | 2.9% | 34 | 0 | 0.0% |
| 6 | 27 | 0 | 79.4% | 7 | 20.6% | 34 | 0 | 0.0% |
| 7 | 28 | 0 | 100.0% | 0 | 0.0% | 28 | 6 | 17.6% |
| 8 | 19 | 0 | 86.4% | 3 | 13.6% | 22 | 12 | 35.3% |
| 9 | 32 | 1 | 97.1% | 1 | 2.9% | 34 | 0 | 0.0% |
| 10 | 20 | 0 | 95.2% | 1 | 4.8% | 21 | 13 | 38.2% |
| 11 | 34 | 0 | 100.0% | 0 | 0.0% | 34 | 0 | 0.0% |
| 12 | 30 | 1 | 93.9% | 2 | 6.1% | 33 | 1 | 2.9% |
| 13 | 27 | 1 | 82.4% | 6 | 17.6% | 34 | 0 | 0.0% |
| 14 | 33 | 0 | 97.1% | 1 | 2.9% | 34 | 0 | 0.0% |
| 15 | 7 | 0 | 100.0% | 0 | 0.0% | 7 | 27 | 79.4% |
| 16 | 21 | 0 | 75.0% | 7 | 25.0% | 28 | 6 | 17.6% |
| 17 | 20 | 0 | 74.1% | 7 | 25.9% | 27 | 7 | 20.6% |
| 18 | 19 | 1 | 80.0% | 5 | 20.0% | 25 | 9 | 26.5% |
| | 482 | 7 | 92.1% | 42 | 7.9% | 531 | 81 | 13.2% |

CQM - 1 Internal CPI Scores by Review Type

Terrell State Hospital (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|----------|-----------------|------------------|----------------|--------------|
| 1 | 27 | 1 | 93.3% | 2 | 6.7% | 30 | 1 | 3.2% |
| 2 | 28 | 0 | 96.6% | 1 | 3.4% | 29 | 2 | 6.5% |
| 3 | 30 | 0 | 100.0% | 0 | 0.0% | 30 | 1 | 3.2% |
| 4 | 17 | 0 | 94.4% | 1 | 5.6% | 18 | 13 | 41.9% |
| 5 | 11 | 0 | 100.0% | 0 | 0.0% | 11 | 20 | 64.5% |
| 6 | 12 | 0 | 100.0% | 0 | 0.0% | 12 | 19 | 61.3% |
| 7 | 10 | 0 | 83.3% | 2 | 16.7% | 12 | 19 | 61.3% |
| 8 | 8 | 0 | 88.9% | 1 | 11.1% | 9 | 22 | 71.0% |
| 9 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 22 | 71.0% |
| 10 | 29 | 0 | 100.0% | 0 | 0.0% | 29 | 2 | 6.5% |
| 11 | 29 | 1 | 96.8% | 1 | 3.2% | 31 | 0 | 0.0% |
| 12 | 14 | 0 | 93.3% | 1 | 6.7% | 15 | 16 | 51.6% |
| | 224 | 2 | 96.2% | 9 | 3.8% | 235 | 137 | 36.8% |

CQM - 1 Internal CPI Scores by Review Type



Waco Center for Youth (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|----------|-----------------|------------------|----------------|--------------|
| 1 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 2 | 8 | 0 | 88.9% | 1 | 11.1% | 9 | 0 | 0.0% |
| 3 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 4 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 5 | 3 | 0 | 100.0% | 0 | 0.0% | 3 | 6 | 66.7% |
| 6 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 7 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 8 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 9 | 2 | 0 | 100.0% | 0 | 0.0% | 2 | 7 | 77.8% |
| 10 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 11 | 4 | 0 | 100.0% | 0 | 0.0% | 4 | 5 | 55.6% |
| 12 | 7 | 0 | 100.0% | 0 | 0.0% | 7 | 2 | 22.2% |
| 13 | 2 | 4 | 66.7% | 3 | 33.3% | 9 | 0 | 0.0% |
| 14 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 15 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| | 107 | 4 | 96.5% | 4 | 3.5% | 115 | 20 | 14.8% |

CQM - 1 Internal CPI Scores by Review Type

Waco Center for Youth (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|----------|-----------------|------------------|----------------|--------------|
| 1 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 2 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 3 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 4 | 7 | 0 | 100.0% | 0 | 0.0% | 7 | 3 | 30.0% |
| 5 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 6 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 7 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 8 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 1 | 10.0% |
| 9 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 10 | 9 | 0 | 90.0% | 1 | 10.0% | 10 | 0 | 0.0% |
| 11 | 0 | 0 | | 0 | | 0 | 10 | |
| 12 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 13 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 14 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 15 | 7 | 0 | 100.0% | 0 | 0.0% | 7 | 3 | 30.0% |
| 16 | 7 | 0 | 100.0% | 0 | 0.0% | 7 | 3 | 30.0% |
| 17 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 18 | 6 | 0 | 100.0% | 0 | 0.0% | 6 | 4 | 40.0% |
| 19 | 6 | 0 | 100.0% | 0 | 0.0% | 6 | 4 | 40.0% |
| 20 | 8 | 0 | 100.0% | 0 | 0.0% | 8 | 2 | 20.0% |
| 21 | 0 | 0 | | 0 | | 0 | 10 | |
| 22 | 10 | 0 | 100.0% | 0 | 0.0% | 10 | 0 | 0.0% |
| 23 | 0 | 0 | | 0 | | 0 | 10 | |
| | 179 | 0 | 99.4% | 1 | 0.6% | 180 | 50 | 21.7% |

CQM - 1 Internal CPI Scores by Review Type

Waco Center for Youth (FY2015 - 1st Quarter)

Physician Documentation

Physician Documentation

Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|------------|------------------|--------------|----------|-----------------|------------------|----------------|--------------|
| 1 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 2 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 3 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 4 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 5 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 6 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 7 | 6 | 0 | 100.0% | 0 | 0.0% | 6 | 3 | 33.3% |
| 8 | 6 | 0 | 100.0% | 0 | 0.0% | 6 | 3 | 33.3% |
| 9 | 8 | 1 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 10 | 3 | 0 | 100.0% | 0 | 0.0% | 3 | 6 | 66.7% |
| 11 | 8 | 0 | 88.9% | 1 | 11.1% | 9 | 0 | 0.0% |
| 12 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 13 | 8 | 1 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 14 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 15 | 0 | 0 | | 0 | | 0 | 9 | |
| 16 | 2 | 2 | 80.0% | 1 | 20.0% | 5 | 4 | 44.4% |
| 17 | 2 | 2 | 100.0% | 0 | 0.0% | 4 | 5 | 55.6% |
| 18 | 0 | 3 | 75.0% | 1 | 25.0% | 4 | 5 | 55.6% |
| | 115 | 9 | 97.6% | 3 | 2.4% | 127 | 35 | 21.6% |

CQM - 1 Internal CPI Scores by Review Type

Waco Center for Youth (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|-----------|------------------|--------------|----------|-----------------|------------------|----------------|--------------|
| 1 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 2 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 3 | 8 | 0 | 100.0% | 0 | 0.0% | 8 | 1 | 11.1% |
| 4 | 3 | 0 | 100.0% | 0 | 0.0% | 3 | 6 | 66.7% |
| 5 | 3 | 0 | 100.0% | 0 | 0.0% | 3 | 6 | 66.7% |
| 6 | 4 | 0 | 100.0% | 0 | 0.0% | 4 | 5 | 55.6% |
| 7 | 2 | 0 | 100.0% | 0 | 0.0% | 2 | 7 | 77.8% |
| 8 | 4 | 0 | 100.0% | 0 | 0.0% | 4 | 5 | 55.6% |
| 9 | 5 | 0 | 83.3% | 1 | 16.7% | 6 | 3 | 33.3% |
| 10 | 9 | 0 | 100.0% | 0 | 0.0% | 9 | 0 | 0.0% |
| 11 | 8 | 0 | 100.0% | 0 | 0.0% | 8 | 1 | 11.1% |
| 12 | 3 | 0 | 100.0% | 0 | 0.0% | 3 | 6 | 66.7% |
| | 67 | 0 | 98.5% | 1 | 1.5% | 68 | 40 | 37.0% |

CQM - 1 Internal CPI Scores by Review Type

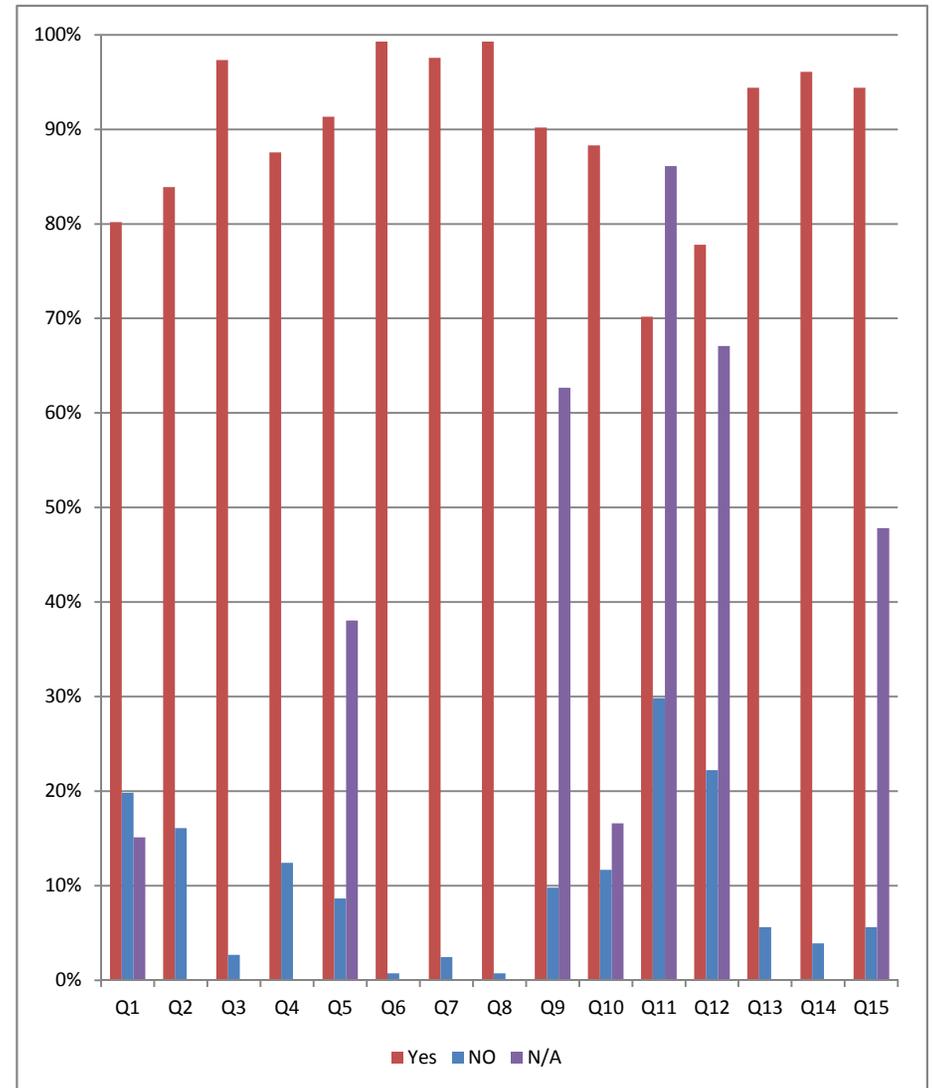
ALL MH (FY2015 - 1st Quarter)

Client's Rights Client's Rights Client's Rights Client's Rights

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|--------------|-------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| Q1 | 234 | 45 | 80.2% | 69 | 19.8% | 348 | 62 | 15.1% |
| Q2 | 327 | 17 | 83.9% | 66 | 16.1% | 410 | 0 | 0.0% |
| Q3 | 399 | 0 | 97.3% | 11 | 2.7% | 410 | 0 | 0.0% |
| Q4 | 359 | 0 | 87.6% | 51 | 12.4% | 410 | 0 | 0.0% |
| Q5 | 232 | 0 | 91.3% | 22 | 8.7% | 254 | 156 | 38.0% |
| Q6 | 407 | 0 | 99.3% | 3 | 0.7% | 410 | 0 | 0.0% |
| Q7 | 400 | 0 | 97.6% | 10 | 2.4% | 410 | 0 | 0.0% |
| Q8 | 407 | 0 | 99.3% | 3 | 0.7% | 410 | 0 | 0.0% |
| Q9 | 138 | 0 | 90.2% | 15 | 9.8% | 153 | 257 | 62.7% |
| Q10 | 260 | 42 | 88.3% | 40 | 11.7% | 342 | 68 | 16.6% |
| Q11 | 40 | 0 | 70.2% | 17 | 29.8% | 57 | 353 | 86.1% |
| Q12 | 103 | 2 | 77.8% | 30 | 22.2% | 135 | 275 | 67.1% |
| Q13 | 308 | 79 | 94.4% | 23 | 5.6% | 410 | 0 | 0.0% |
| Q14 | 394 | 0 | 96.1% | 16 | 3.9% | 410 | 0 | 0.0% |
| Q15 | 202 | 0 | 94.4% | 12 | 5.6% | 214 | 196 | 47.8% |
| TOTAL | 4210 | 185 | 91.9% | 388 | 8.1% | 4783 | 1367 | 22.2% |



CQM - 1 Internal CPI Scores by Review Type

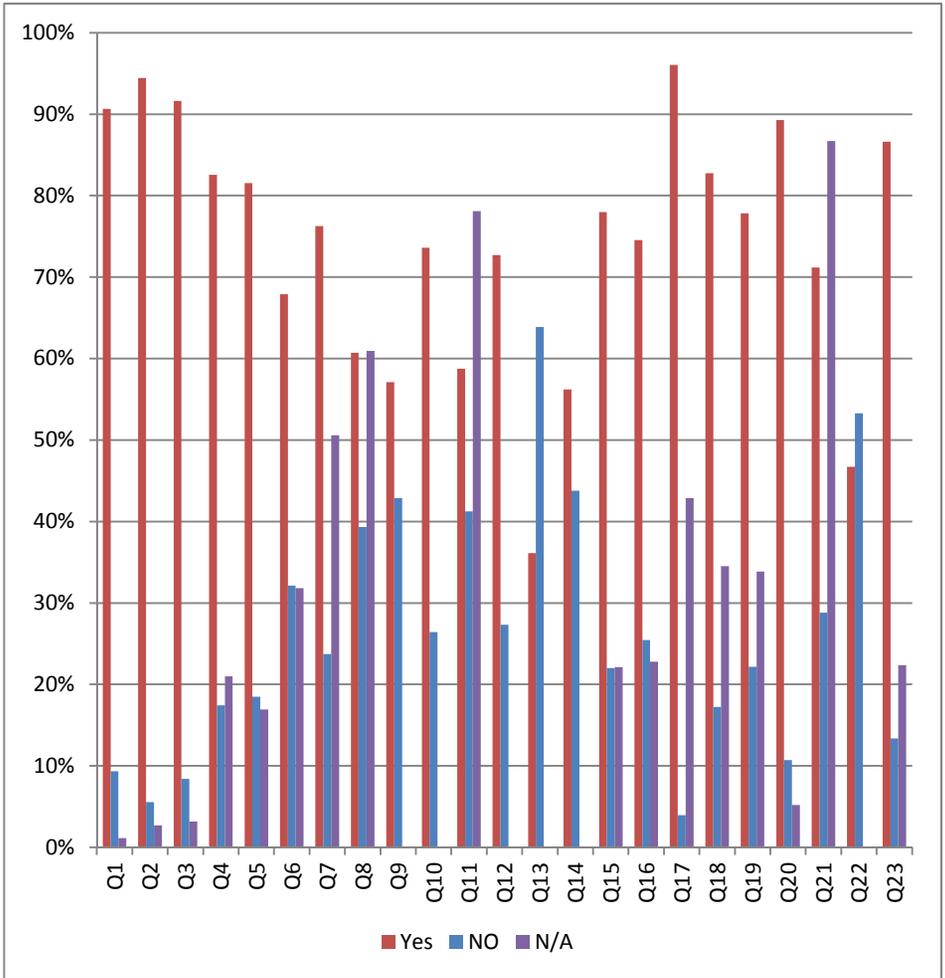
ALL MH (FY2015 - 1st Quarter)

Nursing Nursing Nursing Nursing Nursing Nursing Nursing

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|-------------|------------------|--------------|-------------|-----------------|------------------|----------------|--------------|
| Q1 | 397 | 0 | 90.6% | 41 | 9.4% | 438 | 5 | 1.1% |
| Q2 | 407 | 0 | 94.4% | 24 | 5.6% | 431 | 12 | 2.7% |
| Q3 | 393 | 0 | 91.6% | 36 | 8.4% | 429 | 14 | 3.2% |
| Q4 | 289 | 0 | 82.6% | 61 | 17.4% | 350 | 93 | 21.0% |
| Q5 | 296 | 4 | 81.5% | 68 | 18.5% | 368 | 75 | 16.9% |
| Q6 | 200 | 5 | 67.9% | 97 | 32.1% | 302 | 141 | 31.8% |
| Q7 | 161 | 6 | 76.3% | 52 | 23.7% | 219 | 224 | 50.6% |
| Q8 | 101 | 4 | 60.7% | 68 | 39.3% | 173 | 270 | 60.9% |
| Q9 | 253 | 0 | 57.1% | 190 | 42.9% | 443 | 0 | 0.0% |
| Q10 | 294 | 32 | 73.6% | 117 | 26.4% | 443 | 0 | 0.0% |
| Q11 | 57 | 0 | 58.8% | 40 | 41.2% | 97 | 346 | 78.1% |
| Q12 | 282 | 40 | 72.7% | 121 | 27.3% | 443 | 0 | 0.0% |
| Q13 | 143 | 17 | 36.1% | 283 | 63.9% | 443 | 0 | 0.0% |
| Q14 | 236 | 13 | 56.2% | 194 | 43.8% | 443 | 0 | 0.0% |
| Q15 | 269 | 0 | 78.0% | 76 | 22.0% | 345 | 98 | 22.1% |
| Q16 | 249 | 6 | 74.6% | 87 | 25.4% | 342 | 101 | 22.8% |
| Q17 | 240 | 3 | 96.0% | 10 | 4.0% | 253 | 190 | 42.9% |
| Q18 | 235 | 5 | 82.8% | 50 | 17.2% | 290 | 153 | 34.5% |
| Q19 | 221 | 7 | 77.8% | 65 | 22.2% | 293 | 150 | 33.9% |
| Q20 | 350 | 25 | 89.3% | 45 | 10.7% | 420 | 23 | 5.2% |
| Q21 | 42 | 0 | 71.2% | 17 | 28.8% | 59 | 384 | 86.7% |
| Q22 | 197 | 10 | 46.7% | 236 | 53.3% | 443 | 0 | 0.0% |
| Q23 | 261 | 37 | 86.6% | 46 | 13.4% | 344 | 99 | 22.3% |
| | 5573 | 214 | 74.1% | 2024 | 25.9% | 7811 | 2378 | 23.3% |



CQM - 1 Internal CPI Scores by Review Type

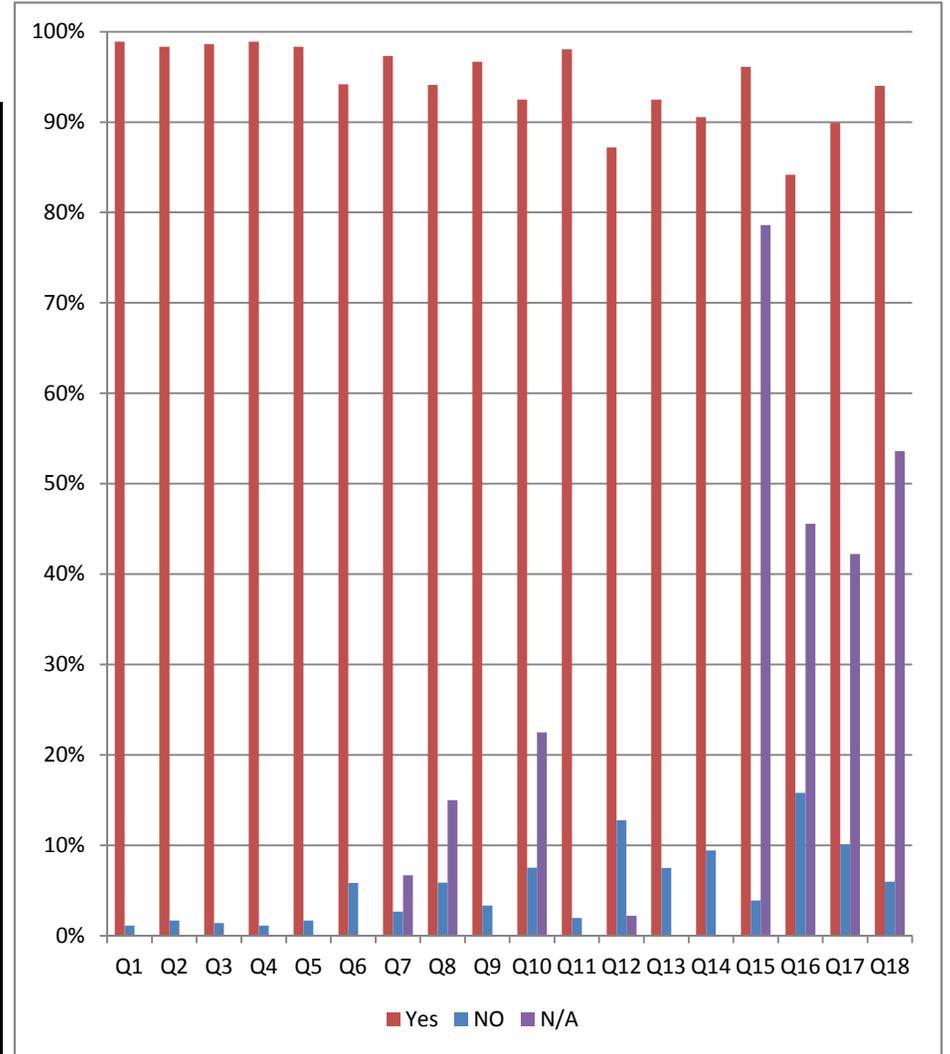
ALL MH (FY2015 - 1st Quarter)

Physician Documentation Physician Documentation Physician Documentation

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|--------------|-------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| Q1 | 354 | 2 | 98.9% | 4 | 1.1% | 360 | 0 | 0.0% |
| Q2 | 327 | 27 | 98.3% | 6 | 1.7% | 360 | 0 | 0.0% |
| Q3 | 326 | 29 | 98.6% | 5 | 1.4% | 360 | 0 | 0.0% |
| Q4 | 356 | 0 | 98.9% | 4 | 1.1% | 360 | 0 | 0.0% |
| Q5 | 354 | 0 | 98.3% | 6 | 1.7% | 360 | 0 | 0.0% |
| Q6 | 339 | 0 | 94.2% | 21 | 5.8% | 360 | 0 | 0.0% |
| Q7 | 320 | 7 | 97.3% | 9 | 2.7% | 336 | 24 | 6.7% |
| Q8 | 279 | 9 | 94.1% | 18 | 5.9% | 306 | 54 | 15.0% |
| Q9 | 334 | 14 | 96.7% | 12 | 3.3% | 360 | 0 | 0.0% |
| Q10 | 255 | 3 | 92.5% | 21 | 7.5% | 279 | 81 | 22.5% |
| Q11 | 353 | 0 | 98.1% | 7 | 1.9% | 360 | 0 | 0.0% |
| Q12 | 291 | 16 | 87.2% | 45 | 12.8% | 352 | 8 | 2.2% |
| Q13 | 282 | 51 | 92.5% | 27 | 7.5% | 360 | 0 | 0.0% |
| Q14 | 313 | 13 | 90.6% | 34 | 9.4% | 360 | 0 | 0.0% |
| Q15 | 74 | 0 | 96.1% | 3 | 3.9% | 77 | 283 | 78.6% |
| Q16 | 150 | 15 | 84.2% | 31 | 15.8% | 196 | 164 | 45.6% |
| Q17 | 181 | 6 | 89.9% | 21 | 10.1% | 208 | 152 | 42.2% |
| Q18 | 150 | 7 | 94.0% | 10 | 6.0% | 167 | 193 | 53.6% |
| Total | 5038 | 199 | 94.9% | 284 | 5.1% | 5521 | 959 | 14.8% |



CQM - 1 Internal CPI Scores by Review Type

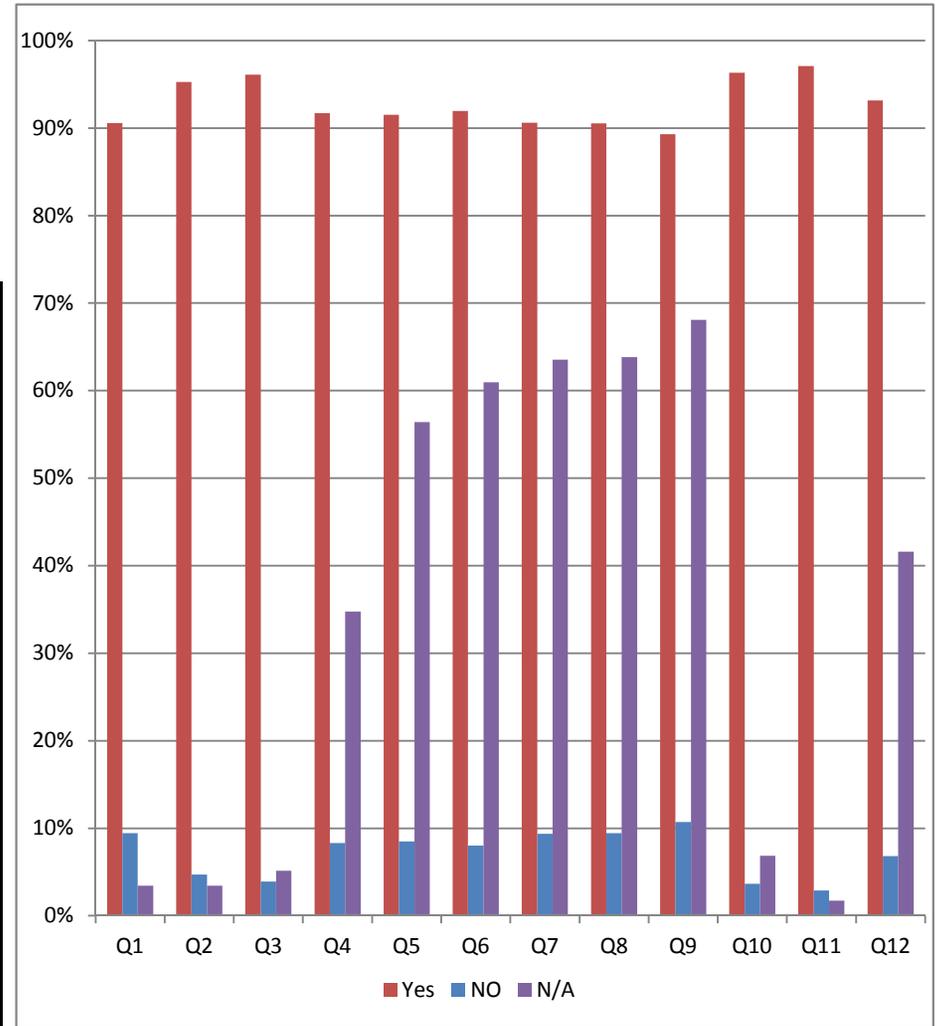
ALL MH (FY2015 - 1st Quarter)

Psychoactive Medications Psychoactive Medications Psychoactive Medications

Internal - All Questions

Sample Dates: 01 Sep 2014 thru 30 Nov 2014

| Question | Yes | No With Question | % Compliant | No | % Non Compliant | Total Applicable | Not Applicable | % |
|----------|-------------|------------------|--------------|------------|-----------------|------------------|----------------|--------------|
| Q1 | 296 | 11 | 90.6% | 32 | 9.4% | 339 | 12 | 3.4% |
| Q2 | 323 | 0 | 95.3% | 16 | 4.7% | 339 | 12 | 3.4% |
| Q3 | 320 | 0 | 96.1% | 13 | 3.9% | 333 | 18 | 5.1% |
| Q4 | 210 | 0 | 91.7% | 19 | 8.3% | 229 | 122 | 34.8% |
| Q5 | 140 | 0 | 91.5% | 13 | 8.5% | 153 | 198 | 56.4% |
| Q6 | 126 | 0 | 92.0% | 11 | 8.0% | 137 | 214 | 61.0% |
| Q7 | 116 | 0 | 90.6% | 12 | 9.4% | 128 | 223 | 63.5% |
| Q8 | 115 | 0 | 90.6% | 12 | 9.4% | 127 | 224 | 63.8% |
| Q9 | 100 | 0 | 89.3% | 12 | 10.7% | 112 | 239 | 68.1% |
| Q10 | 308 | 7 | 96.3% | 12 | 3.7% | 327 | 24 | 6.8% |
| Q11 | 331 | 4 | 97.1% | 10 | 2.9% | 345 | 6 | 1.7% |
| Q12 | 186 | 5 | 93.2% | 14 | 6.8% | 205 | 146 | 41.6% |
| | 2571 | 27 | 93.7% | 176 | 6.3% | 2774 | 1438 | 34.1% |



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COM-2

Measure: Potentially Preventable Readmissions (15 days)

Timeframe: Monthly

Data Source

CARE ODS Report

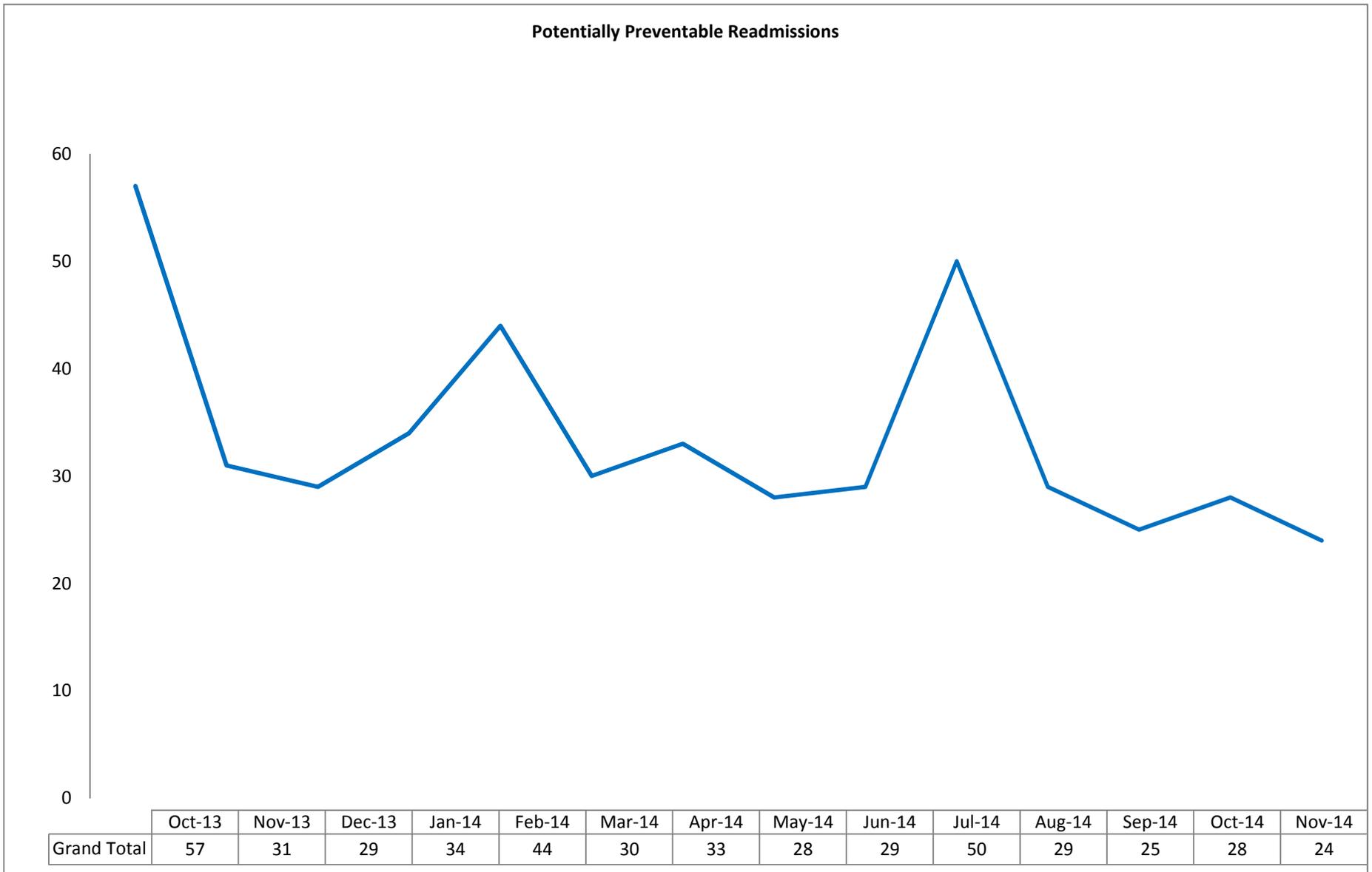
Purpose

Measures the readmissions (15 days)

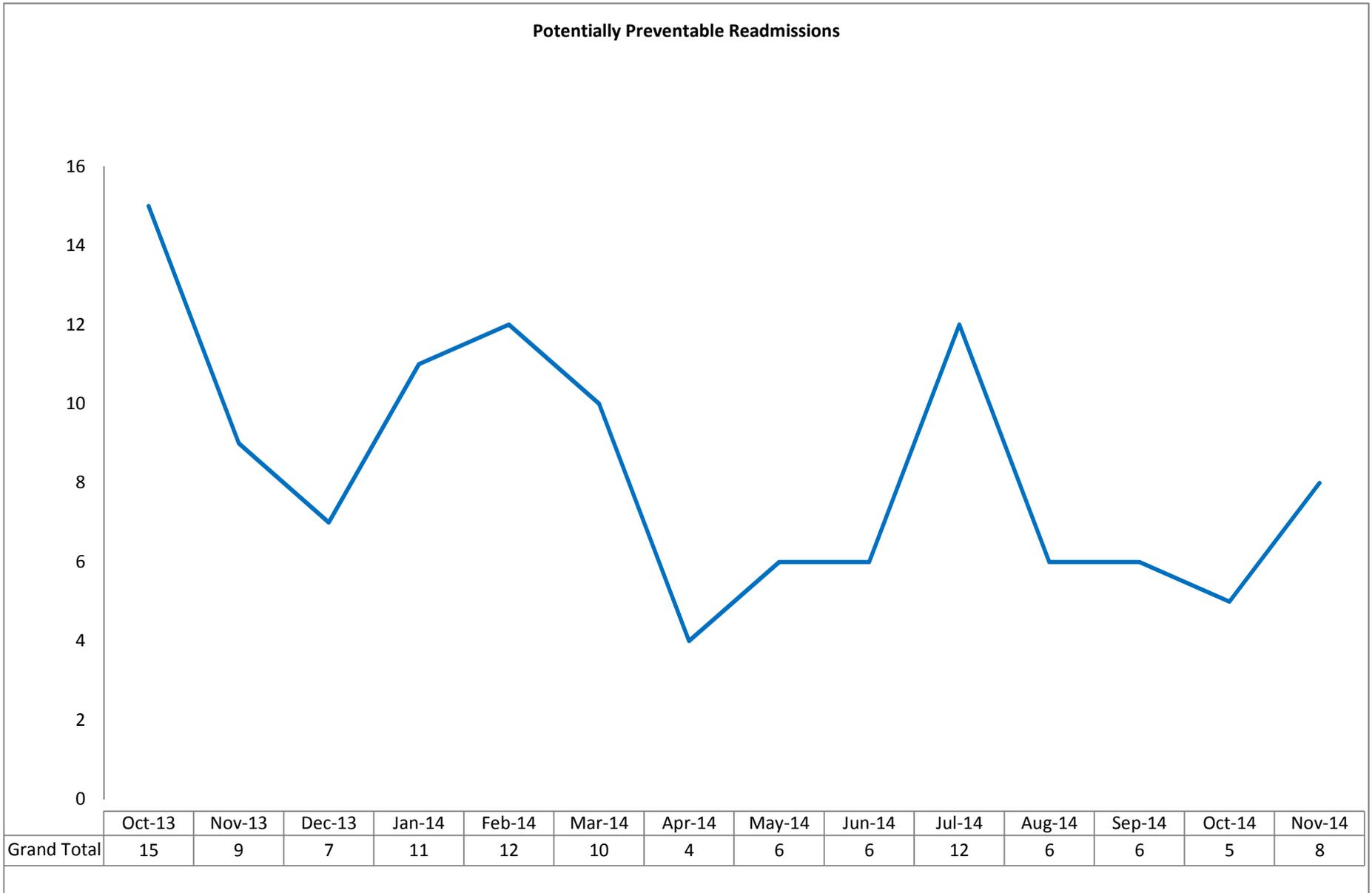
Data Display and Chart Description

Chart shows monthly numbers of potentially preventable readmissions for individual state hospitals and system-wide.

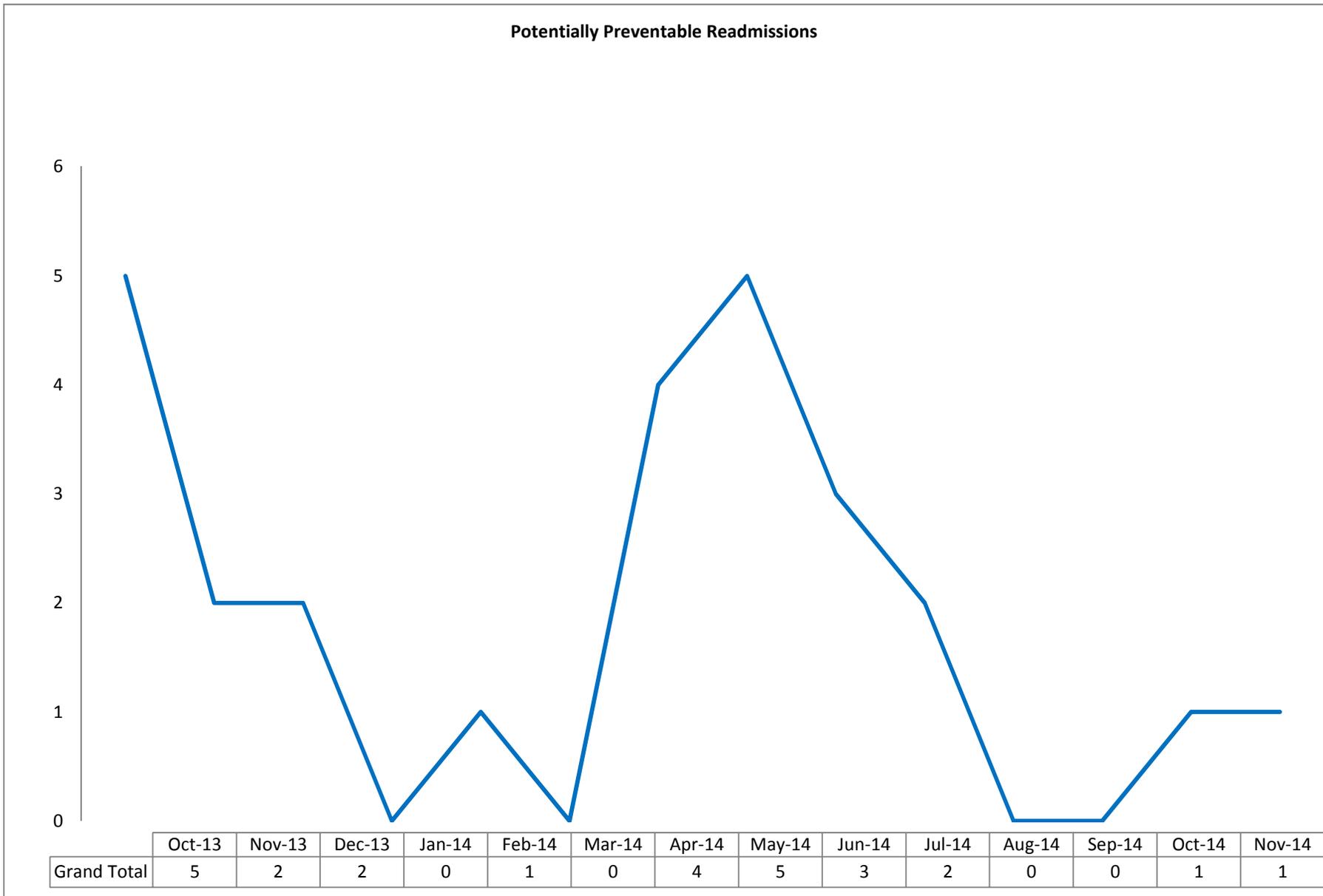
**CQM-2 Potentially Preventable Readmissions
All State MH Hospitals**



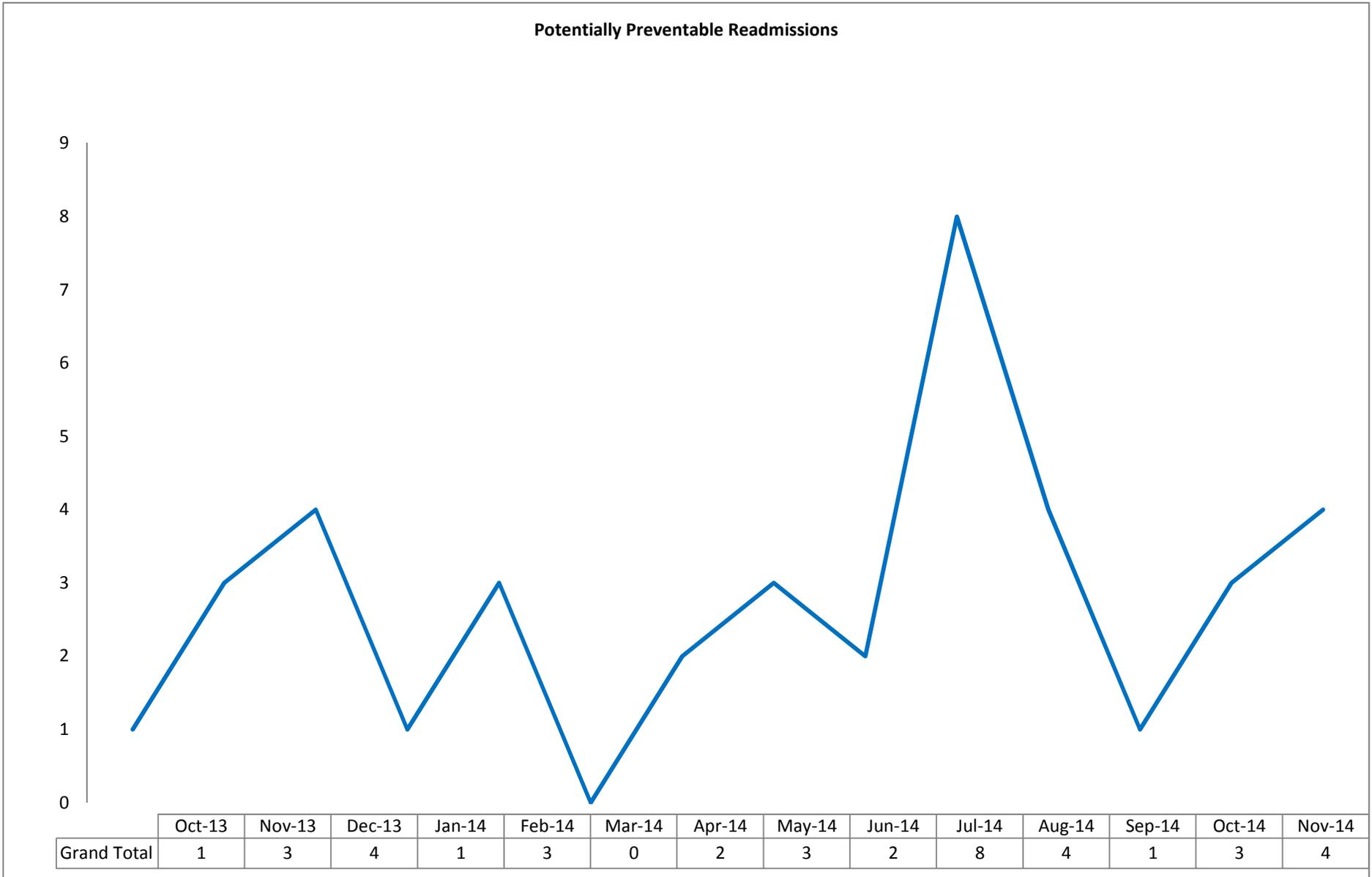
**CQM-2 Potentially Preventable Readmissions
Austin State Hospital**



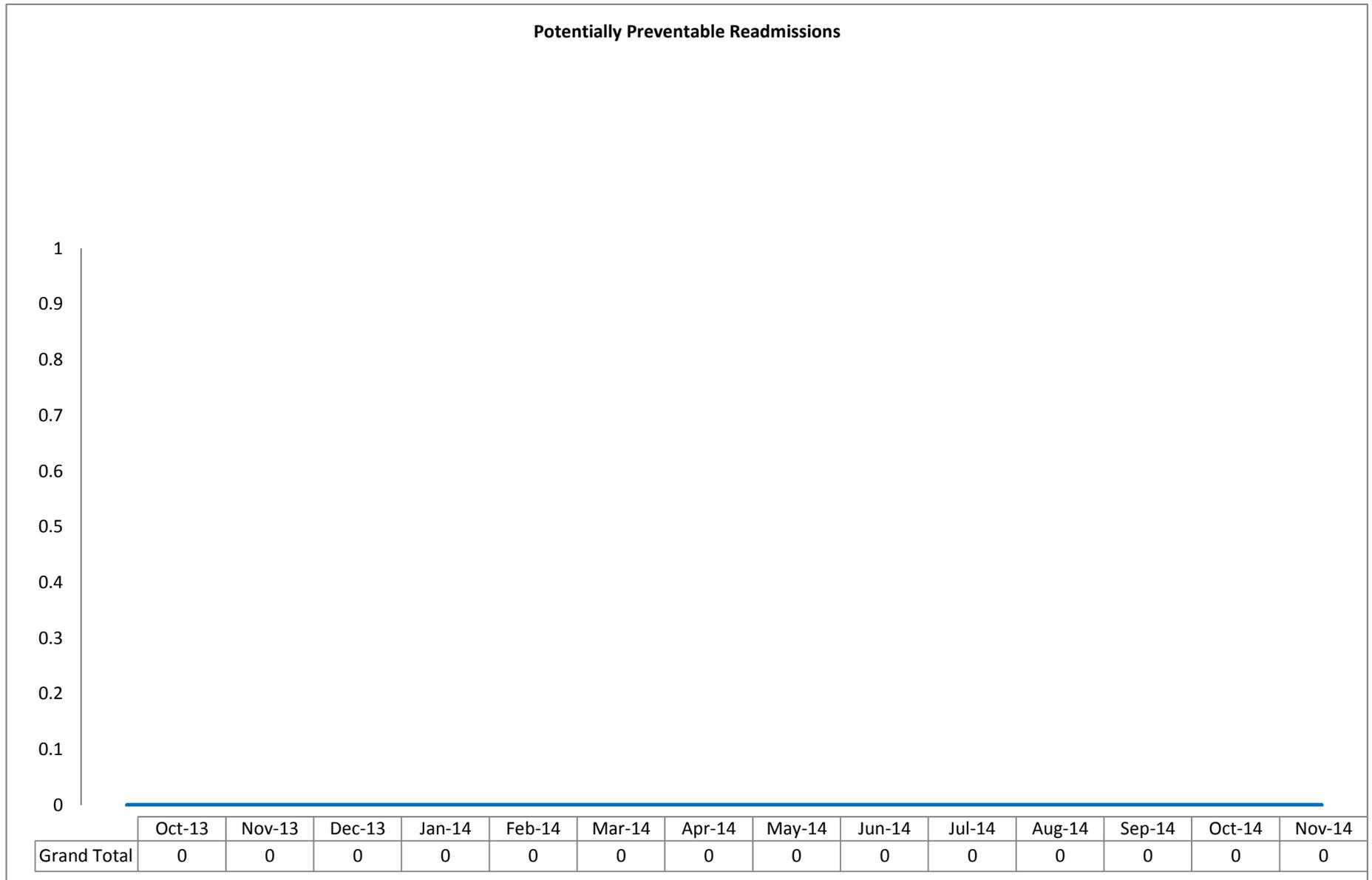
**CQM-2 Potentially Preventable Readmissions
Big Spring State Hospital**



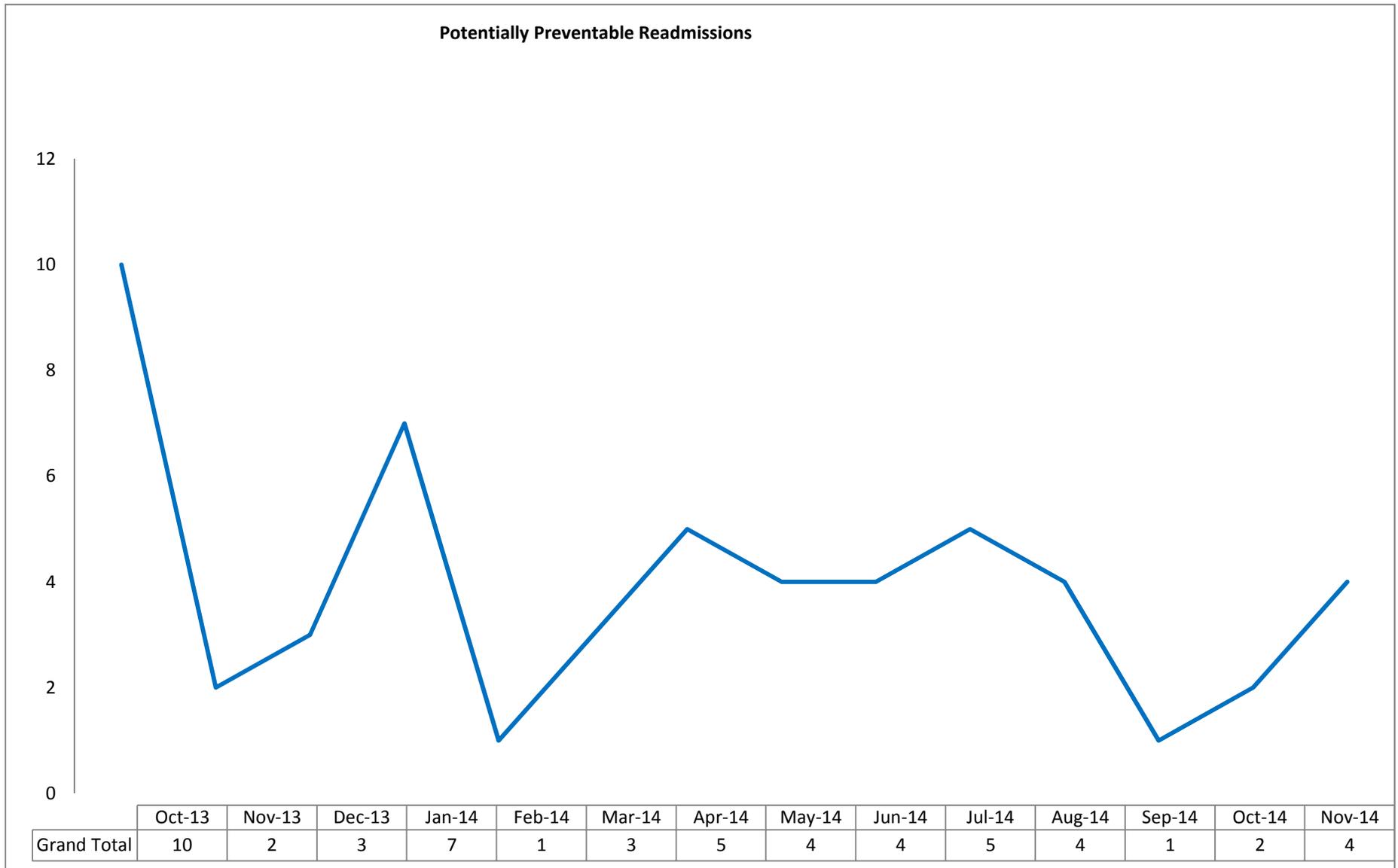
**CQM-2 Potentially Preventable Readmissions
El Paso Psychiatric Center**



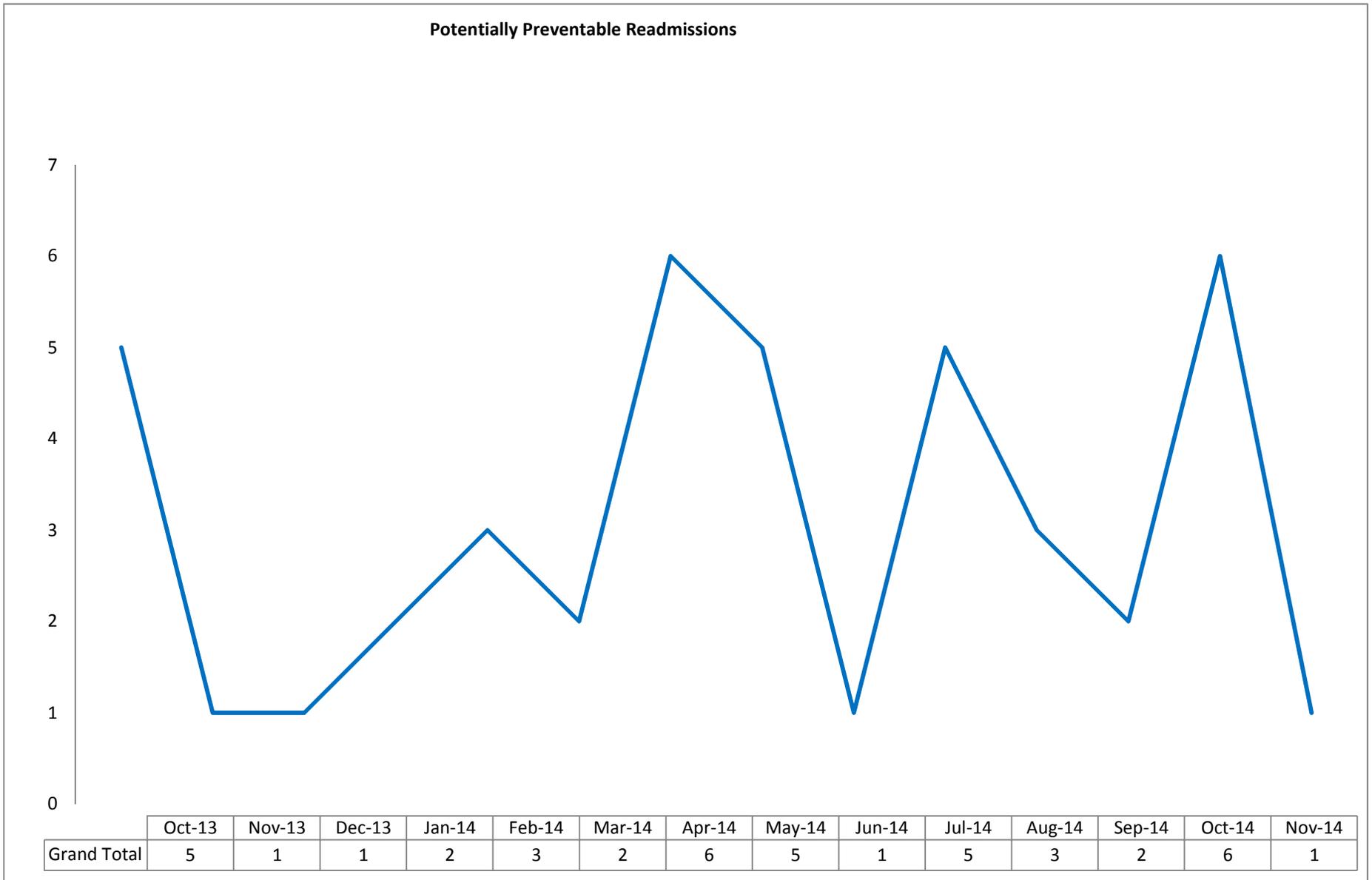
**CQM-2 Potentially Preventable Readmissions
Kerrville State Hospital**



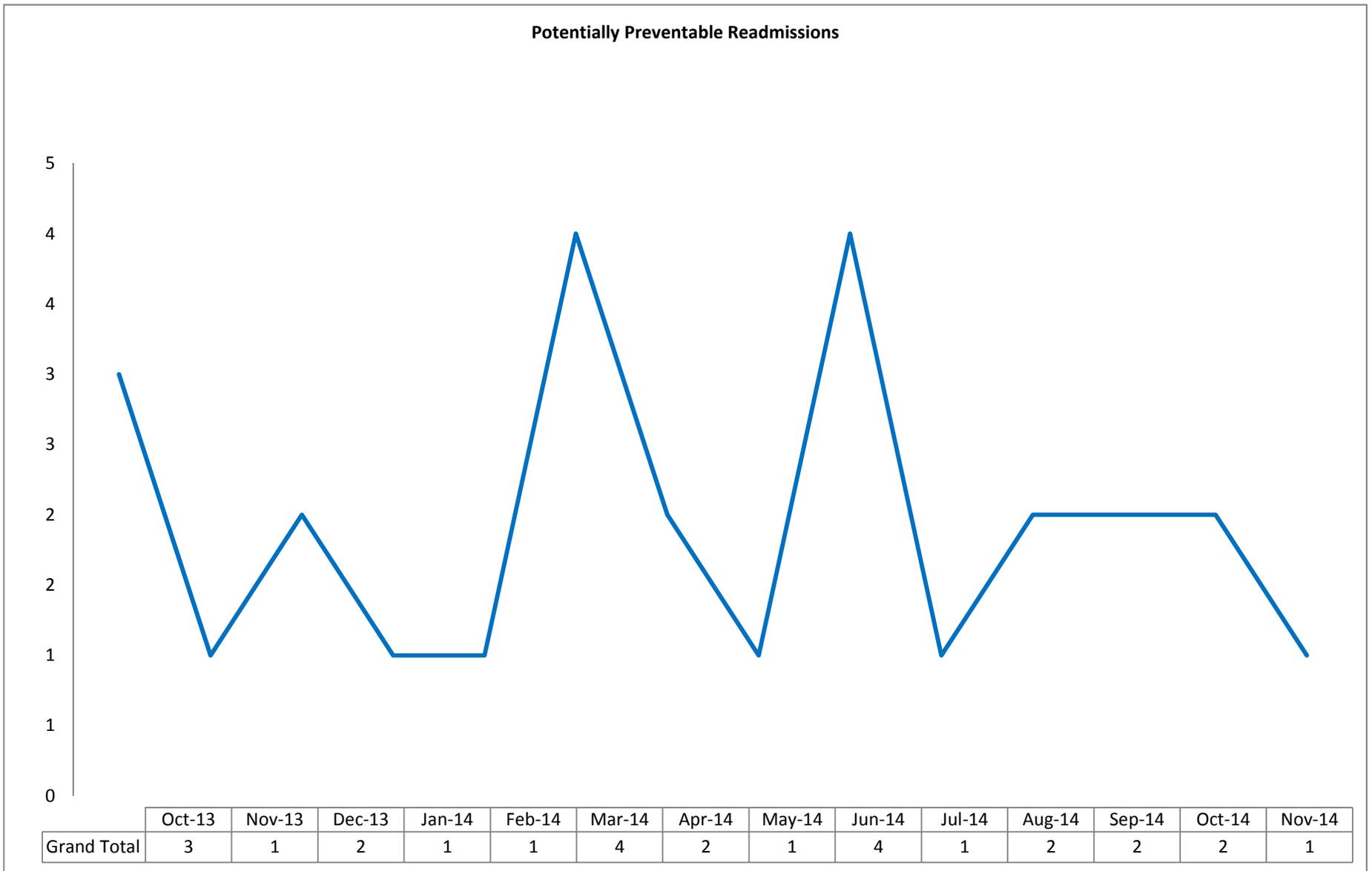
**CQM-2 Potentially Preventable Readmissions
North Texas State Hospital**



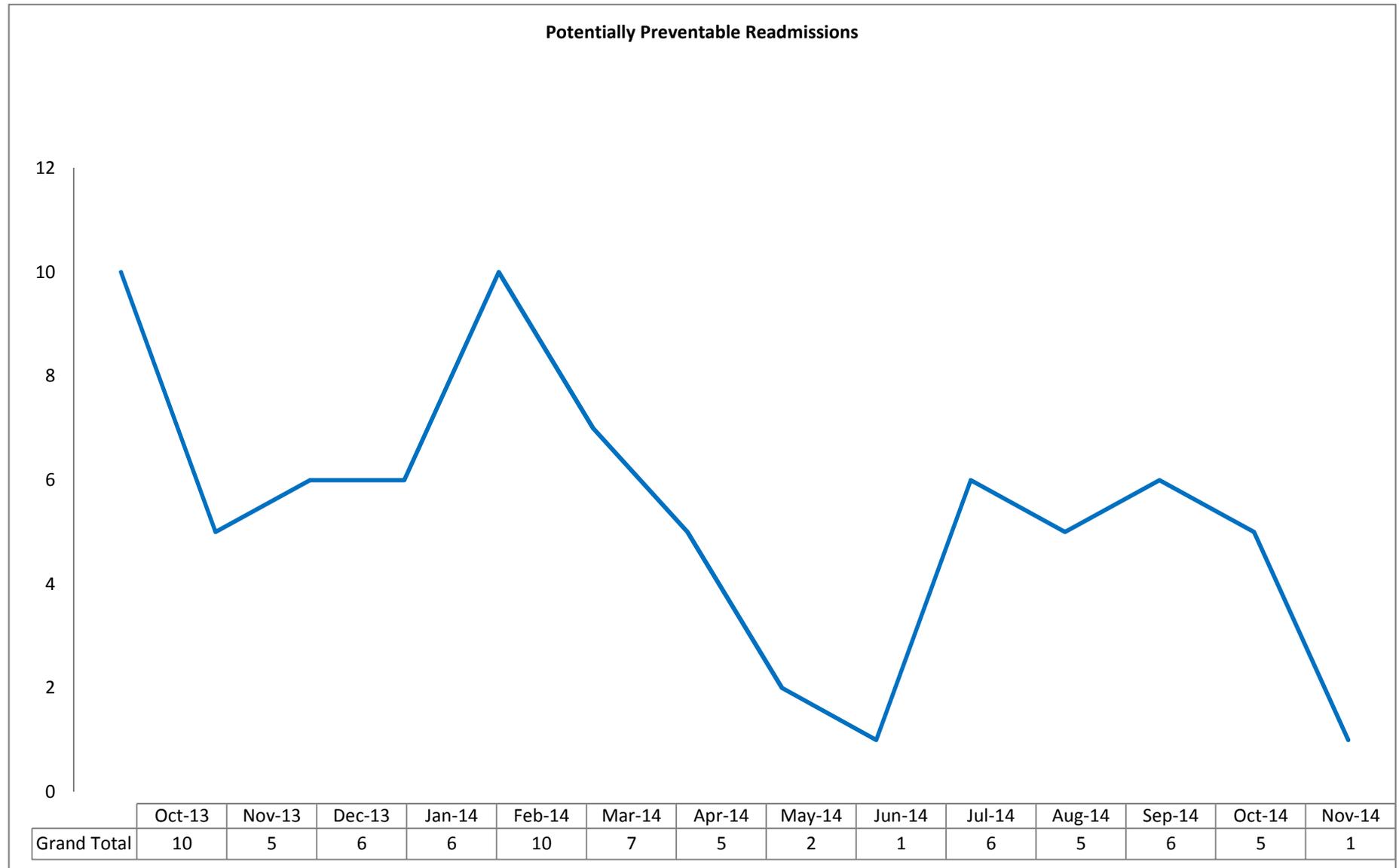
**CQM-2 Potentially Preventable Readmissions
Rio Grande State Center**



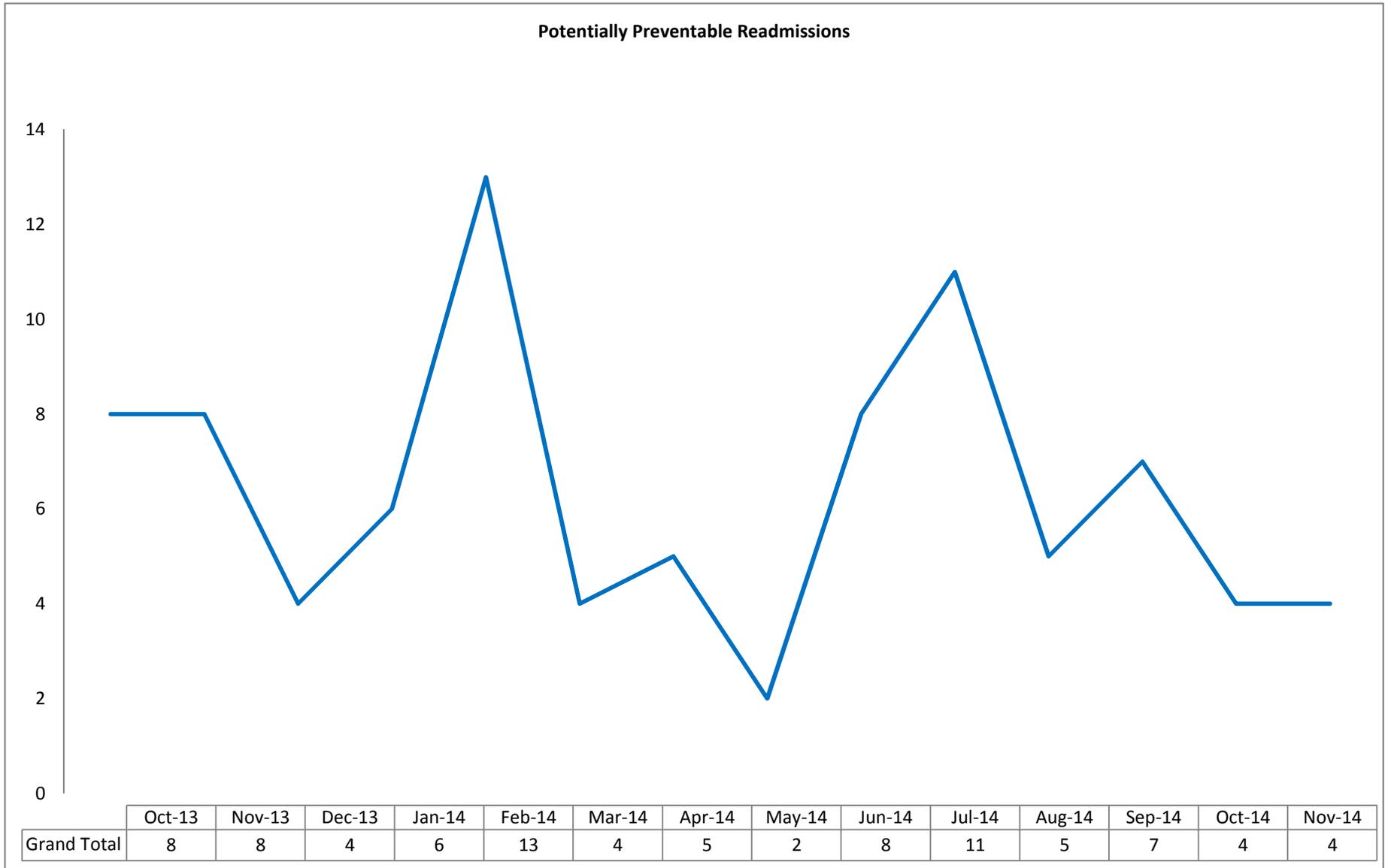
**CQM-2 Potentially Preventable Readmissions
Rusk State Hospital**



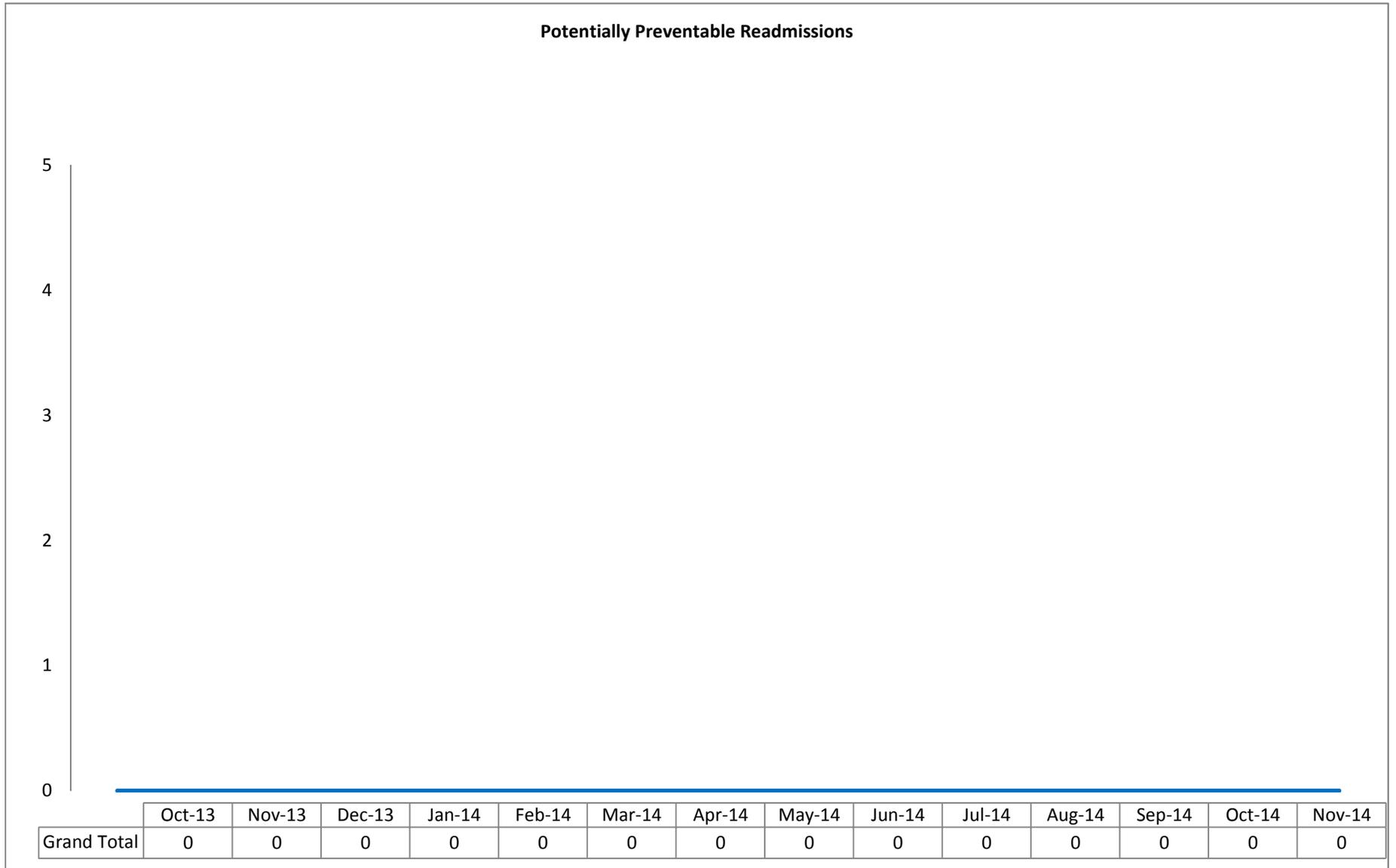
**CQM-2 Potentially Preventable Readmissions
San Antonio State Hospital**



**CQM-2 Potentially Preventable Readmissions
Terrell State Hospital**



**CQM-2 Potentially Preventable Readmissions
Waco Center for Youth**



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COM-3

Measure: Frequency of Employee Injury, per 1,000 Bed Days

Timeframe: Monthly

Definition

The state hospital number of employee injuries by age group category; injuries resulted by patient aggression; and injuries resulting in a workers' compensation claim.

Data Source

Facility form

CARE Reports HC022175 & HC022185 (Unduplicated Clients Days by Account Units)

Data Display and Chart Description

Chart shows monthly employee injuries by age categories and rate per 1,000 bed days by the individual state hospitals and system-wide. Chart shows monthly employee injuries associated with patient aggression/no restraint. Charts with monthly data points showing total employee injuries, injuries associated with patient aggression and rate per 1,000 bed days and injuries resulting in a workers compensation claim and rate per 1,000 bed days.

Purpose

Measure employee injuries by 1,000 bed days.

CQM - 3 Employee Injuries
All State Hospitals - Q1 FY15

| | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | TCID | WCFY | System Total |
|---------------------------|-------------|-------------|-------------|-------------|-------------|--------------|-------------|-------------|-------------|-------------|-------------|--------------|
| Age 18-39 | 18 | 25 | 12 | 16 | 39 | 40 | 73 | 38 | 19 | 1 | 9 | 290 |
| Per 1,000 Bed Days | 0.77 | 1.51 | 2.00 | 0.91 | 0.76 | 8.36 | 2.55 | 1.51 | 0.87 | 0.29 | 1.36 | 1.41 |
| Age 40-64 | 21 | 19 | 2 | 21 | 48 | 31 | 44 | 48 | 20 | 4 | 12 | 270 |
| Per 1,000 Bed Days | 0.90 | 1.15 | 0.33 | 1.19 | 0.93 | 6.48 | 1.54 | 1.91 | 0.91 | 1.18 | 1.82 | 1.31 |
| Age 65 - Older | 0 | 0 | 0 | 0 | 5 | 0 | 0 | 2 | 1 | 1 | 0 | 9 |
| Per 1,000 Bed Days | 0.00 | 0.00 | 0.00 | 0.00 | 0.10 | 0.00 | 0.00 | 0.08 | 0.05 | 0.29 | 0.00 | 0.04 |
| Unknown | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Per 1,000 Bed Days | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Total | 39 | 44 | 14 | 37 | 92 | 71 | 117 | 88 | 40 | 6 | 21 | 569 |
| Per 1,000 Bed Days | 1.67 | 2.66 | 2.33 | 2.10 | 1.78 | 14.84 | 4.08 | 3.49 | 1.83 | 1.77 | 3.18 | 2.77 |

CQM - 3 Employee Injuries
All State Hospitals - FY15

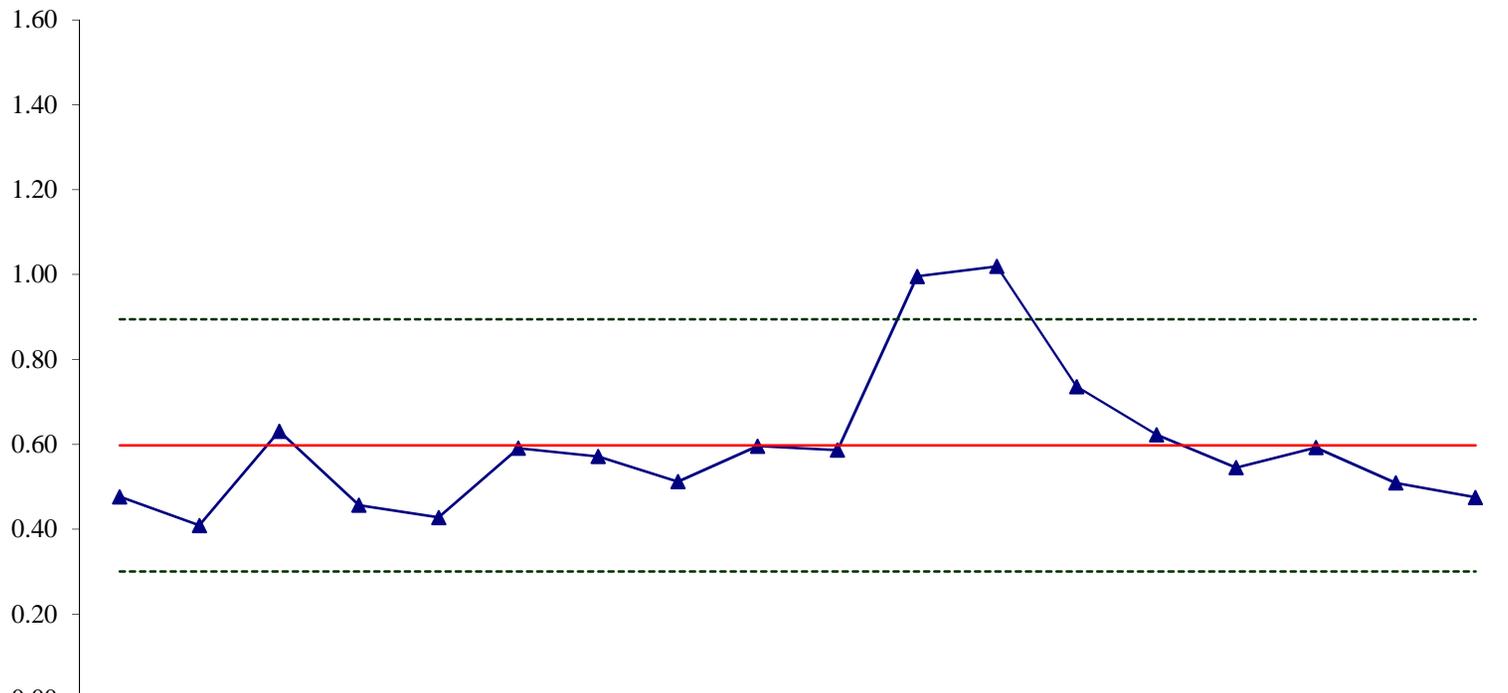
| | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | TCID | WCFY | System Total |
|--|------------|------------|------------|------------|------------|------------|------------|------------|------------|-----------|-----------|--------------|
| Q1 Total Injuries | 39 | 44 | 14 | 37 | 92 | 71 | 117 | 88 | 40 | 6 | 21 | 569 |
| # Injuries Associated with Patient Aggression/No Restraint | 18 | 22 | 10 | 8 | 48 | 48 | 57 | 27 | 19 | 0 | 1 | 258 |
| | 46% | 50% | 71% | 22% | 52% | 68% | 49% | 31% | 48% | 0% | 5% | 45% |
| Q2 Total Injuries | | | | | | | | | | | | |
| # Injuries Associated with Patient Aggression/No Restraint | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Q3 Total Injuries | | | | | | | | | | | | |
| # Injuries Associated with Patient Aggression/No Restraint | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Q4 Total Injuries | | | | | | | | | | | | |
| # Injuries Associated with Patient Aggression/No Restraint | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| FY Total Injuries | 39 | 44 | 14 | 37 | 92 | 71 | 117 | 88 | 40 | 6 | 21 | 569 |
| # Injuries Associated with Patient Aggression/No Restraint | 18 | 22 | 10 | 8 | 48 | 48 | 57 | 27 | 19 | 0 | 1 | 258 |
| | 46% | 50% | 71% | 22% | 52% | 68% | 49% | 31% | 48% | 0% | 5% | 45% |

CQM - 3 Employee Injuries
All State Hospitals - FY15

| | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | TCID | WCFY | System Total |
|--|-------------|-------------|-------------|-------------|-------------|--------------|-------------|-------------|-------------|-------------|-------------|--------------|
| Q1 Total Injuries | 39 | 44 | 14 | 37 | 92 | 71 | 117 | 88 | 40 | 6 | 21 | 569 |
| # Injuries Associated with Patient Aggression/No Restraint | 18 | 22 | 10 | 8 | 48 | 48 | 57 | 27 | 19 | 0 | 1 | 258 |
| Per 1,000 Bed days | 0.77 | 1.33 | 1.66 | 0.45 | 0.93 | 10.03 | 1.99 | 1.07 | 0.87 | 0.00 | 0.15 | 1.25 |
| Q2 Total Injuries | | | | | | | | | | | | |
| # Injuries Associated with Patient Aggression/No Restraint | | | | | | | | | | | | |
| Per 1,000 Bed days | | | | | | | | | | | | |
| Q3 Total Injuries | | | | | | | | | | | | |
| # Injuries Associated with Patient Aggression/No Restraint | | | | | | | | | | | | |
| Per 1,000 Bed days | | | | | | | | | | | | |
| Q4 Total Injuries | | | | | | | | | | | | |
| # Injuries Associated with Patient Aggression/No Restraint | | | | | | | | | | | | |
| Per 1,000 Bed days | | | | | | | | | | | | |
| FY Total Injuries | 39 | 44 | 14 | 37 | 92 | 71 | 117 | 88 | 40 | 6 | 21 | 569 |
| # Injuries Associated with Patient Aggression/No Restraint | 18 | 22 | 10 | 8 | 48 | 48 | 57 | 27 | 19 | 0 | 1 | 258 |
| Per 1,000 Bed days | 0.77 | 1.33 | 1.66 | 0.45 | 0.93 | 10.03 | 1.99 | 1.07 | 0.87 | 0.00 | 0.15 | 1.25 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
All State Hospitals**

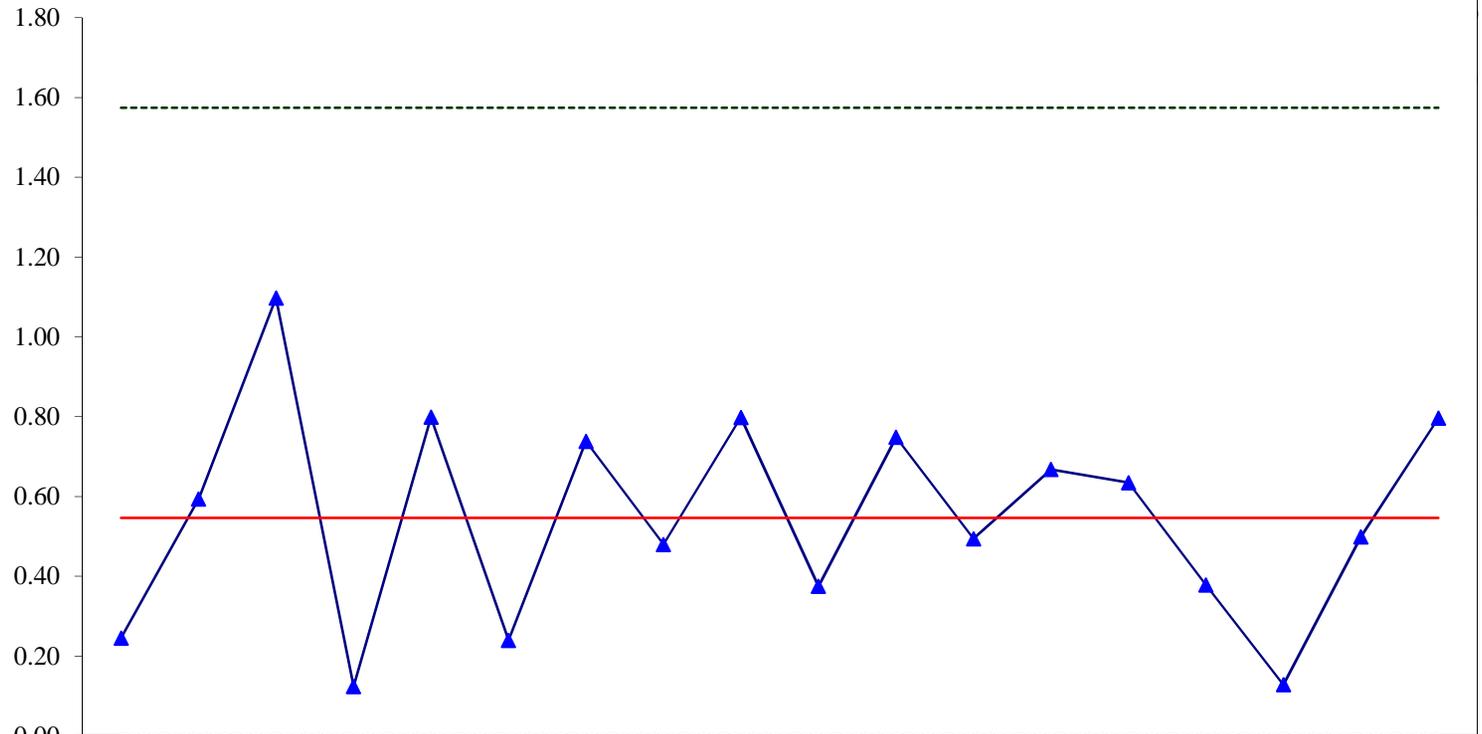
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 181 | 209 | 223 | 204 | 200 | 189 | 188 | 176 | 175 | 174 | 245 | 224 | 213 | 248 | 188 | 204 | 201 | 164 |
| Injuries Associated with R/S | 34 | 30 | 46 | 32 | 35 | 41 | 40 | 36 | 38 | 41 | 68 | 73 | 50 | 43 | 38 | 40 | 36 | 32 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 0.48 | 0.41 | 0.63 | 0.46 | 0.43 | 0.59 | 0.57 | 0.51 | 0.60 | 0.59 | 1.00 | 1.02 | 0.74 | 0.62 | 0.55 | 0.59 | 0.51 | 0.47 |
| ----- UCL | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 |
| ----- Avg | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 | 0.60 |
| ----- LCL | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
Austin State Hospital**

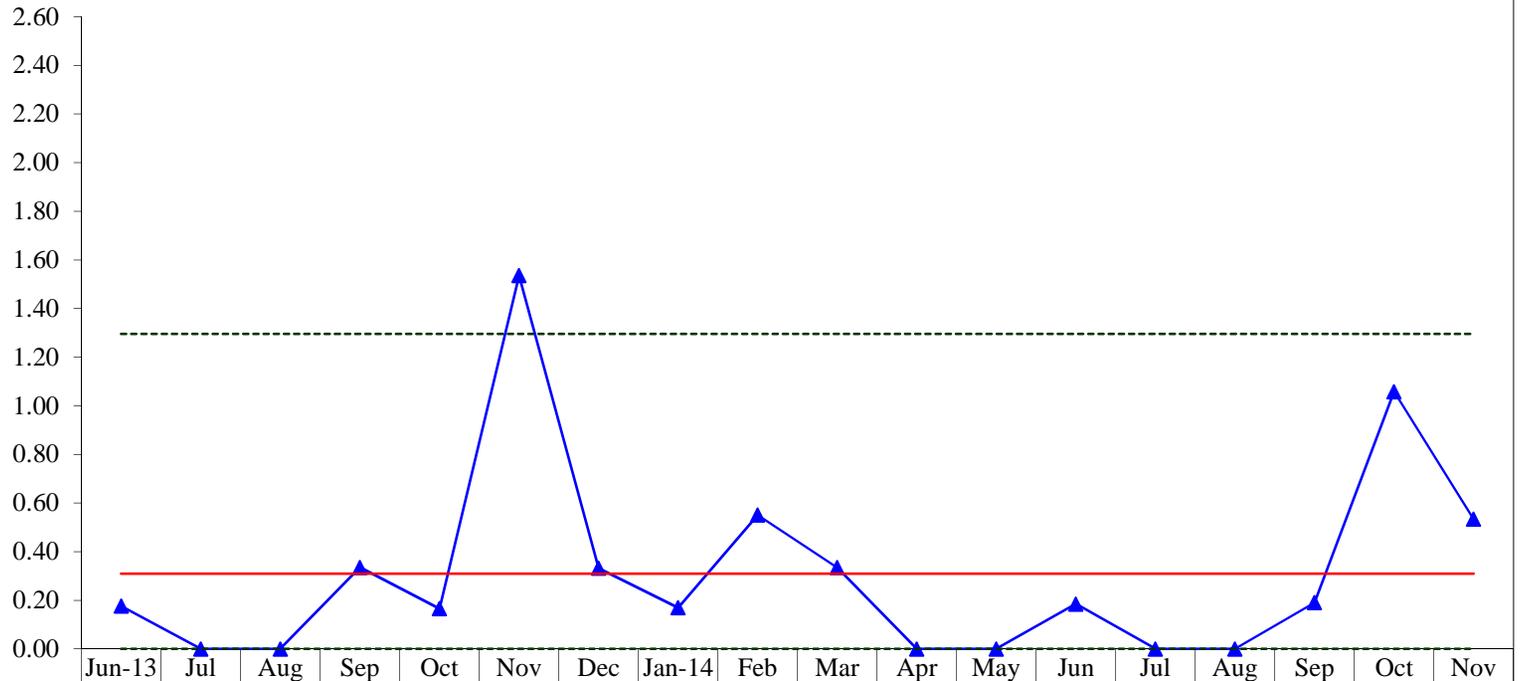
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 11 | 12 | 18 | 8 | 13 | 7 | 13 | 14 | 15 | 12 | 10 | 12 | 8 | 22 | 10 | 15 | 12 | 12 |
| Injuries Associated with R/S | 2 | 5 | 9 | 1 | 7 | 2 | 6 | 4 | 6 | 3 | 6 | 4 | 5 | 5 | 3 | 1 | 4 | 6 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 0.24 | 0.59 | 1.10 | 0.12 | 0.80 | 0.24 | 0.74 | 0.48 | 0.80 | 0.38 | 0.75 | 0.49 | 0.67 | 0.63 | 0.38 | 0.13 | 0.50 | 0.80 |
| ----- UCL | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 | 1.57 |
| — Avg | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 | 0.55 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

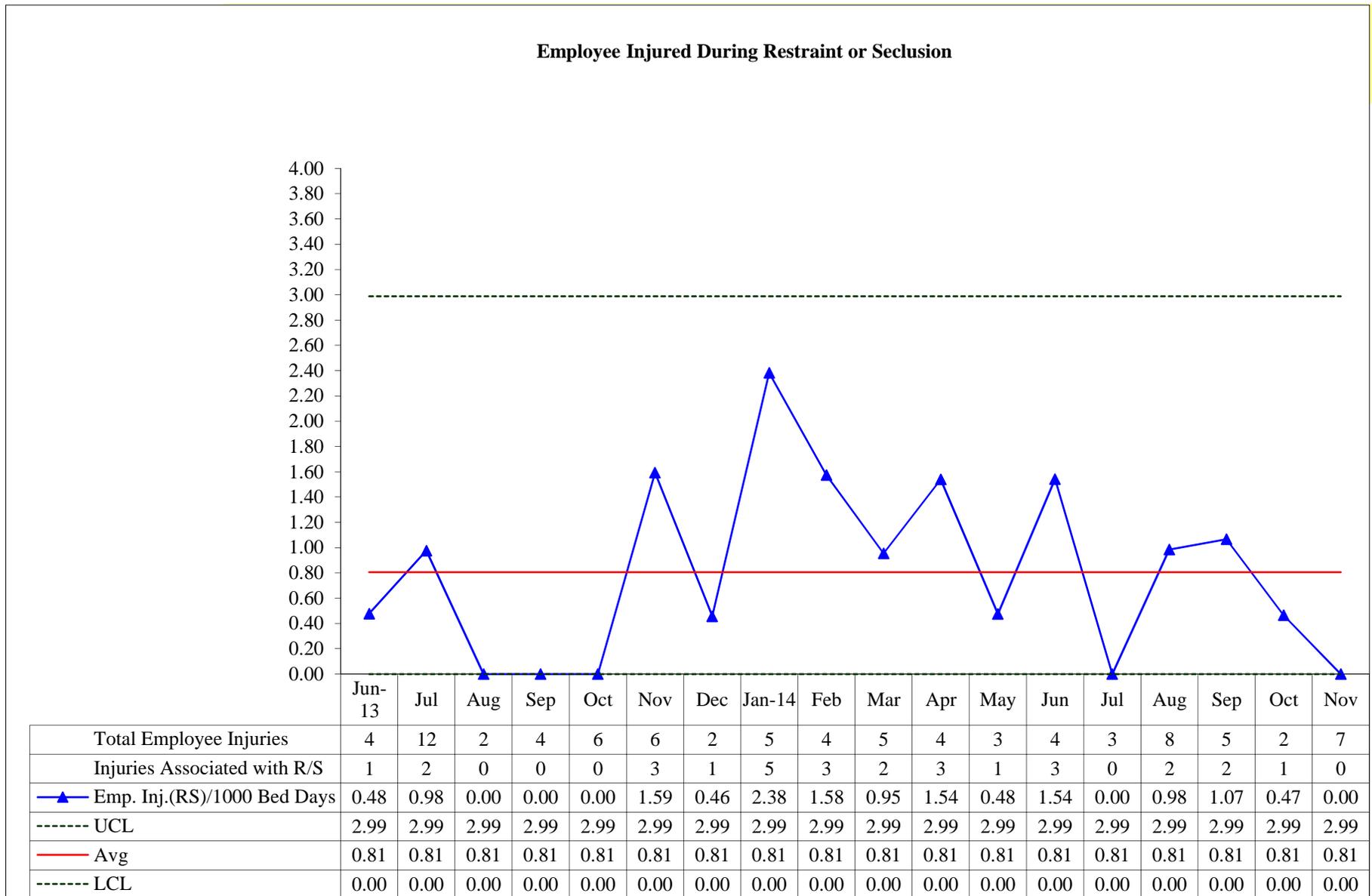
**CQM - 3 Employees Injuries Resulted by Patient Aggression
Big Spring State Hospital**

Employee Injured During Restraint or Seclusion



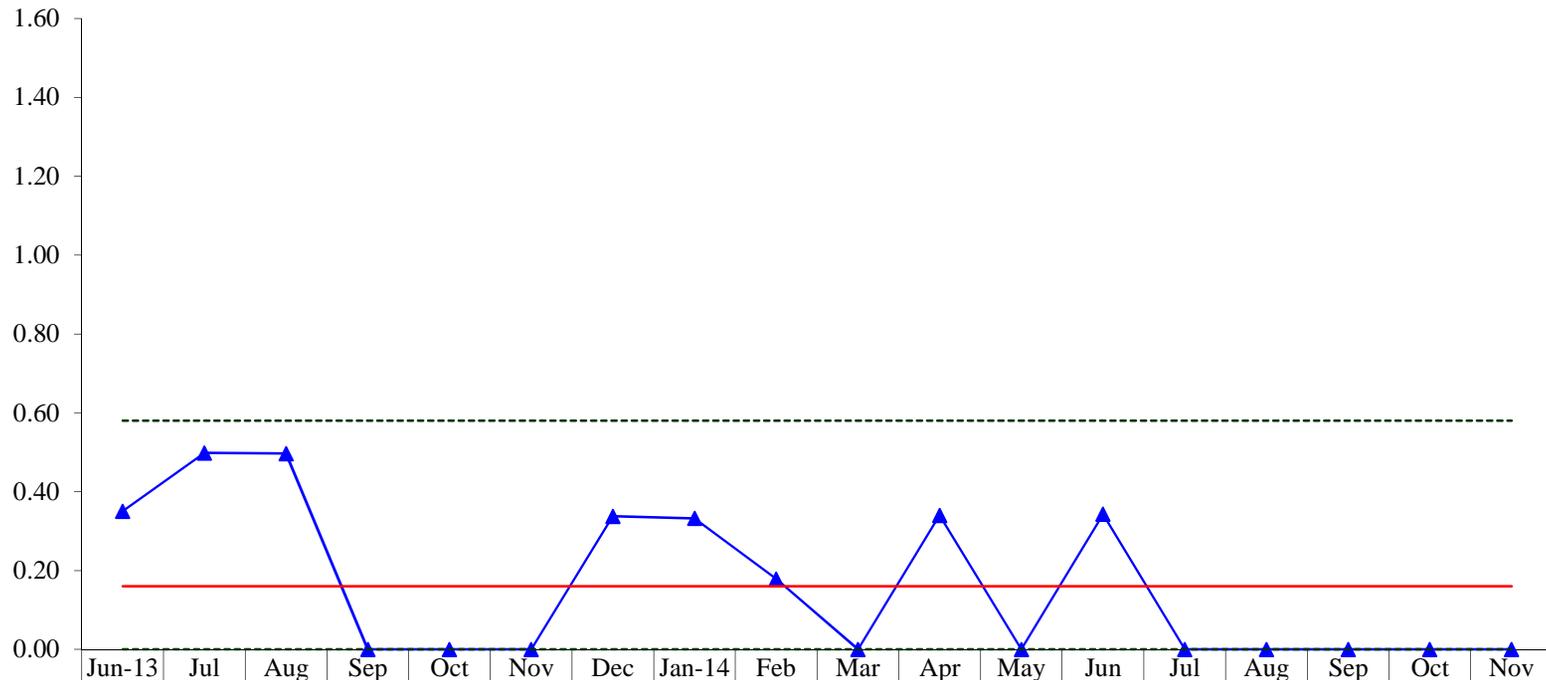
| | | | | | | | | | | | | | | | | | | |
|-------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 14 | 14 | 8 | 12 | 12 | 22 | 22 | 10 | 8 | 12 | 20 | 14 | 14 | 14 | 8 | 13 | 20 | 11 |
| Injuries Associated with R/S | 1 | 0 | 0 | 2 | 1 | 9 | 2 | 1 | 3 | 2 | 0 | 0 | 1 | 0 | 0 | 1 | 6 | 3 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 0.18 | 0.00 | 0.00 | 0.34 | 0.17 | 1.54 | 0.33 | 0.17 | 0.55 | 0.33 | 0.00 | 0.00 | 0.18 | 0.00 | 0.00 | 0.19 | 1.06 | 0.53 |
| ----- UCL | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 | 1.30 |
| — Avg | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 | 0.31 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
El Paso Psychiatric Center**



**CQM - 3 Employees Injuries Resulted by Patient Aggression
Kerrville State Hospital**

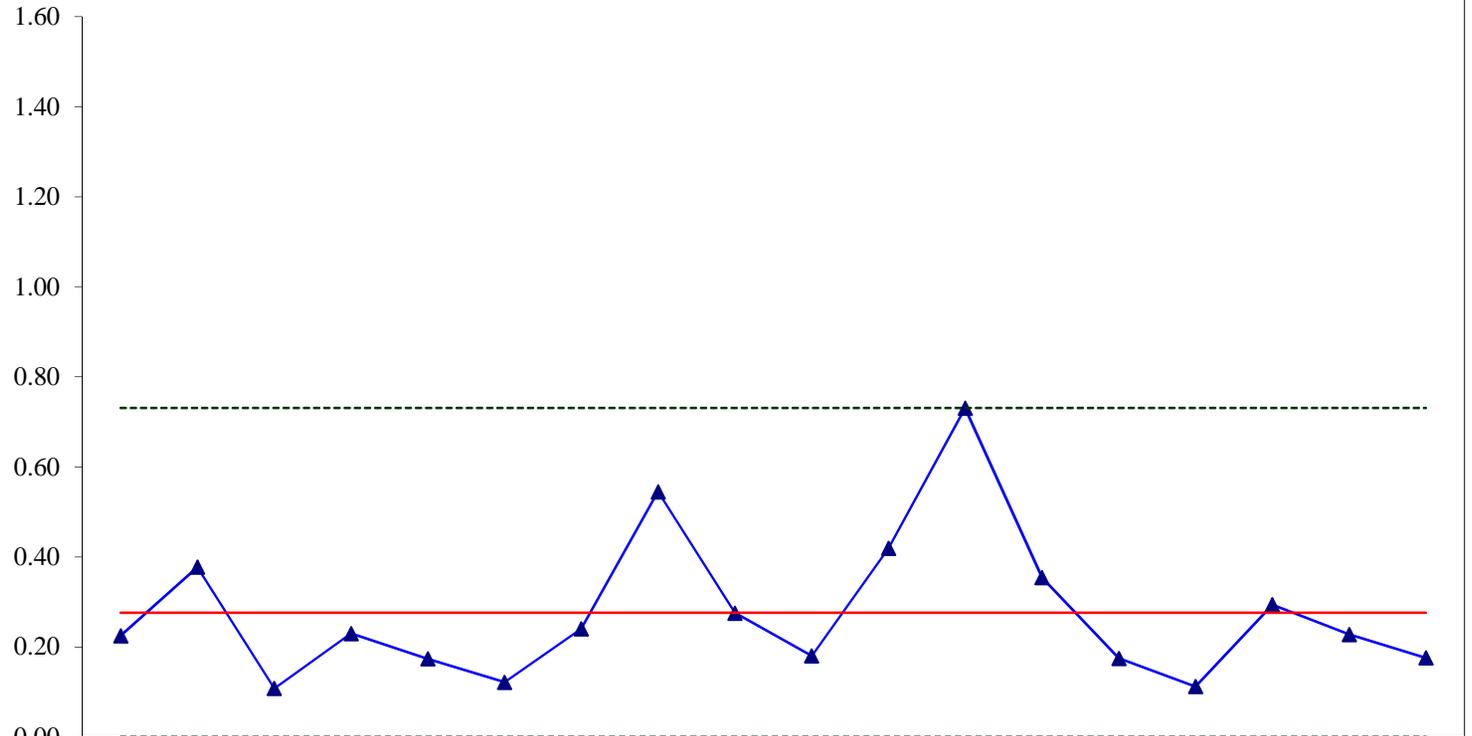
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 14 | 13 | 12 | 8 | 11 | 4 | 13 | 10 | 19 | 8 | 17 | 9 | 19 | 10 | 7 | 9 | 20 | 8 |
| Injuries Associated with R/S | 2 | 3 | 3 | 0 | 0 | 0 | 2 | 2 | 1 | 0 | 2 | 0 | 2 | 0 | 0 | 0 | 0 | 0 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 0.35 | 0.50 | 0.50 | 0.00 | 0.00 | 0.00 | 0.34 | 0.33 | 0.18 | 0.00 | 0.34 | 0.00 | 0.34 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| ----- UCL | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 | 0.58 |
| — Avg | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 | 0.16 |
| LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
North Texas State Hospital**

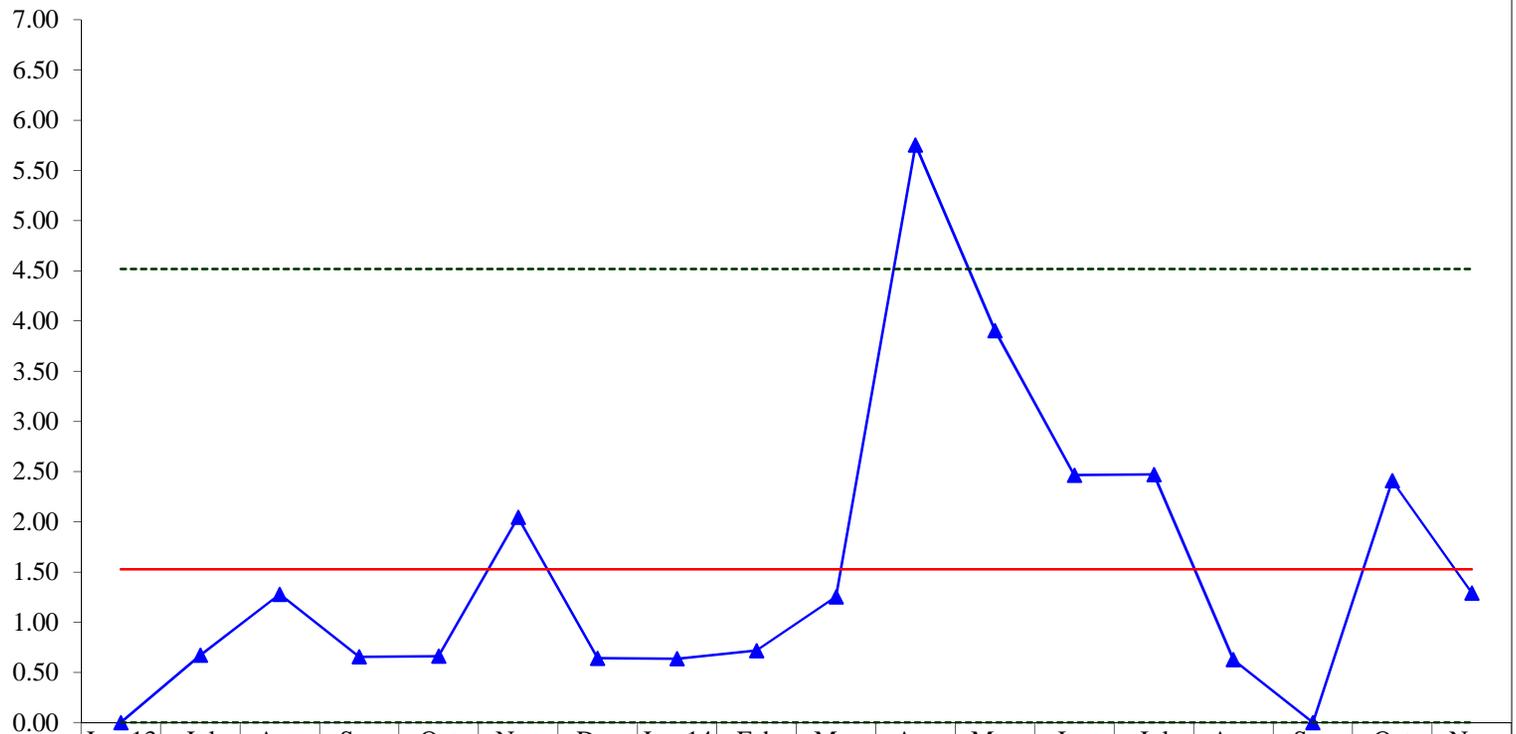
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 30 | 46 | 50 | 41 | 44 | 35 | 37 | 31 | 35 | 32 | 45 | 39 | 38 | 42 | 26 | 44 | 28 | 20 |
| Injuries Associated with R/S | 4 | 7 | 2 | 4 | 3 | 2 | 4 | 9 | 4 | 3 | 7 | 13 | 6 | 3 | 2 | 5 | 4 | 3 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 0.23 | 0.38 | 0.11 | 0.23 | 0.17 | 0.12 | 0.24 | 0.54 | 0.28 | 0.18 | 0.42 | 0.73 | 0.35 | 0.17 | 0.11 | 0.29 | 0.23 | 0.18 |
| ----- UCL | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 | 0.73 |
| ----- Avg | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 | 0.28 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
Rio Grande State Center**

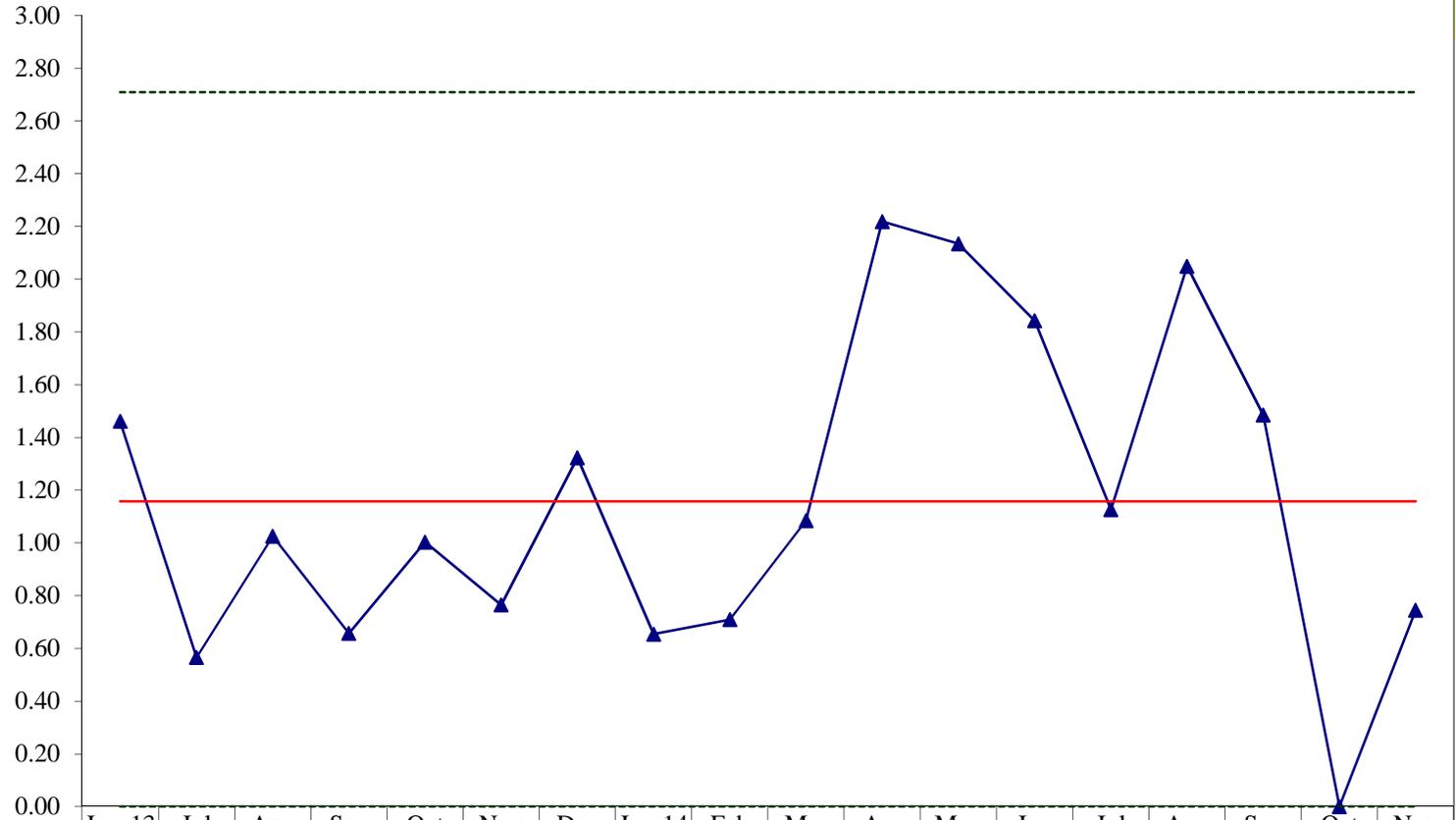
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 12 | 18 | 27 | 23 | 26 | 36 | 25 | 29 | 15 | 15 | 39 | 23 | 22 | 24 | 22 | 24 | 31 | 16 |
| Injuries Associated with R/S | 0 | 1 | 2 | 1 | 1 | 3 | 1 | 1 | 1 | 2 | 9 | 6 | 4 | 4 | 1 | 0 | 4 | 2 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 0.00 | 0.67 | 1.28 | 0.66 | 0.66 | 2.04 | 0.64 | 0.64 | 0.72 | 1.25 | 5.75 | 3.90 | 2.46 | 2.47 | 0.63 | 0.00 | 2.41 | 1.29 |
| ----- UCL | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 | 4.52 |
| ----- Avg | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 | 1.53 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
Rusk State Hospital**

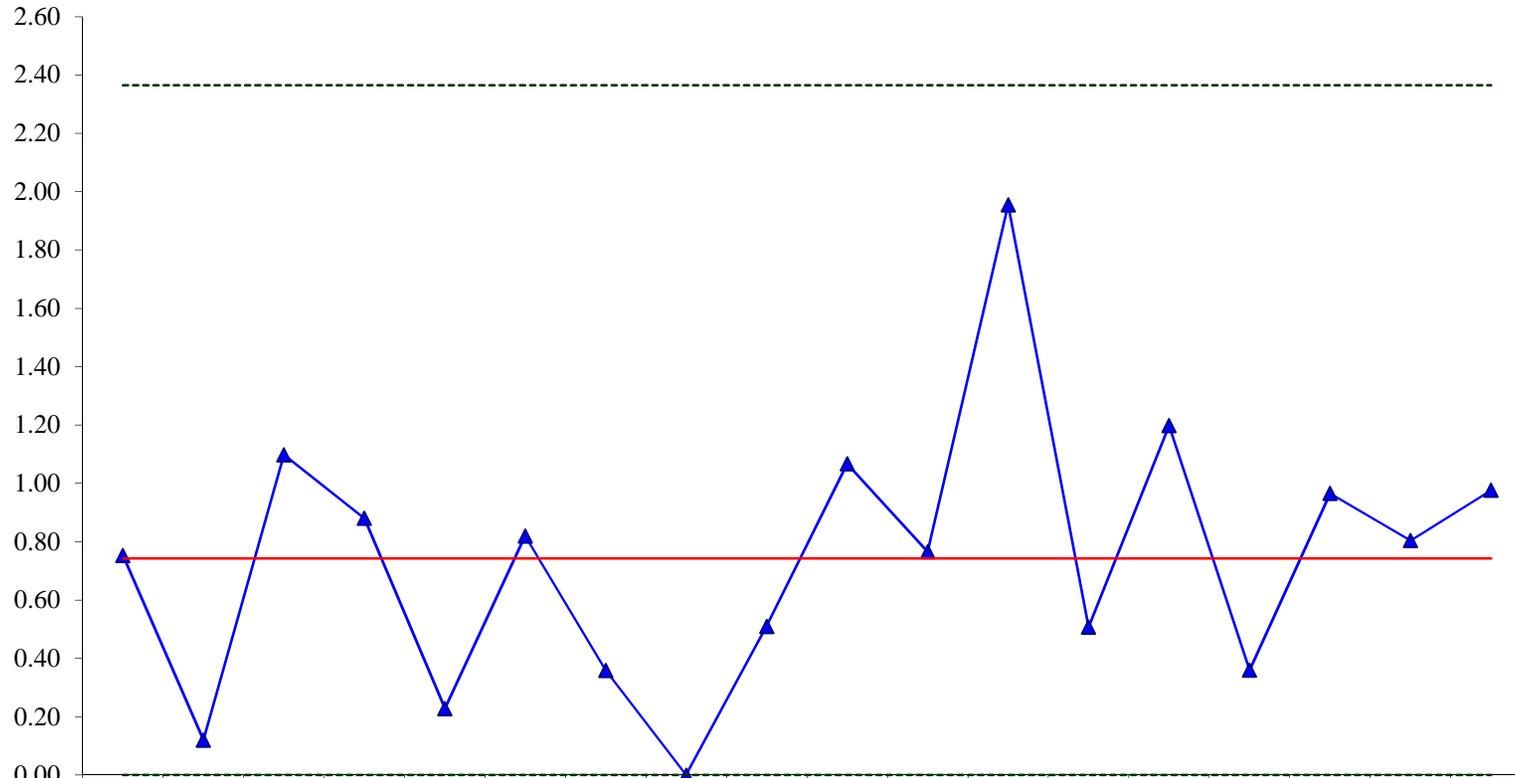
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 41 | 28 | 35 | 38 | 24 | 21 | 32 | 29 | 21 | 34 | 52 | 62 | 49 | 48 | 43 | 40 | 31 | 46 |
| Injuries Associated with R/S | 15 | 6 | 11 | 7 | 11 | 8 | 14 | 7 | 7 | 11 | 22 | 23 | 19 | 11 | 20 | 14 | 0 | 7 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 1.46 | 0.57 | 1.03 | 0.66 | 1.00 | 0.76 | 1.32 | 0.65 | 0.71 | 1.08 | 2.22 | 2.13 | 1.84 | 1.13 | 2.05 | 1.48 | 0.00 | 0.74 |
| ----- UCL | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 | 2.71 |
| ----- Avg | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 | 1.16 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
San Antonio State Hospital**

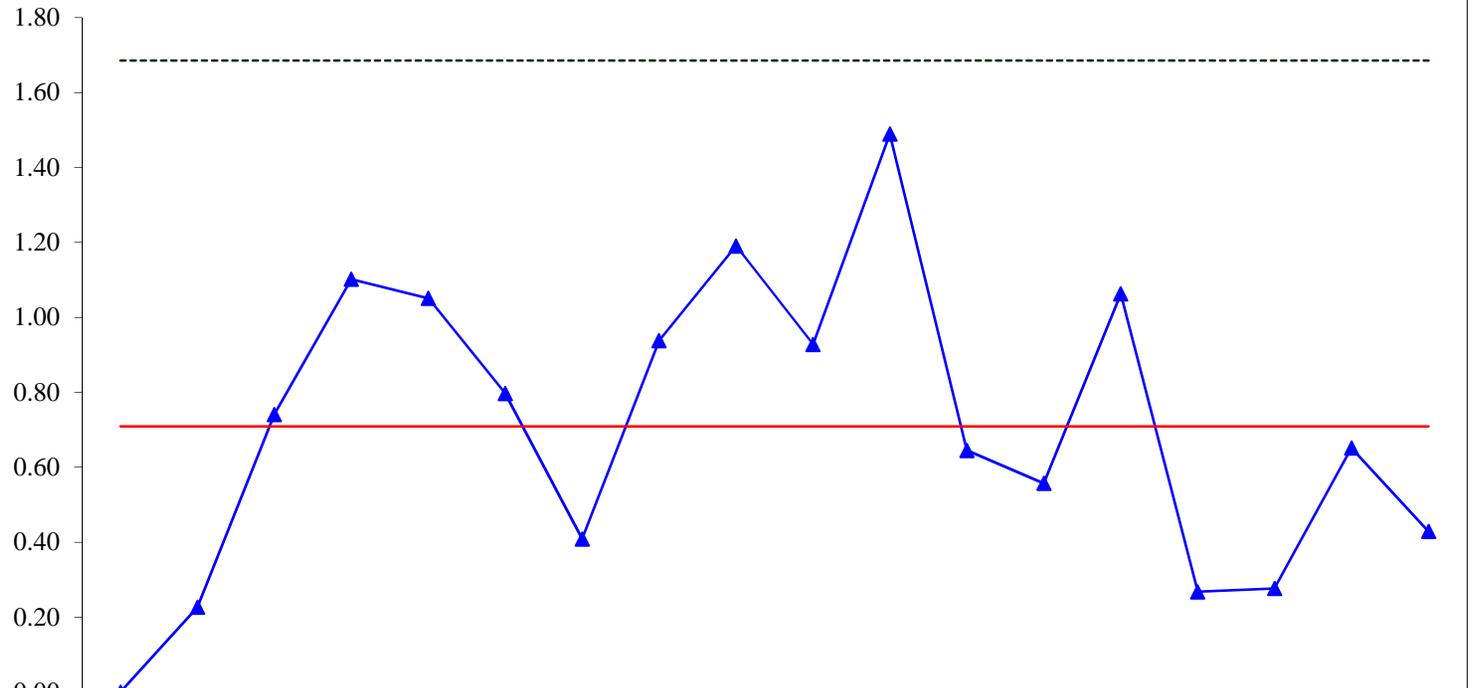
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 23 | 24 | 29 | 27 | 23 | 30 | 16 | 30 | 18 | 30 | 25 | 36 | 29 | 40 | 31 | 25 | 35 | 28 |
| Injuries Associated with R/S | 6 | 1 | 9 | 7 | 2 | 7 | 3 | 0 | 4 | 9 | 6 | 16 | 4 | 10 | 3 | 8 | 7 | 8 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 0.75 | 0.12 | 1.10 | 0.88 | 0.23 | 0.82 | 0.36 | 0.00 | 0.51 | 1.07 | 0.77 | 1.96 | 0.51 | 1.20 | 0.36 | 0.97 | 0.80 | 0.98 |
| ----- UCL | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 | 2.37 |
| — Avg | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 | 0.74 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
Terrell State Hospital**

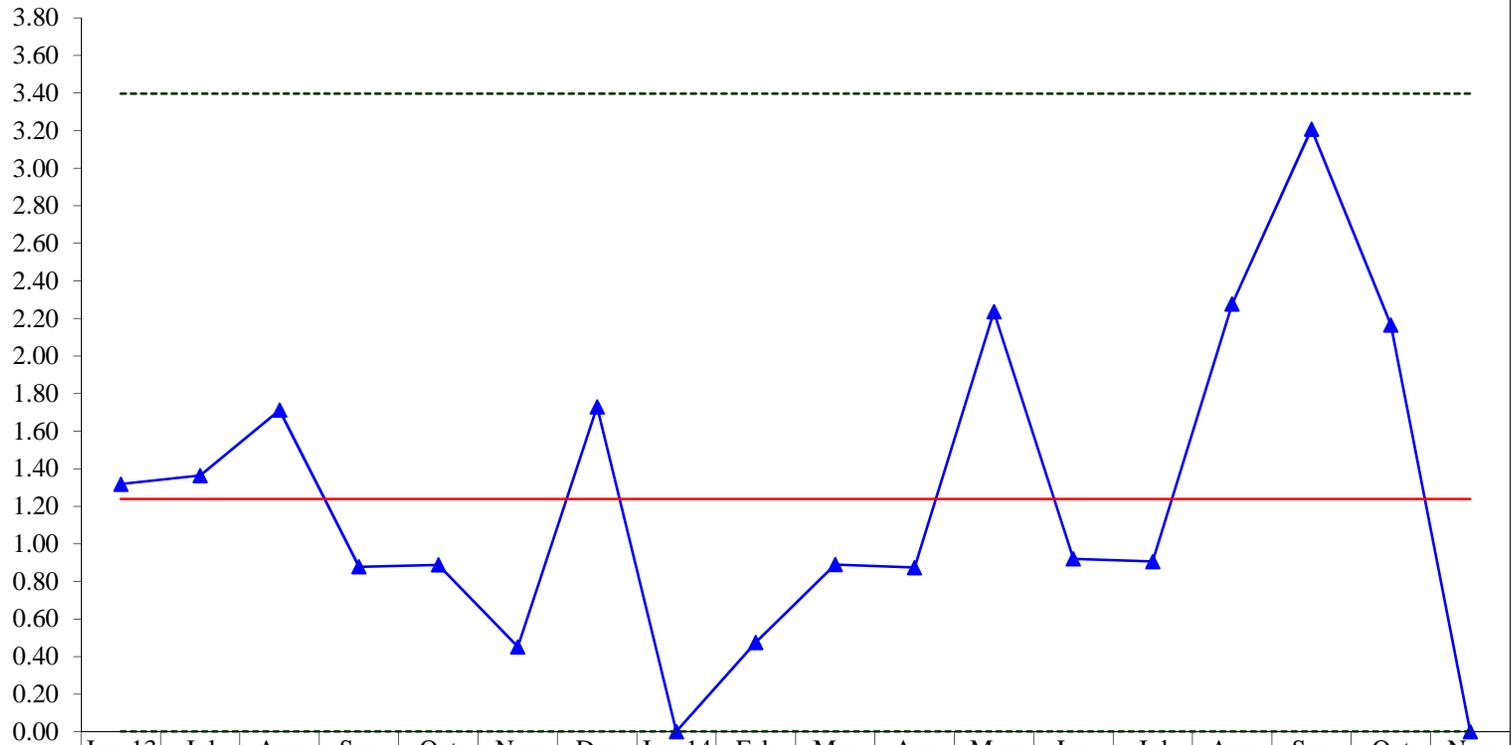
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 28 | 36 | 38 | 31 | 33 | 23 | 21 | 17 | 36 | 22 | 29 | 19 | 25 | 37 | 25 | 16 | 12 | 12 |
| Injuries Associated with R/S | 0 | 2 | 6 | 8 | 8 | 6 | 3 | 7 | 8 | 7 | 11 | 5 | 4 | 8 | 2 | 2 | 5 | 3 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 0.00 | 0.23 | 0.74 | 1.10 | 1.05 | 0.80 | 0.41 | 0.94 | 1.19 | 0.93 | 1.49 | 0.65 | 0.56 | 1.06 | 0.27 | 0.28 | 0.65 | 0.43 |
| ----- UCL | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 | 1.69 |
| — Avg | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 | 0.71 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
Waco Center for Youth**

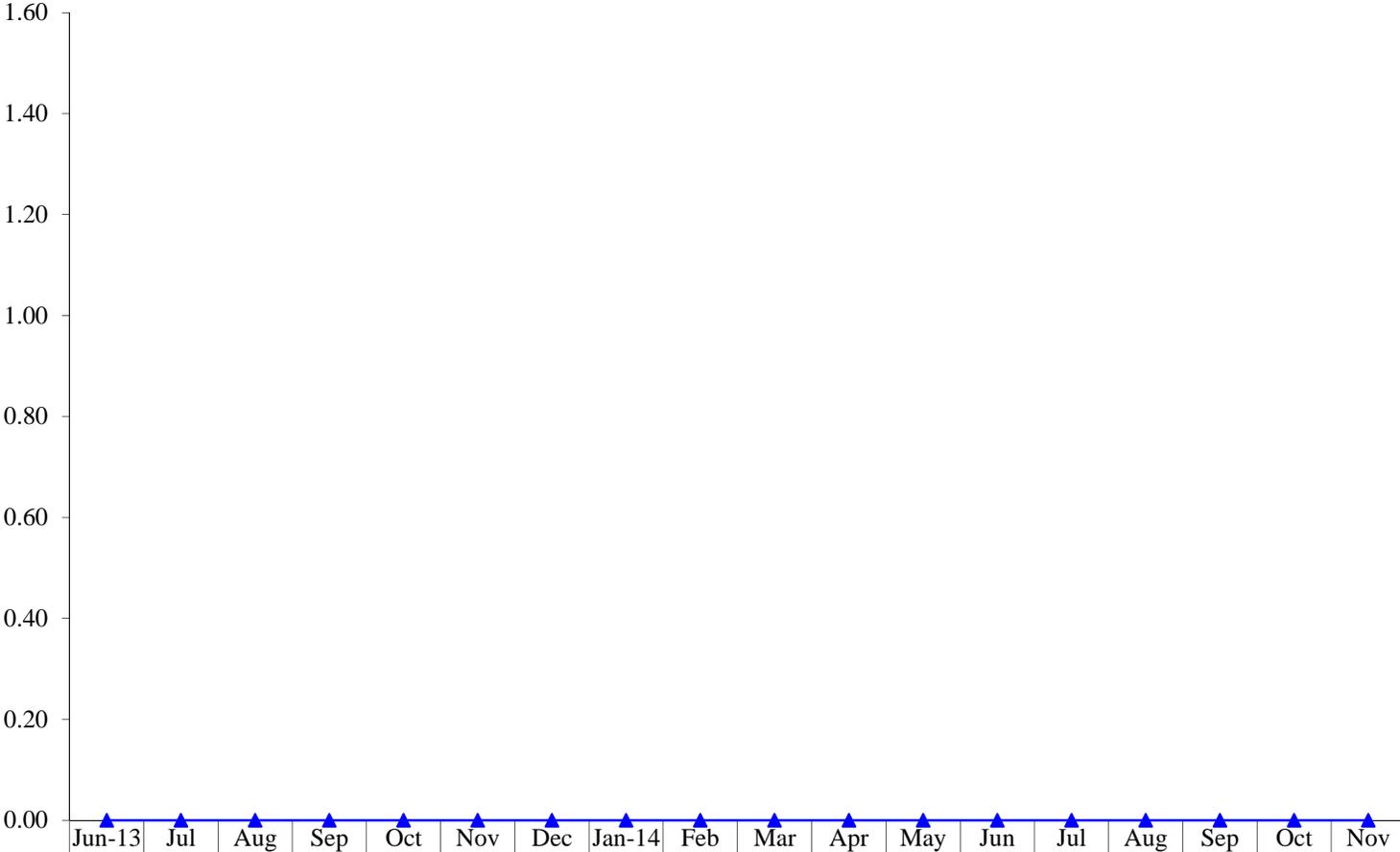
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 4 | 5 | 4 | 10 | 5 | 4 | 6 | 0 | 3 | 3 | 2 | 6 | 4 | 6 | 6 | 9 | 8 | 4 |
| Injuries Associated with R/S | 3 | 3 | 4 | 2 | 2 | 1 | 4 | 0 | 1 | 2 | 2 | 5 | 2 | 2 | 5 | 7 | 5 | 0 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 1.32 | 1.36 | 1.71 | 0.88 | 0.89 | 0.45 | 1.73 | 0.00 | 0.48 | 0.89 | 0.87 | 2.24 | 0.92 | 0.91 | 2.28 | 3.21 | 2.16 | 0.00 |
| ----- UCL | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 | 3.40 |
| — Avg | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 | 1.24 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employees Injuries Resulted by Patient Aggression
Texas Center for Infectious Disease**

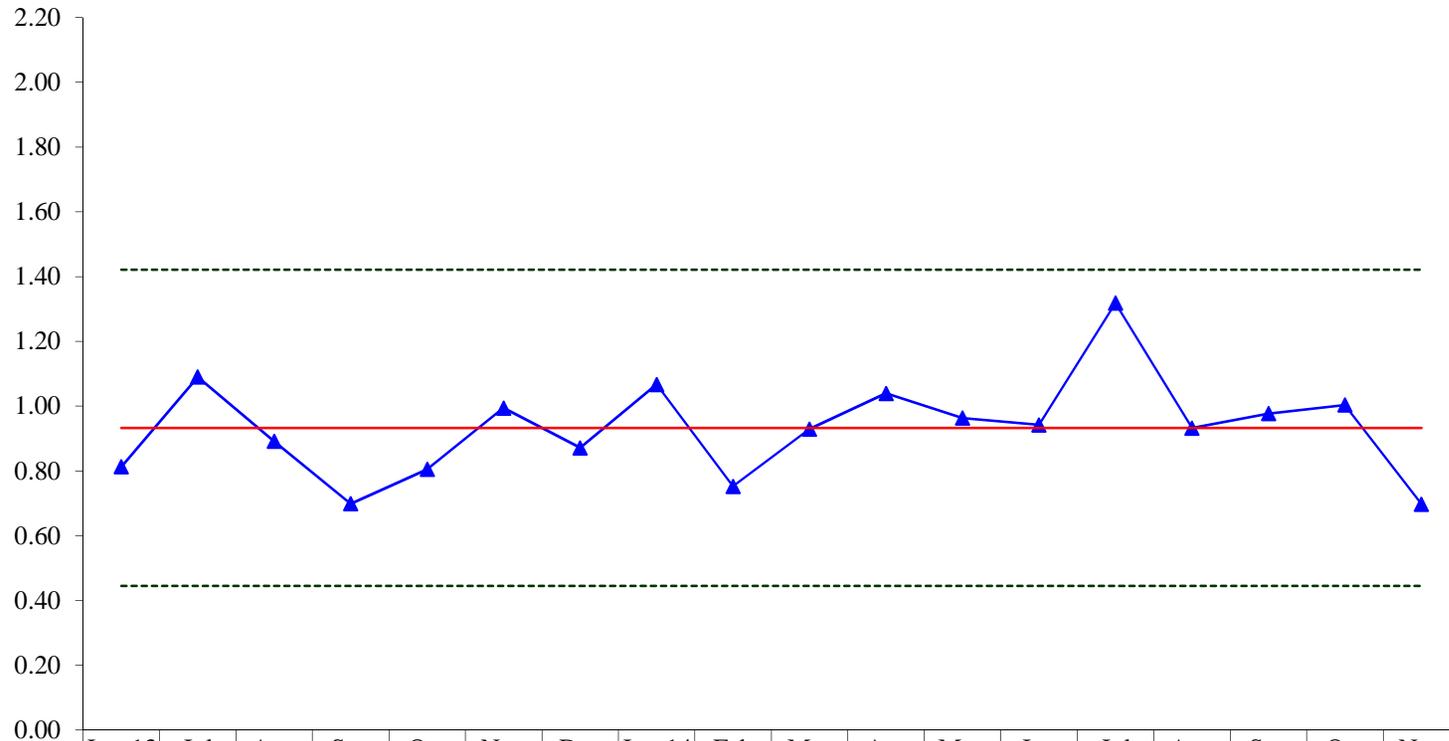
Employee Injured During Restraint or Seclusion



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 0 | 1 | 0 | 2 | 3 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 2 | 4 | 2 | 0 |
| Injuries Associated with R/S | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ▲ Emp. Inj.(RS)/1000 Bed Days | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
All State Hospitals**

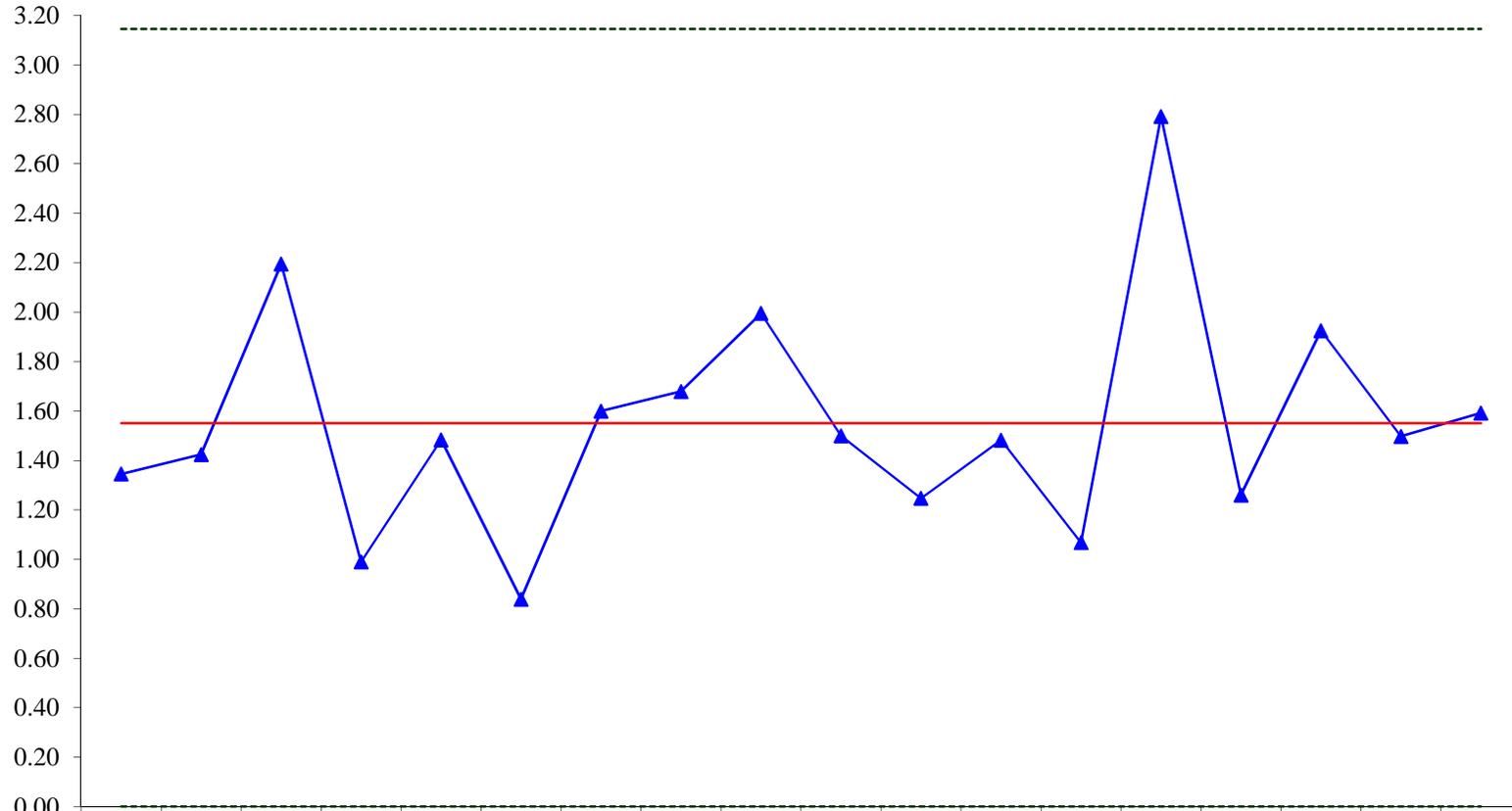
Employee Injuries Resulting in a Workers' Compensation Claim



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 181 | 209 | 223 | 204 | 200 | 189 | 188 | 176 | 175 | 174 | 245 | 224 | 213 | 248 | 188 | 204 | 201 | 164 |
| Injuries Resulting in a WCC | 58 | 80 | 65 | 49 | 58 | 69 | 61 | 75 | 48 | 65 | 71 | 69 | 64 | 91 | 65 | 66 | 71 | 47 |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 0.81 | 1.09 | 0.89 | 0.70 | 0.81 | 0.99 | 0.87 | 1.07 | 0.75 | 0.93 | 1.04 | 0.96 | 0.94 | 1.32 | 0.93 | 0.98 | 1.00 | 0.70 |
| ----- UCL | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 | 1.42 |
| ----- Avg | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 | 0.93 |
| ----- LCL | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 | 0.44 |

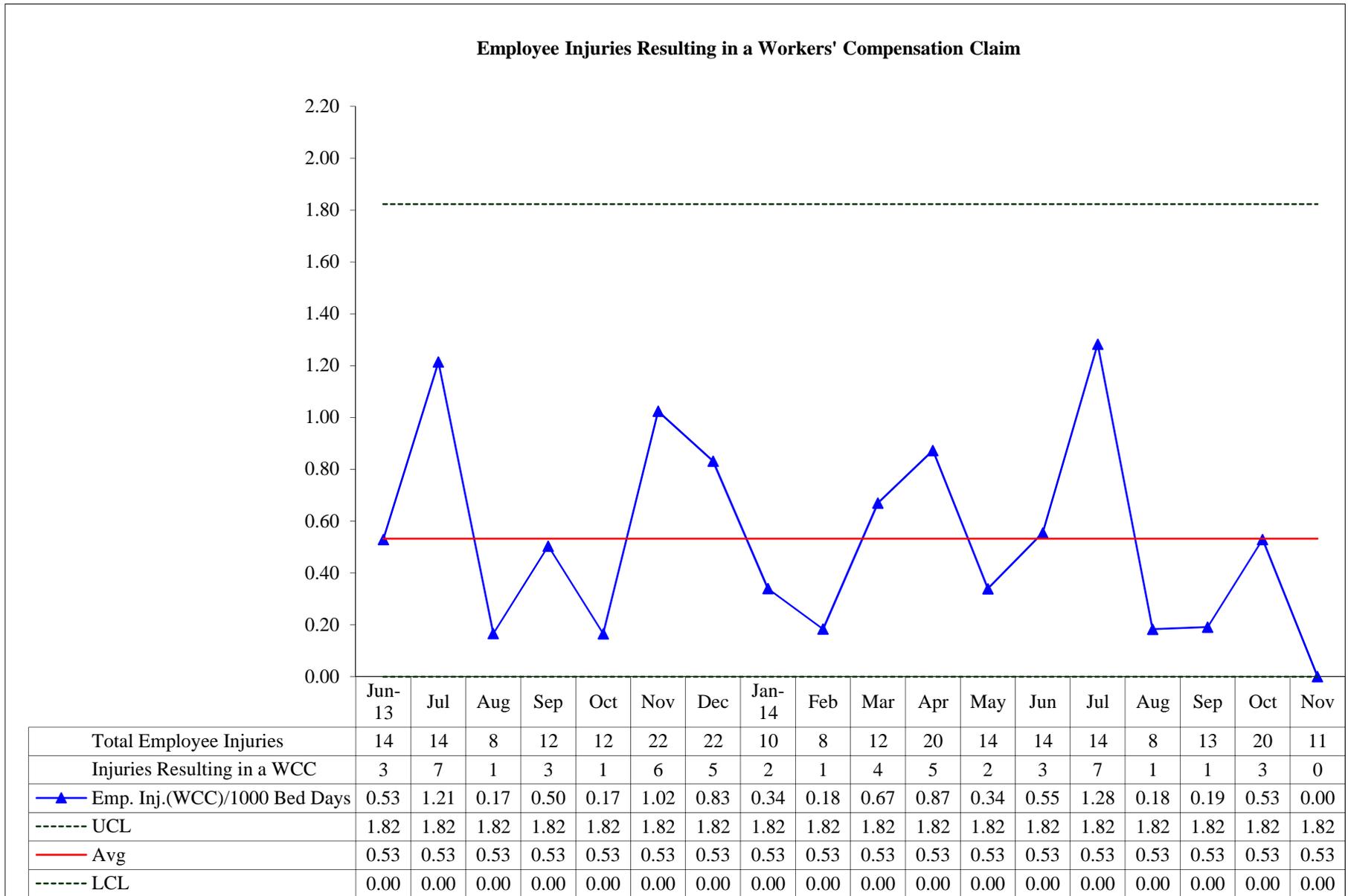
**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
Austin State Hospital**

Employee Injuries Resulting in a Workers' Compensation Claim



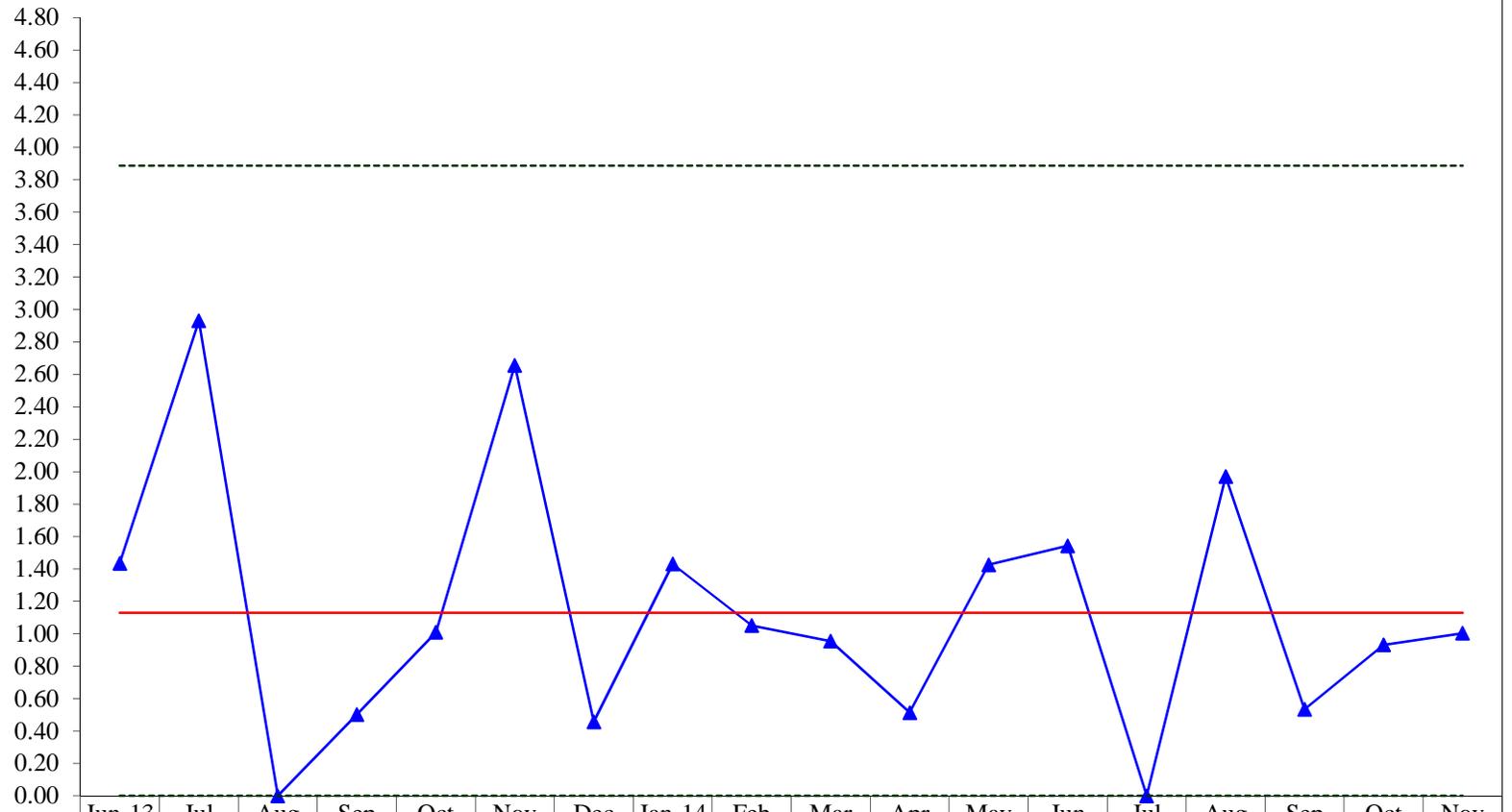
| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 11 | 12 | 18 | 8 | 13 | 7 | 13 | 14 | 15 | 12 | 10 | 12 | 8 | 22 | 10 | 15 | 12 | 12 | |
| Injuries Resulting in a WCC | 11 | 12 | 18 | 8 | 13 | 7 | 13 | 14 | 15 | 12 | 10 | 12 | 8 | 22 | 10 | 15 | 12 | 12 | |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 1.35 | 1.42 | 2.20 | 0.99 | 1.48 | 0.84 | 1.60 | 1.68 | 2.00 | 1.50 | 1.25 | 1.48 | 1.07 | 2.79 | 1.26 | 1.93 | 1.50 | 1.59 | |
| ----- UCL | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 | 3.15 |
| ----- Avg | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 | 1.55 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
Big Spring State Hospital**



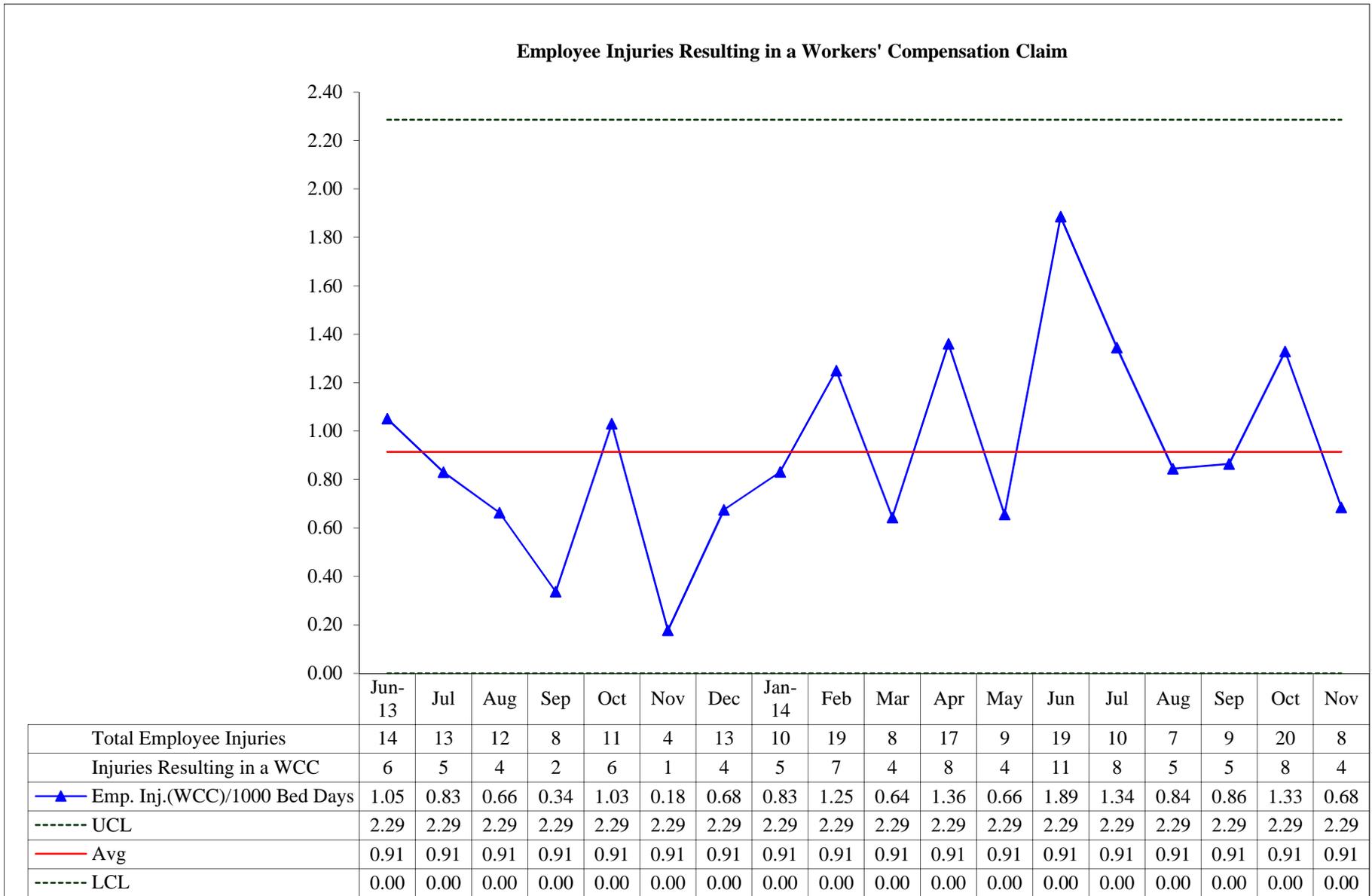
**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
El Paso Psychiatric Center**

Employee Injuries Resulting in a Workers' Compensation Claim



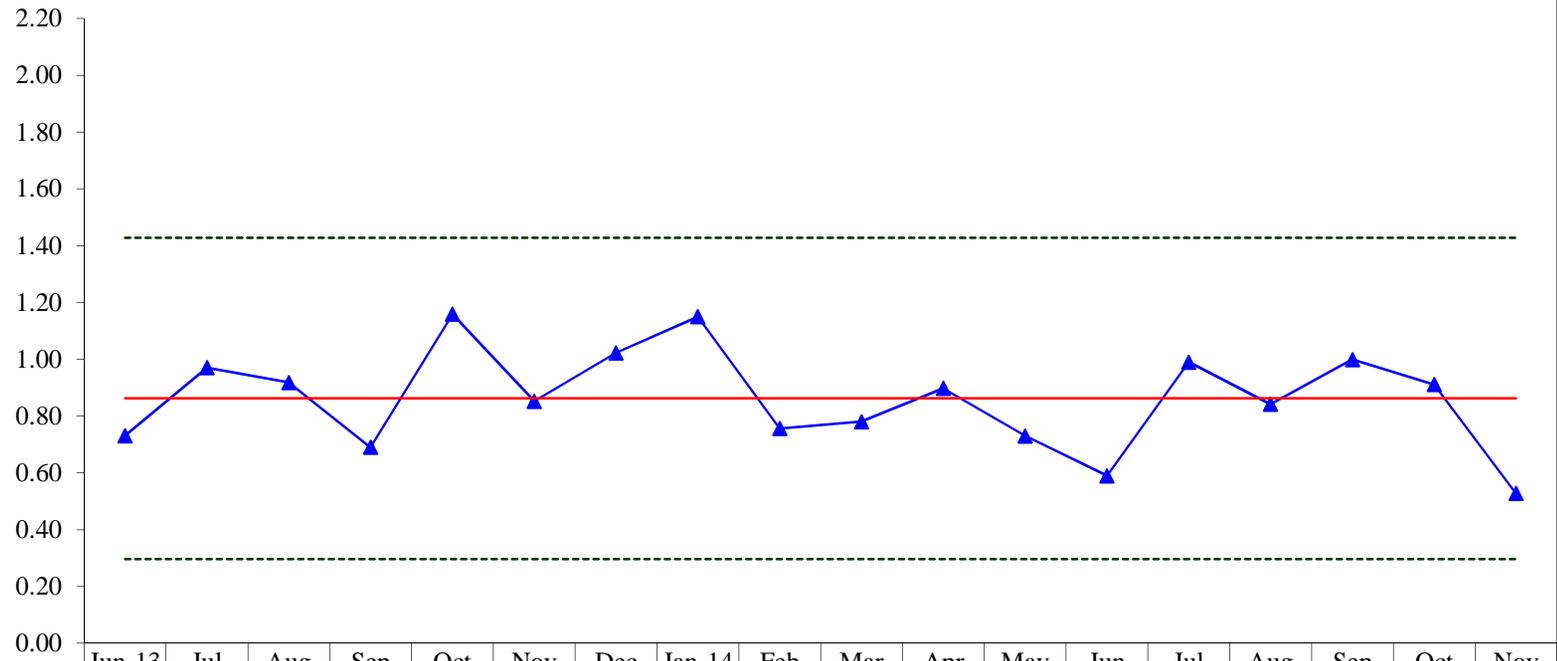
| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 4 | 12 | 2 | 4 | 6 | 6 | 2 | 5 | 4 | 5 | 4 | 3 | 4 | 3 | 8 | 5 | 2 | 7 |
| Injuries Resulting in a WCC | 3 | 6 | 0 | 1 | 2 | 5 | 1 | 3 | 2 | 2 | 1 | 3 | 3 | 0 | 4 | 1 | 2 | 2 |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 1.43 | 2.93 | 0.00 | 0.50 | 1.01 | 2.66 | 0.46 | 1.43 | 1.05 | 0.95 | 0.51 | 1.43 | 1.54 | 0.00 | 1.97 | 0.53 | 0.93 | 1.00 |
| ----- UCL | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 | 3.89 |
| ----- Avg | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 | 1.13 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
Kerrville State Hospital**



**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
North Texas State Hospital**

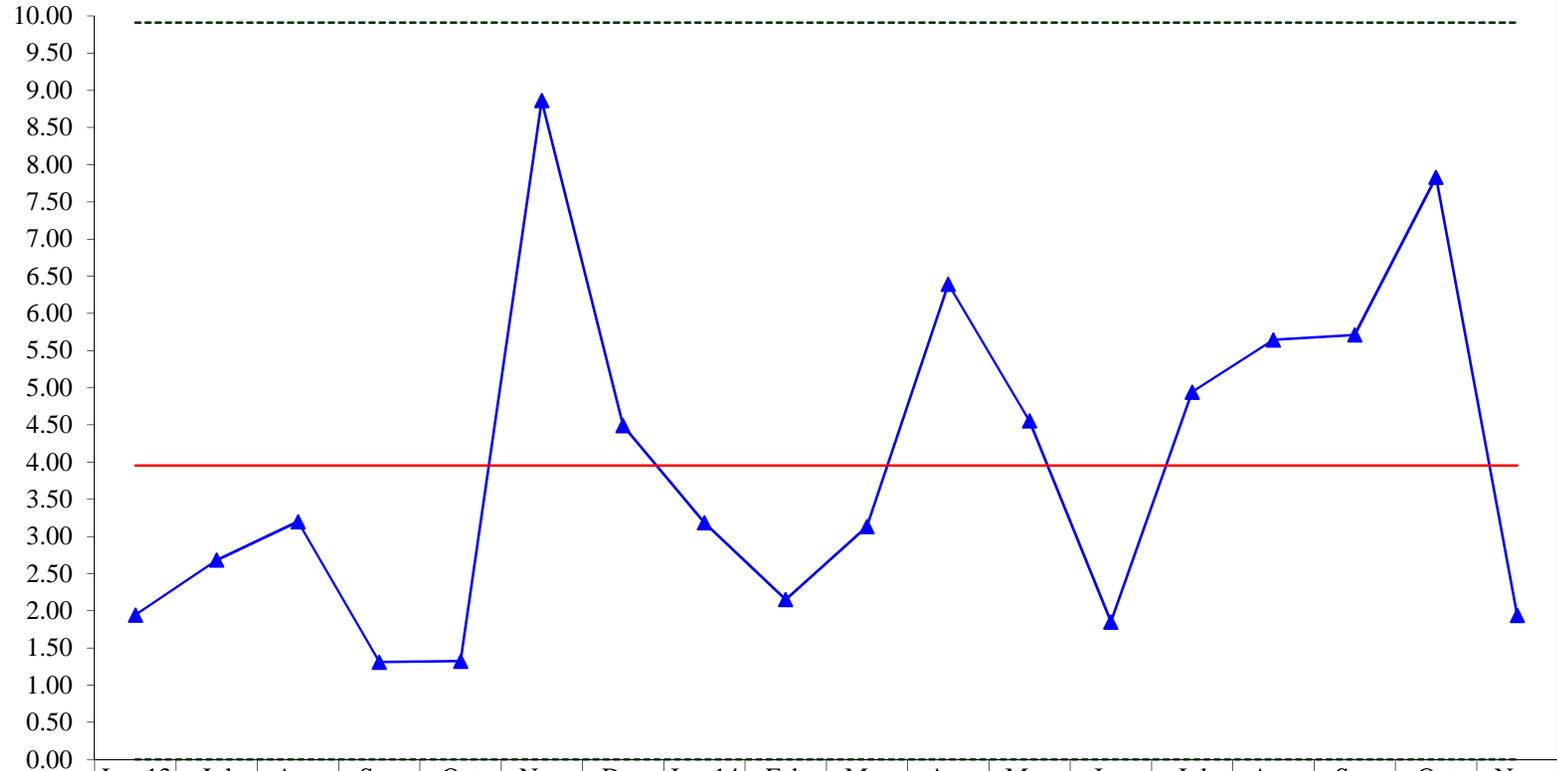
Employee Injuries Resulting in a Workers' Compensation Claim



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 30 | 46 | 50 | 41 | 44 | 35 | 37 | 31 | 35 | 32 | 45 | 39 | 38 | 42 | 26 | 44 | 28 | 20 |
| Injuries Resulting in a WCC | 13 | 18 | 17 | 12 | 20 | 14 | 17 | 19 | 11 | 13 | 15 | 13 | 10 | 17 | 15 | 17 | 16 | 9 |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 0.73 | 0.97 | 0.92 | 0.69 | 1.16 | 0.85 | 1.02 | 1.15 | 0.76 | 0.78 | 0.90 | 0.73 | 0.59 | 0.99 | 0.84 | 1.00 | 0.91 | 0.53 |
| ----- UCL | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 | 1.43 |
| — Avg | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 | 0.86 |
| ----- LCL | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 | 0.30 |

**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
Rio Grande State Center**

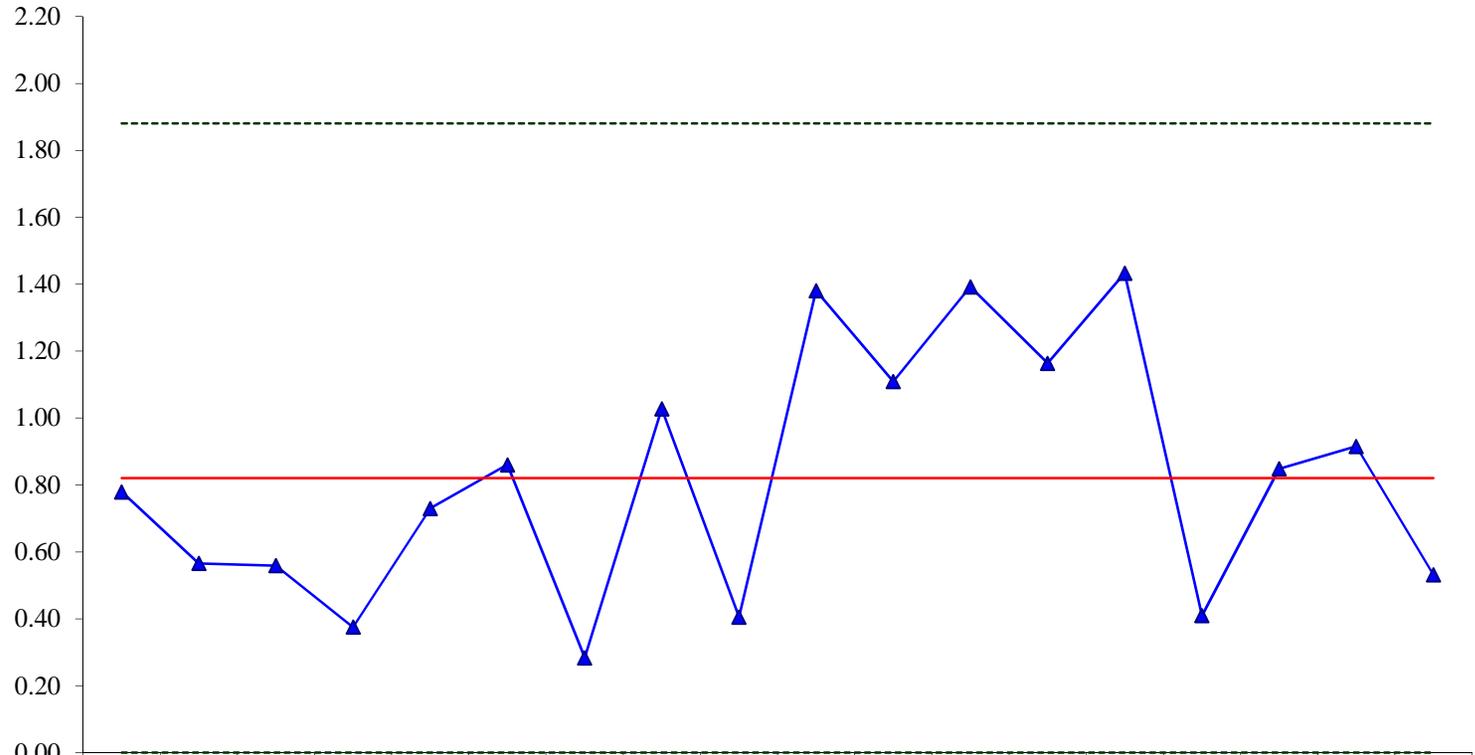
Employee Injuries Resulting in a Workers' Compensation Claim



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 12 | 18 | 27 | 23 | 26 | 36 | 25 | 29 | 15 | 15 | 39 | 23 | 22 | 24 | 22 | 24 | 31 | 16 |
| Injuries Resulting in a WCC | 3 | 4 | 5 | 2 | 2 | 13 | 7 | 5 | 3 | 5 | 10 | 7 | 3 | 8 | 9 | 9 | 13 | 3 |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 1.94 | 2.68 | 3.20 | 1.31 | 1.32 | 8.86 | 4.49 | 3.18 | 2.15 | 3.13 | 6.39 | 4.55 | 1.85 | 4.94 | 5.64 | 5.71 | 7.83 | 1.94 |
| ----- UCL | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 | 9.91 |
| ----- Avg | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 | 3.95 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
Rusk State Hospital

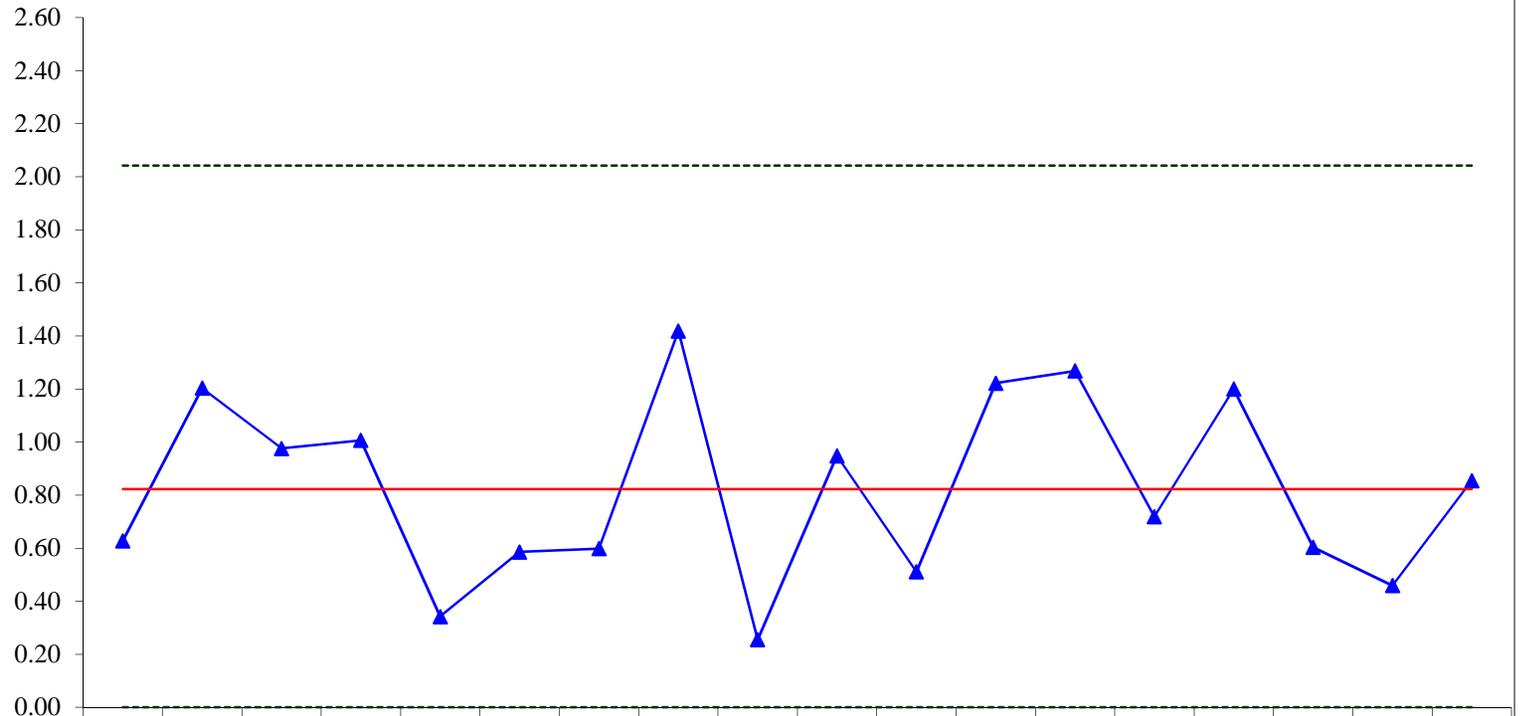
Employee Injuries Resulting in a Workers' Compensation Claim



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 41 | 28 | 35 | 38 | 24 | 21 | 32 | 29 | 21 | 34 | 52 | 62 | 49 | 48 | 43 | 40 | 31 | 46 |
| Injuries Resulting in a WCC | 8 | 6 | 6 | 4 | 8 | 9 | 3 | 11 | 4 | 14 | 11 | 15 | 12 | 14 | 4 | 8 | 9 | 5 |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 0.78 | 0.57 | 0.56 | 0.38 | 0.73 | 0.86 | 0.28 | 1.03 | 0.41 | 1.38 | 1.11 | 1.39 | 1.16 | 1.43 | 0.41 | 0.85 | 0.92 | 0.53 |
| ----- UCL | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 | 1.88 |
| — Avg | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
San Antonio State Hospital

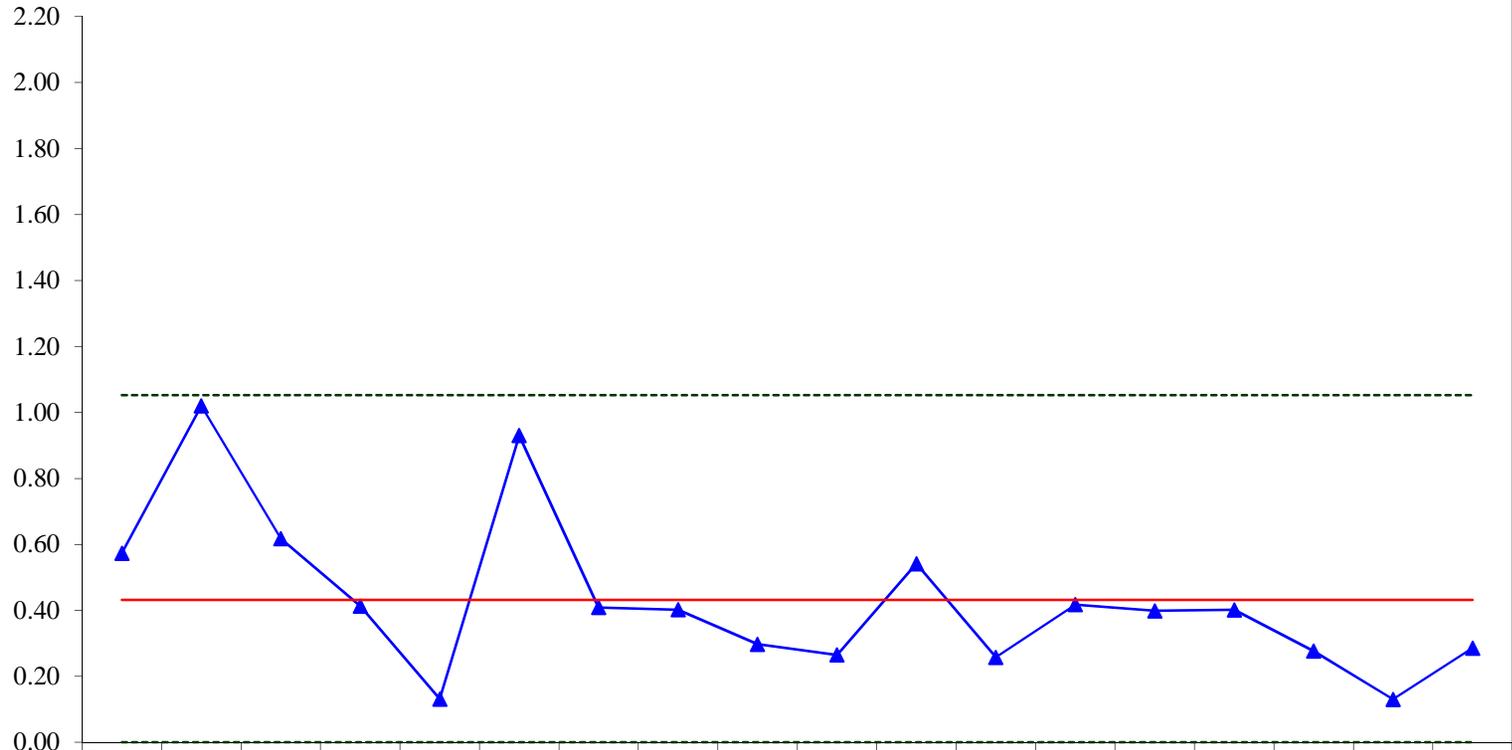
Employee Injuries Resulting in a Workers' Compensation Claim



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 23 | 24 | 29 | 27 | 23 | 30 | 16 | 30 | 18 | 30 | 25 | 36 | 29 | 40 | 31 | 25 | 35 | 28 |
| Injuries Resulting in a WCC | 5 | 10 | 8 | 8 | 3 | 5 | 5 | 12 | 2 | 8 | 4 | 10 | 10 | 6 | 10 | 5 | 4 | 7 |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 0.63 | 1.20 | 0.98 | 1.01 | 0.34 | 0.59 | 0.60 | 1.42 | 0.26 | 0.95 | 0.51 | 1.22 | 1.27 | 0.72 | 1.20 | 0.60 | 0.46 | 0.85 |
| ----- UCL | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 | 2.04 |
| ----- Avg | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 | 0.82 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
Terrell State Hospital**

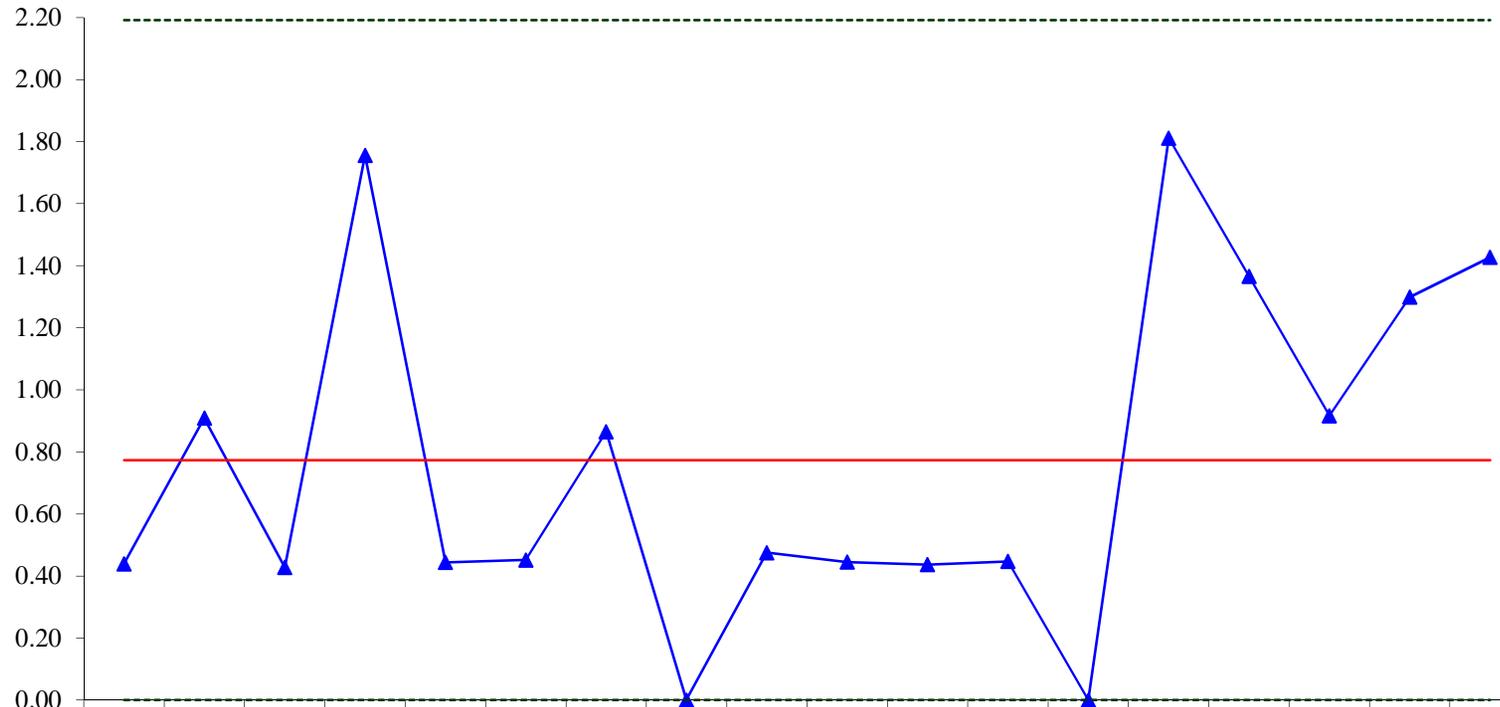
Employee Injuries Resulting in a Workers' Compensation Claim



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 28 | 36 | 38 | 31 | 33 | 23 | 21 | 17 | 36 | 22 | 29 | 19 | 25 | 37 | 25 | 16 | 12 | 12 |
| Injuries Resulting in a WCC | 5 | 9 | 5 | 3 | 1 | 7 | 3 | 3 | 2 | 2 | 4 | 2 | 3 | 3 | 3 | 2 | 1 | 2 |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 0.57 | 1.02 | 0.62 | 0.41 | 0.13 | 0.93 | 0.41 | 0.40 | 0.30 | 0.27 | 0.54 | 0.26 | 0.42 | 0.40 | 0.40 | 0.28 | 0.13 | 0.29 |
| ----- UCL | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 | 1.05 |
| ----- Avg | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 | 0.43 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
Waco Center for Youth**

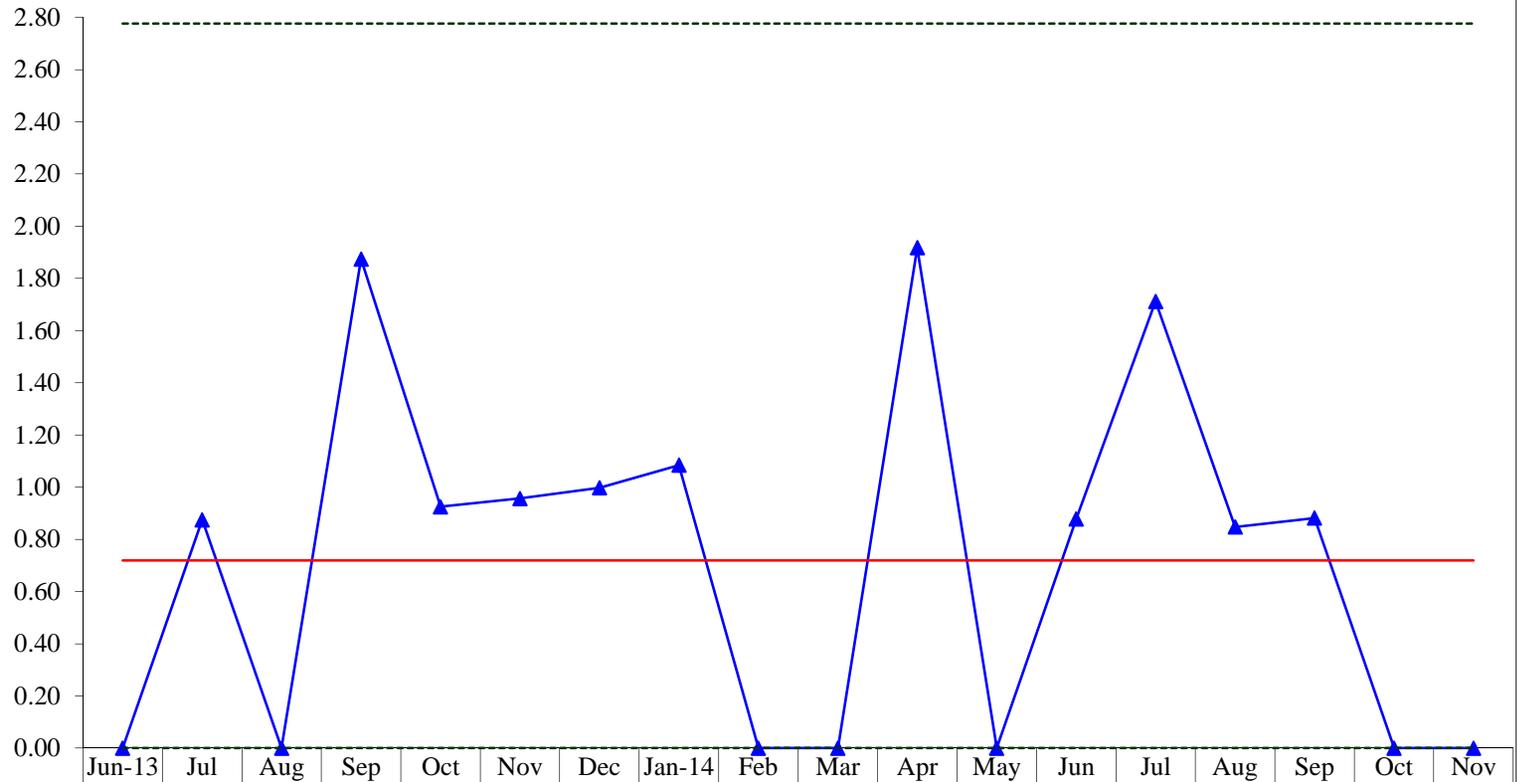
Employee Injuries Resulting in a Workers' Compensation Claim



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 4 | 5 | 4 | 10 | 5 | 4 | 6 | 0 | 3 | 3 | 2 | 6 | 4 | 6 | 6 | 9 | 8 | 4 |
| Injuries Resulting in a WCC | 1 | 2 | 1 | 4 | 1 | 1 | 2 | 0 | 1 | 1 | 1 | 1 | 0 | 4 | 3 | 2 | 3 | 3 |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 0.44 | 0.91 | 0.43 | 1.76 | 0.44 | 0.45 | 0.87 | 0.00 | 0.48 | 0.44 | 0.44 | 0.45 | 0.00 | 1.81 | 1.37 | 0.92 | 1.30 | 1.43 |
| ----- UCL | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 | 2.19 |
| ----- Avg | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 | 0.77 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**CQM - 3 Employee Injuries Resulting in a Workers' Compensation Claim
Texas Center for Infectious Disease**

Employee Injuries Resulting in a Workers' Compensation Claim



| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------------------------|--------|------|------|------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| Total Employee Injuries | 0 | 1 | 0 | 2 | 3 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 2 | 4 | 2 | 0 |
| Injuries Resulting in a WCC | 0 | 1 | 0 | 2 | 1 | 1 | 1 | 1 | 0 | 0 | 2 | 0 | 1 | 2 | 1 | 1 | 0 | 0 |
| ▲ Emp. Inj.(WCC)/1000 Bed Days | 0.00 | 0.87 | 0.00 | 1.87 | 0.93 | 0.96 | 1.00 | 1.08 | 0.00 | 0.00 | 1.92 | 0.00 | 0.88 | 1.71 | 0.85 | 0.88 | 0.00 | 0.00 |
| ----- UCL | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 | 2.78 |
| — Avg | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 | 0.72 |
| ----- LCL | 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 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COM-4

Measure: Frequency of Patient Restraint (Mechanical & Physical Holds), per 1,000 Bed Days

Timeframe: Monthly

Definition

The state hospital rate of patient restraint incidents as documented on the MHRS 7-4 (or approved substitute) per 1,000 bed days.

Data Source

ODS Ad Hoc Report (Restraint and Seclusion Report)

CARE Reports HC022175 & HC022185 (Unduplicated Clients Days by Account Units)

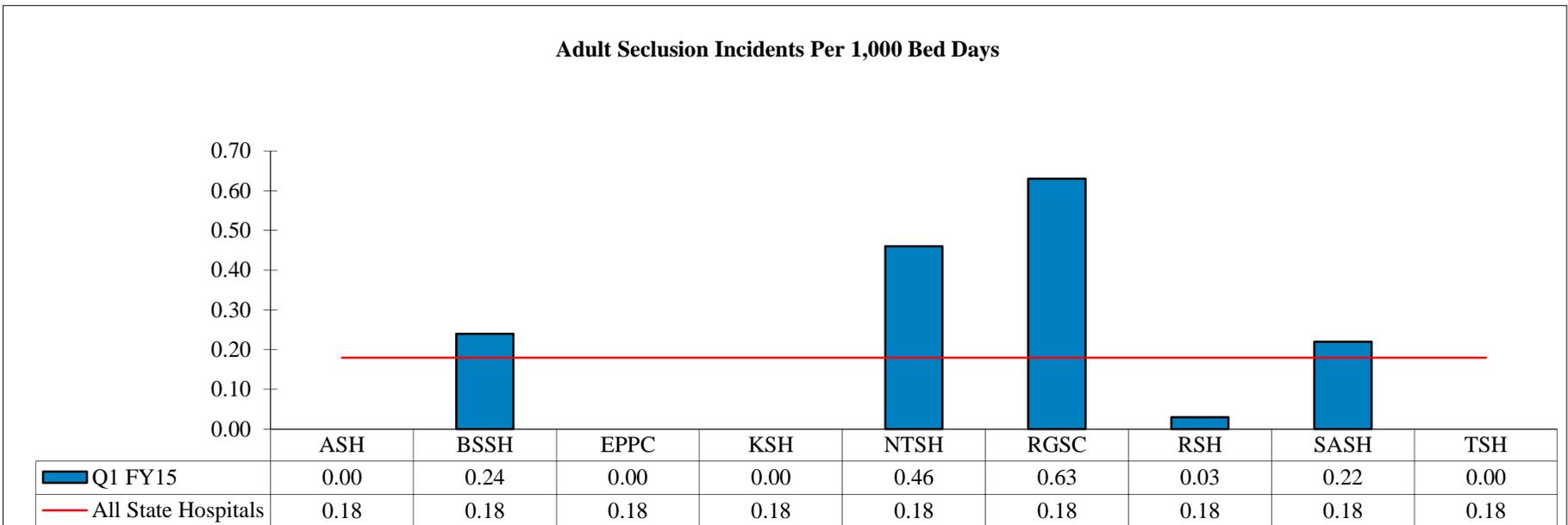
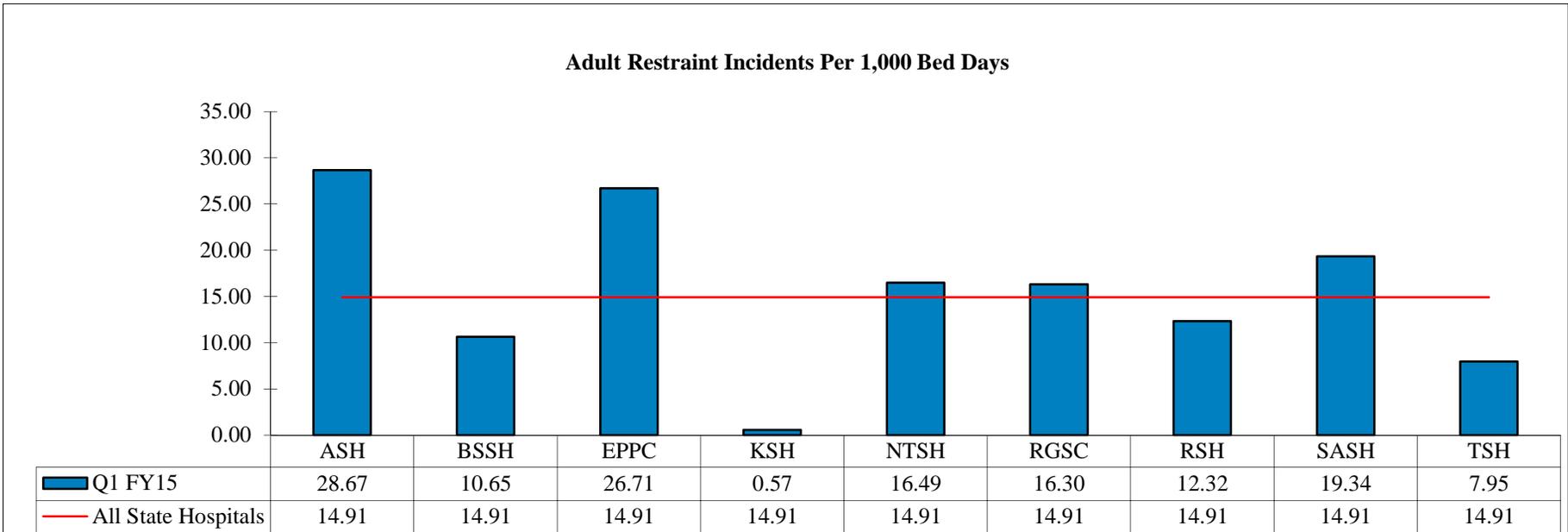
Data Display and Chart Description

Table shows quarterly numbers of incidents, numbers of persons and total hours for restraint and seclusions and bed days for children, adolescents and adults for individual state hospitals and system-wide. Table shows quarterly restraints that were less than 5 minutes for individual state hospitals and system-wide. Charts shows monthly data points of restraint by type (personal or mechanical) for individual state hospitals and system-wide.

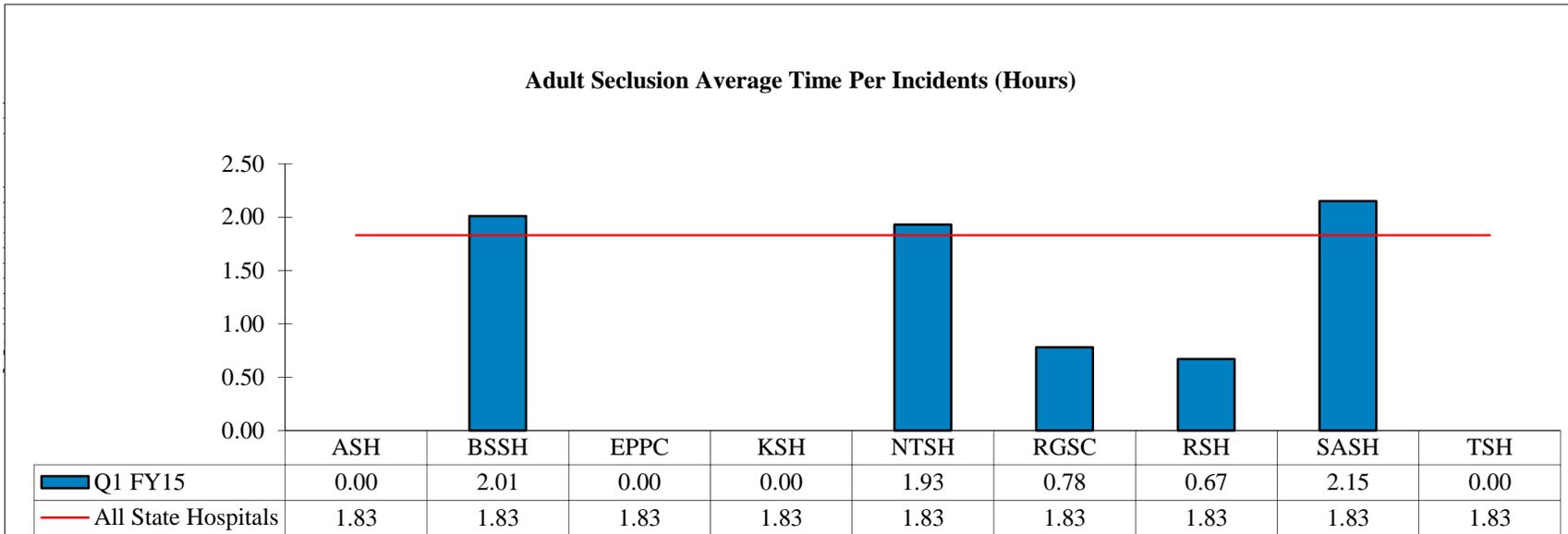
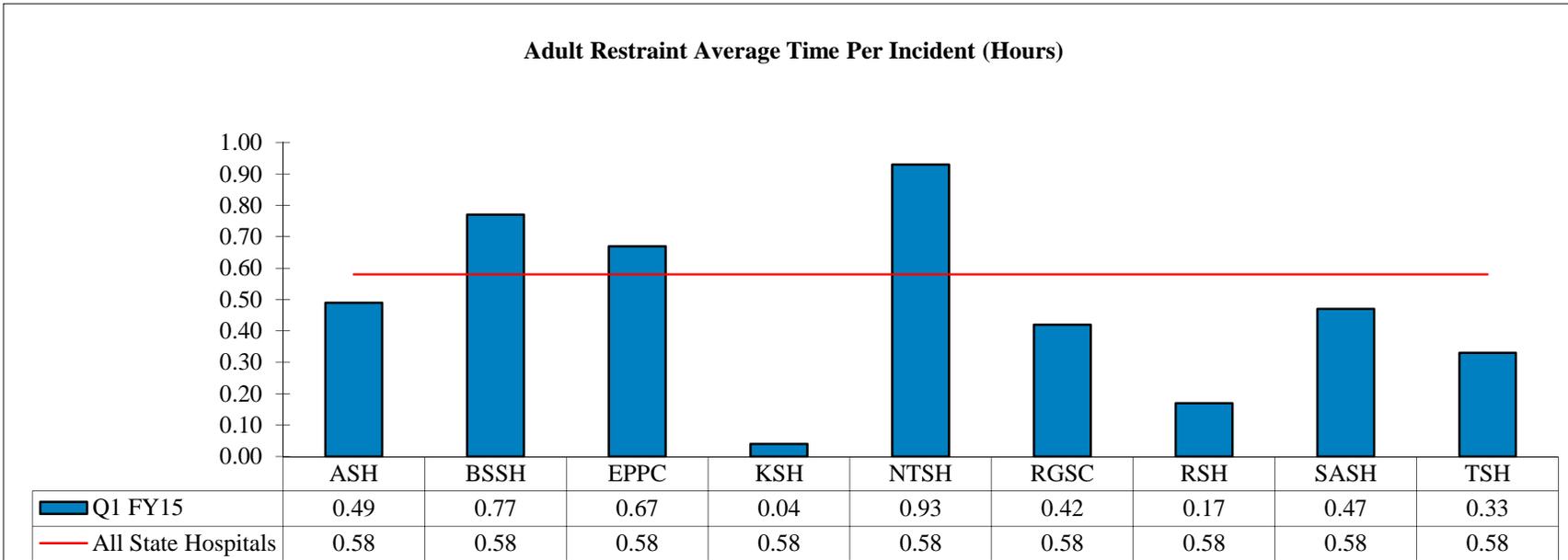
Purpose

Measure patient restraints by 1,000 bed days.

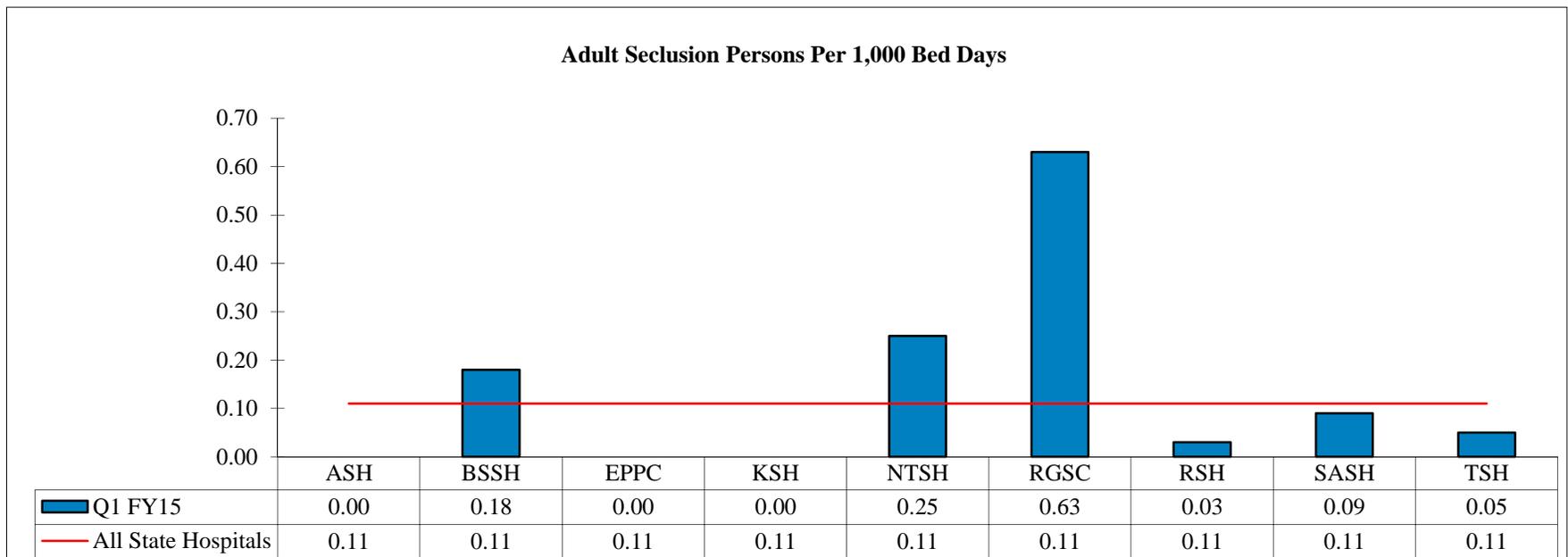
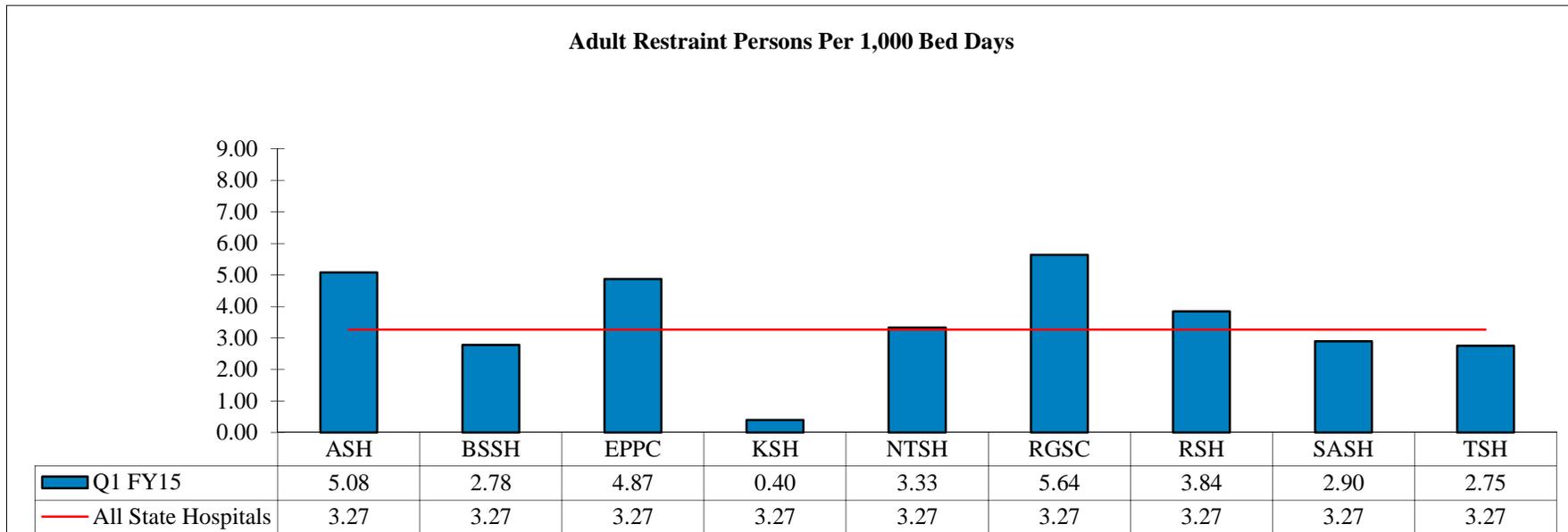
CQM - 4 Restraint and Seclusion Data
All State MH Hospitals



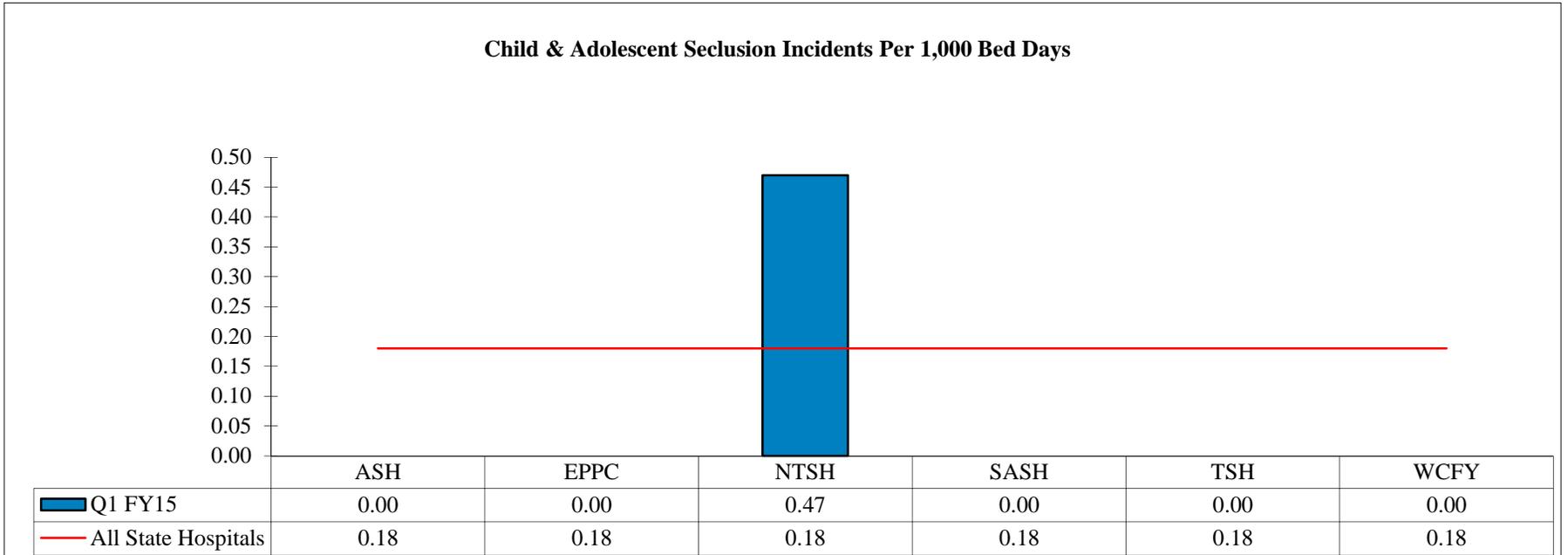
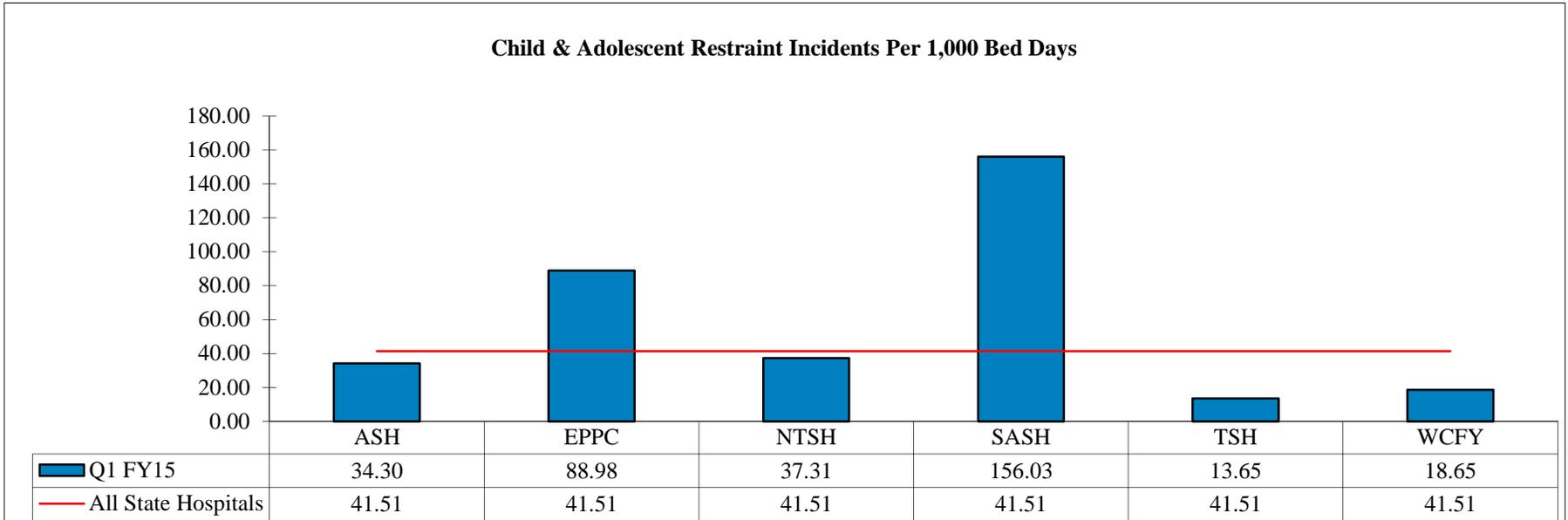
CQM - 4 Restraint and Seclusion Data
All State MH Hospitals



CQM - 4 Restraint and Seclusion Data
All State MH Hospitals

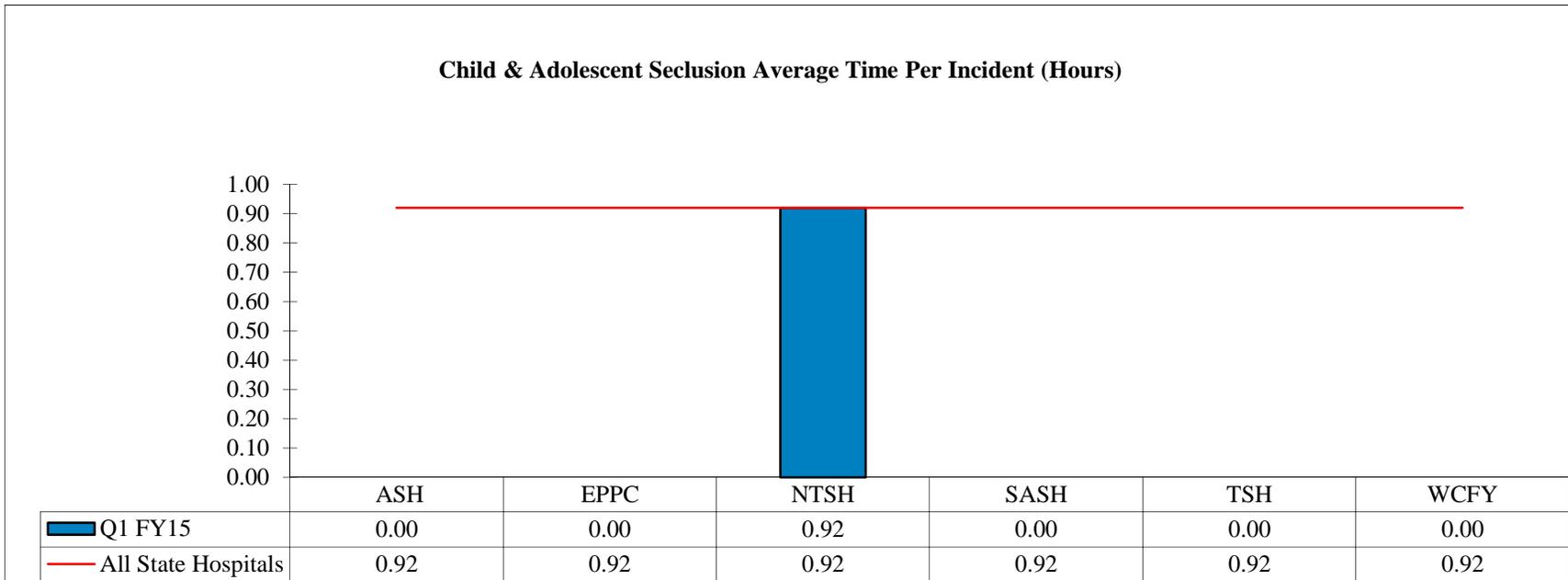
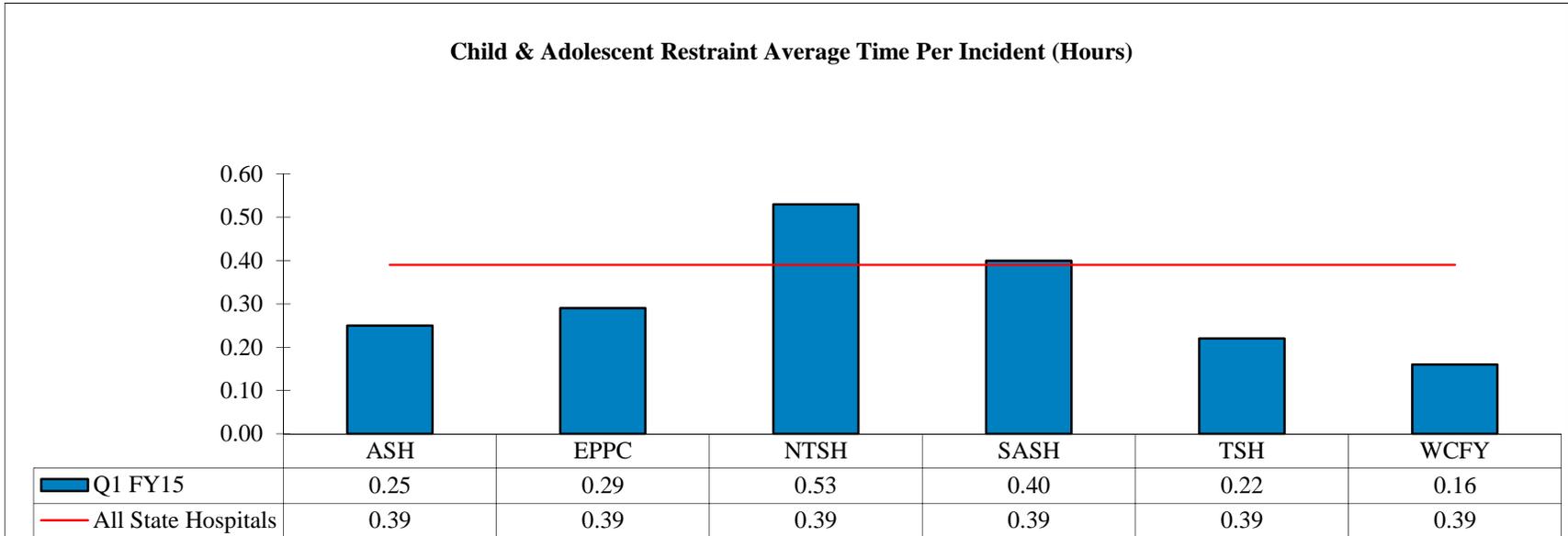


CQM - 4 Restraint and Seclusion Data
All State MH Hospitals

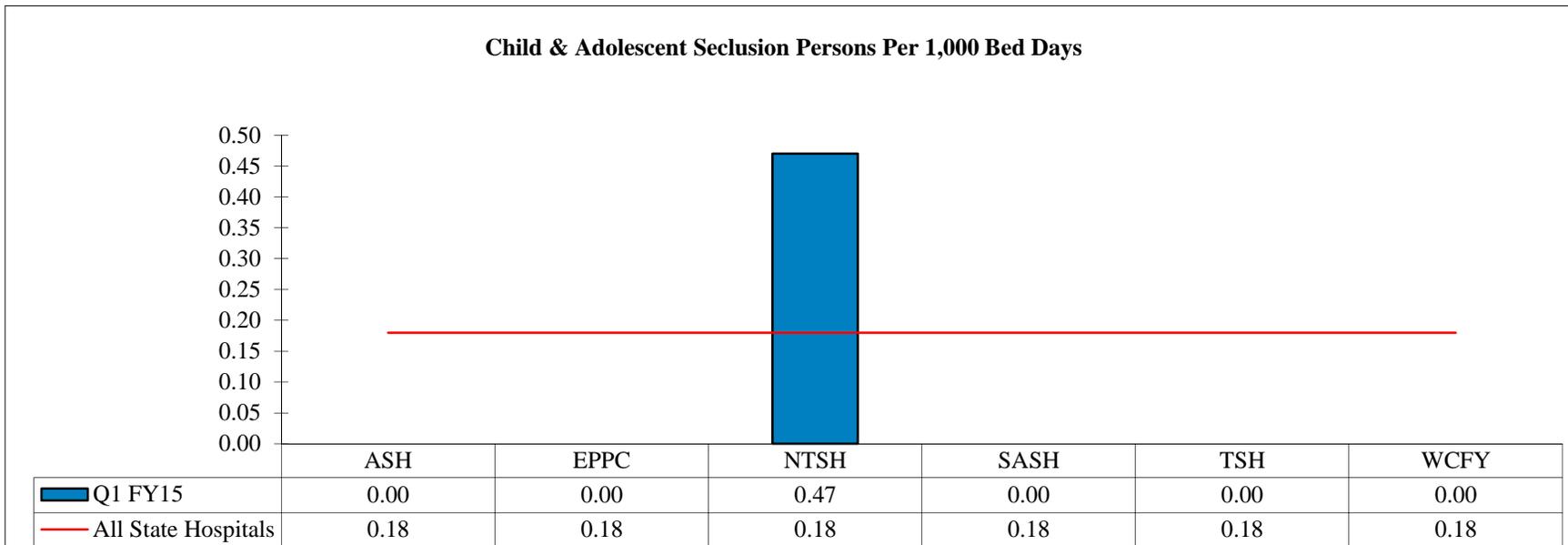
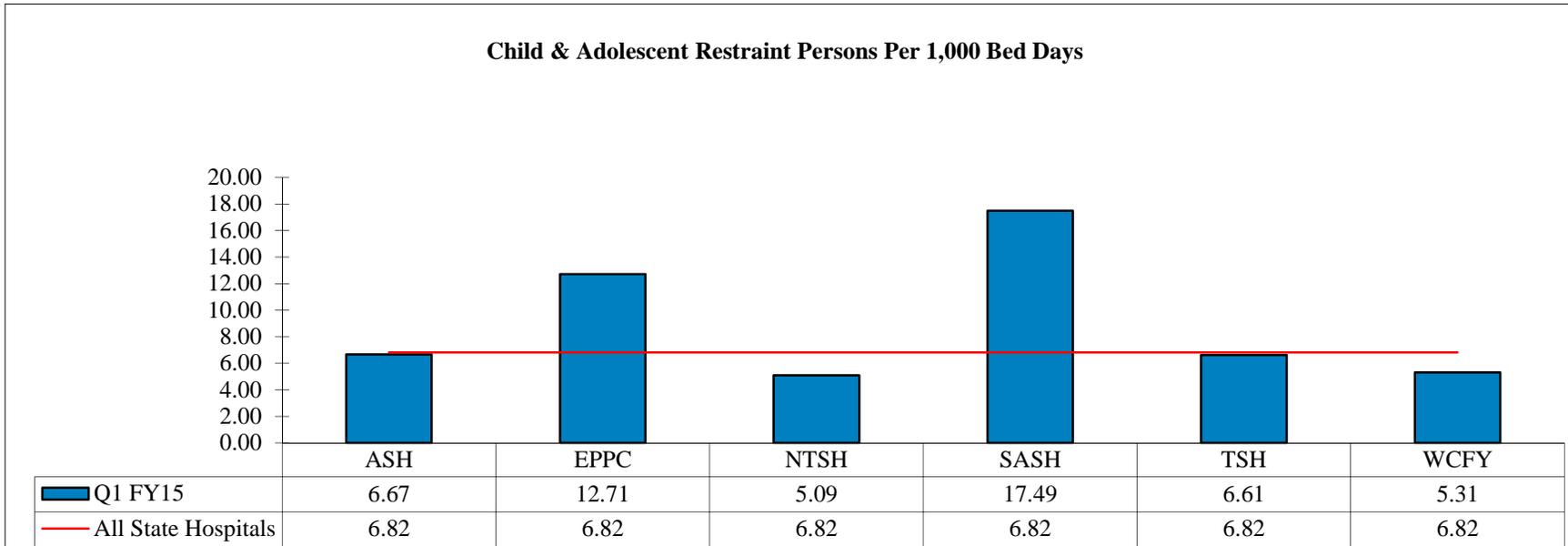


Source: CARE Reports HC022175/85

CQM - 4 Restraint and Seclusion Data
All State MH Hospitals



CQM - 4 Restraint and Seclusion Data
All State MH Hospitals



**CQM - 4 Restraint and Seclusion Data
All State MH Hospitals - FY15**

Fiscal Year 2015

| | Number of Incidents | | | | Number of Persons | | | | Total Hours for Quarter | | | |
|-------------------------------------|---------------------|----|----|----|-------------------|----|----|----|-------------------------|----|----|----|
| | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 |
| Austin State Hospital | | | | | | | | | | | | |
| Child/Adolescent Bed Days | 2,099 | | | | 2,099 | | | | 2,099 | | | |
| Bed Days in Quarter-All Other Units | 21,242 | | | | 21,242 | | | | 21,242 | | | |
| Restraint Involving Children | 0 | | | | 0 | | | | 0.0 | | | |
| Restraint Involving Adolescents | 72 | | | | 14 | | | | 17.8 | | | |
| Restraint Involving Adults | 609 | | | | 108 | | | | 301.3 | | | |
| Seclusion Involving Children | 0 | | | | 0 | | | | 0.0 | | | |
| Seclusion Involving Adolescents | 0 | | | | 0 | | | | 0.0 | | | |
| Seclusion Involving Adults | 0 | | | | 0 | | | | 0.0 | | | |
| Big Spring State Hospital | | | | | | | | | | | | |
| Bed Days in Quarter | 16,524 | | | | 16,524 | | | | 16,524 | | | |
| Restraint Involving Adults | 176 | | | | 46 | | | | 136.3 | | | |
| Seclusion Involving Adults | 4 | | | | 3 | | | | 8.1 | | | |
| El Paso Psychiatric Center | | | | | | | | | | | | |
| Child/Adolescent Bed Days | 472 | | | | 472 | | | | 472 | | | |
| Bed Days in Quarter-All Other Units | 5,542 | | | | 5,542 | | | | 5,542 | | | |
| Restraint Involving Children | 0 | | | | 0 | | | | 0.0 | | | |
| Restraint Involving Adolescents | 42 | | | | 6 | | | | 12.2 | | | |
| Restraint Involving Adults | 148 | | | | 27 | | | | 98.9 | | | |
| Seclusion Involving Children | 0 | | | | 0 | | | | 0.0 | | | |
| Seclusion Involving Adolescents | 0 | | | | 0 | | | | 0.0 | | | |
| Seclusion Involving Adults | 0 | | | | 0 | | | | 0.0 | | | |
| Kerrville State Hospital | | | | | | | | | | | | |
| Bed Days in Quarter | 17,643 | | | | 17,643 | | | | 17,643 | | | |
| Restraint Involving Adults | 10 | | | | 7 | | | | 0.43 | | | |
| Seclusion Involving Adults | 0 | | | | 0 | | | | 0.0 | | | |

CQM - 4 Restraint and Seclusion Data
All State MH Hospitals - FY15

Fiscal Year 2015

| | Number of Incidents | | | | Number of Persons | | | | Total Hours for Quarter | | | |
|--------------------------------------|---------------------|----|----|----|-------------------|----|----|----|-------------------------|----|----|----|
| | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 |
| North Texas State Hospital | | | | | | | | | | | | |
| Child/Adolescent Bed Days | 8,443 | | | | 8,443 | | | | 8,443 | | | |
| Bed Days in Quarter-All Other Units | 43,188 | | | | 43,188 | | | | 43,188 | | | |
| Restraint Involving Children | 0 | | | | 0 | | | | 0.0 | | | |
| Restraint Involving Adolescents | 315 | | | | 43 | | | | 167.2 | | | |
| Restraint Involving Adults | 712 | | | | 144 | | | | 659.3 | | | |
| Seclusion Involving Children | 0 | | | | 0 | | | | 0.0 | | | |
| Seclusion Involving Adolescents | 4 | | | | 4 | | | | 3.7 | | | |
| Seclusion Involving Adults | 20 | | | | 11 | | | | 38.5 | | | |
| Rio Grande State Center | | | | | | | | | | | | |
| Bed Days in Quarter | 4,784 | | | | 4,784 | | | | 4,784 | | | |
| Restraint Involving Adults | 78 | | | | 27 | | | | 33.1 | | | |
| Seclusion Involving Adults | 3 | | | | 3 | | | | 2.3 | | | |
| Rusk State Hospital | | | | | | | | | | | | |
| Bed Days in Quarter | 28,653 | | | | 28,653 | | | | 28,653 | | | |
| Restraint Involving Adults | 353 | | | | 110 | | | | 59.7 | | | |
| Seclusion Involving Adults | 1 | | | | 1 | | | | 0.7 | | | |
| San Antonio State Hospital | | | | | | | | | | | | |
| Child/Adolescent Bed Days in Quarter | 2,115 | | | | 2,115 | | | | 2,115 | | | |
| Bed Days in Quarter-All Other Units | 23,065 | | | | 23,065 | | | | 23,065 | | | |
| Restraint Involving Adolescents | 330 | | | | 37 | | | | 133.2 | | | |
| Restraint Involving Adults | 446 | | | | 67 | | | | 209.0 | | | |
| Seclusion Involving Adolescents | 0 | | | | 0 | | | | 0.0 | | | |
| Seclusion Involving Adults | 5 | | | | 2 | | | | 10.8 | | | |

CQM - 4 Restraint and Seclusion Data
All State MH Hospitals - FY15

Fiscal Year 2015

| | Number of Incidents | | | | Number of Persons | | | | Total Hours for Quarter | | | |
|--------------------------------------|---------------------|----|----|----|-------------------|----|----|----|-------------------------|-----|-----|-----|
| | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 |
| Terrell State Hospital | | | | | | | | | | | | |
| Child/Adolescent Bed Days in Quarter | 2,271 | | | | 2,271 | | | | 2,271 | | | |
| Bed Days in Quarter-All Other Units | 19,622 | | | | 19,622 | | | | 19,622 | | | |
| Restraint Involving Children | 0 | | | | 0 | | | | 0.0 | | | |
| Restraint Involving Adolescents | 31 | | | | 15 | | | | 6.9 | | | |
| Restraint Involving Adults | 156 | | | | 54 | | | | 51.4 | | | |
| Seclusion Involving Children | 0 | | | | 0 | | | | 0.0 | | | |
| Seclusion Involving Adolescents | 0 | | | | 0 | | | | 0.0 | | | |
| Seclusion Involving Adults | 0 | | | | 0 | | | | 0.0 | | | |
| Waco Center For Youth | | | | | | | | | | | | |
| Child/Adolescent Bed Days in Quarter | 6,594 | | | | 6,594 | | | | 6,594 | | | |
| Restraint Involving Adolescents | 123 | | | | 35 | | | | 20.0 | | | |
| Seclusion Involving Adolescents | 0 | | | | 0 | | | | 0.0 | | | |
| All State MH Hospitals | | | | | | | | | | | | |
| Child/Adolescent Bed Days | 21,994 | 0 | 0 | 0 | 21,994 | 0 | 0 | 0 | 21,994 | 0 | 0 | 0 |
| Bed Days in Quarter-All Other Units | 180,263 | 0 | 0 | 0 | 180,263 | 0 | 0 | 0 | 180,263 | 0 | 0 | 0 |
| Restraint Involving Children | 0 | | | | 0 | | | | 0.0 | | | |
| Restraint Involving Adolescents | 913 | | | | 150 | | | | 357 | | | |
| Restraint Involving Adults | 2,688 | | | | 590 | | | | 1,549.4 | | | |
| Seclusion Involving Children | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Seclusion Involving Adolescents | 4 | 0 | 0 | 0 | 4 | 0 | 0 | 0 | 3.7 | 0.0 | 0.0 | 0.0 |
| Seclusion Involving Adults | 33 | 0 | 0 | 0 | 20 | 0 | 0 | 0 | 60.3 | 0.0 | 0.0 | 0.0 |

**CQM - 4 Restraint and Seclusion Data
All State MH Hospitals**

Fiscal Year 2015

| | Number of Incidents | | | | Number of Persons | | | |
|-------------------------------------|---------------------|----|----|----|-------------------|----|----|----|
| | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 |
| Austin State Hospital | | | | | | | | |
| < 5 Restraint Involving Children | 0 | | | | 0 | | | |
| < 5 Restraint Involving Adolescents | 19 | | | | 9 | | | |
| < 5 Restraint Involving Adults | 385 | | | | 101 | | | |
| Big Spring State Hospital | | | | | | | | |
| < 5 Restraint Involving Adults | 76 | | | | 36 | | | |
| El Paso Psychiatric Center | | | | | | | | |
| < 5 Restraint Involving Children | 0 | | | | 0 | | | |
| < 5 Restraint Involving Adolescents | 16 | | | | 5 | | | |
| < 5 Restraint Involving Adults | 81 | | | | 25 | | | |
| Kerrville State Hospital | | | | | | | | |
| < 5 Restraint Involving Adults | 8 | | | | 7 | | | |
| North Texas State Hospital | | | | | | | | |
| < 5 Restraint Involving Children | 0 | | | | 0 | | | |
| < 5 Restraint Involving Adolescents | 68 | | | | 24 | | | |
| < 5 Restraint Involving Adults | 306 | | | | 118 | | | |
| Rio Grande State Center | | | | | | | | |
| < 5 Restraint Involving Adults | 13 | | | | 10 | | | |
| Rusk State Hospital | | | | | | | | |
| < 5 Restraint Involving Adults | 281 | | | | 108 | | | |
| San Antonio State Hospital | | | | | | | | |
| < 5 Restraint Involving Adolescents | 150 | | | | 33 | | | |
| < 5 Restraint Involving Adults | 151 | | | | 47 | | | |
| Terrell State Hospital | | | | | | | | |
| < 5 Restraint Involving Children | 0 | | | | 0 | | | |
| < 5 Restraint Involving Adolescents | 10 | | | | 8 | | | |
| < 5 Restraint Involving Adults | 103 | | | | 47 | | | |
| Waco Center For Youth | | | | | | | | |
| < 5 Restraint Involving Adolescents | 59 | | | | 26 | | | |
| All State MH Hospitals | | | | | | | | |
| < 5 Restraint Involving Children | 0 | | | | 0 | | | |
| < 5 Restraint Involving Adolescents | 322 | | | | 105 | | | |
| < 5 Restraint Involving Adults | 1,404 | | | | 499 | | | |

**CQM - 4 Restraint and Seclusion Data
All State MH Hospitals**

Fiscal Year 2015

| | Number of Incidents | | | | FY Total |
|-----------------------------------|---------------------|----|----|----|----------|
| | Q1 | Q2 | Q3 | Q4 | |
| Austin State Hospital | | | | | |
| Personal Restraint | 506 | | | | 506 |
| Mechanical Restraint | 175 | | | | 175 |
| Seclusion | 0 | | | | 0 |
| Big Spring State Hospital | | | | | |
| Personal Restraint | 105 | | | | 105 |
| Mechanical Restraint | 71 | | | | 71 |
| Seclusion | 4 | | | | 4 |
| El Paso Psychiatric Center | | | | | |
| Personal Restraint | 129 | | | | 129 |
| Mechanical Restraint | 61 | | | | 61 |
| Seclusion | 0 | | | | 0 |
| Kerrville State Hospital | | | | | |
| Personal Restraint | 9 | | | | 9 |
| Mechanical Restraint | 1 | | | | 1 |
| Seclusion | 0 | | | | 0 |
| North Texas State Hospital | | | | | |
| Personal Restraint | 646 | | | | 646 |
| Mechanical Restraint | 381 | | | | 381 |
| Seclusion | 24 | | | | 24 |
| Rio Grande State Center | | | | | |
| Personal Restraint | 61 | | | | 61 |
| Mechanical Restraint | 17 | | | | 17 |
| Seclusion | 3 | | | | 3 |
| Rusk State Hospital | | | | | |
| Personal Restraint | 304 | | | | 304 |
| Mechanical Restraint | 49 | | | | 49 |
| Seclusion | 1 | | | | 1 |
| San Antonio State Hospital | | | | | |
| Personal Restraint | 491 | | | | 491 |
| Mechanical Restraint | 285 | | | | 285 |
| Seclusion | 5 | | | | 5 |

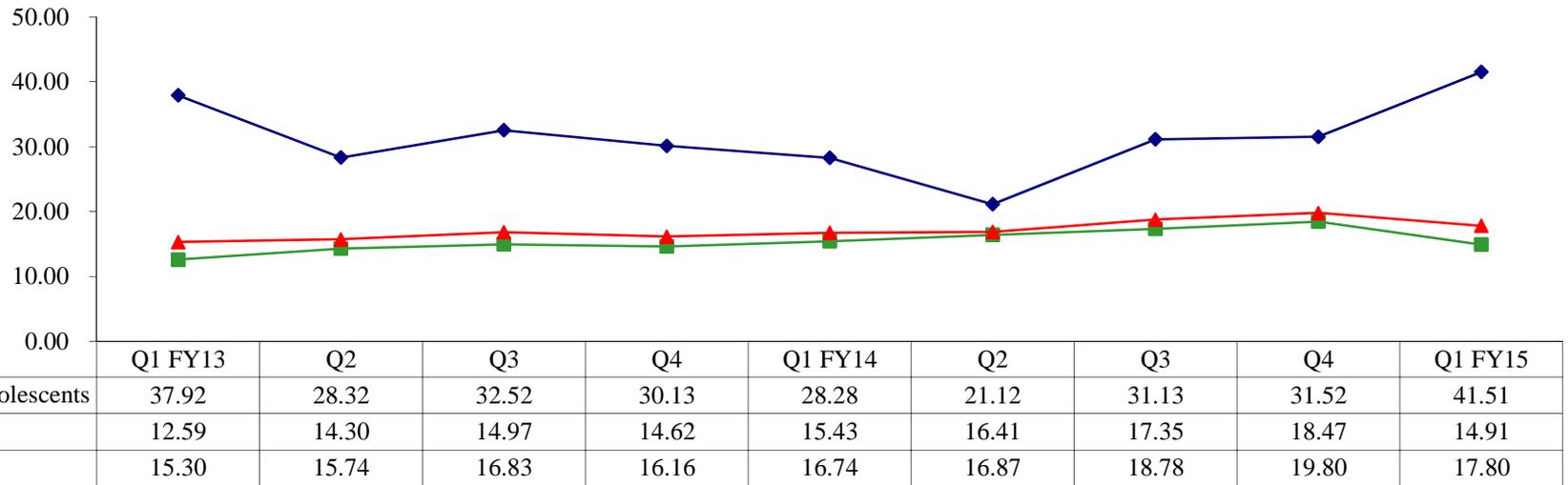
**CQM - 4 Restraint and Seclusion Data
All State MH Hospitals**

Fiscal Year 2015

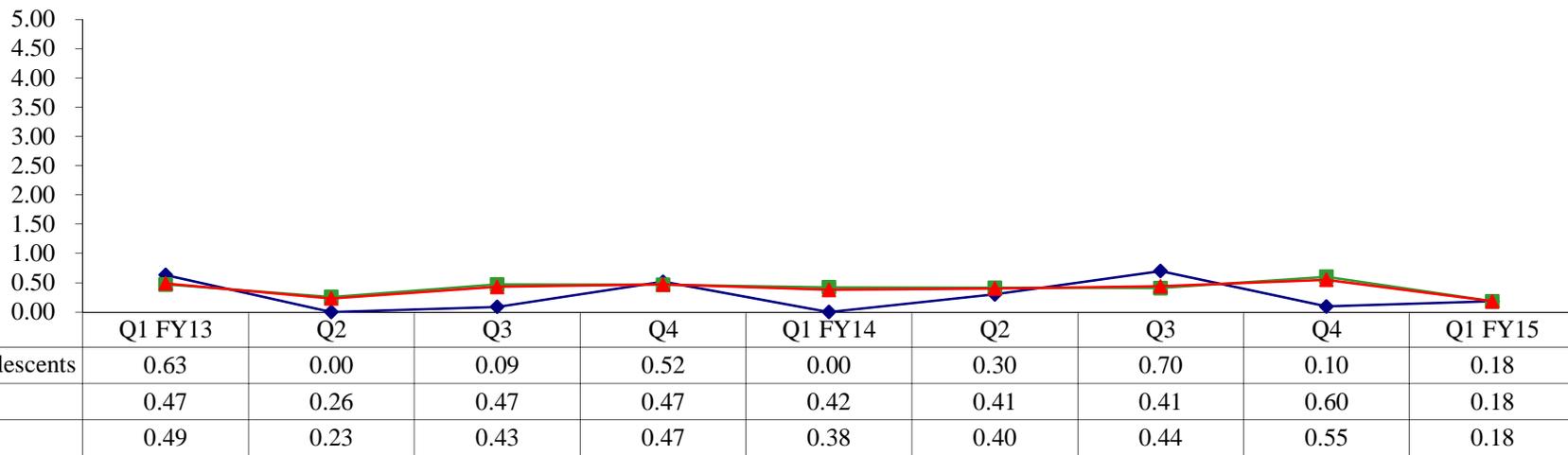
| | Number of Incidents | | | | FY Total |
|-------------------------------|---------------------|----|----|----|----------|
| | Q1 | Q2 | Q3 | Q4 | |
| Terrell State Hospital | | | | | |
| Personal Restraint | 144 | | | | 144 |
| Mechanical Restraint | 43 | | | | 43 |
| Seclusion | 0 | | | | 0 |
| Waco Center For Youth | | | | | |
| Personal Restraint | 123 | | | | 123 |
| Mechanical Restraint | 0 | | | | 0 |
| Seclusion | 0 | | | | 0 |
| All State MH Hospitals | | | | | |
| Personal Restraint | 2,518 | | | | 2,518 |
| Mechanical Restraint | 1,083 | | | | 1,083 |
| Seclusion | 37 | | | | 37 |

CQM - 4 Restraint and Seclusion Data
All State MH Hospitals

Restraint Incidents Per 1,000 Bed Days

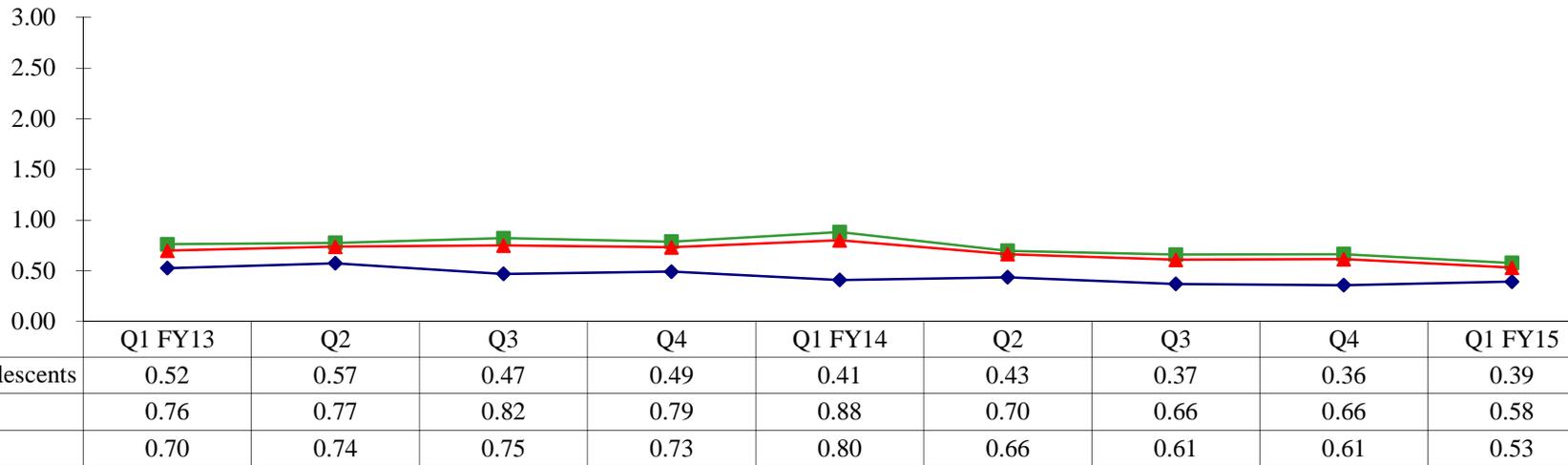


Seclusion Incidents Per 1,000 Bed Days

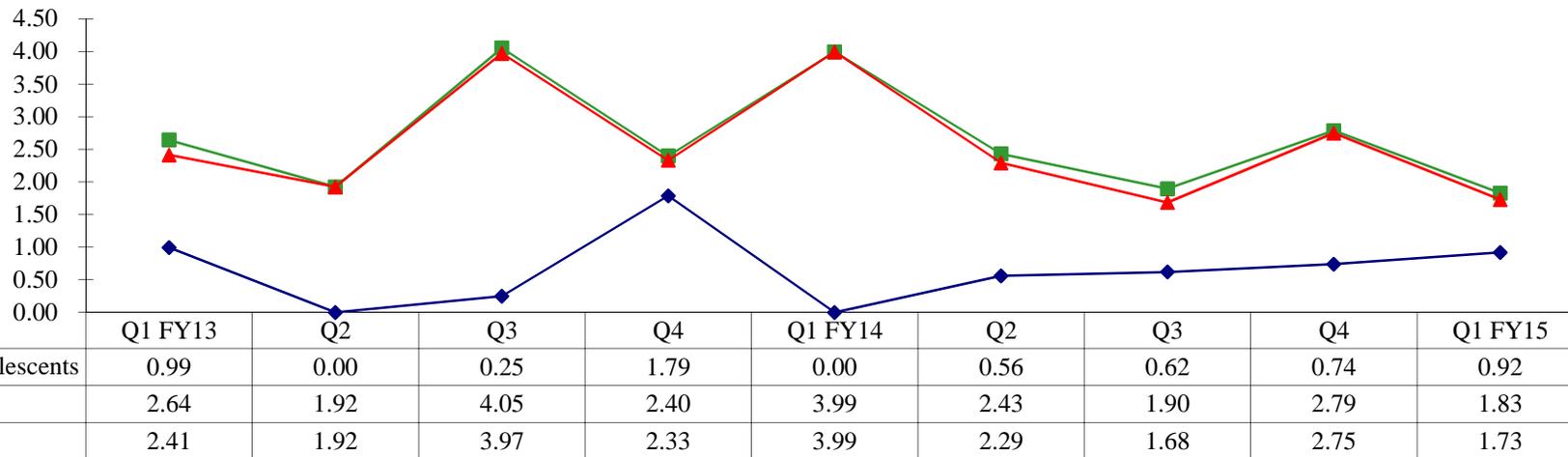


CQM - 4 Restraint and Seclusion Data
All State MH Hospitals

Average Number of Hours Per Incident in Restraints

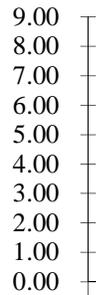


Average Number of Hours Per Incident in Seclusion



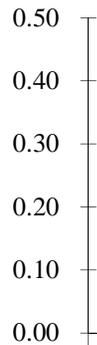
CQM - 4 Restraint and Seclusion Data
All State MH Hospitals

Number of Persons in Restraint/1000 Bed Days



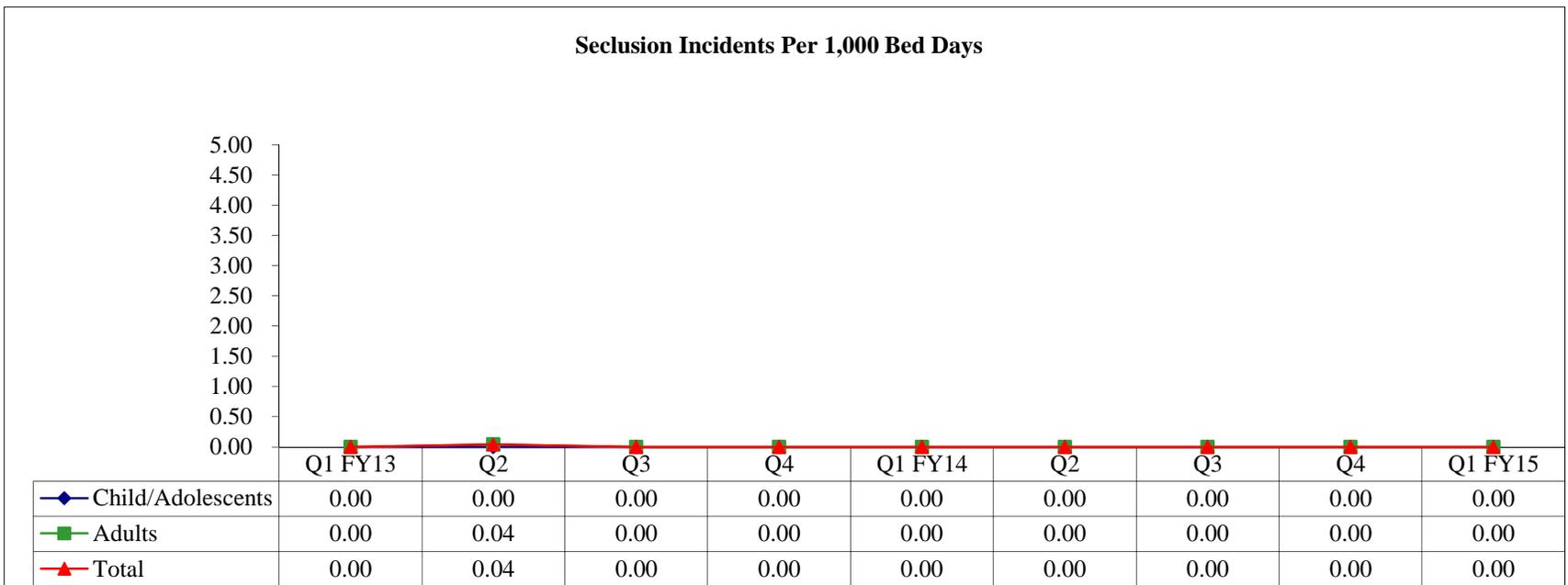
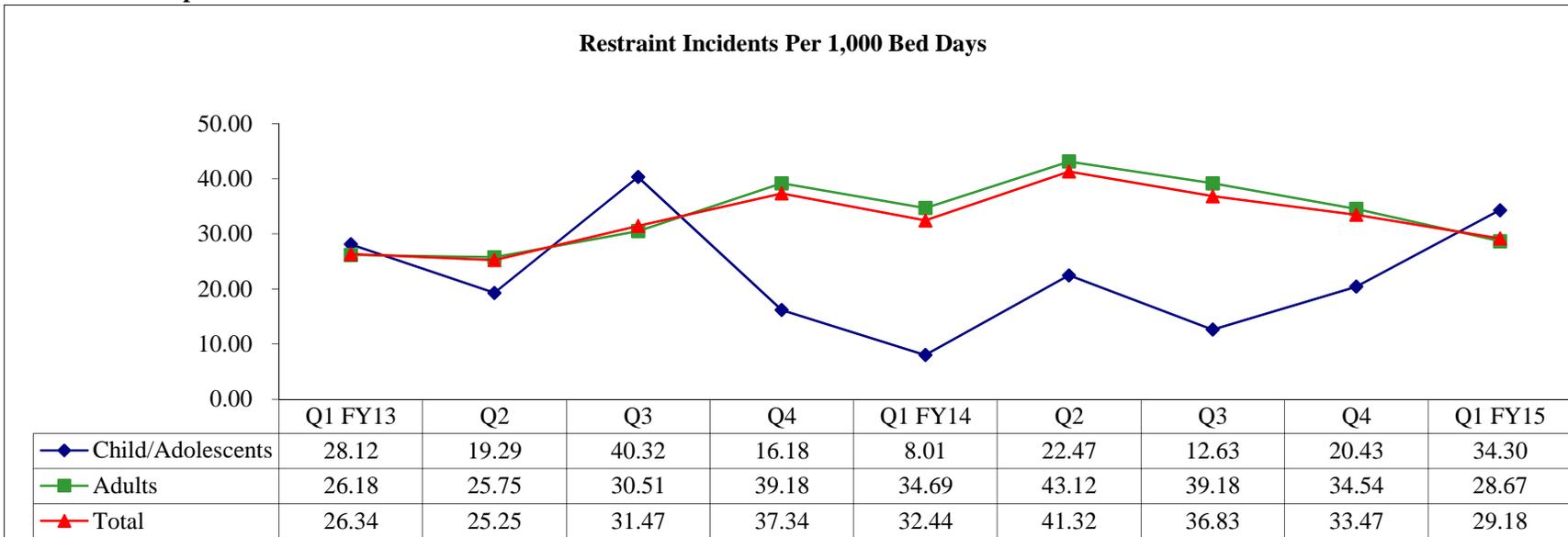
| | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|------|------|------|---------|------|------|------|---------|
| Child/Adolescents | 6.52 | 5.78 | 6.93 | 6.59 | 5.79 | 5.31 | 6.72 | 6.78 | 6.82 |
| Adults | 3.15 | 3.47 | 3.36 | 3.33 | 3.31 | 3.33 | 3.40 | 3.39 | 3.27 |
| Total | 3.51 | 3.71 | 3.74 | 3.66 | 3.56 | 3.52 | 3.75 | 3.74 | 3.66 |

Number of Persons in Seclusion/1000 Bed Days



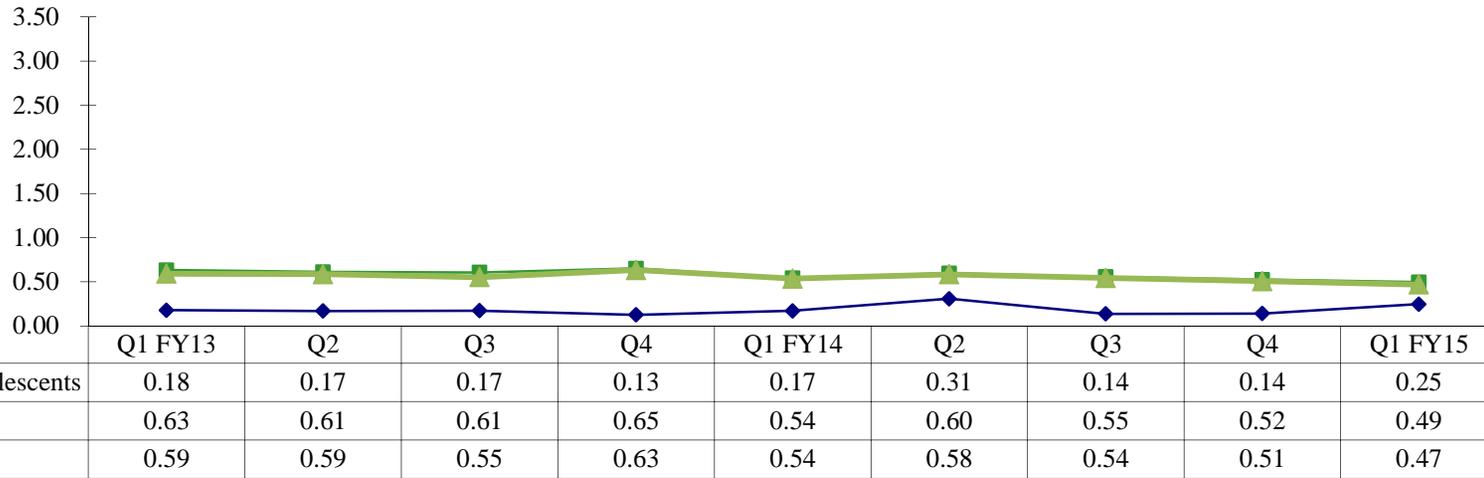
| | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|------|------|------|---------|------|------|------|---------|
| Child/Adolescents | 0.32 | 0.00 | 0.09 | 0.19 | 0.00 | 0.10 | 0.23 | 0.05 | 0.18 |
| Adults | 0.14 | 0.16 | 0.16 | 0.19 | 0.16 | 0.16 | 0.18 | 0.18 | 0.11 |
| Total | 0.16 | 0.15 | 0.15 | 0.19 | 0.14 | 0.15 | 0.19 | 0.17 | 0.12 |

CQM - 4 Restraint and Seclusion Data
Austin State Hospital

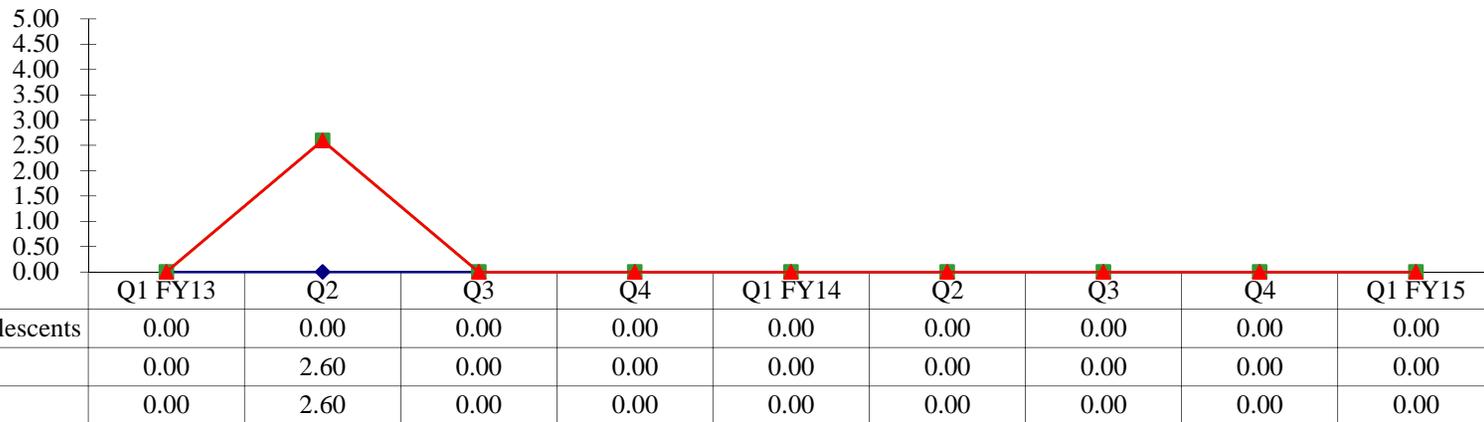


CQM - 4 Restraint and Seclusion Data
Austin State Hospital

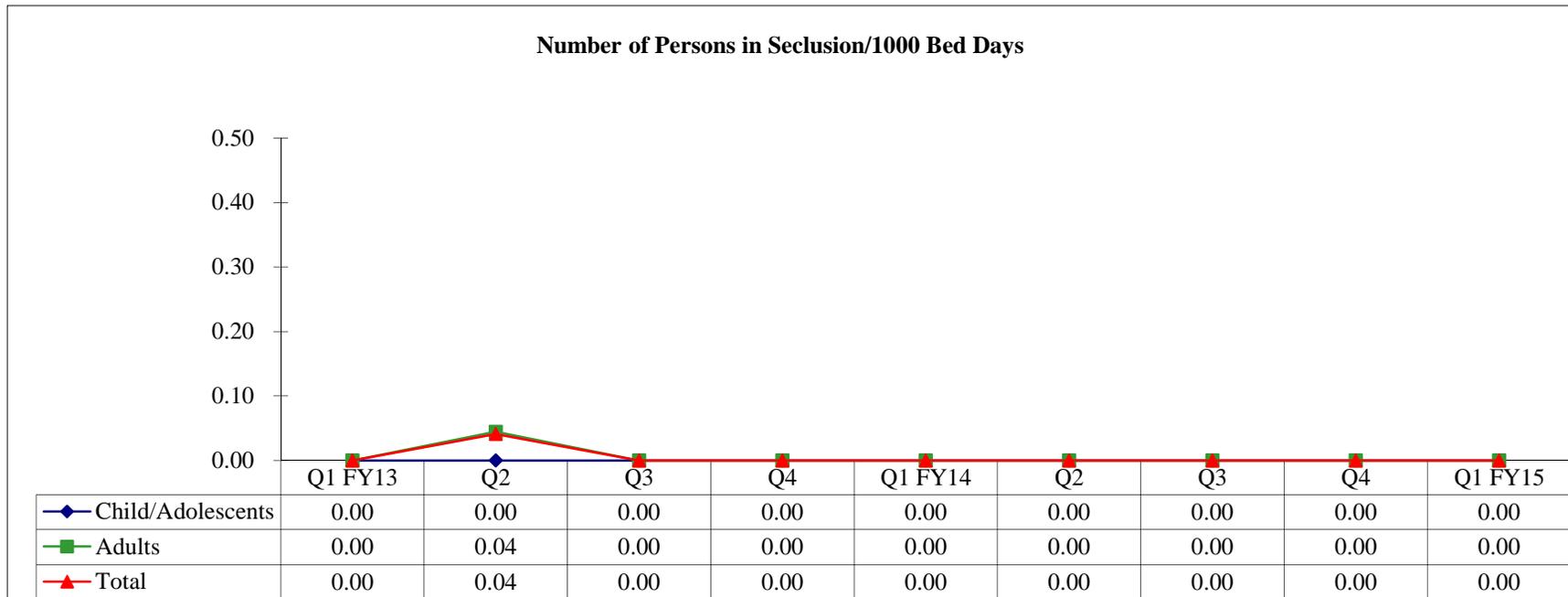
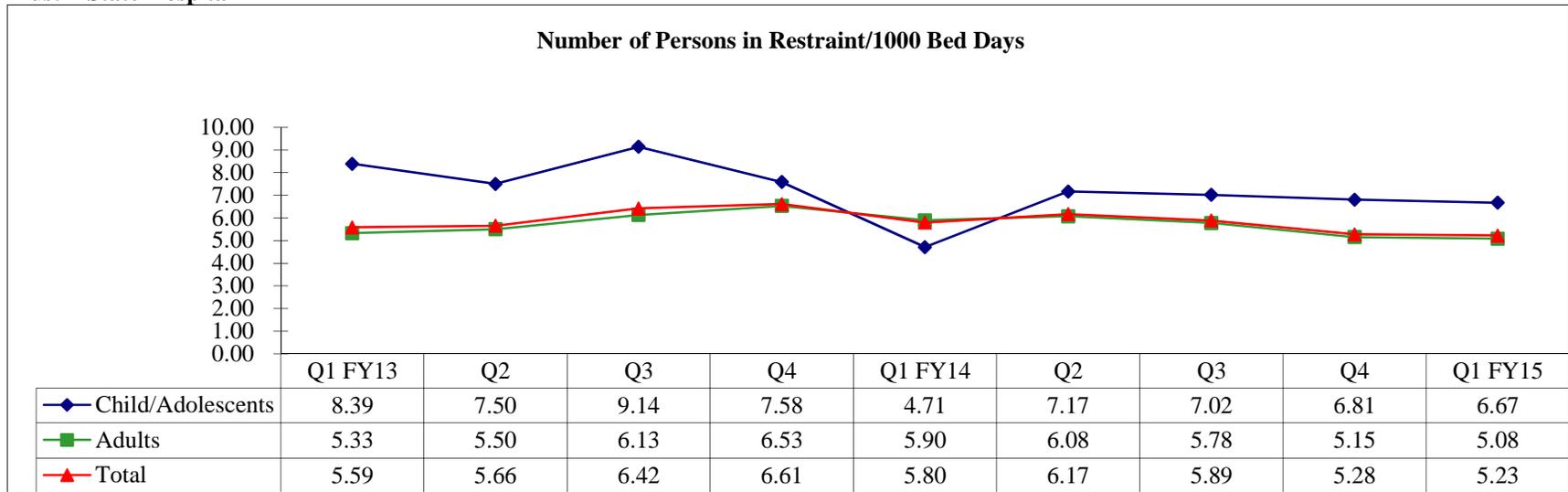
Average Number of Hours Per Incident in Restraints



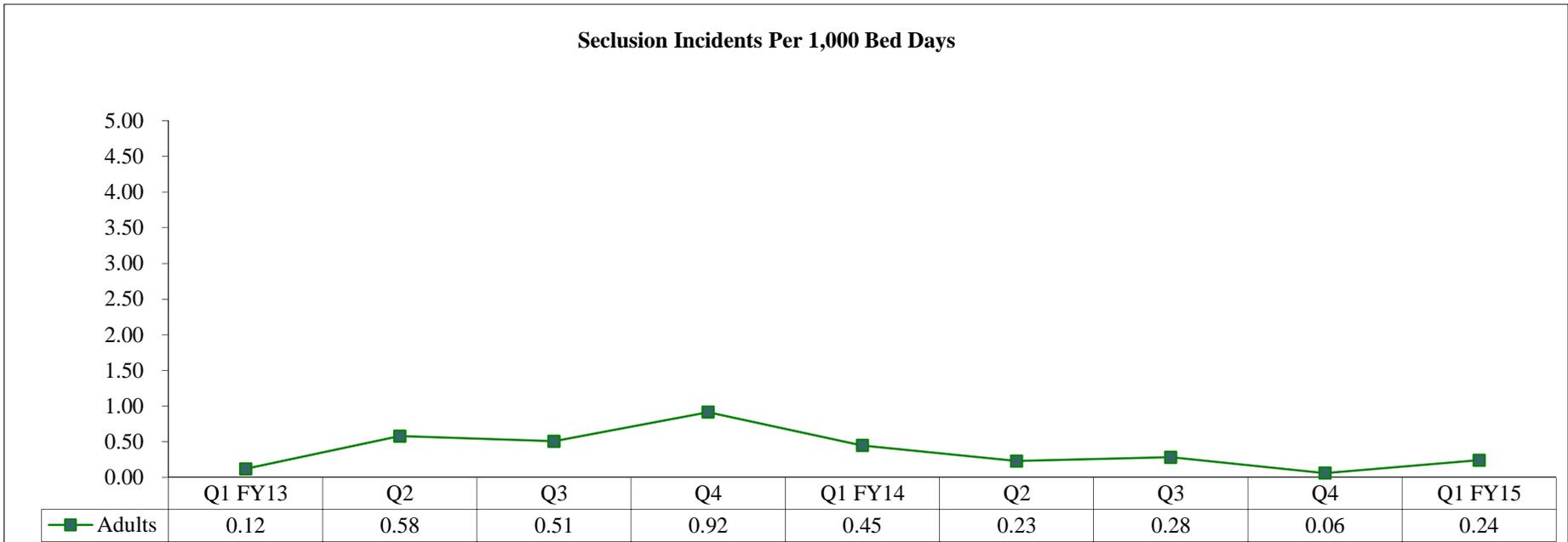
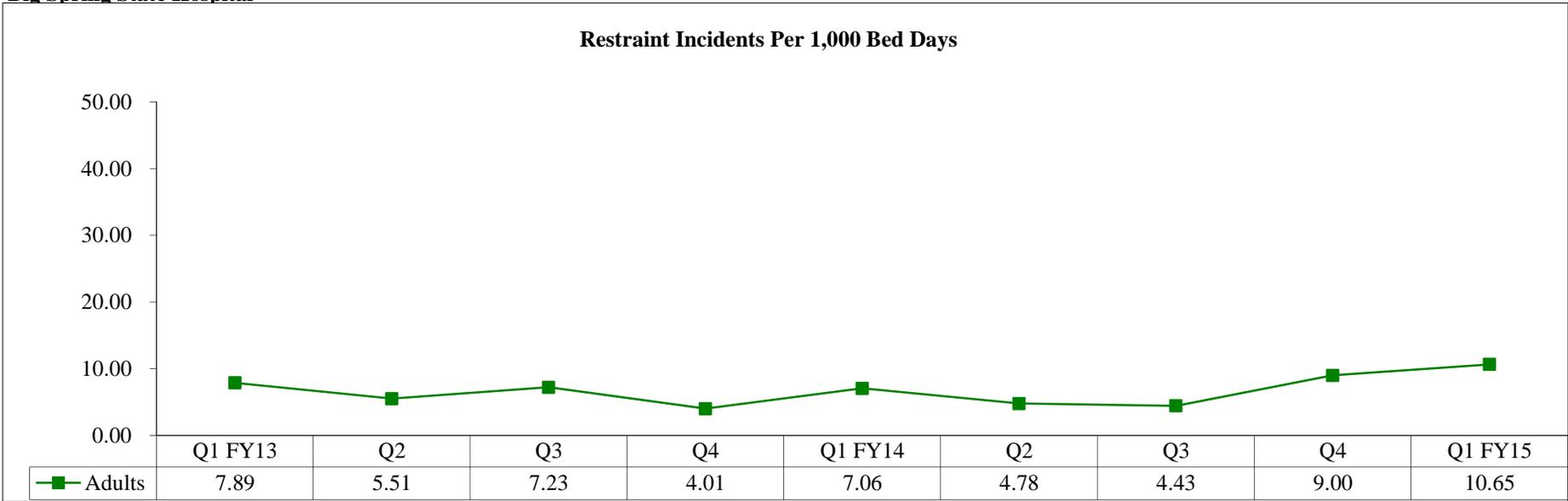
Average Number of Hours Per Incident in Seclusion



CQM - 4 Restraint and Seclusion Data
Austin State Hospital

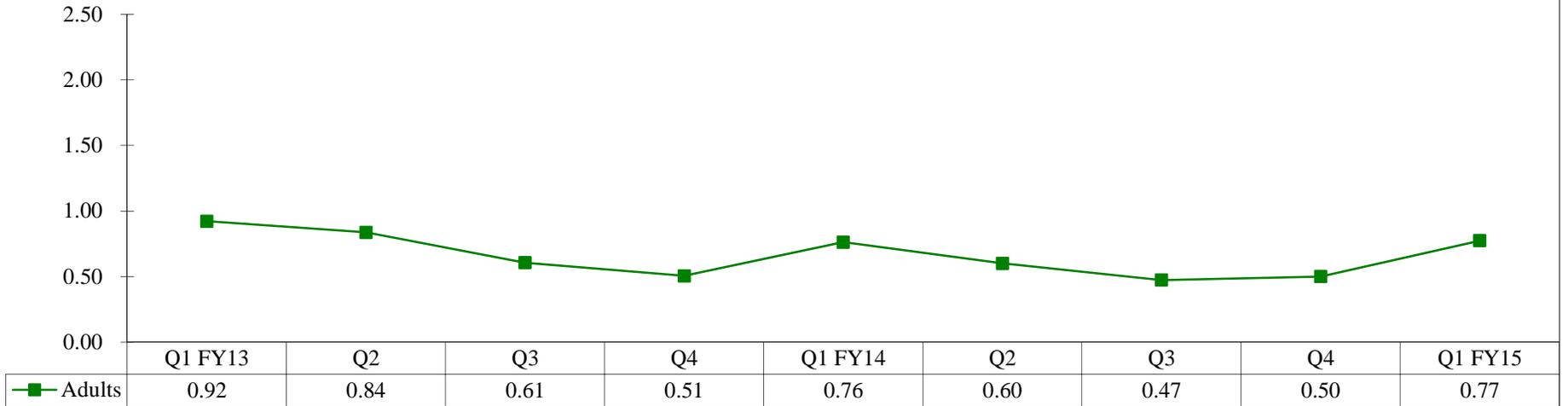


CQM - 4 Restraint and Seclusion Data
Big Spring State Hospital

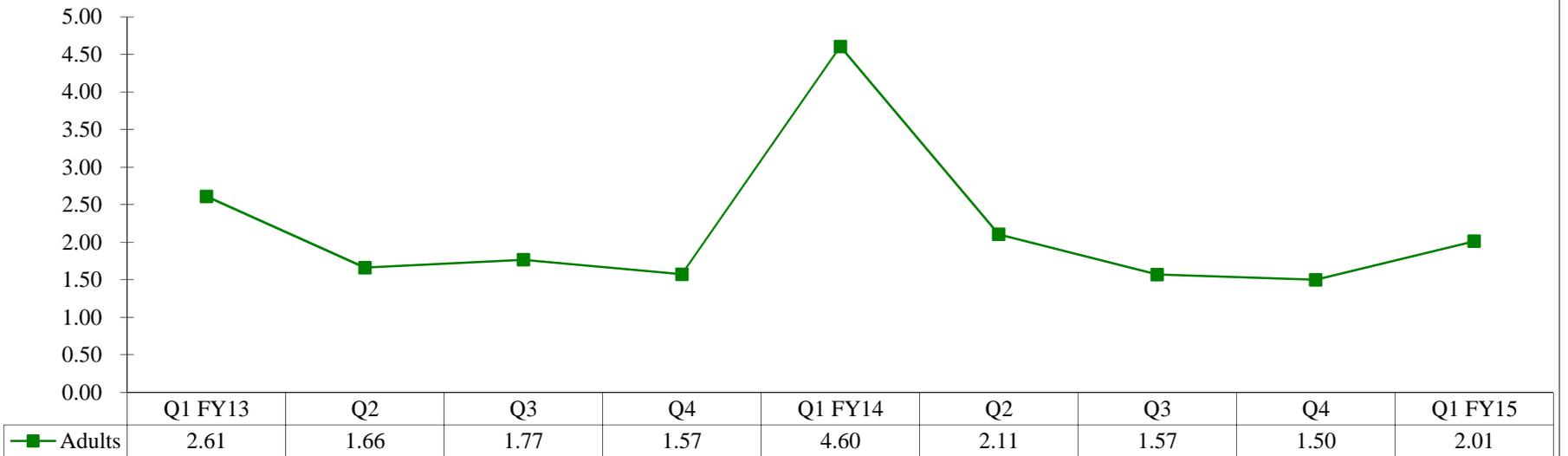


CQM - 4 Restraint and Seclusion Data
Big Spring State Hospital

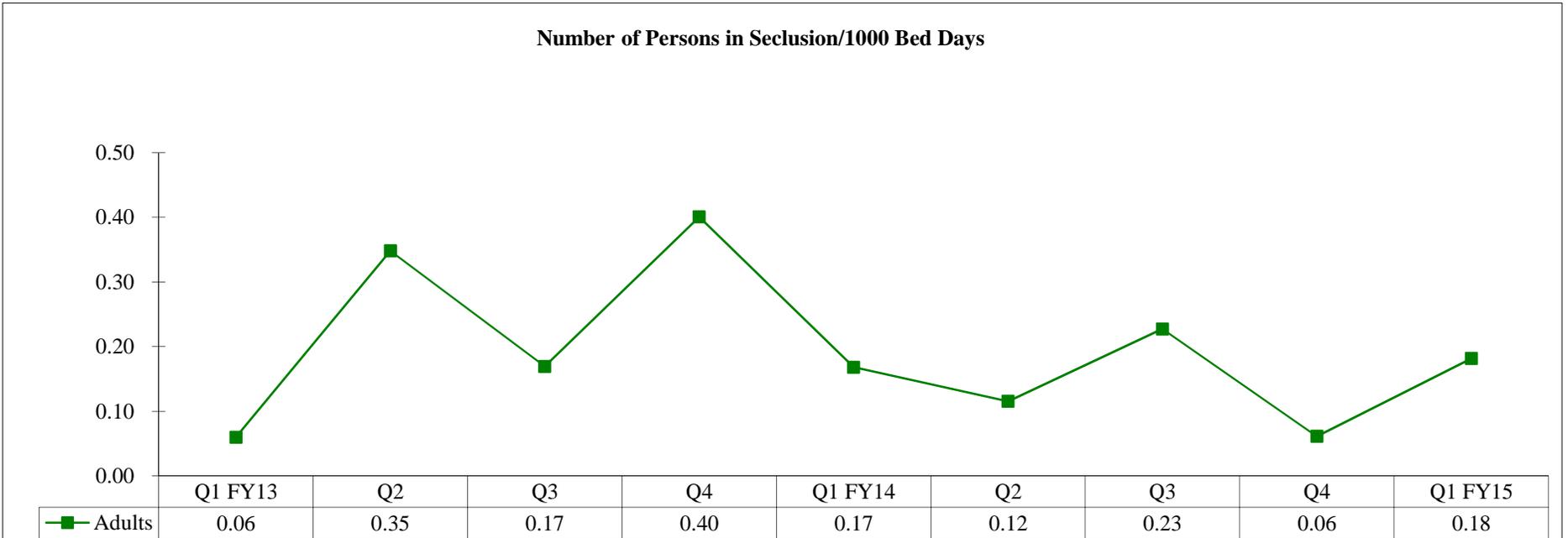
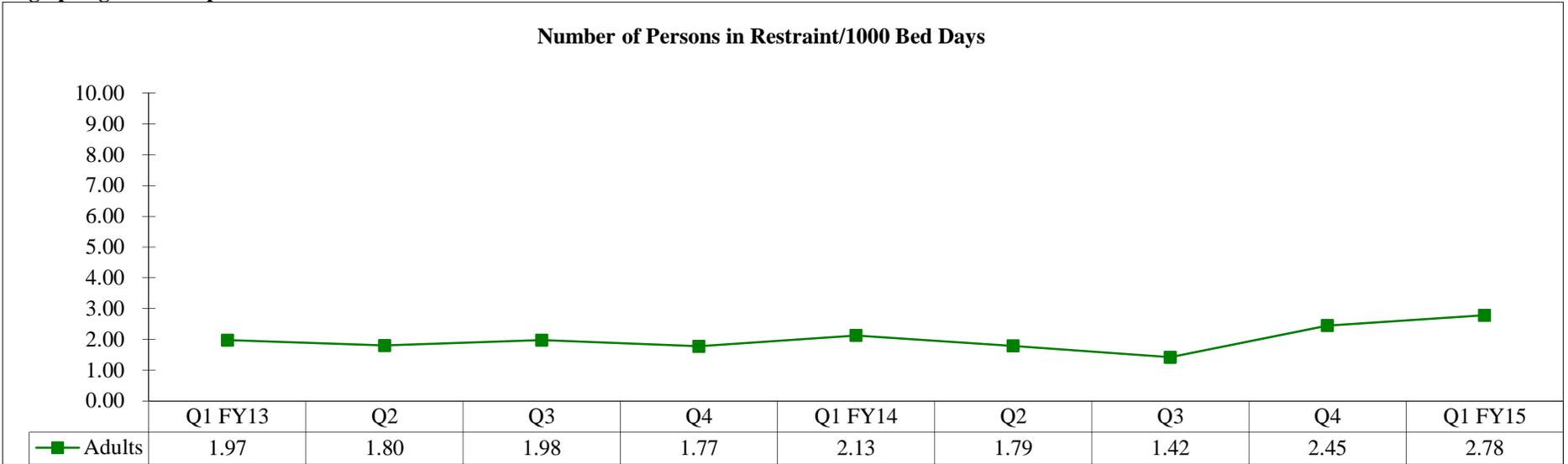
Average Number of Hours Per Incident in Restraints



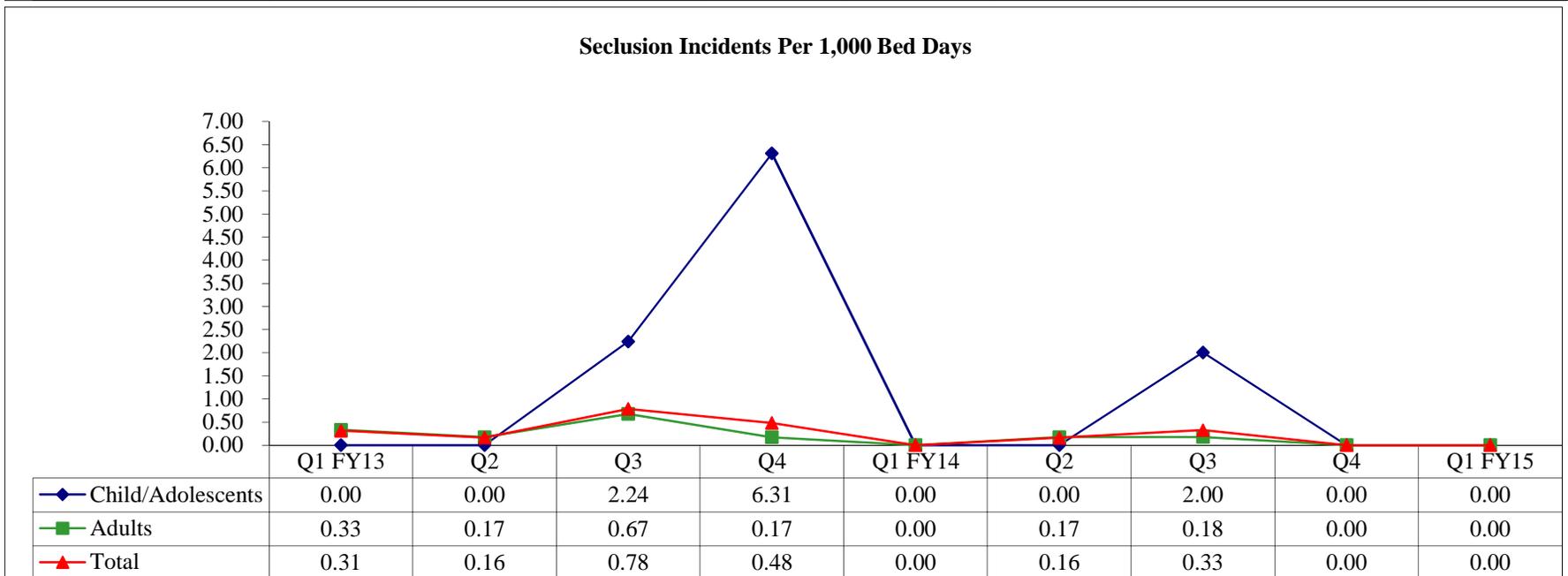
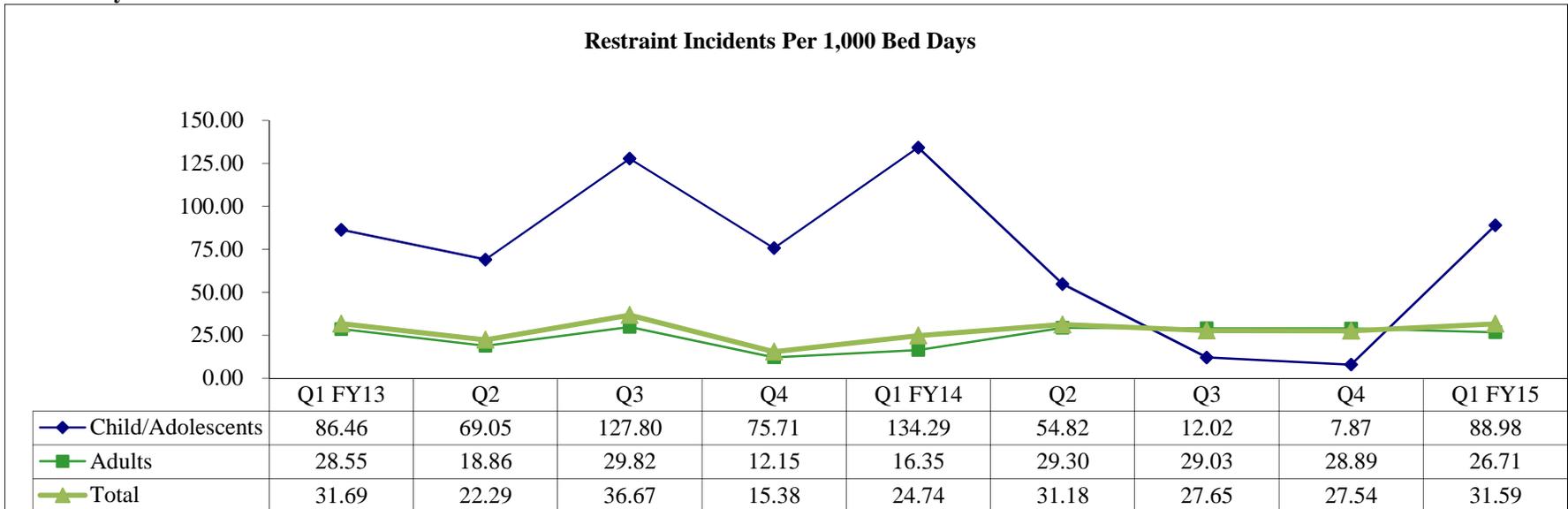
Average Number of Hours Per Incident in Seclusion



CQM - 4 Restraint and Seclusion Data
Big Spring State Hospital

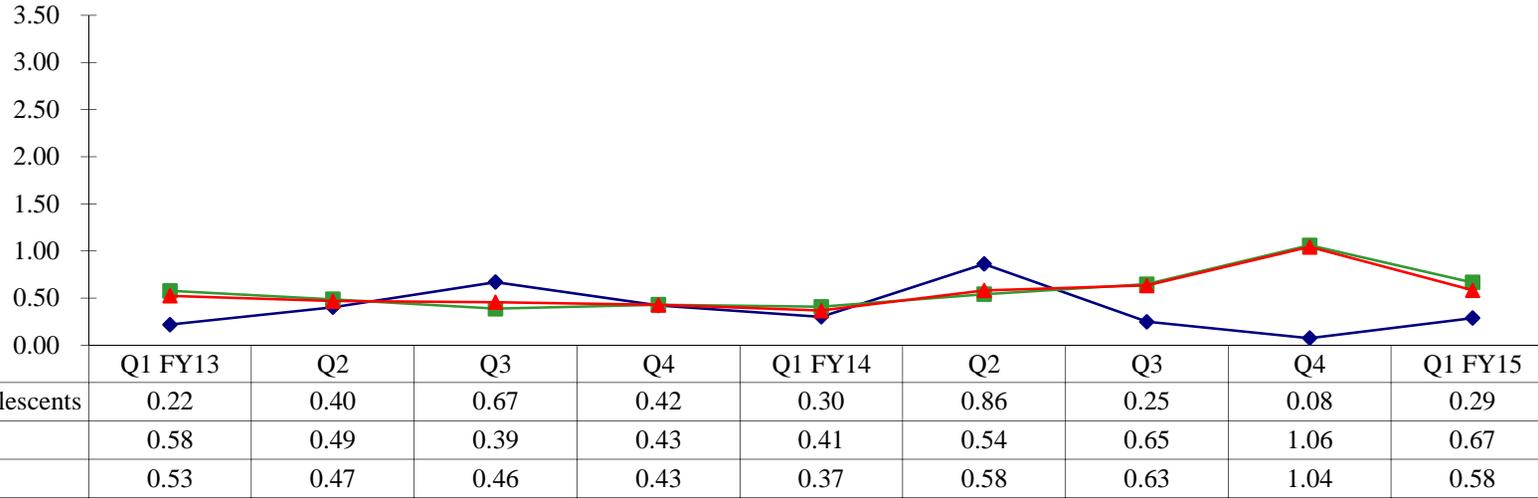


CQM - 4 Restraint and Seclusion Data
El Paso Psychiatric Center

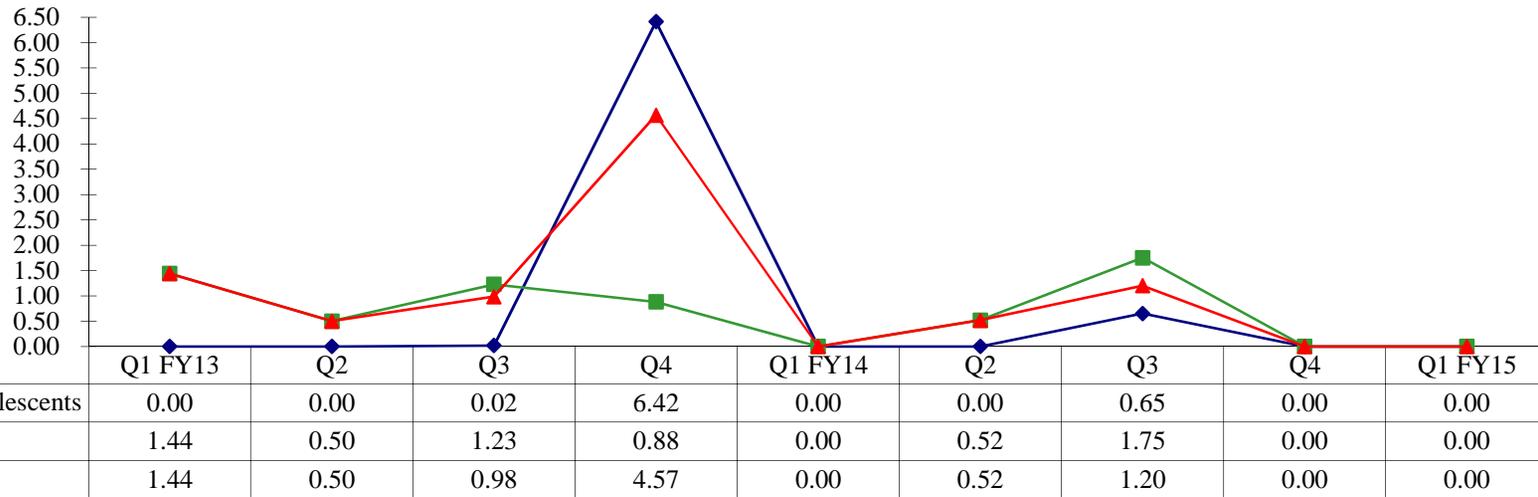


CQM - 4 Restraint and Seclusion Data
El Paso Psychiatric Center

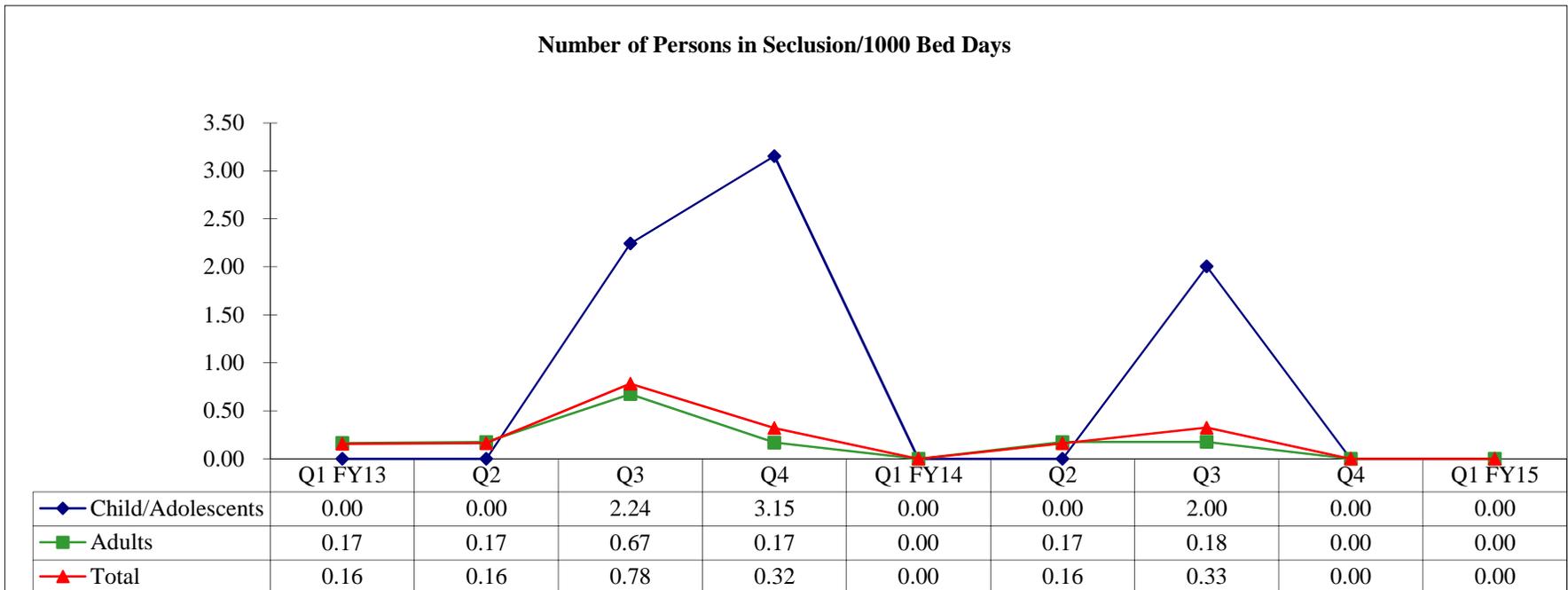
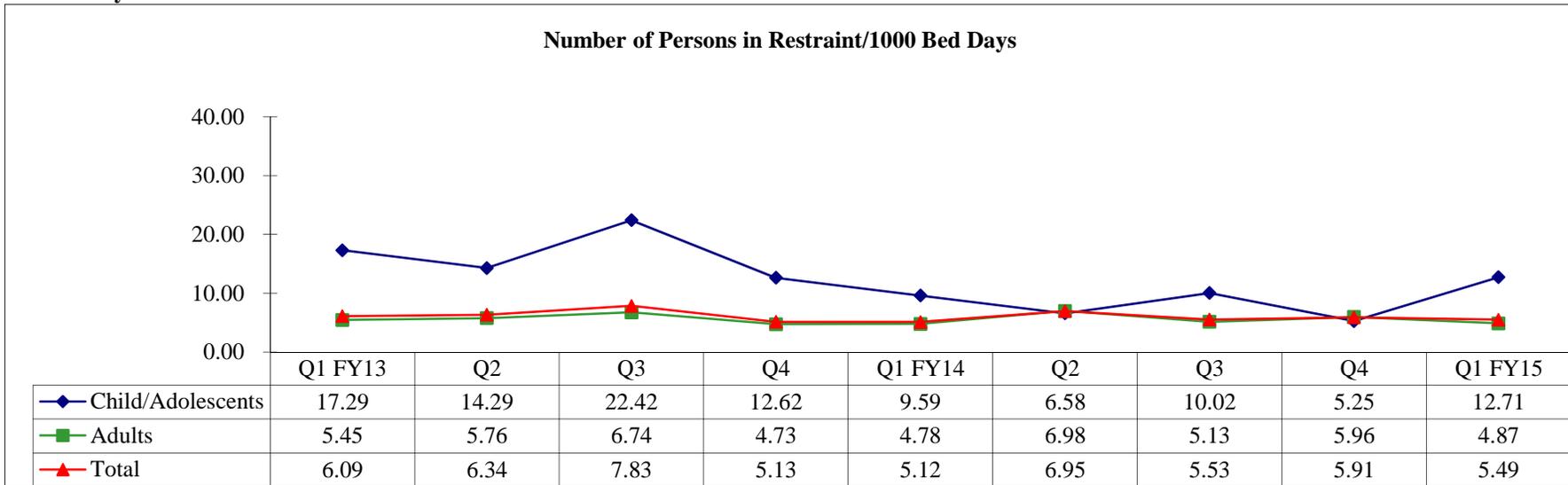
Average Number of Hours Per Incident in Restraints



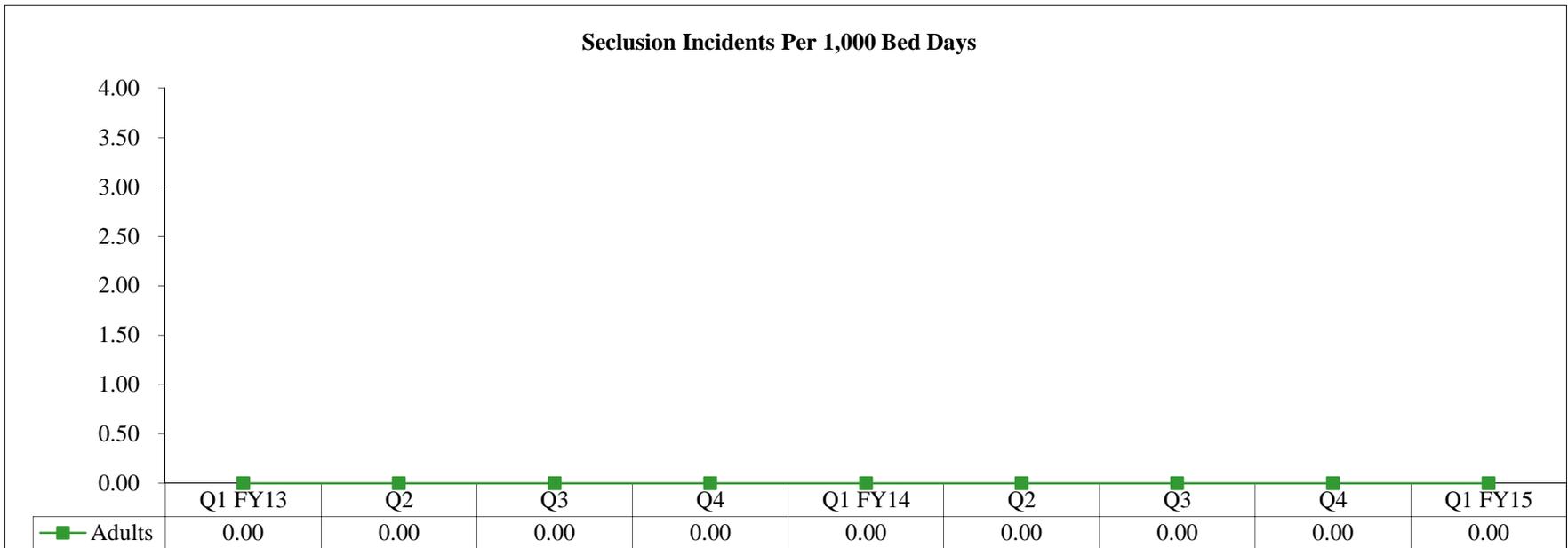
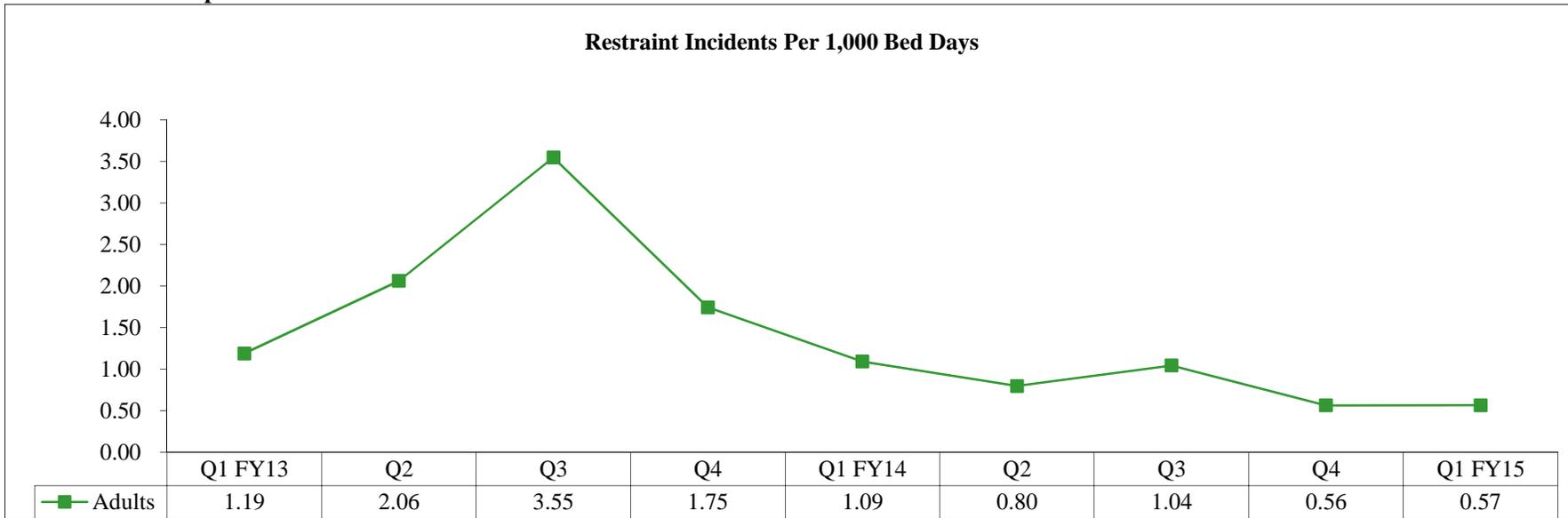
Average Number of Hours Per Incident in Seclusion



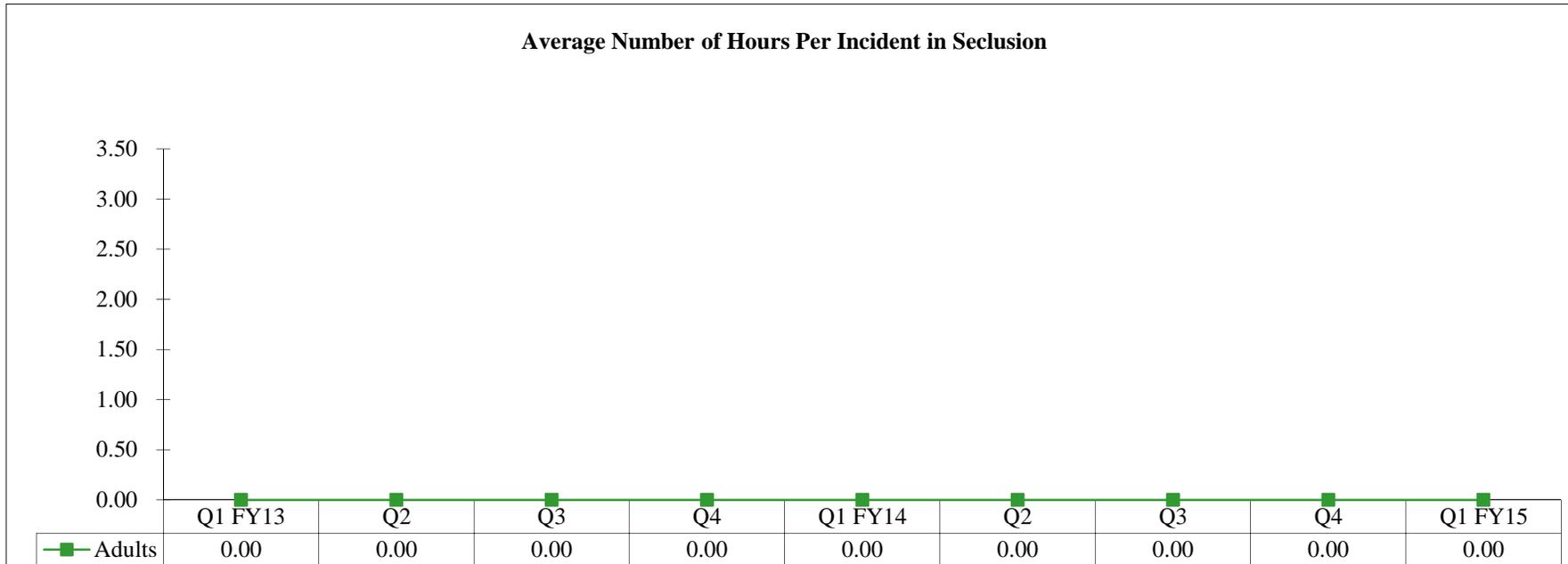
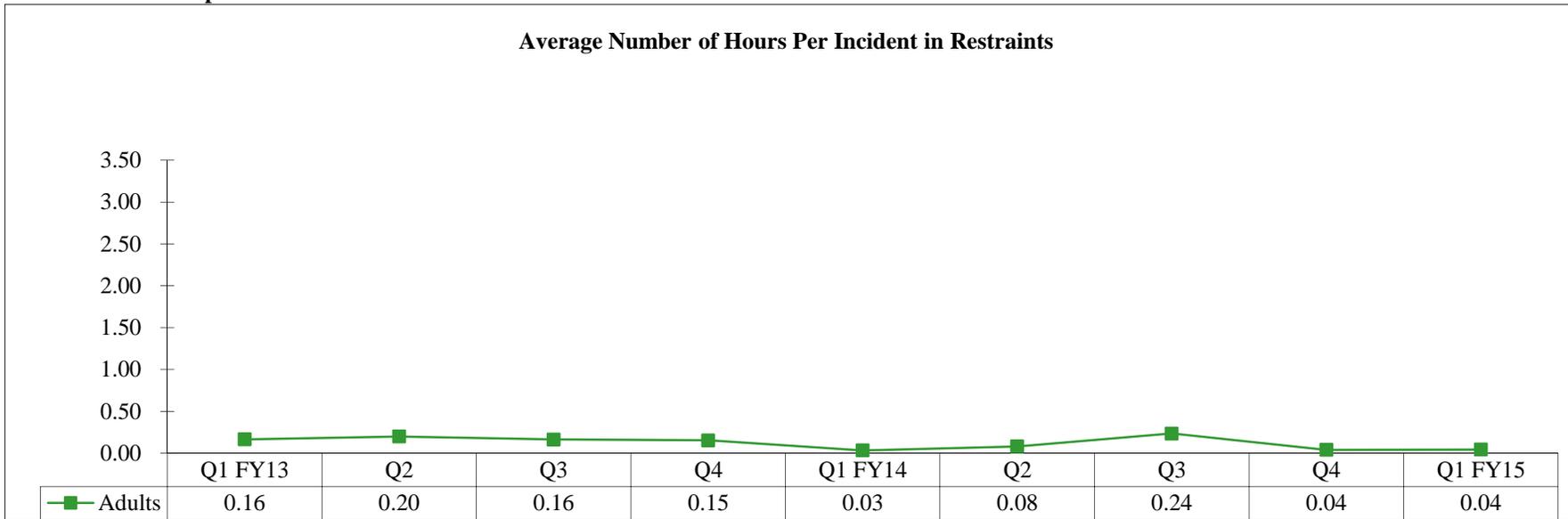
CQM - 4 Restraint and Seclusion Data
El Paso Psychiatric Center



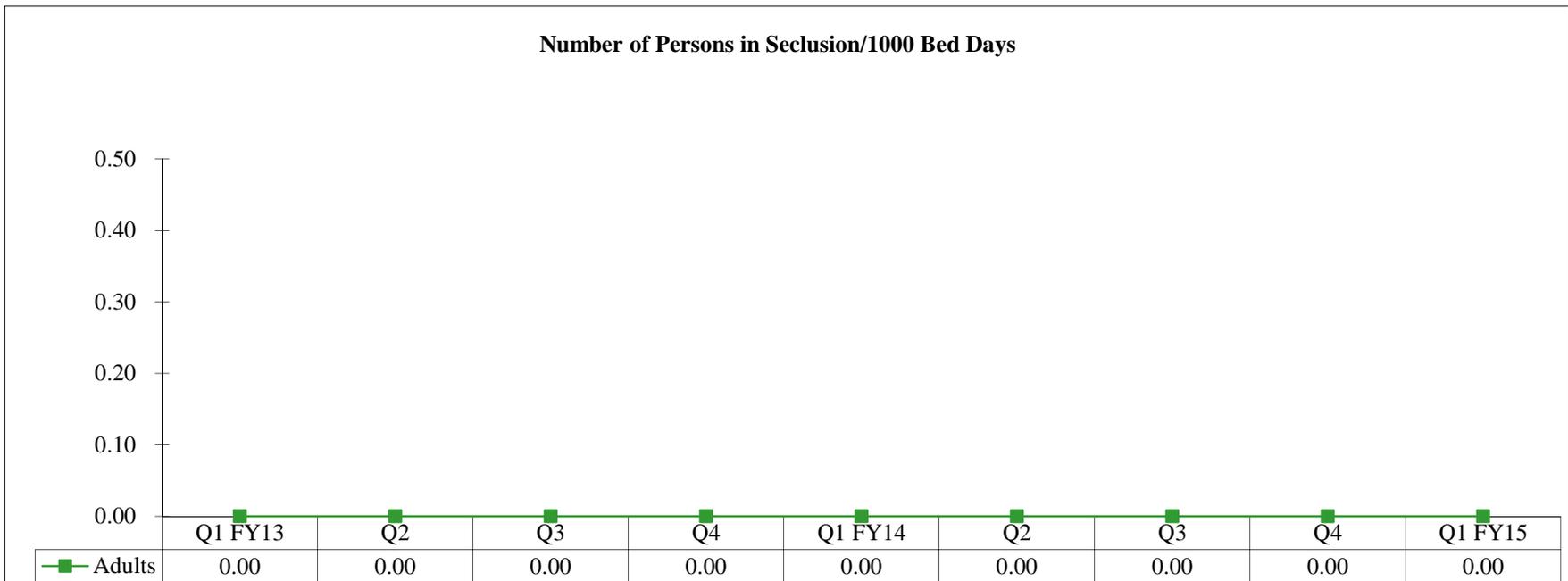
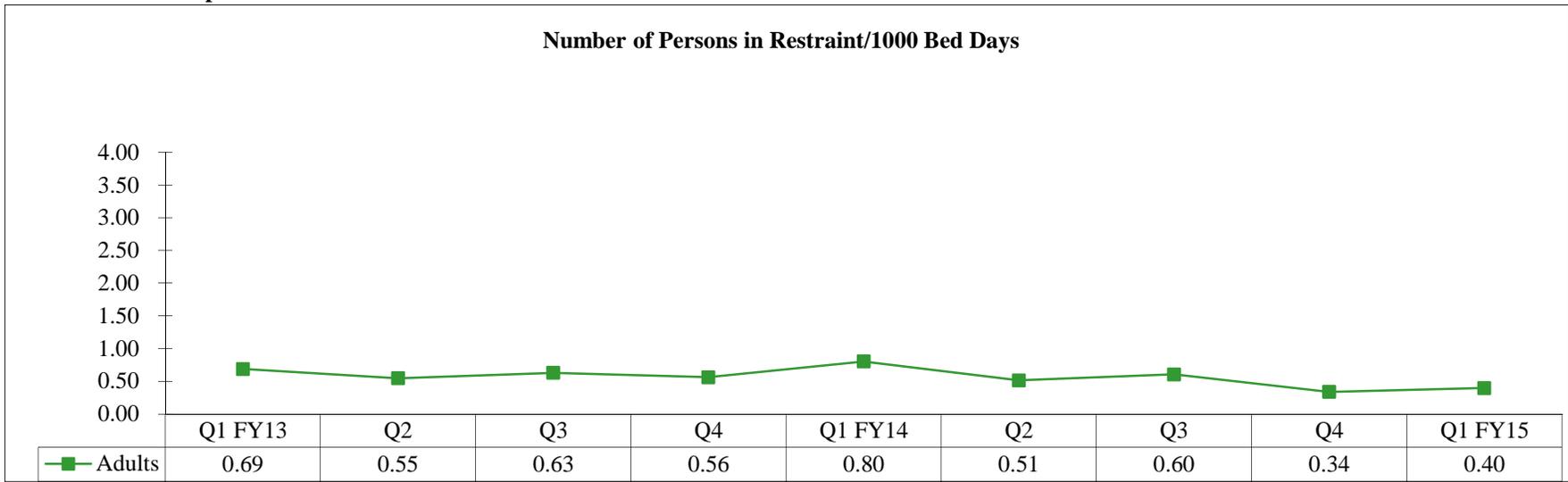
CQM - 4 Restraint and Seclusion Data
Kerrville State Hospital



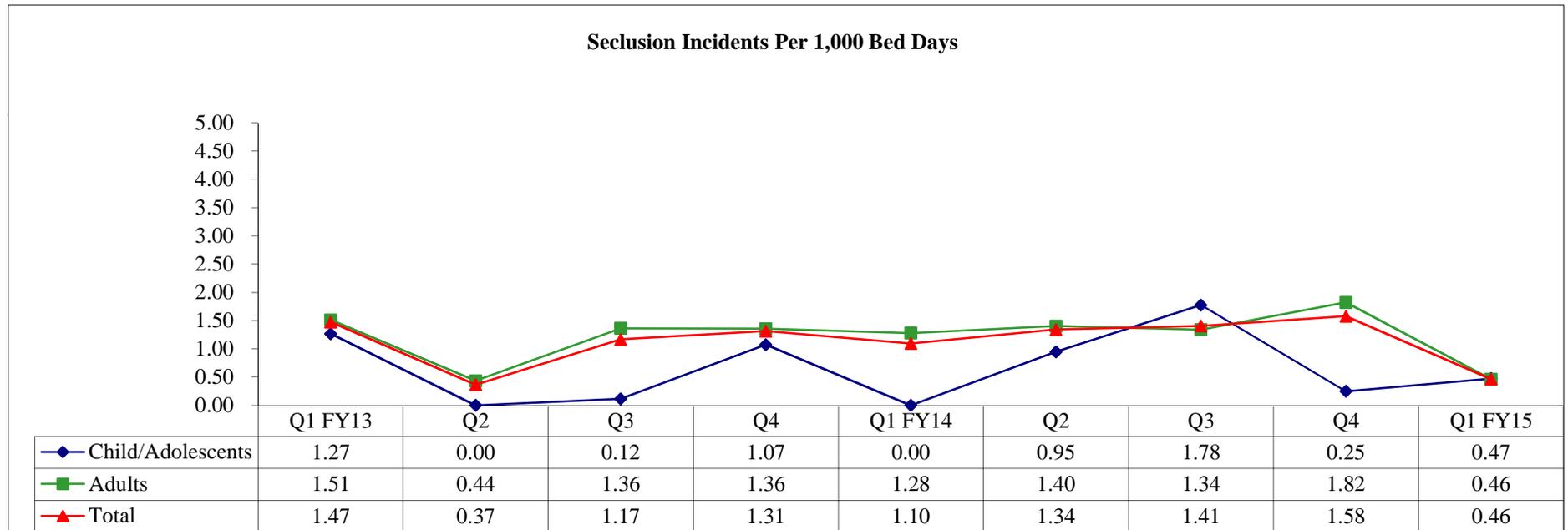
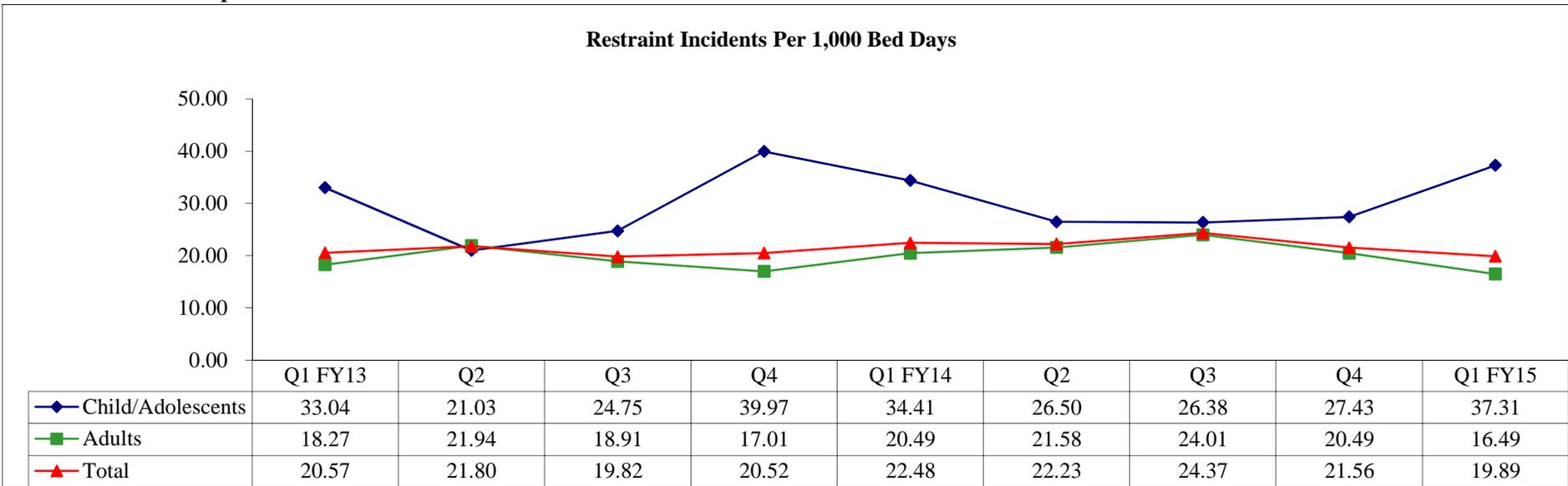
CQM - 4 Restraint and Seclusion Data
Kerrville State Hospital



CQM - 4 Restraint and Seclusion Data
Kerrville State Hospital

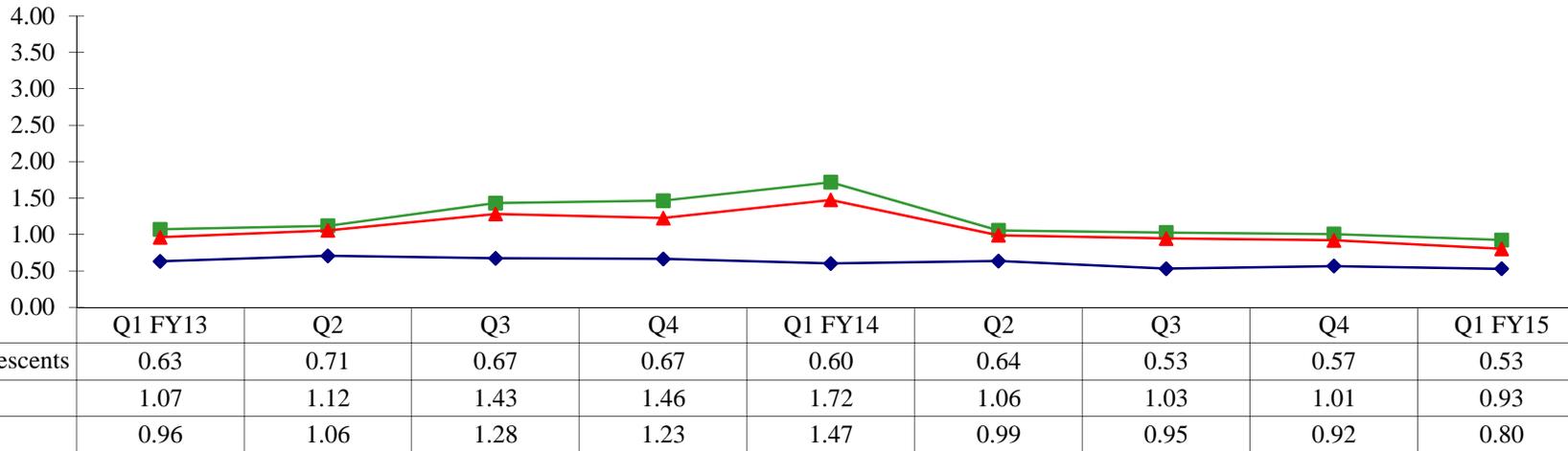


CQM - 4 Restraint and Seclusion Data
North Texas State Hospital

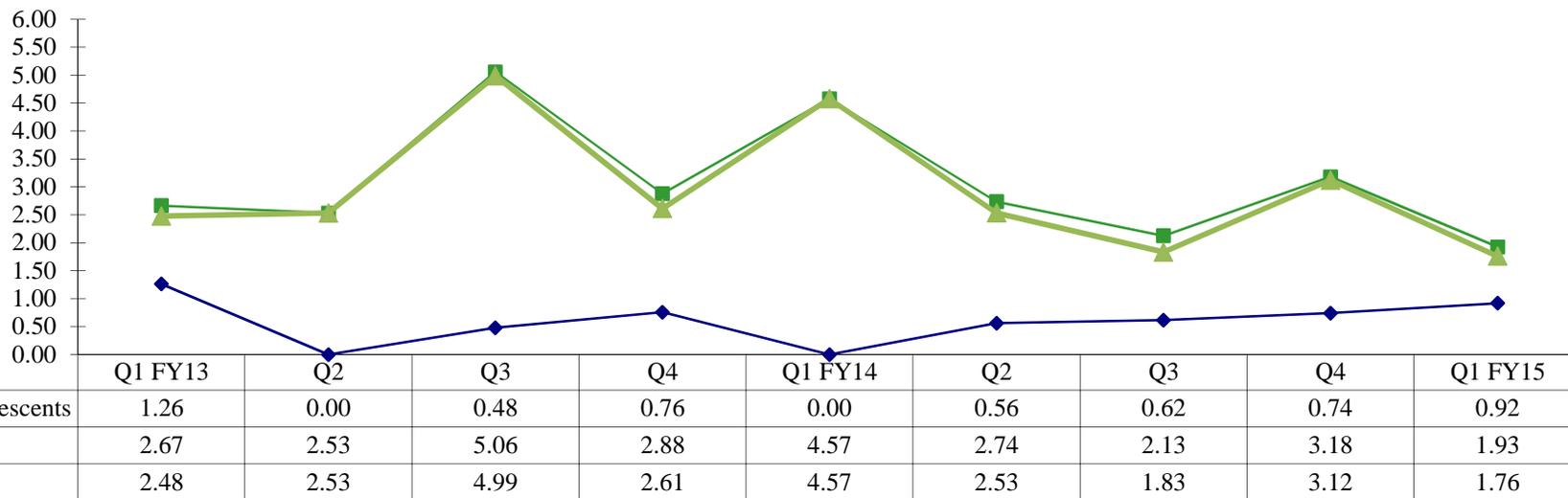


CQM - 4 Restraint and Seclusion Data
North Texas State Hospital

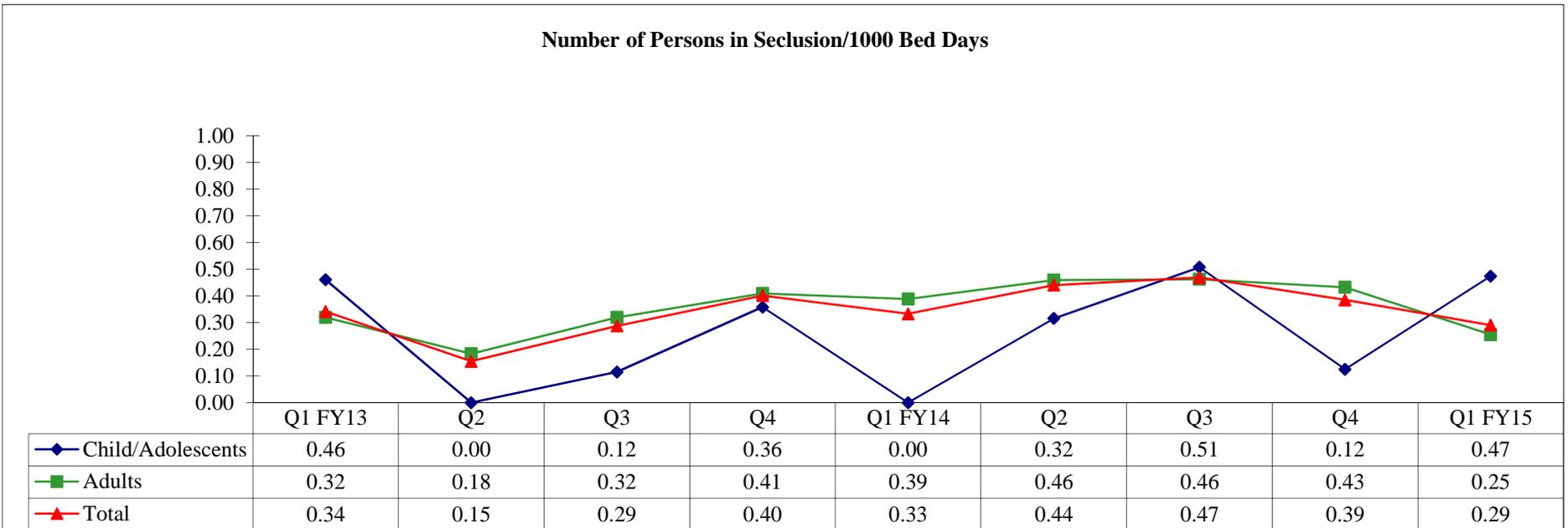
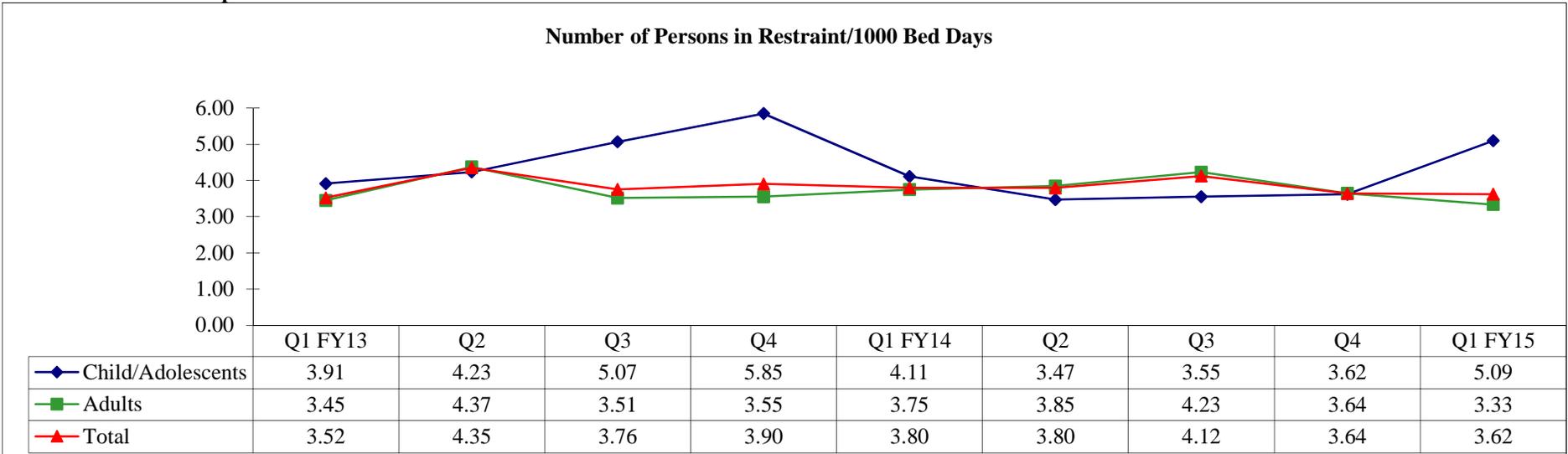
Average Number of Hours Per Incident in Restraints



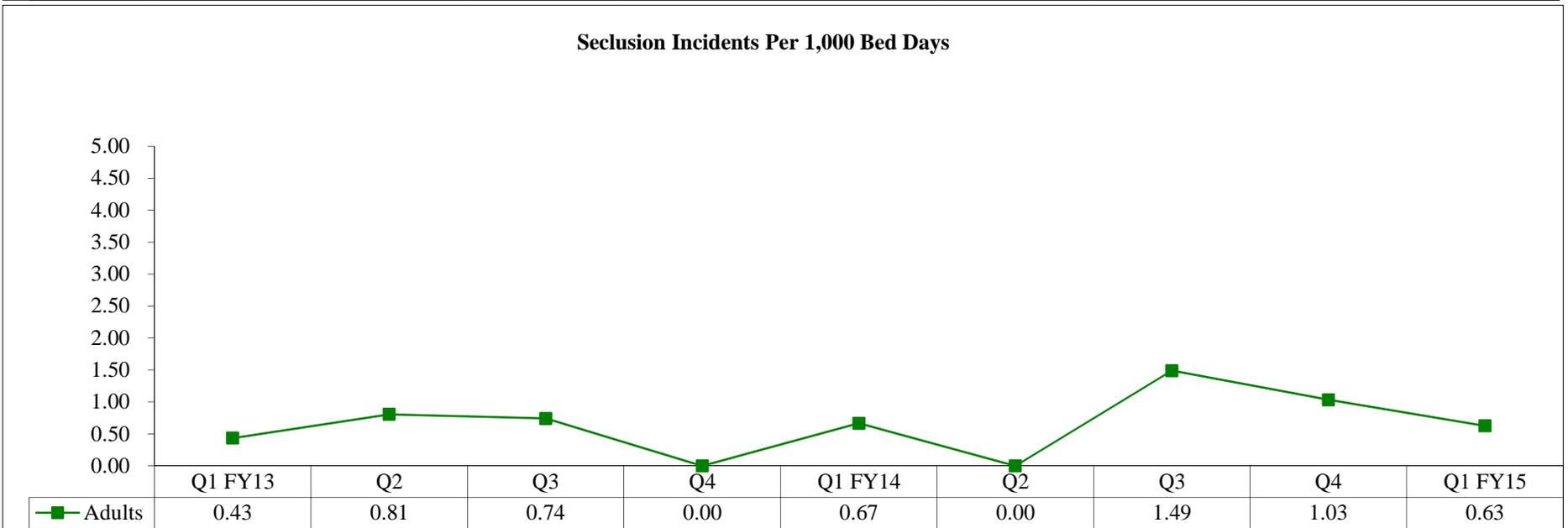
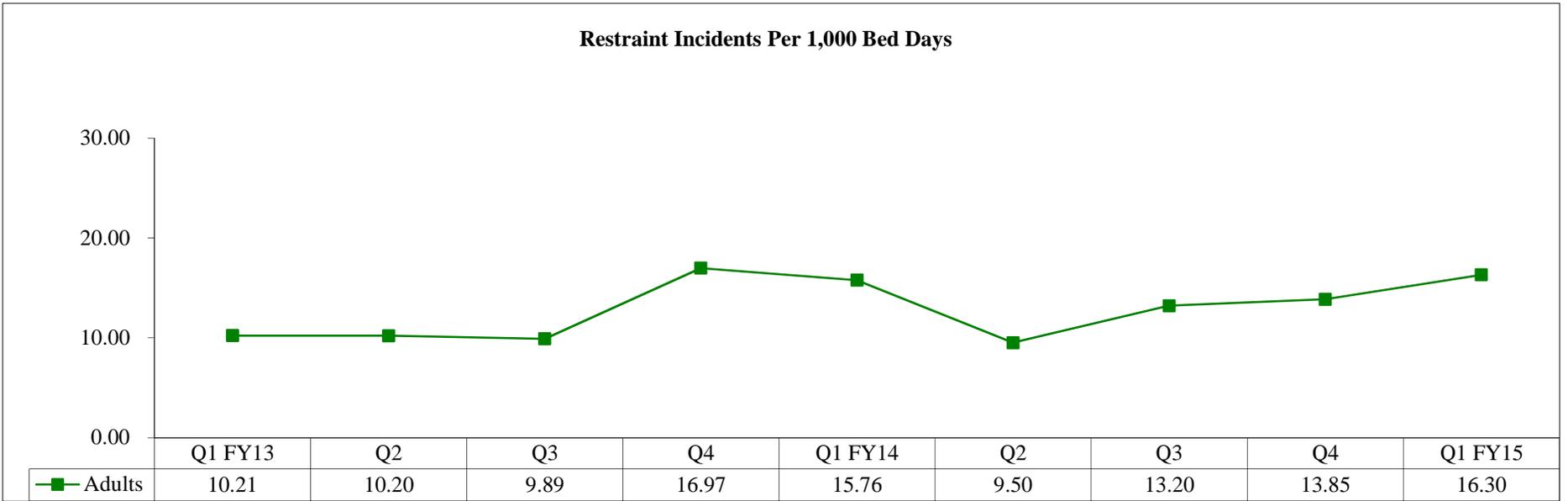
Average Number of Hours Per Incident in Seclusion



CQM - 4 Restraint and Seclusion Data
North Texas State Hospital

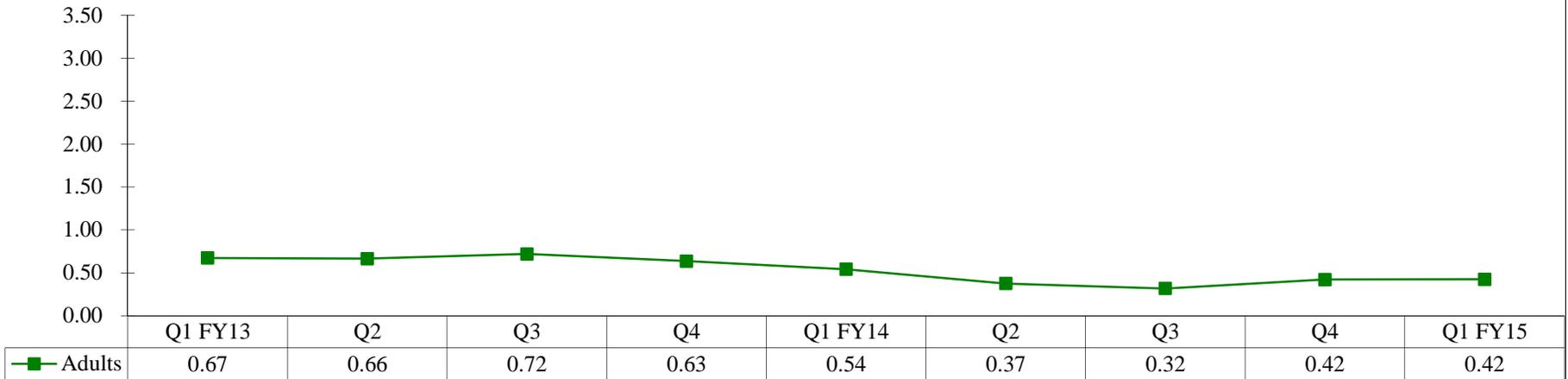


CQM - 4 Restraint and Seclusion Data
Rio Grande State Center

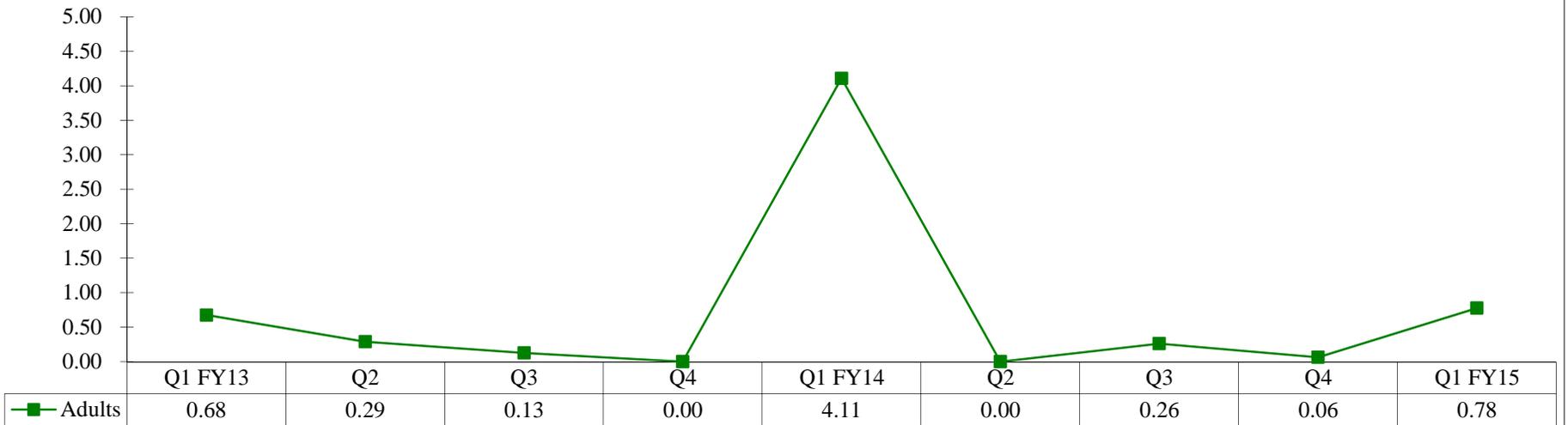


CQM - 4 Restraint and Seclusion Data
Rio Grande State Center

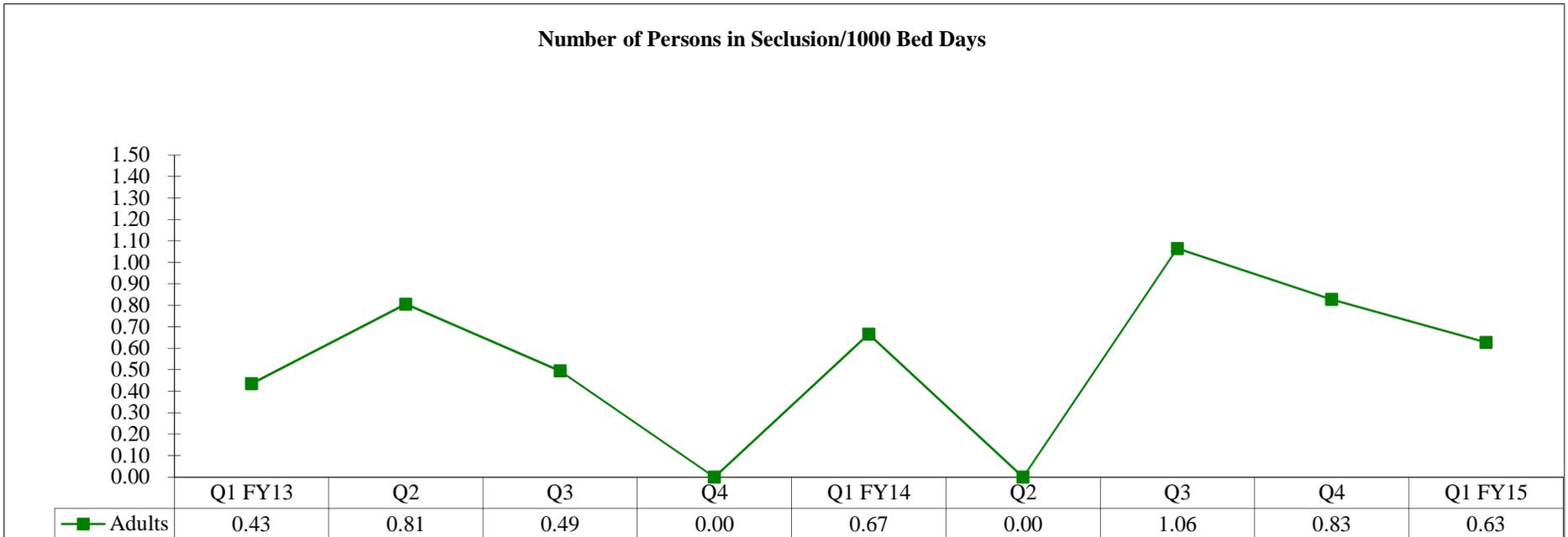
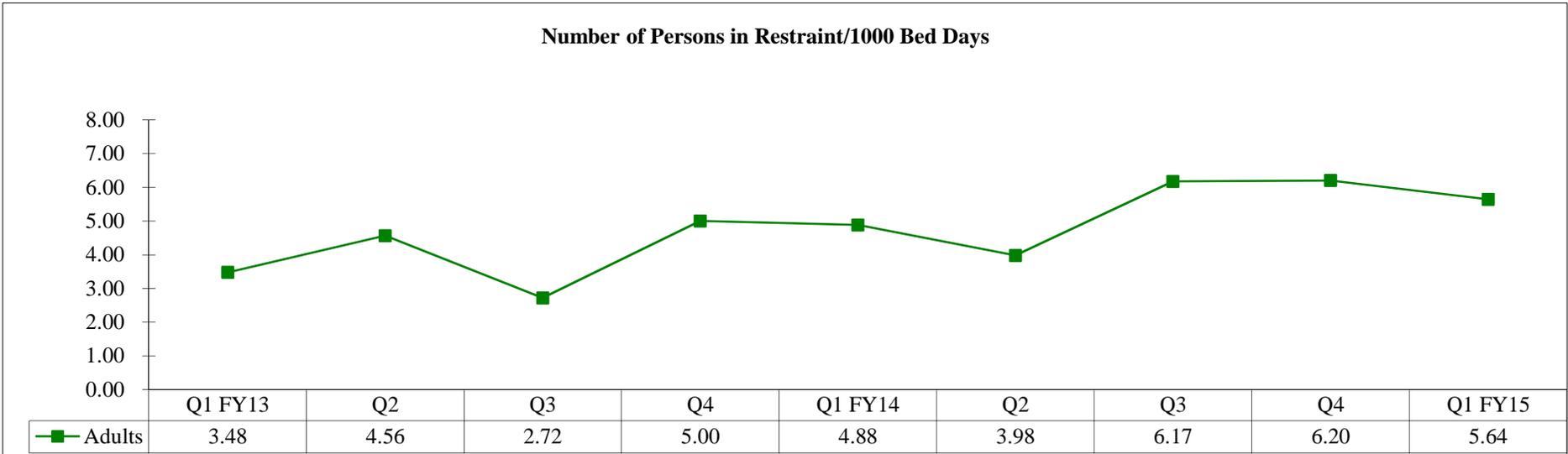
Average Number of Hours Per Incident in Restraints



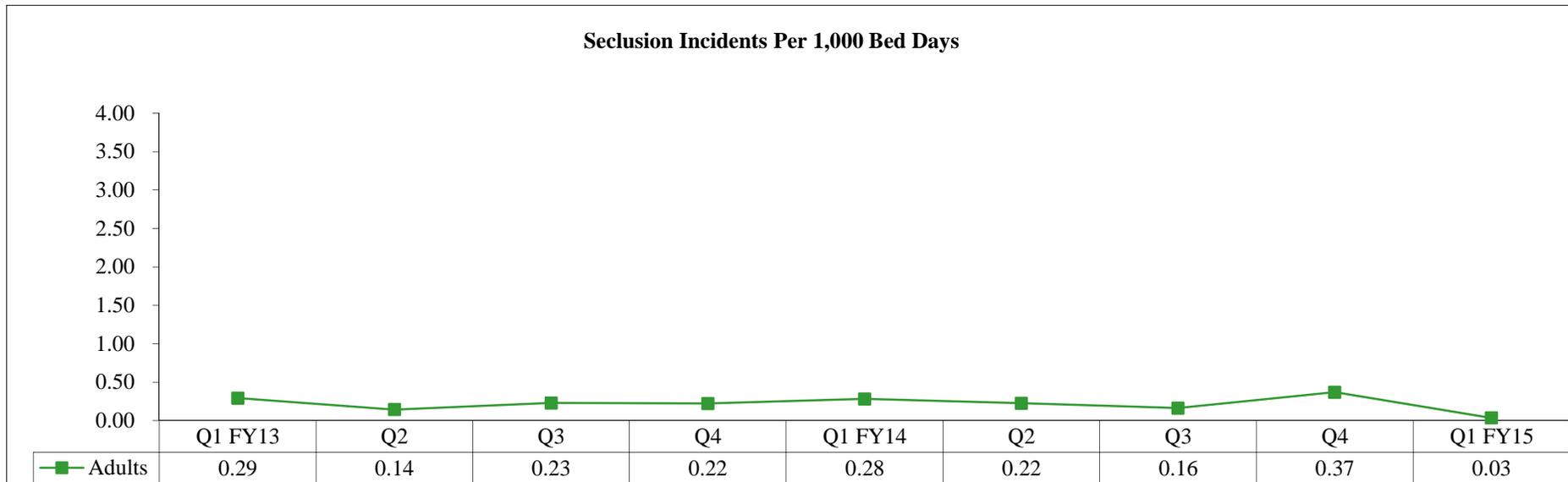
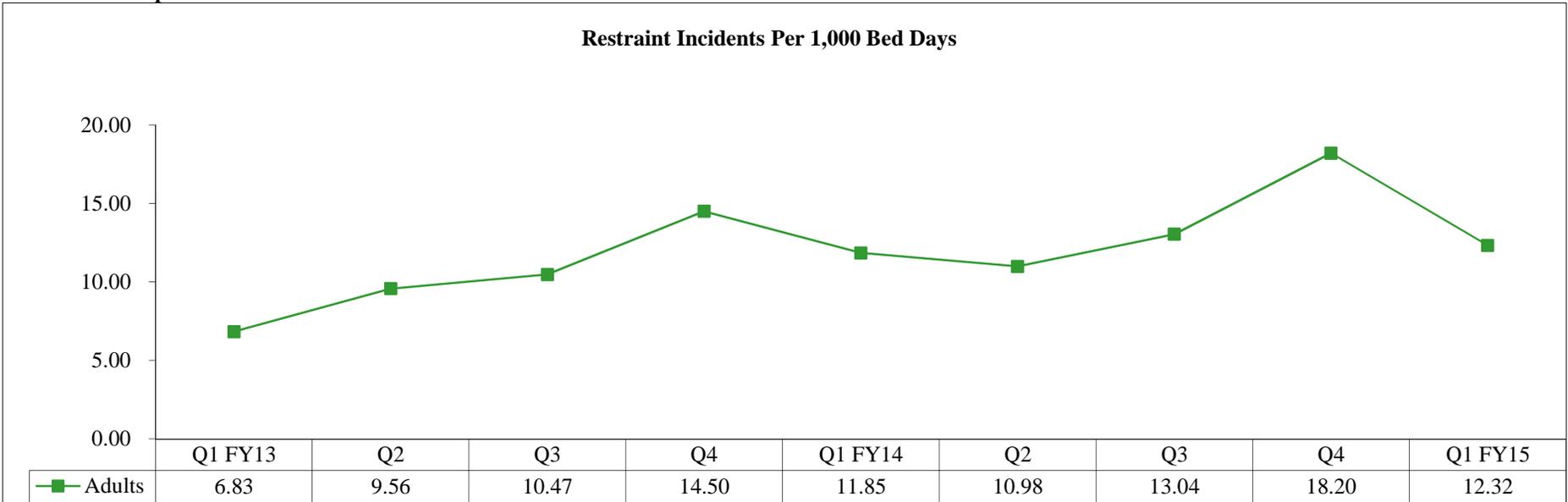
Average Number of Hours Per Incident in Seclusion



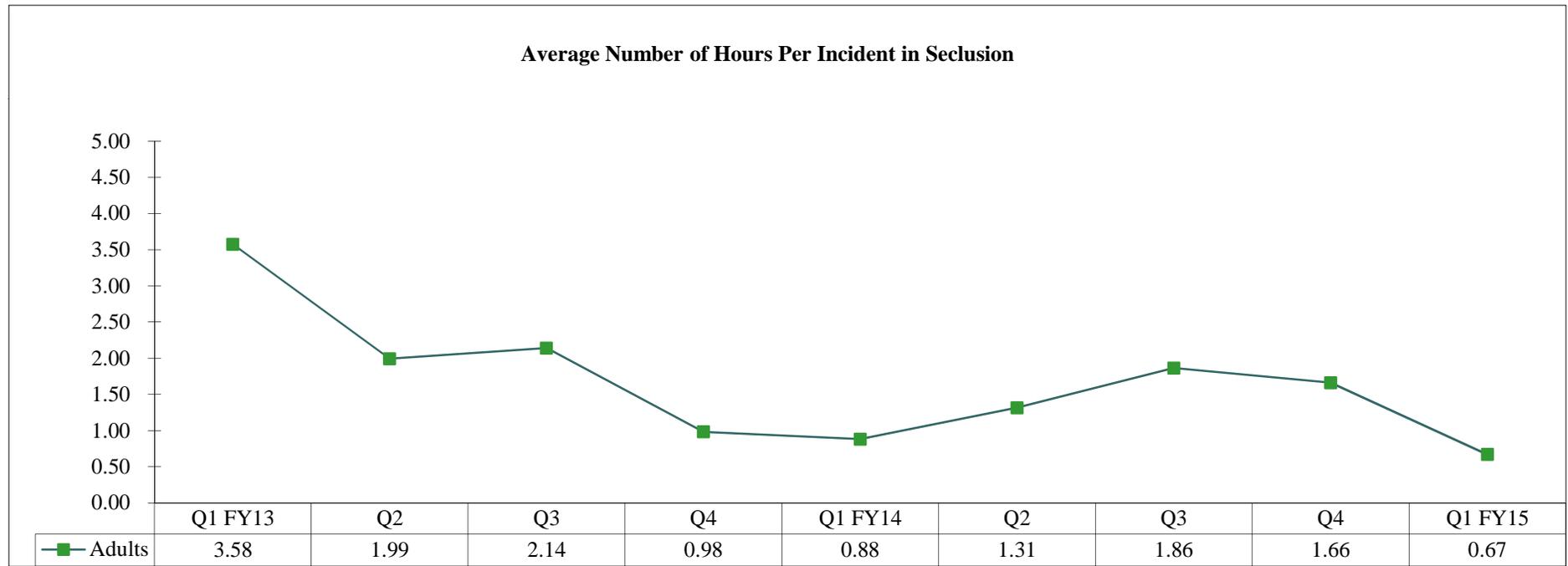
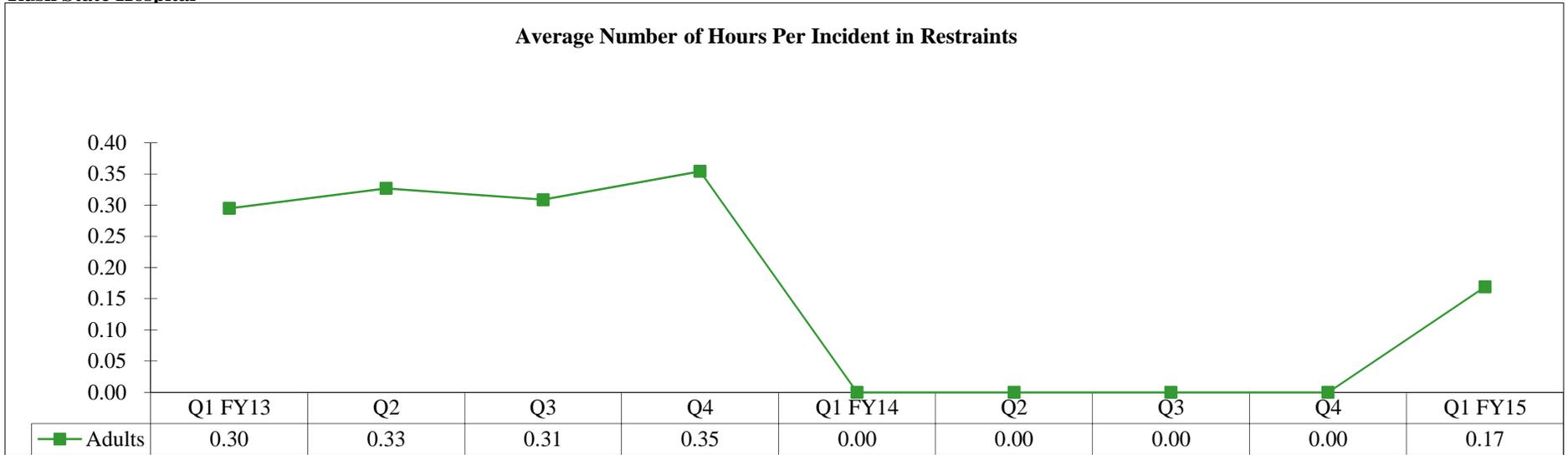
CQM - 4 Restraint and Seclusion Data
Rio Grande State Center



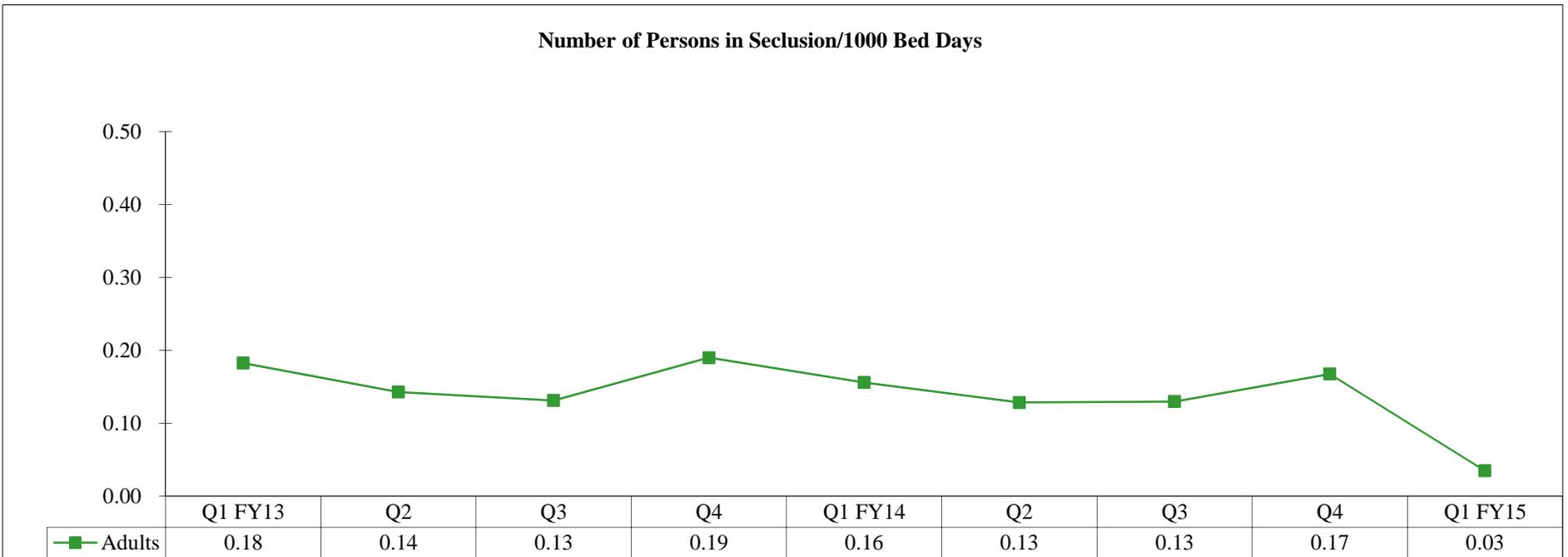
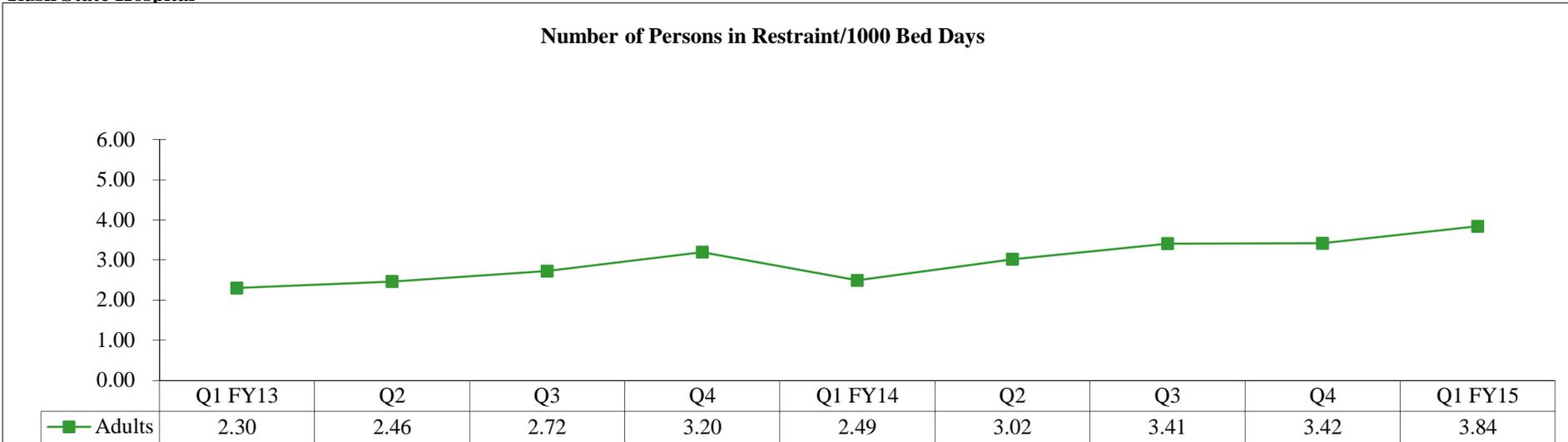
CQM - 4 Restraint and Seclusion Data
Rusk State Hospital



CQM - 4 Restraint and Seclusion Data
Rusk State Hospital

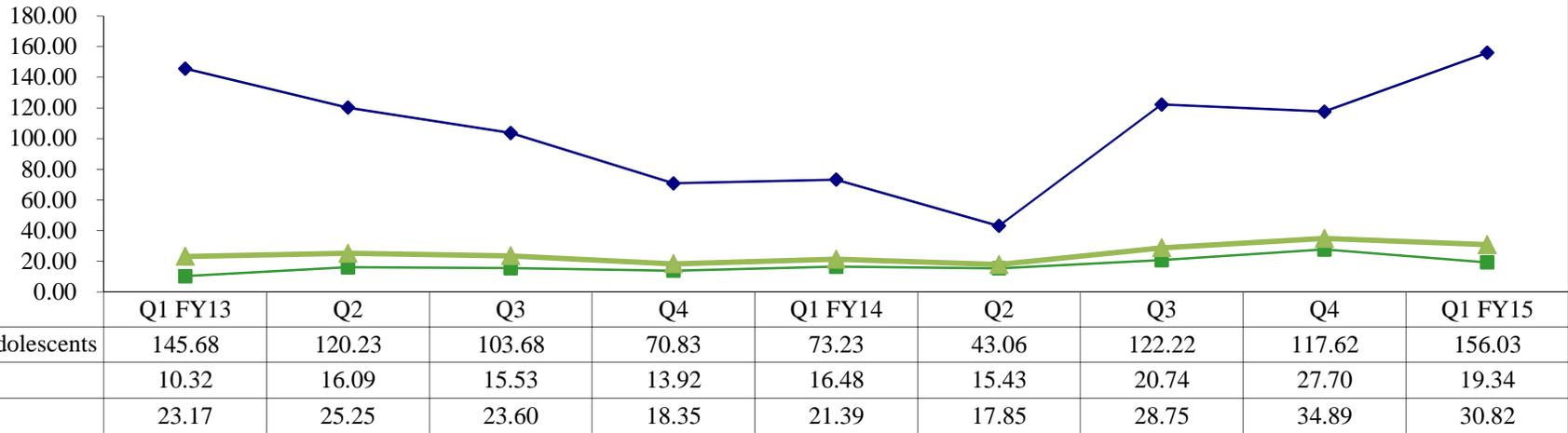


CQM - 4 Restraint and Seclusion Data
Rusk State Hospital

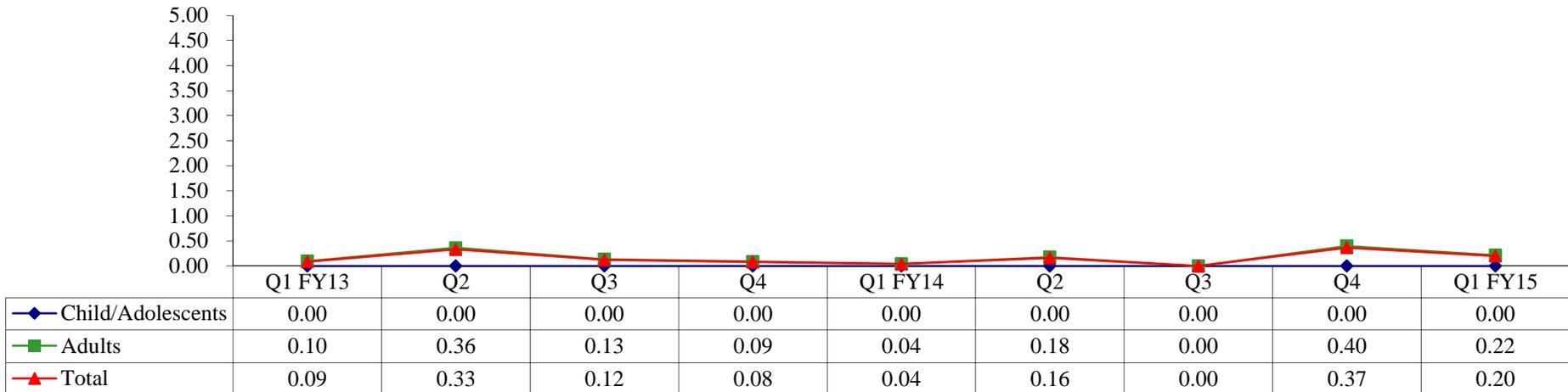


CQM - 4 Restraint and Seclusion Data
San Antonio State Hospital

Restraint Incidents Per 1,000 Bed Days

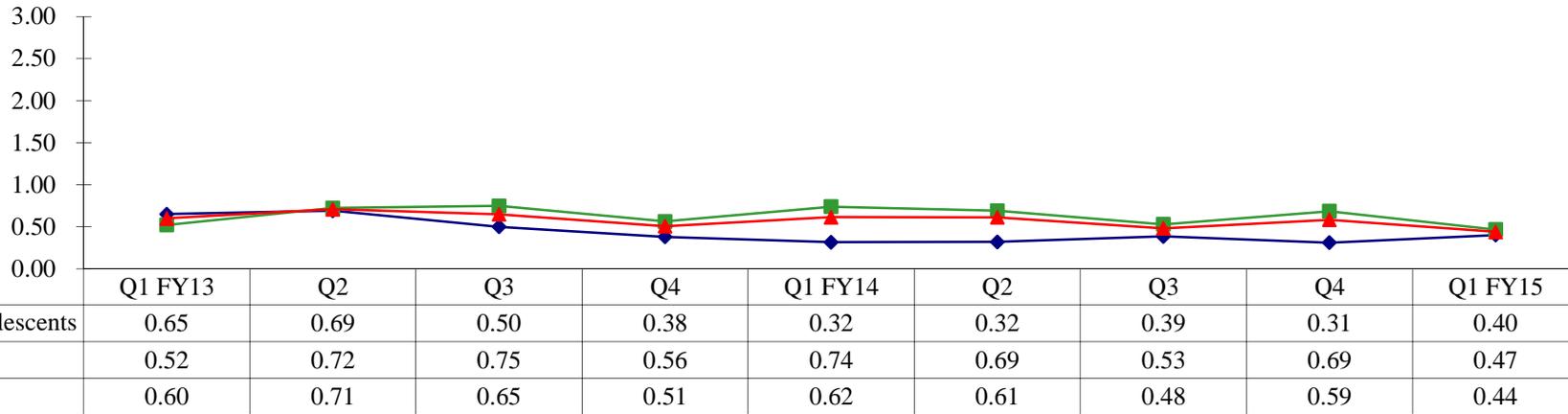


Seclusion Incidents Per 1,000 Bed Days

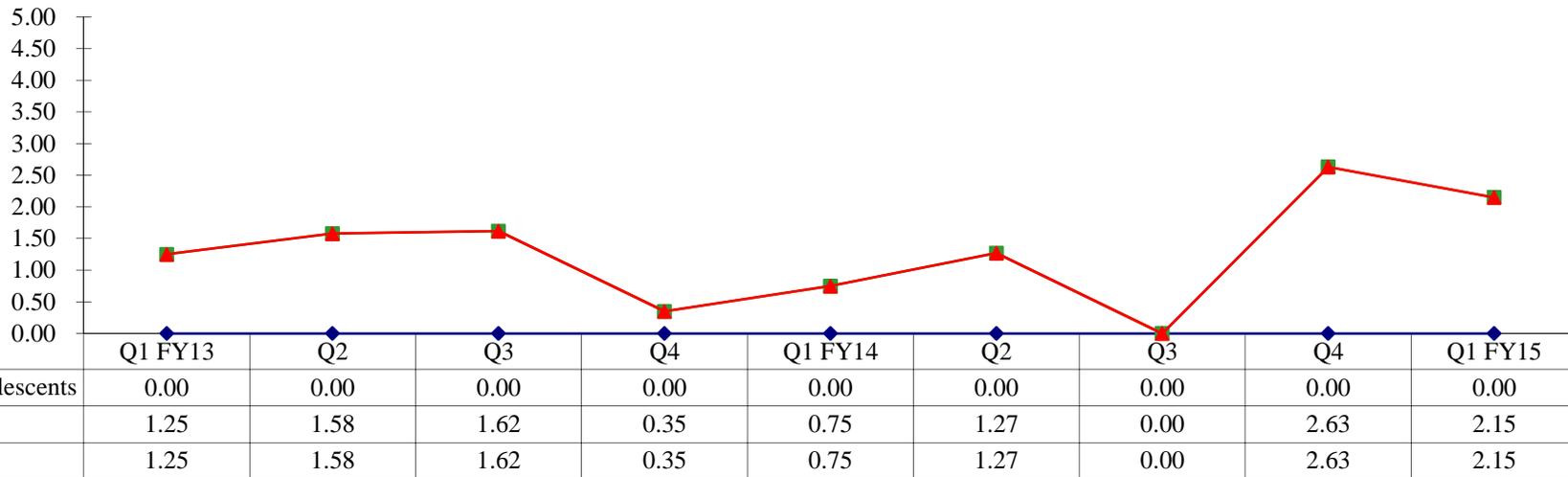


CQM - 4 Restraint and Seclusion Data
San Antonio State Hospital

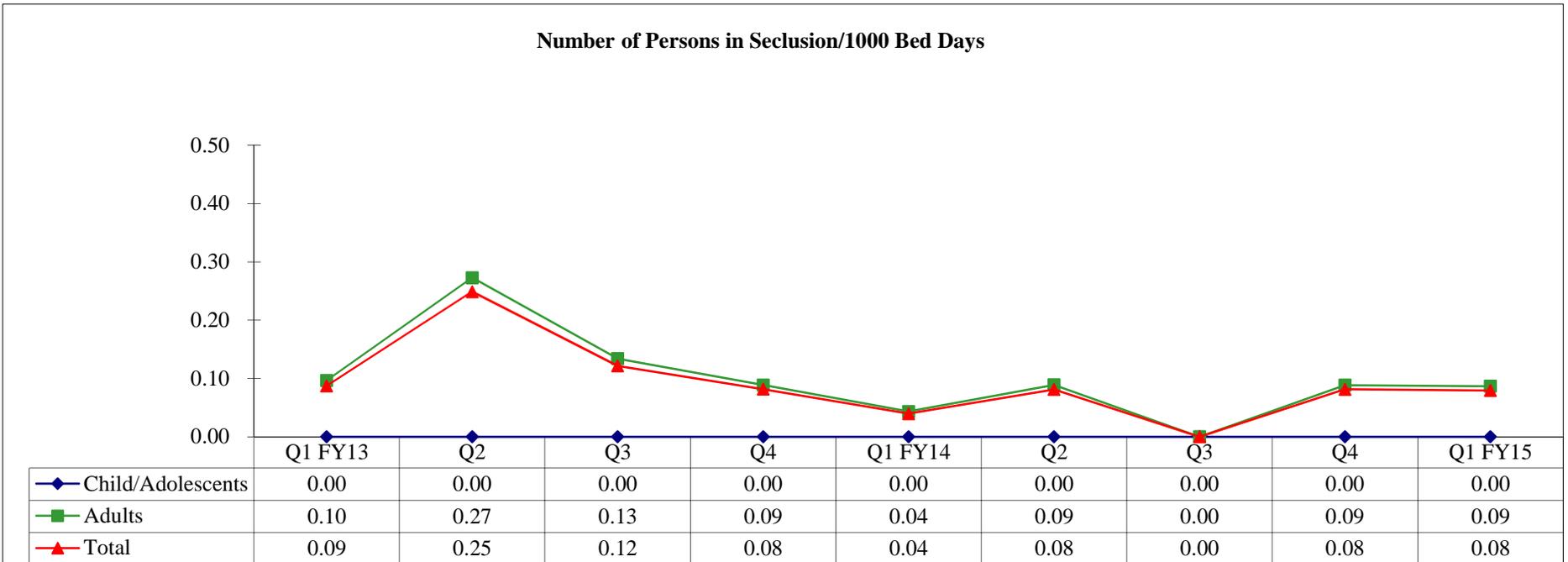
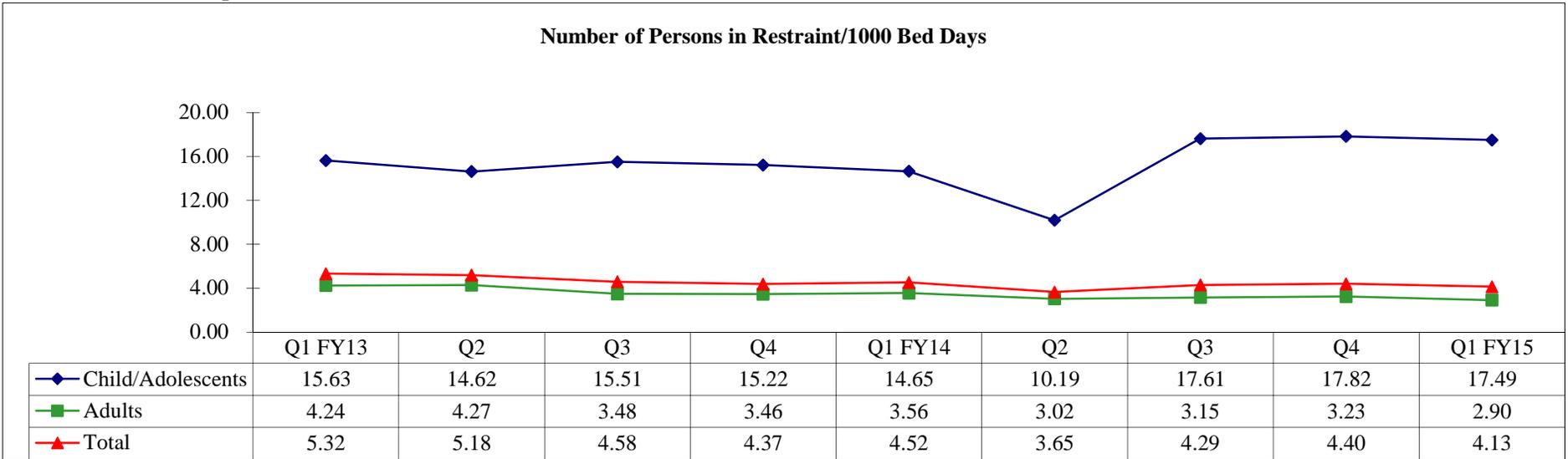
Average Number of Hours Per Incident in Restraints



Average Number of Hours Per Incident in Seclusion

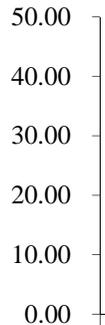


CQM - 4 Restraint and Seclusion Data
San Antonio State Hospital



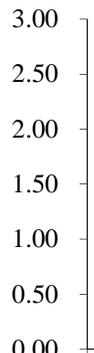
CQM - 4 Restraint and Seclusion Data
Terrell State Hospital

Restraint Incidents Per 1,000 Bed Days



| | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|------|-------|-------|---------|-------|-------|-------|---------|
| Child/Adolescents | 26.29 | 6.12 | 22.76 | 16.24 | 19.32 | 14.61 | 34.14 | 16.35 | 13.65 |
| Adults | 4.94 | 7.58 | 9.23 | 4.79 | 6.28 | 7.35 | 5.91 | 8.56 | 7.95 |
| Total | 6.70 | 7.46 | 10.34 | 5.61 | 7.72 | 8.09 | 8.64 | 9.29 | 8.54 |

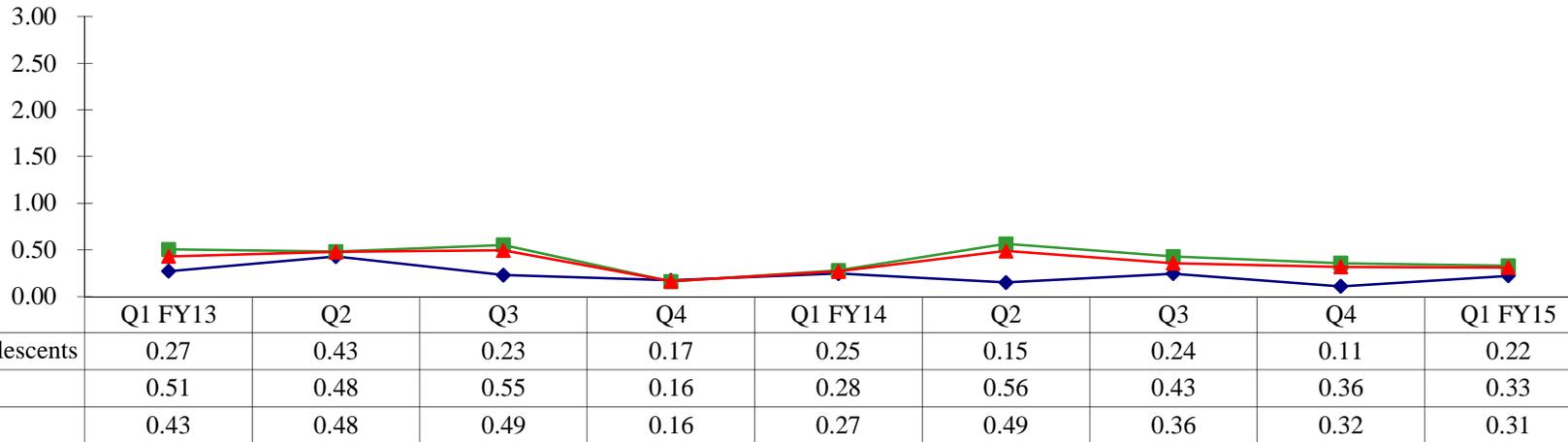
Seclusion Incidents Per 1,000 Bed Days



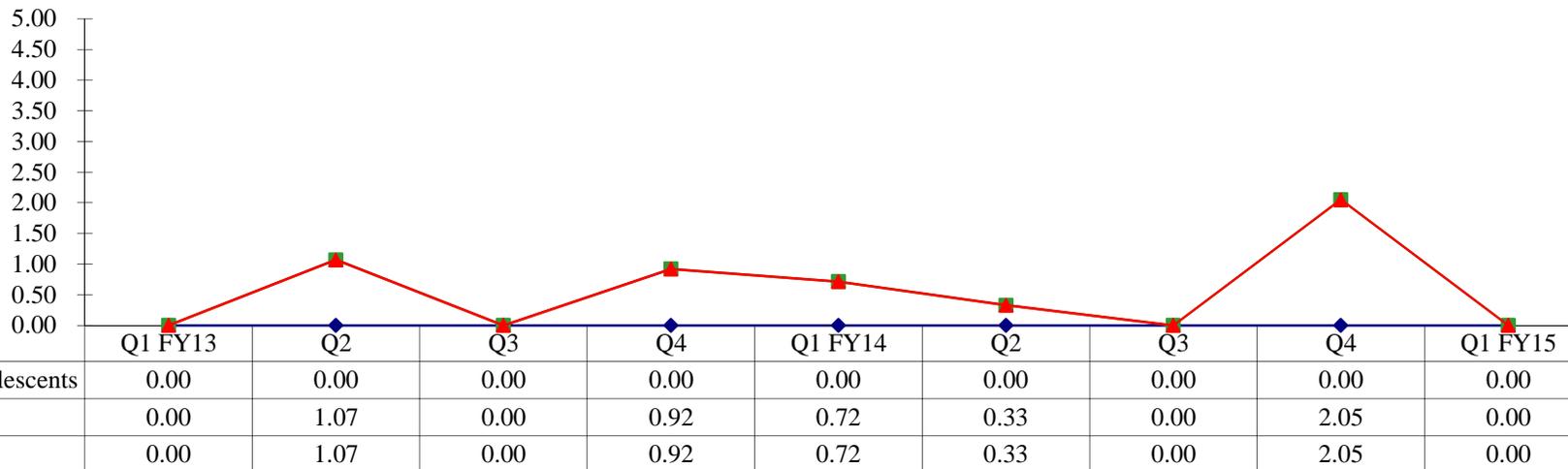
| | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|------|------|------|---------|------|------|------|---------|
| Child/Adolescents | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Adults | 0.00 | 0.04 | 0.00 | 0.04 | 0.10 | 0.05 | 0.00 | 0.20 | 0.00 |
| Total | 0.00 | 0.04 | 0.00 | 0.04 | 0.09 | 0.05 | 0.00 | 0.18 | 0.00 |

CQM - 4 Restraint and Seclusion Data
Terrell State Hospital

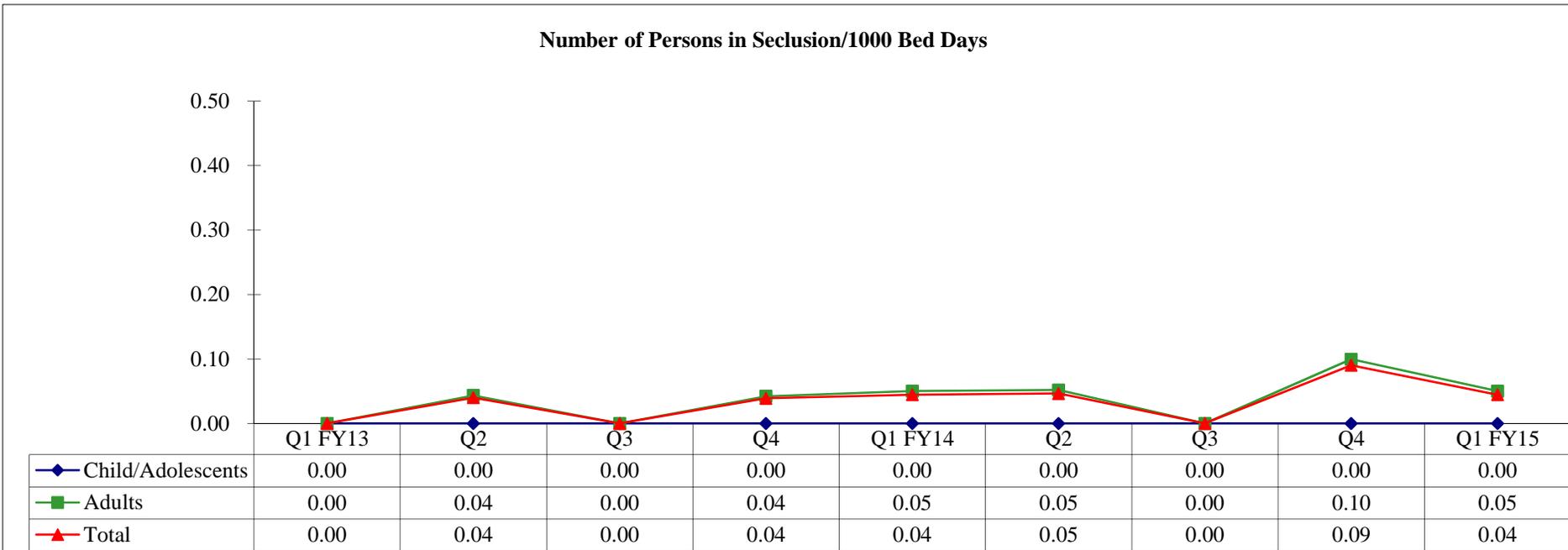
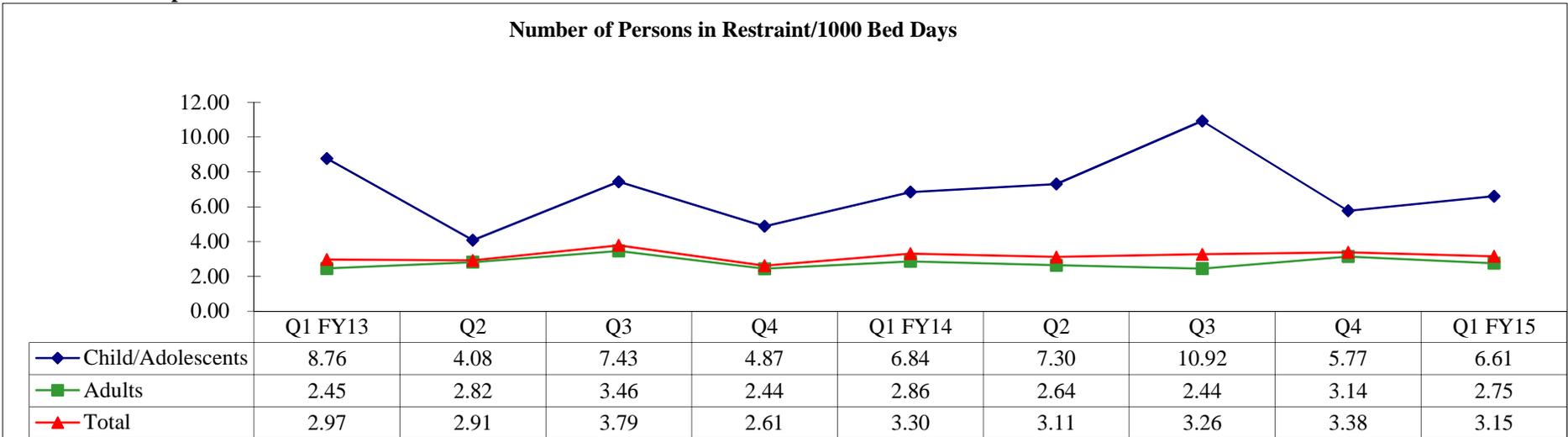
Average Number of Hours Per Incident in Restraints



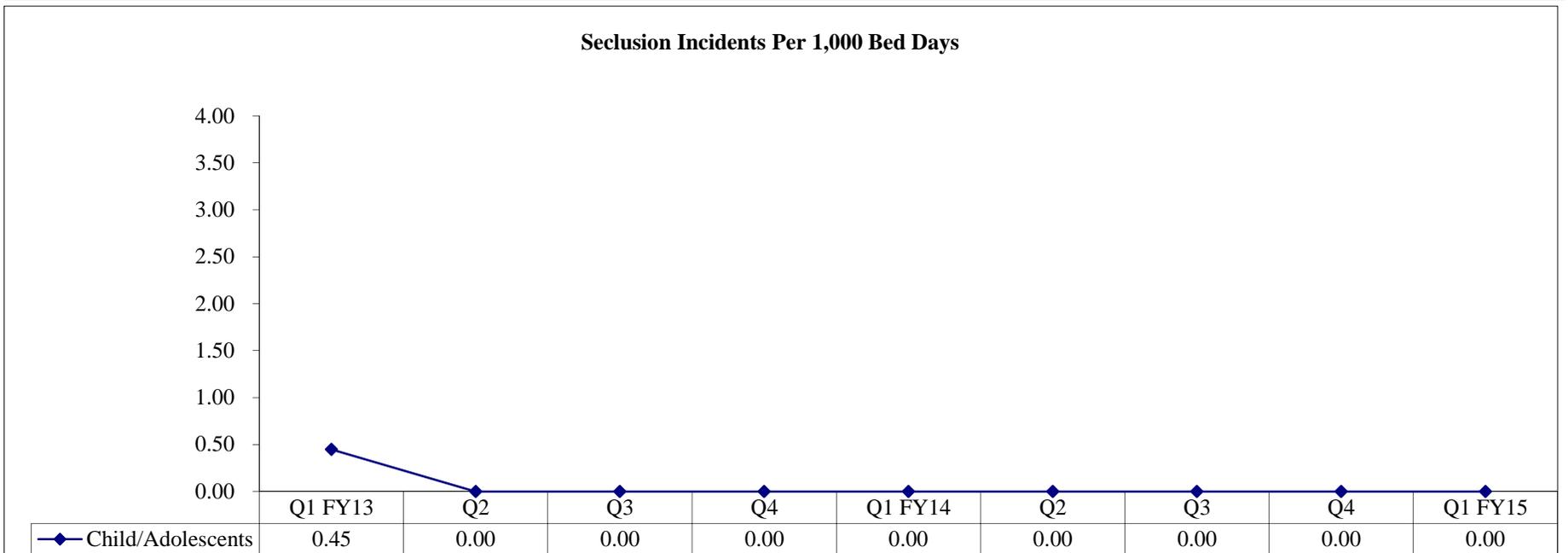
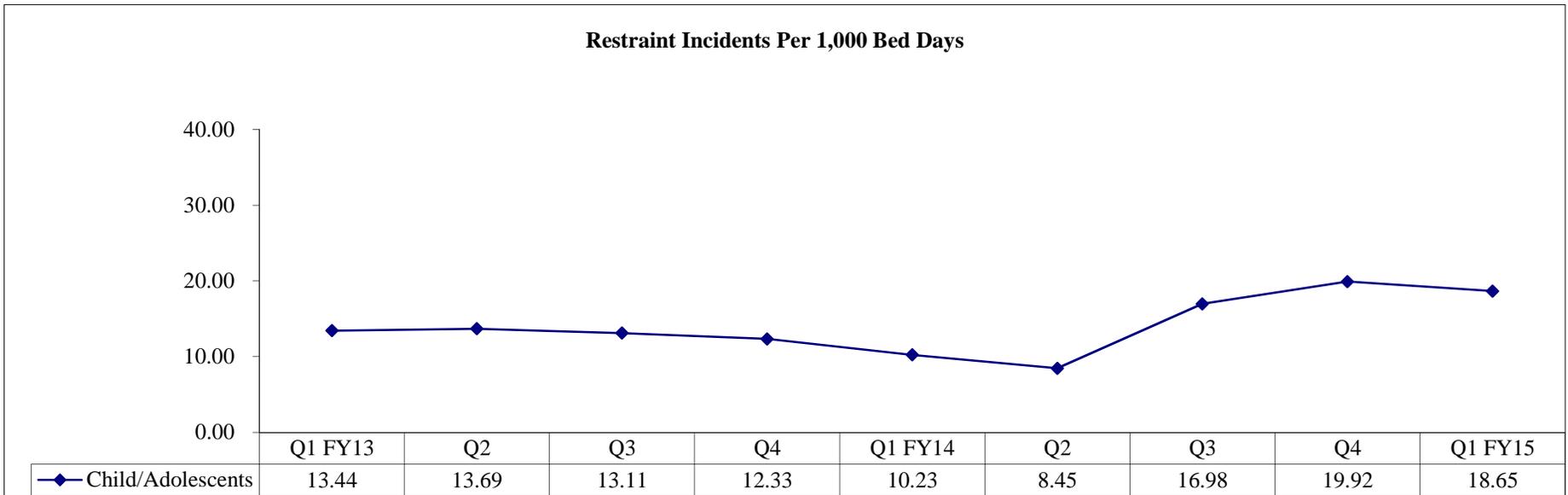
Average Number of Hours Per Incident in Seclusion



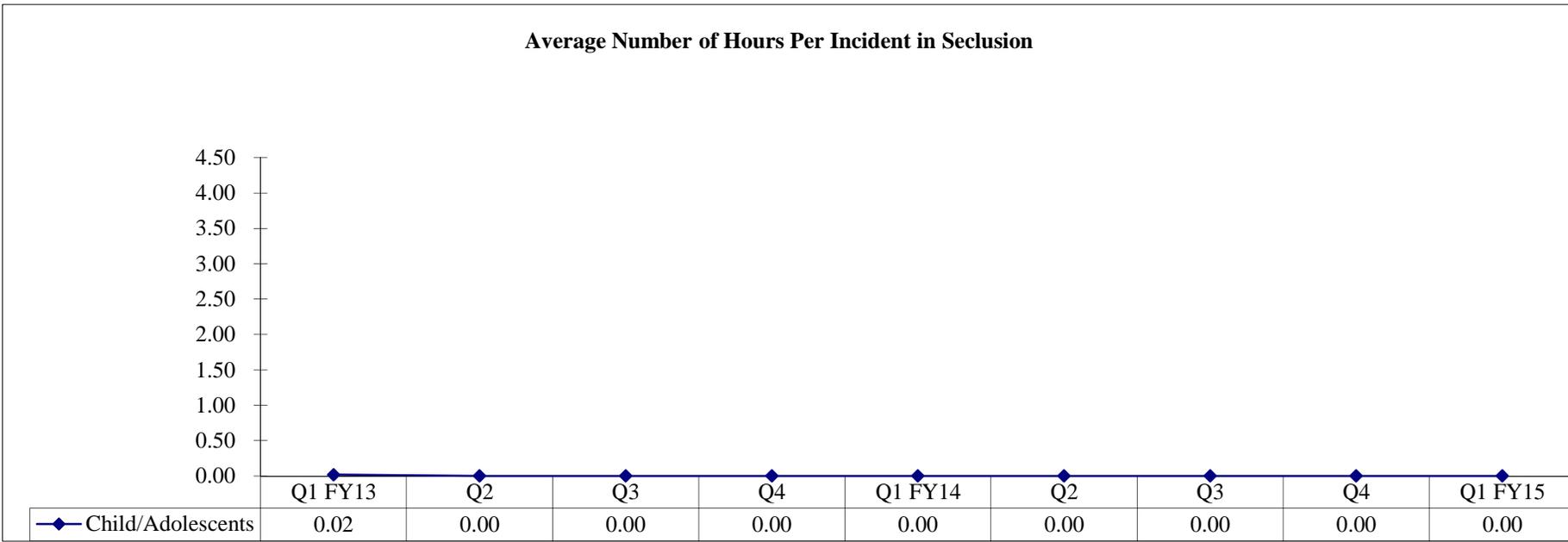
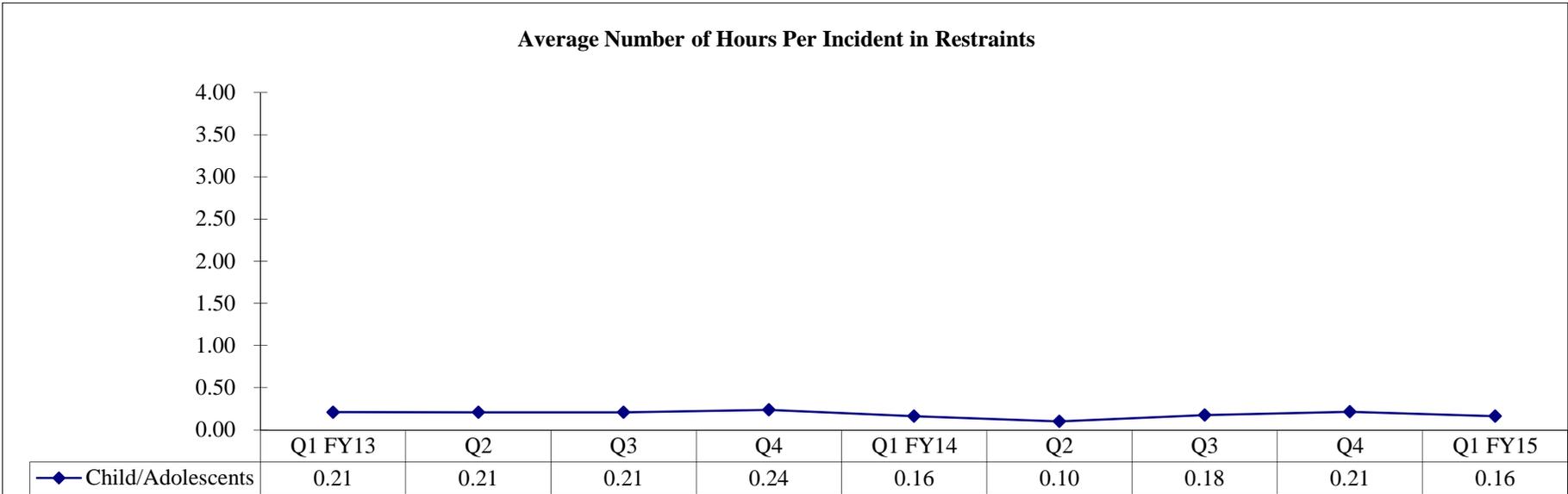
CQM - 4 Restraint and Seclusion Data
Terrell State Hospital



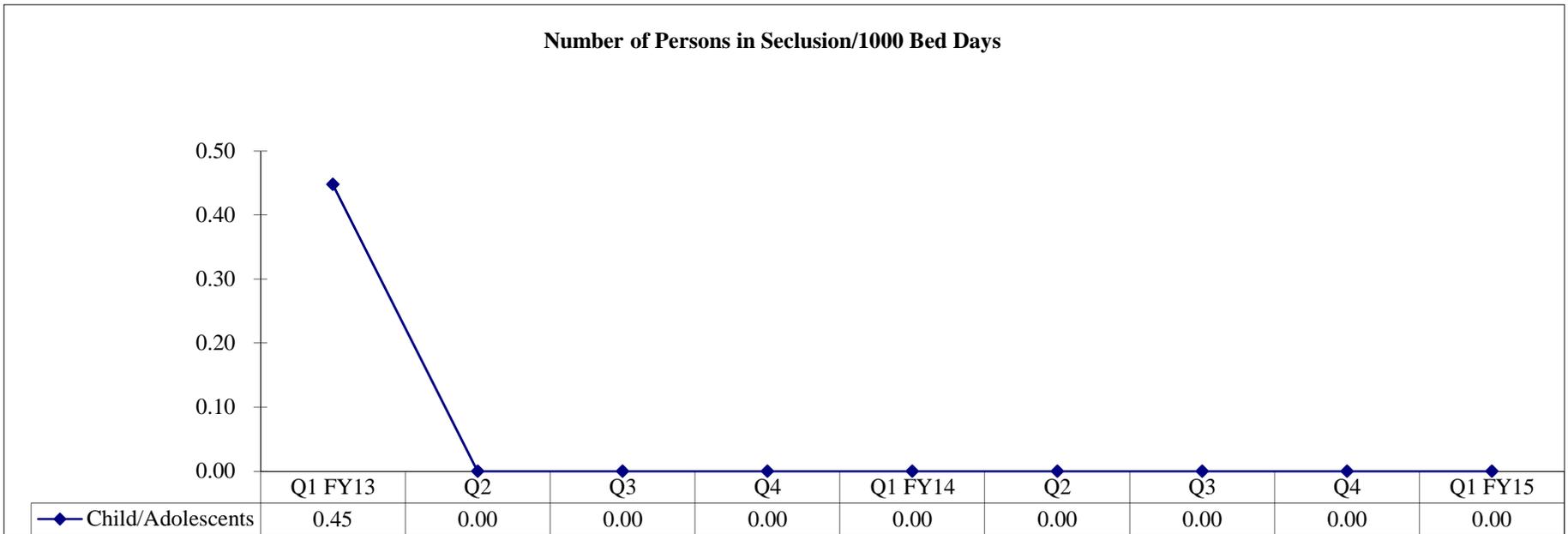
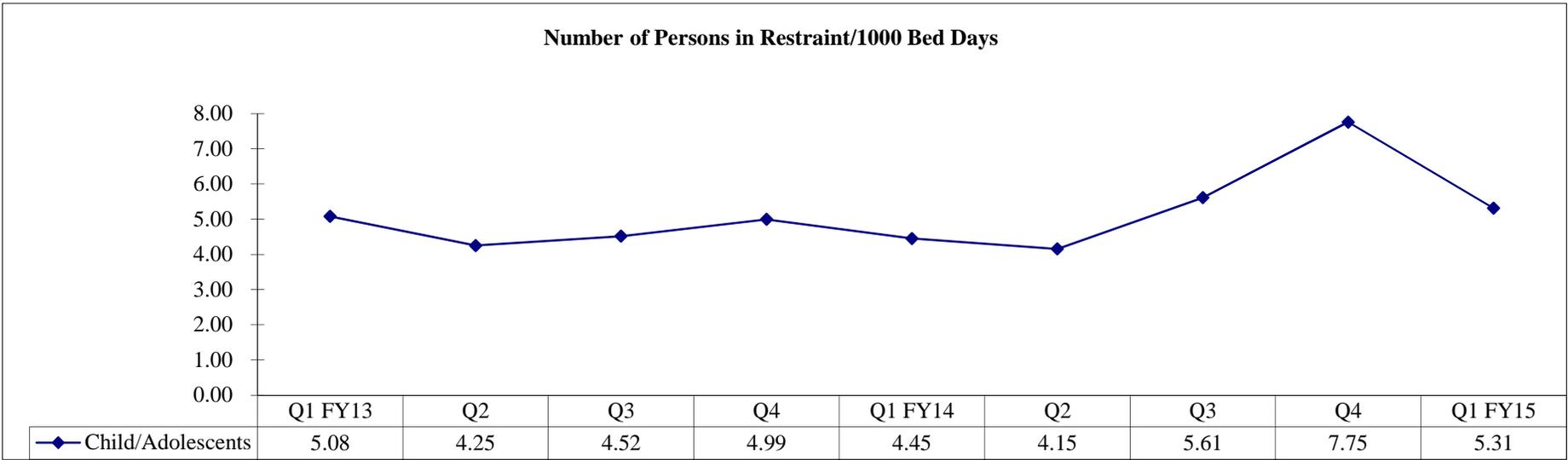
**CQM - 4 Restraint and Seclusion Data
Waco Center for Youth**



**CQM - 4 Restraint and Seclusion Data
Waco Center for Youth**



**CQM - 4 Restraint and Seclusion Data
Waco Center for Youth**



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COM-5

Measure: Patient to Patient Aggression

Timeframe: Monthly

Definition

The state hospital rate of patient injuries documented on the Client Injury Assessment per month.

Data Source

ODS Ad Hoc Report (Patient Injuries)

CARE Reports HC022175 & HC022185 (Unduplicated Clients Days by Account Units)

Data Display and Chart Description

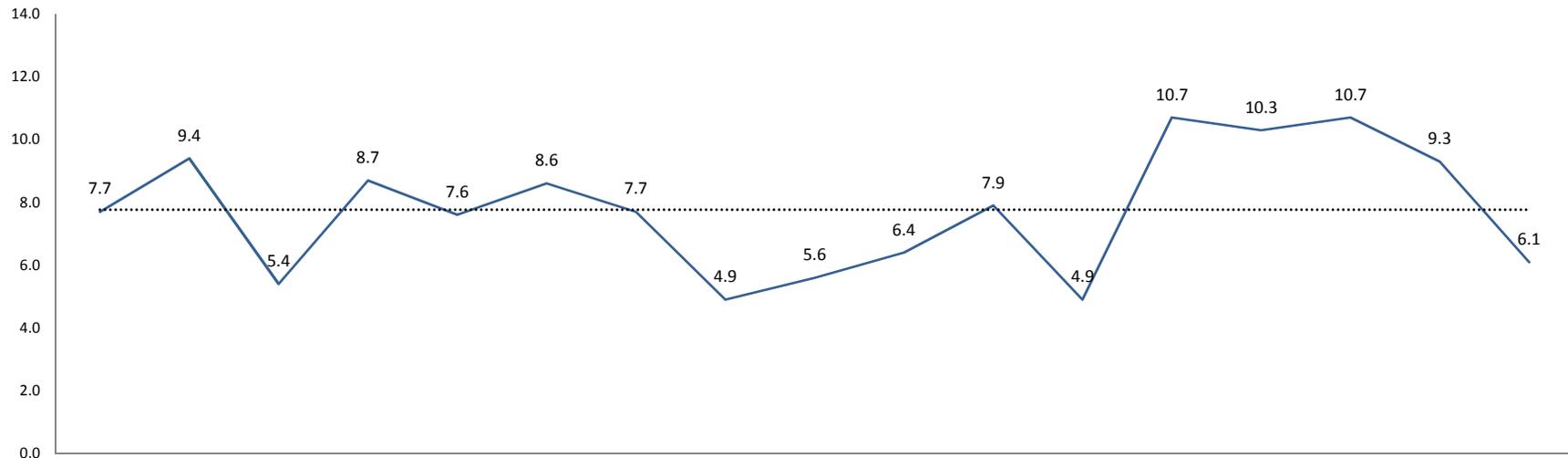
Chart shows number of patient to patient aggression and rate (per 1,000 bed days) for individual state hospitals and system-wide. Table shows number of injuries by probable cause and rate (per 1,000 bed days) of injuries by treatment for individual state hospitals and system-wide. Bar chart with fiscal year to date of total NRI Categories 3,4, and 5 injuries per 1,000 bed days for individual state hospitals and system-wide. (Category 3 – Medical Treatment; Category 4 – Hospitalization; and Category 5 – Fatal). Table shows number of injuries by age category (child/adolescent; adult; and geriatric).

Purpose

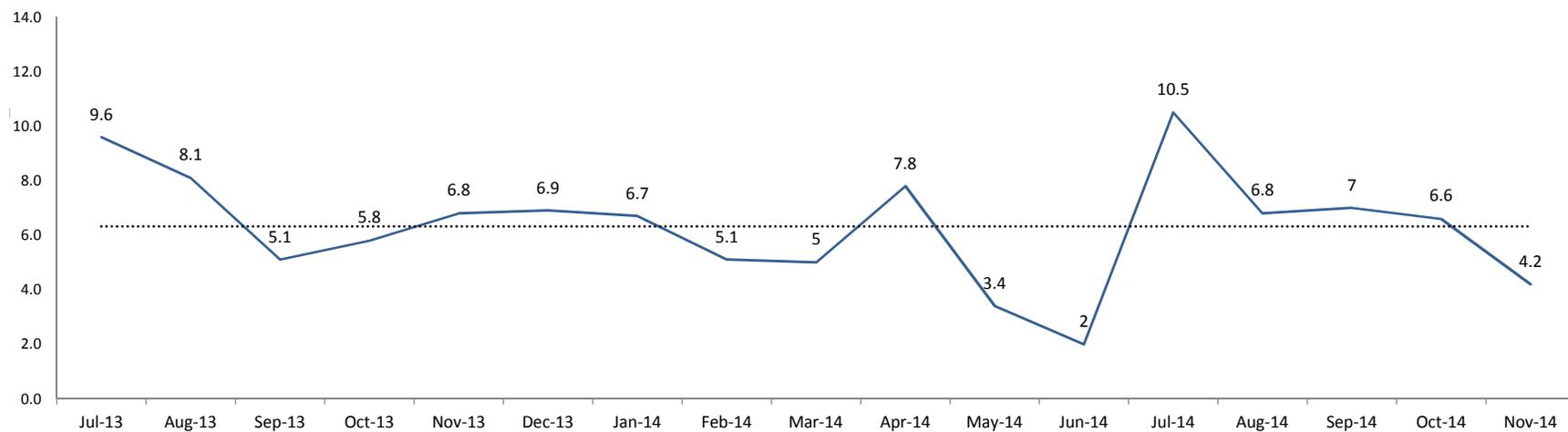
Measure patient injuries by 1,000 bed days.

**CMQ-5 Patient to Patient Aggression
Austin State Hospital**

Injuries resulting from Patient-to-Patient Aggression

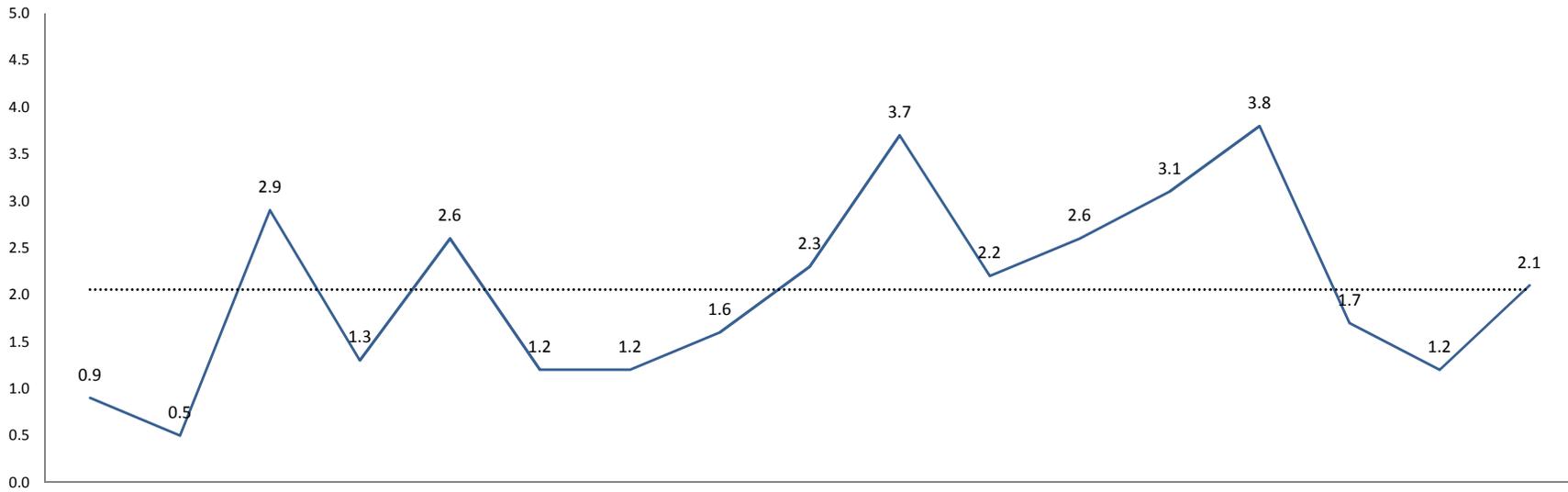


Restraint/Seclusion Events resulting from Patient-to-Patient Aggression

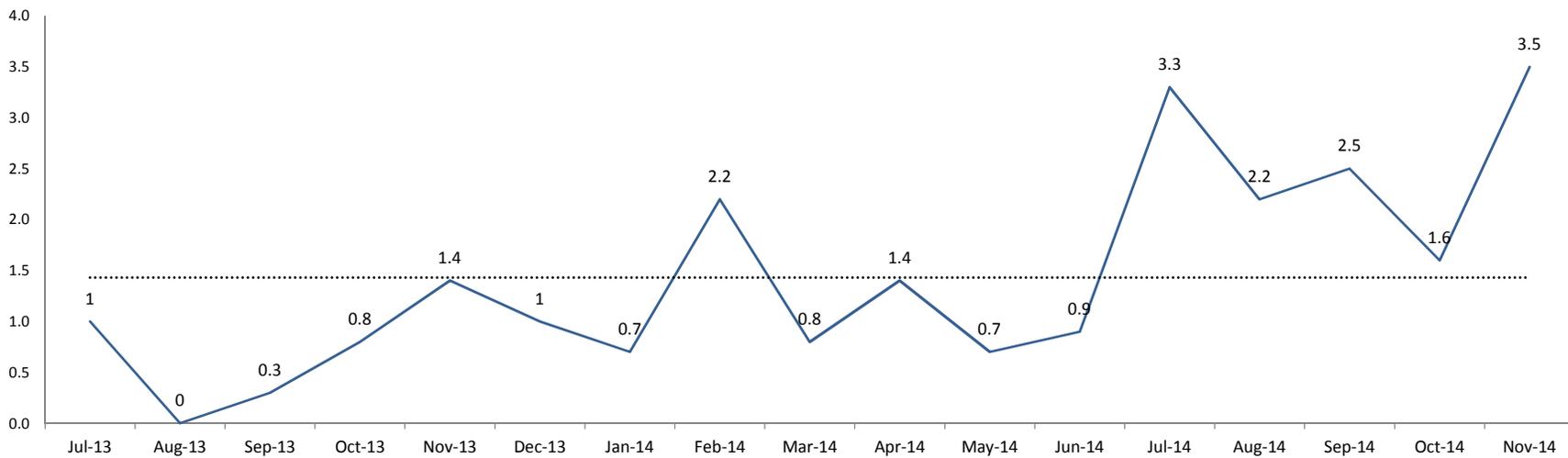


**CMQ-5 Patient to Patient Aggression
Big Spring State Hospital**

Injuries resulting from Patient-to-Patient Aggression

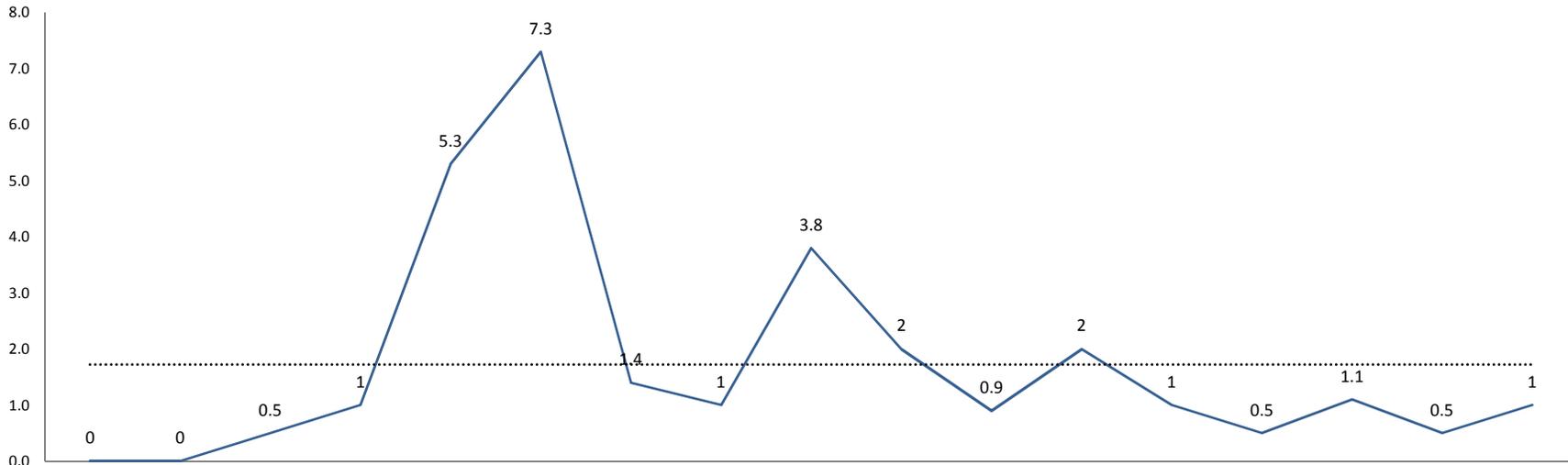


Restraint/Seclusion Events resulting from Patient-to-Patient Aggression

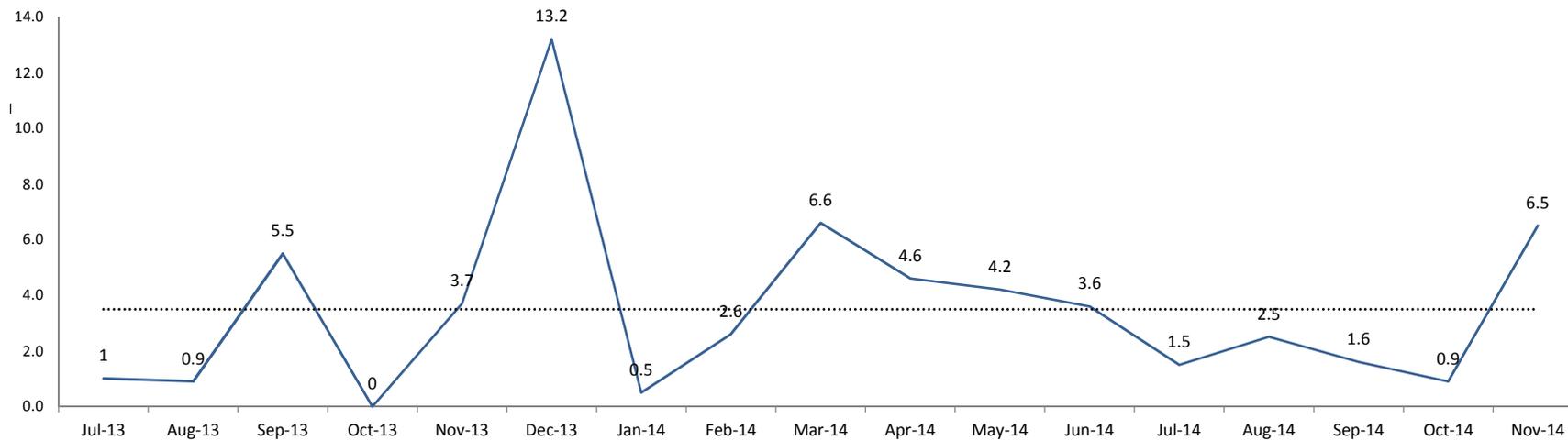


**CMQ-5 Patient to Patient Aggression
El Paso Psychiatric Center**

Injuries resulting from Patient-to-Patient Aggression

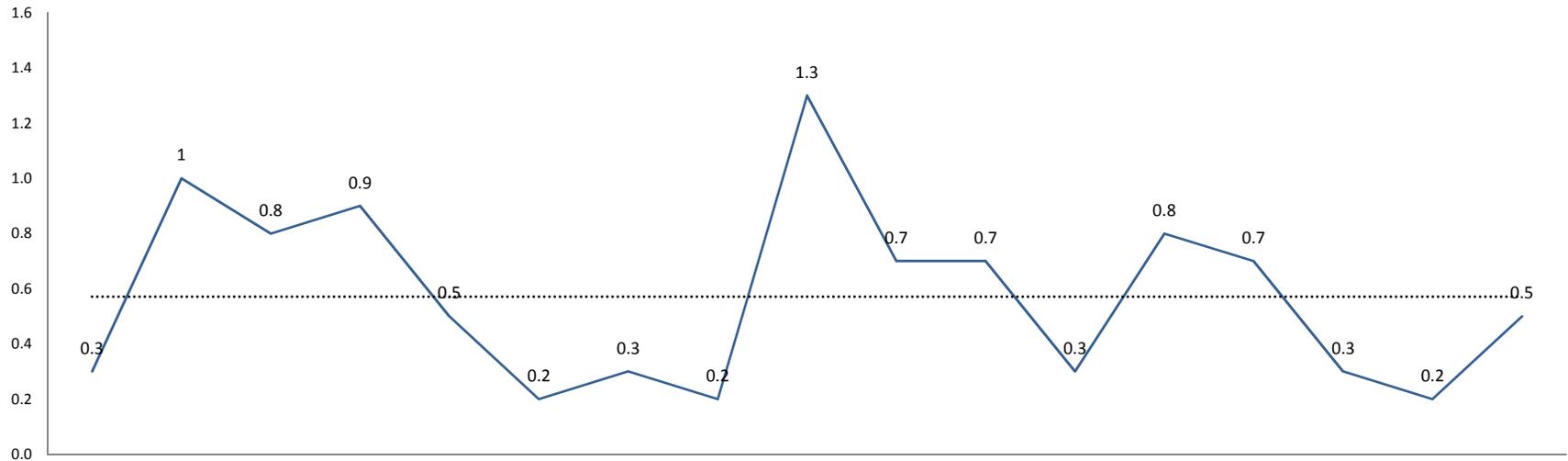


Restraint/Seclusion Events resulting from Patient-to-Patient Aggression

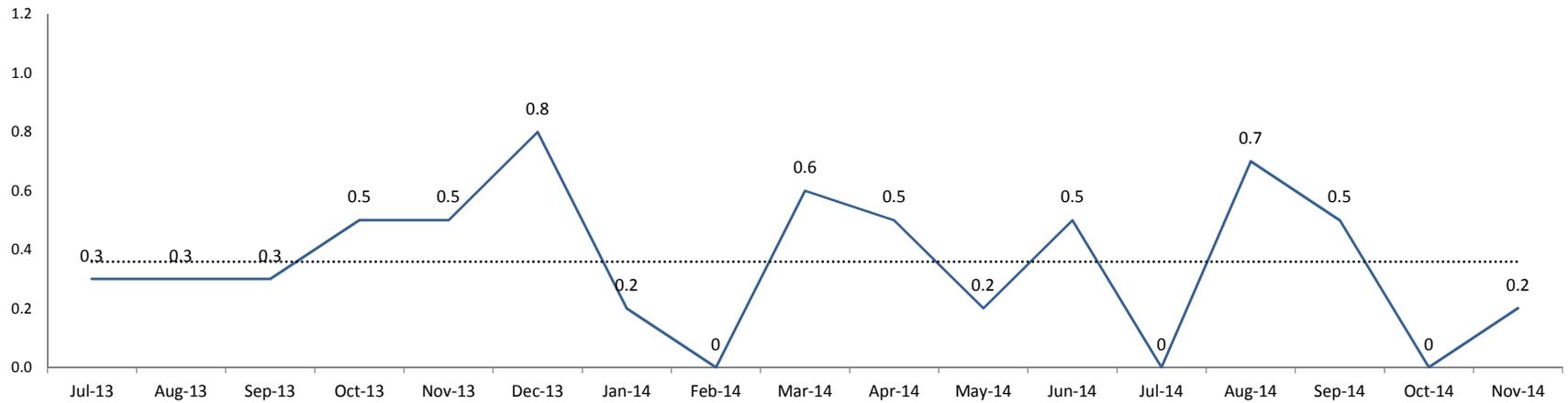


**CMQ-5 Patient to Patient Aggression
Kerrville State Hospital**

Injuries resulting from Patient-to-Patient Aggression

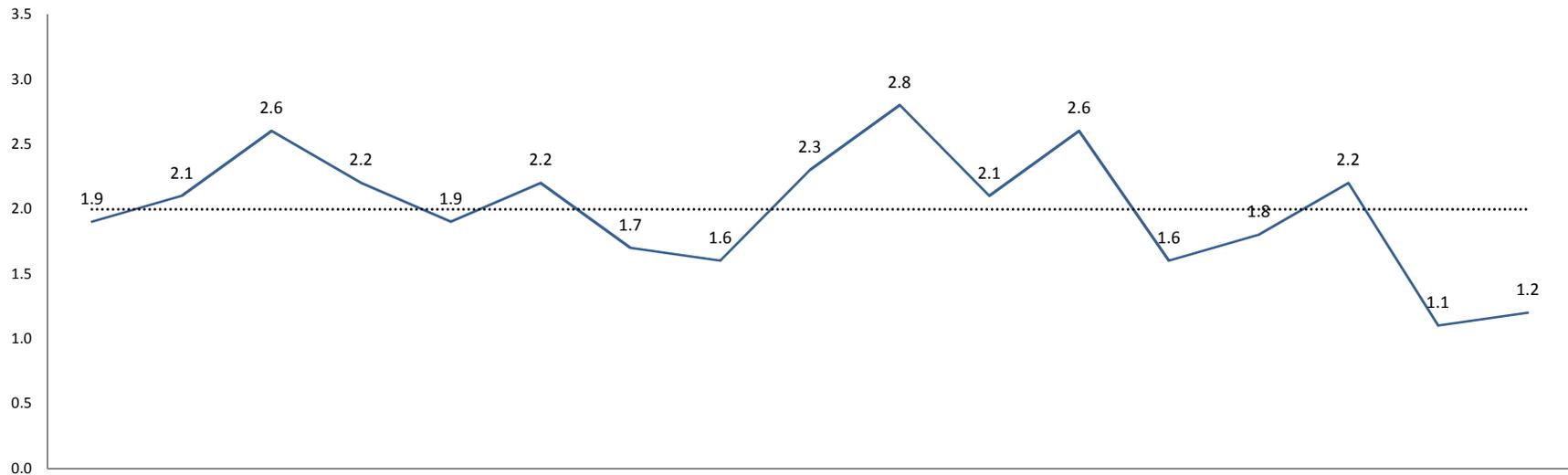


Restraint/Seclusion Events resulting from Patient-to-Patient Aggression

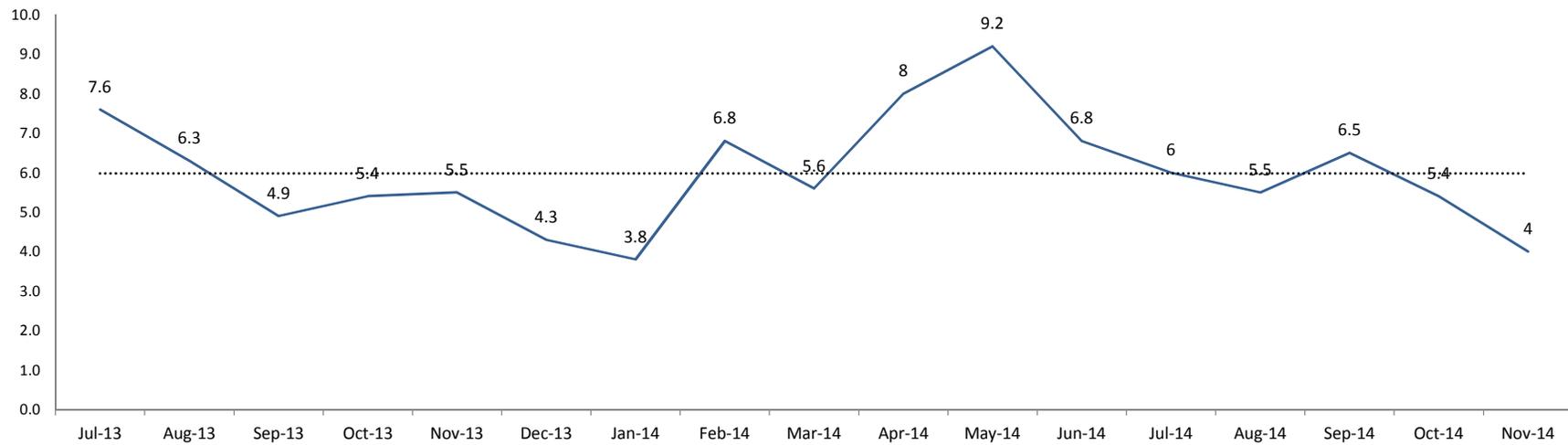


**CMQ-5 Patient to Patient Aggression
North Texas State Hospital**

Injuries resulting from Patient-to-Patient Aggression

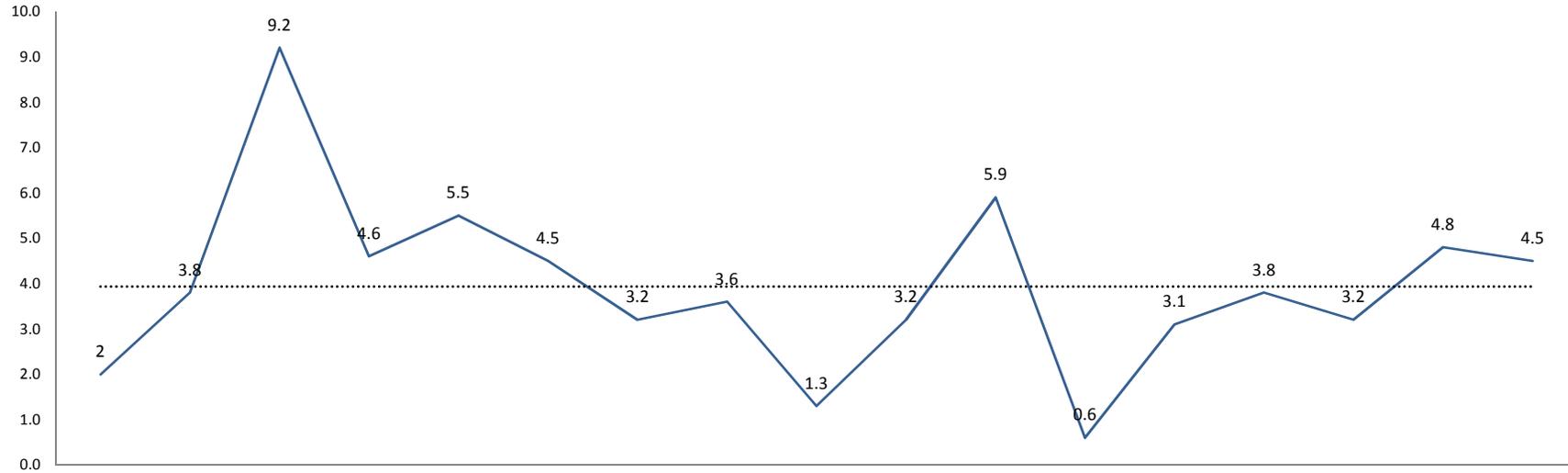


Restraint/Seclusion Events resulting from Patient-to-Patient Aggression

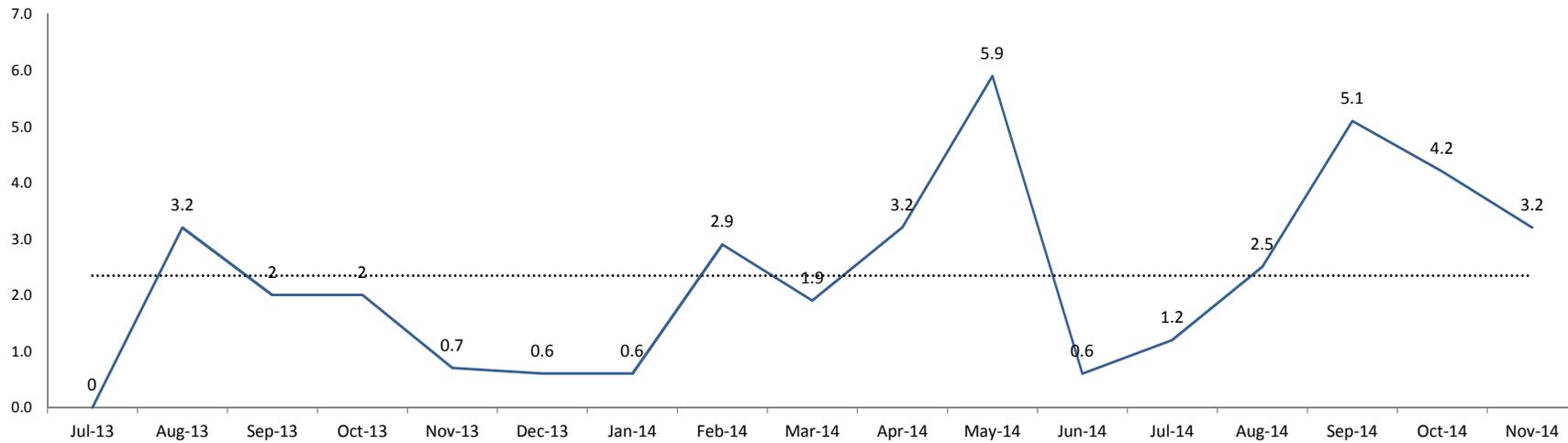


**CMQ-5 Patient to Patient Aggression
Rio Grande State Center**

Injuries resulting from Patient-to-Patient Aggression

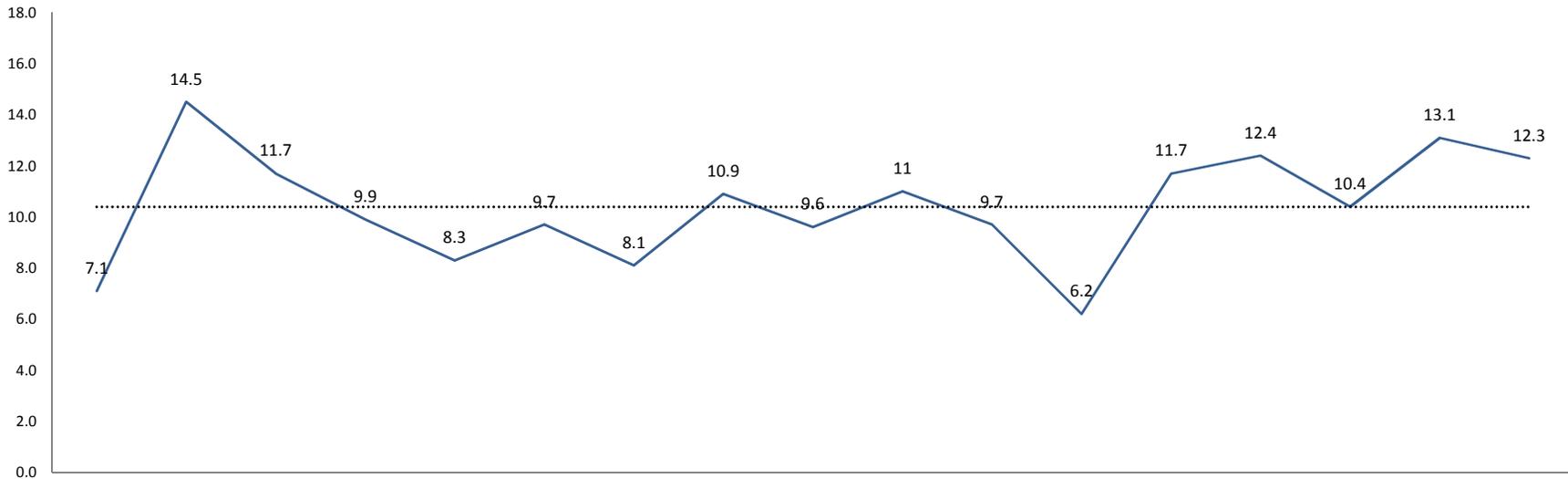


Restraint/Seclusion Events resulting from Patient-to-Patient Aggression

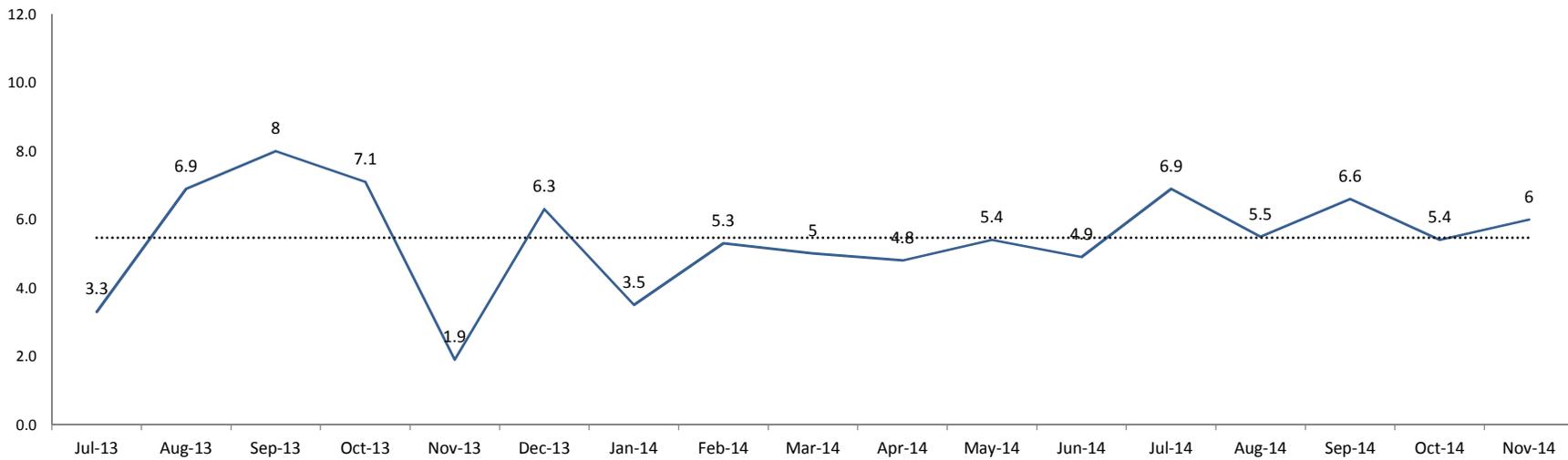


**CMQ-5 Patient to Patient Aggression
Rusk State Hospital**

Injuries resulting from Patient-to-Patient Aggression

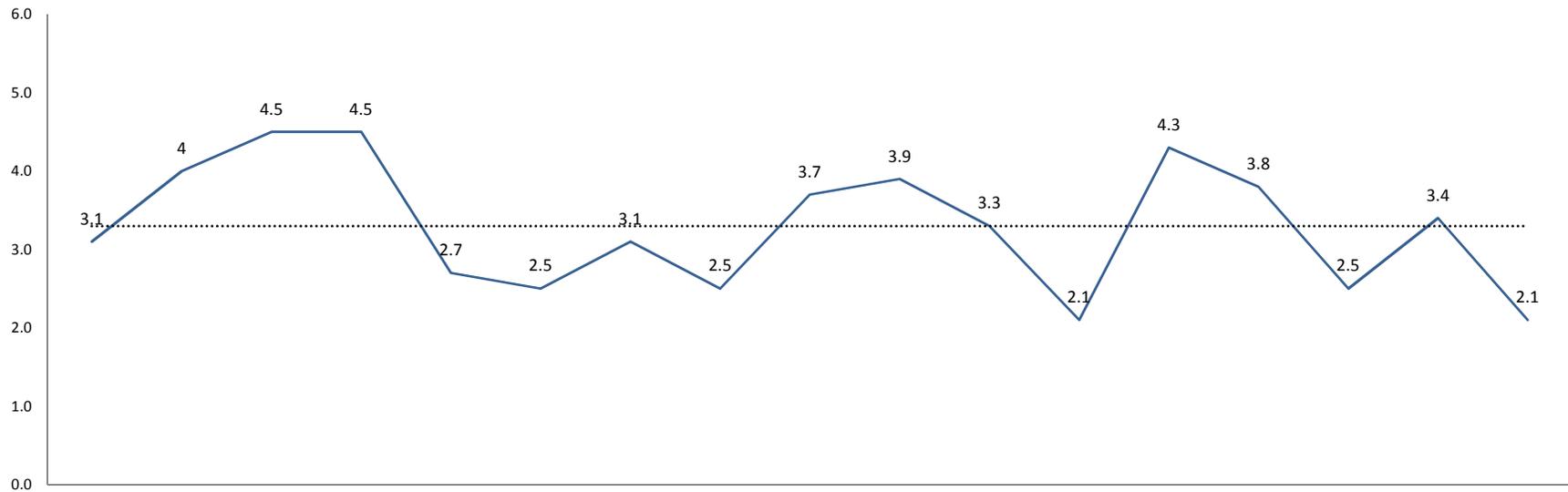


Restraint/Seclusion Events resulting from Patient-to-Patient Aggression

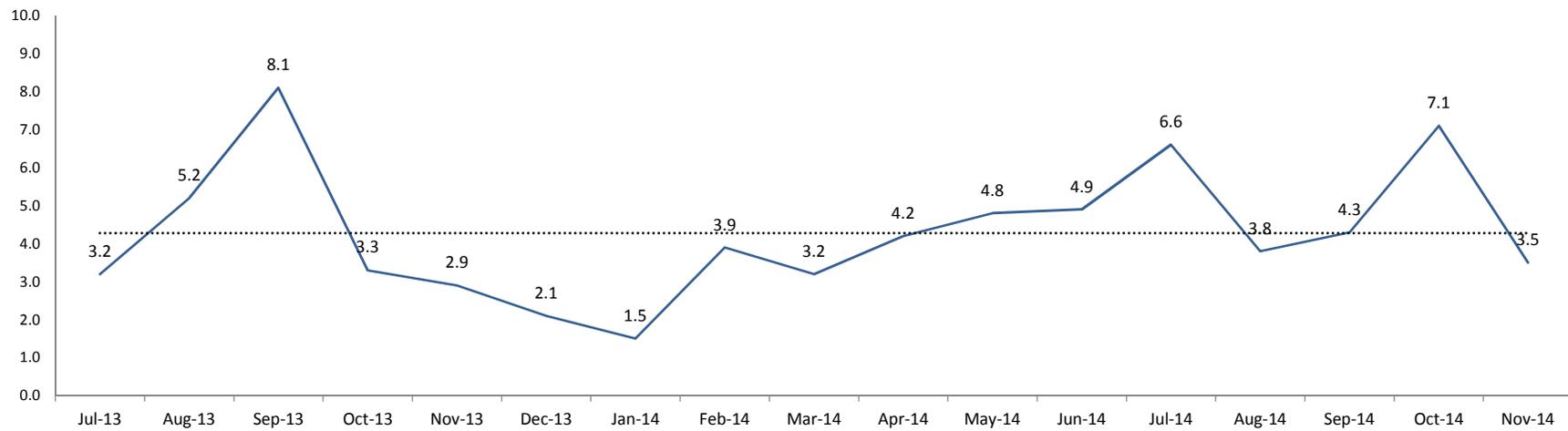


**CMQ-5 Patient to Patient Aggression
San Antonio State Hospital**

Injuries resulting from Patient-to-Patient Aggression

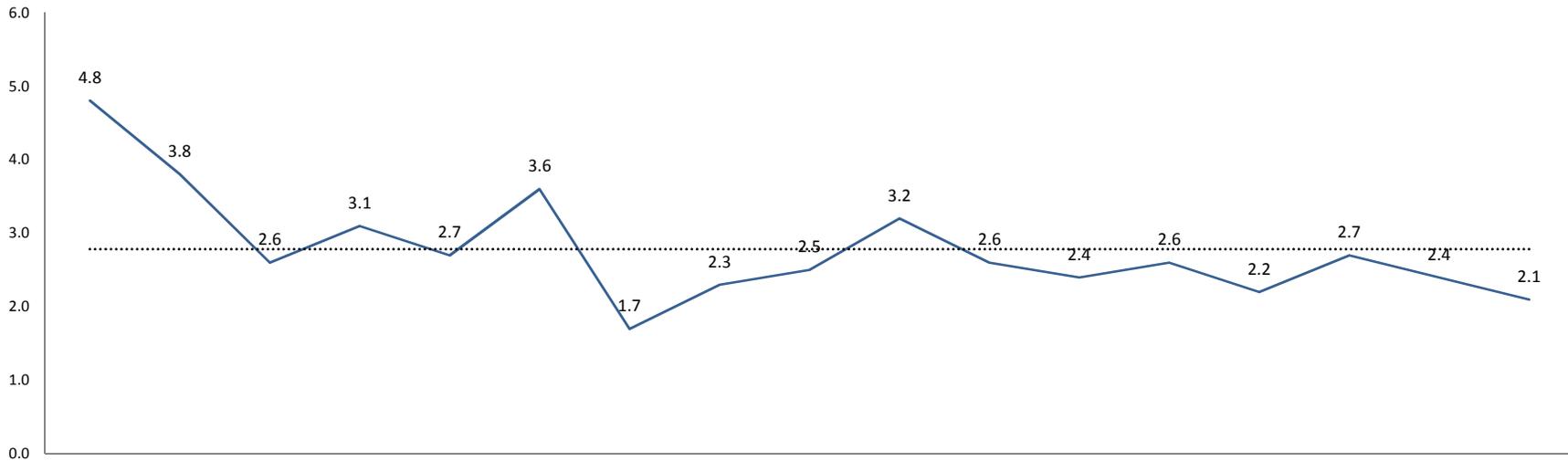


Restraint/Seclusion Events resulting from Patient-to-Patient Aggression

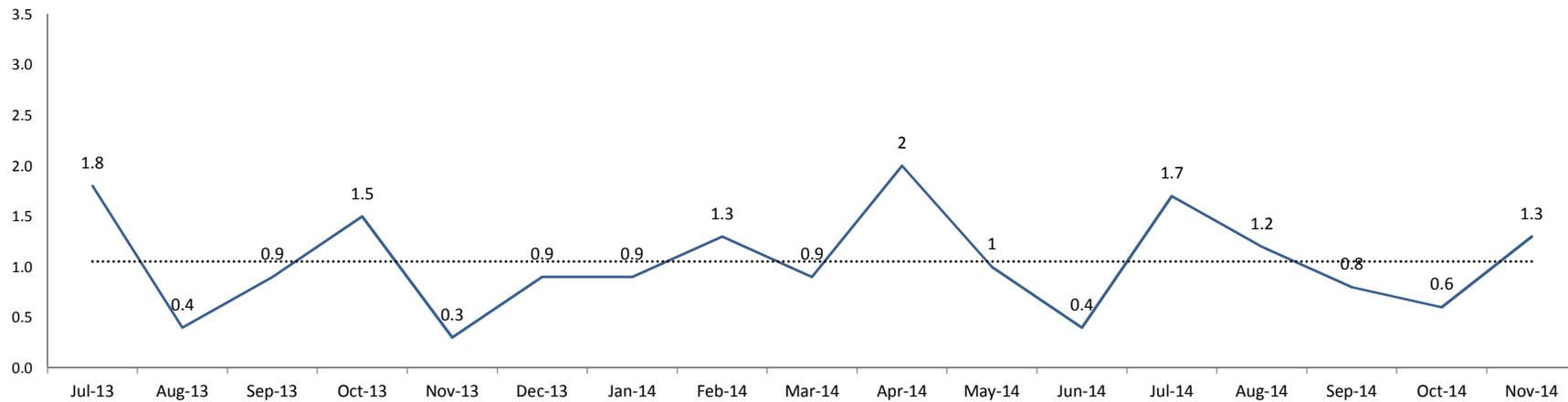


**CMQ-5 Patient to Patient Aggression
Terrell State Hospital**

Injuries resulting from Patient-to-Patient Aggression

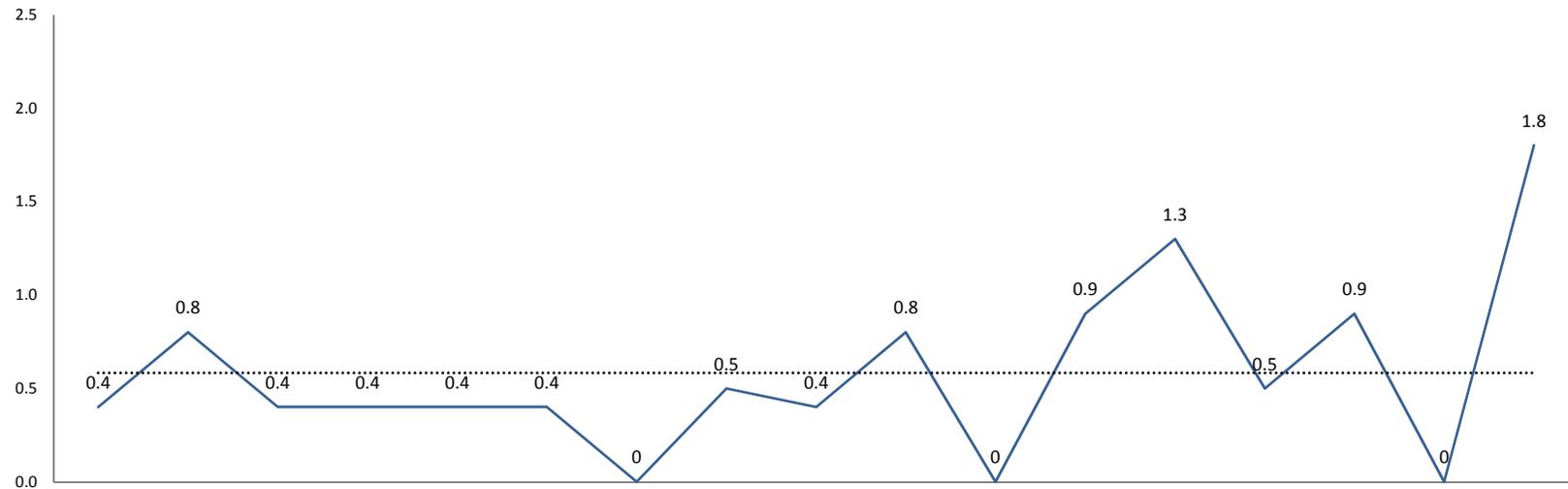


Restraint/Seclusion Events resulting from Patient-to-Patient Aggression

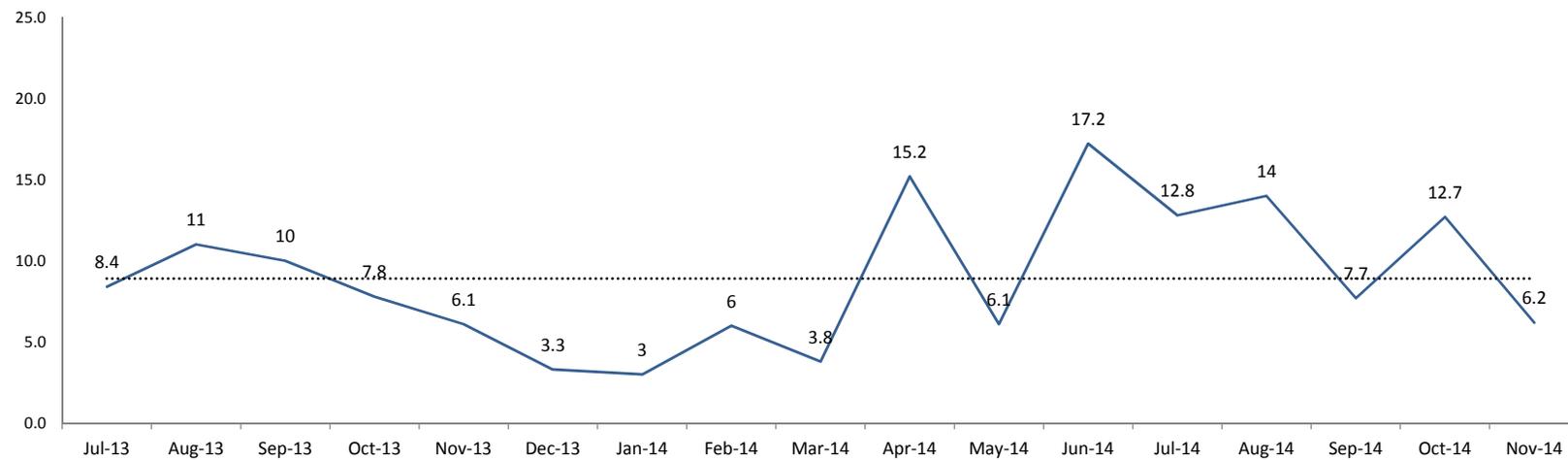


**CMQ-5 Patient to Patient Aggression
Waco Center for Youth**

Injuries resulting from Patient-to-Patient Aggression



Restraint/Seclusion Events resulting from Patient-to-Patient Aggression



CQM - 5 Patient Injuries

All Mental Health Hospitals - FY15

| Hospital | Q1 | | | | | | | Q2 | | | | | | | Q3 | | | | | | | Q4 | | | | | | | |
|--------------------|-----------|-------------|------------|-----------|-----------------|----------|-------------|-----|-------|-----------|--------|-----------------|-------|---|-----|-------|-----------|--------|-----------------|-------|---|-----|-------|-----------|--------|-----------------|-------|---|--|
| | N/A | No Tx | First Aid | Med Tx | ospital-ization | Fatal | * | N/A | No Tx | First Aid | Med Tx | ospital-ization | Fatal | * | N/A | No Tx | First Aid | Med Tx | ospital-ization | Fatal | * | N/A | No Tx | First Aid | Med Tx | ospital-ization | Fatal | * | |
| ALL MH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Accident | 0 | 386 | 280 | 36 | 0 | 0 | 702 | | | | | | | | | | | | | | | | | | | | | | |
| Another Client | 0 | 565 | 271 | 23 | 0 | 0 | 859 | | | | | | | | | | | | | | | | | | | | | | |
| Employee/Accident | 0 | 12 | 8 | 0 | 0 | 0 | 20 | | | | | | | | | | | | | | | | | | | | | | |
| Medical Condition | 0 | 20 | 10 | 7 | 0 | 0 | 37 | | | | | | | | | | | | | | | | | | | | | | |
| Self Inflicted | 0 | 210 | 310 | 20 | 0 | 0 | 540 | | | | | | | | | | | | | | | | | | | | | | |
| Undetermined | 29 | 209 | 85 | 13 | 0 | 0 | 336 | | | | | | | | | | | | | | | | | | | | | | |
| Visitor | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | |
| Total | 29 | 1402 | 964 | 99 | 0 | 0 | 2494 | | | | | | | | | | | | | | | | | | | | | | |
| Rate/1000 Bed Days | 0.14 | 6.93 | 4.77 | 0.49 | 0.00 | 0.00 | 0.49 | | | | | | | | | | | | | | | | | | | | | | |

N/A = Not Available

*Total Rate/1000 Bed Days for NRI Category 3, 4,5 (Med Tx, Hospitalization & Fatal)

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COM-6

Measure: Frequency of Abuse & Neglect Allegations, per 1,000 Bed Days

Timeframe: Monthly

Definition

The state hospital rate of confirmed closed abuse and neglect cases per 1,000 bed days.

Data Source

DFPS Allegations by Facility Type and Disposition Report – CAPS Data Warehouse
CARE Reports HC022175 & HC022185 (Unduplicated Clients Days by Account Units)

Data Display and Chart Description

Table showing quarterly number of completed investigations, number of confirmed cases and confirmed rate per 1,000 bed days for individual state hospitals and system-wide.

Purpose

Measure confirmed abuse and neglect allegations by 1,000 bed days.

CQM - 6 Abuse/Neglect Rate
All State MH Hospitals - As of November 30, 2014

| Facility | FY13 | | | | | FY14 | | | | | FY15 | | | | |
|------------------------------------|------|------|------|------|----------|------|------|------|------|----------|------|----|----|-----|------------|
| | Q1 | Q2 | Q3 | Q4 | FY Total | Q1 | Q2 | Q3 | Q4 | FY Total | Q1 | Q2 | Q3 | Q4* | FY Total** |
| All State Hospitals | | | | | | | | | | | | | | | |
| Completed Investigations | 545 | 667 | 633 | 728 | 2573 | 694 | 701 | 721 | 734 | 2850 | 636 | | | | 636 |
| Total Confirmed | 39 | 57 | 66 | 66 | 228 | 51 | 54 | 57 | 56 | 218 | 57 | | | | 57 |
| Total Confirmed Rate/1000 Bed Days | 0.19 | 0.28 | 0.31 | 0.31 | 0.27 | 0.24 | 0.27 | 0.28 | 0.28 | 0.27 | 0.28 | | | | 0.28 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COMO-7

Measure: Achieve 95% of All Staff Current with CORE, Specialty and Overall Training Requirements

Timeframe: Monthly

Definition

The state hospital percentage of employees with active training statuses who have completed, within specified time frames, all courses related to their position type and competency groups training program assignments. Monthly data (based on date entered up until the time the report is run, 6:30 a.m. on the first day of the following month) will be reported in TIMS Report 101A.

Data Source

TIMS Report 101A

Data Display and Chart Description

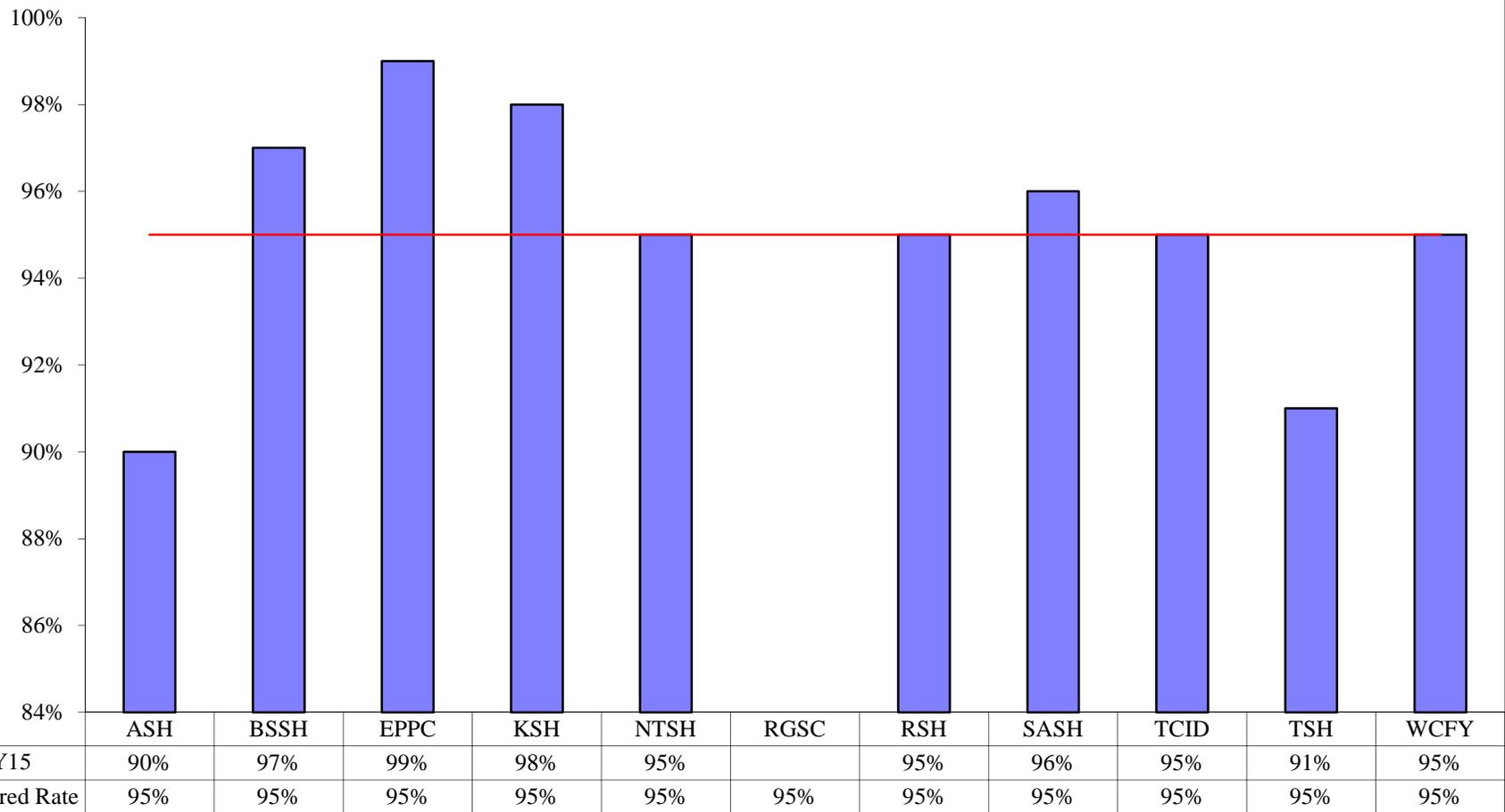
Control chart with monthly data points of percentage of training completed for individual state hospitals and system-wide. Bar chart with all state hospital scores for the last month of the quarter.

Purpose

Monitor staff competency

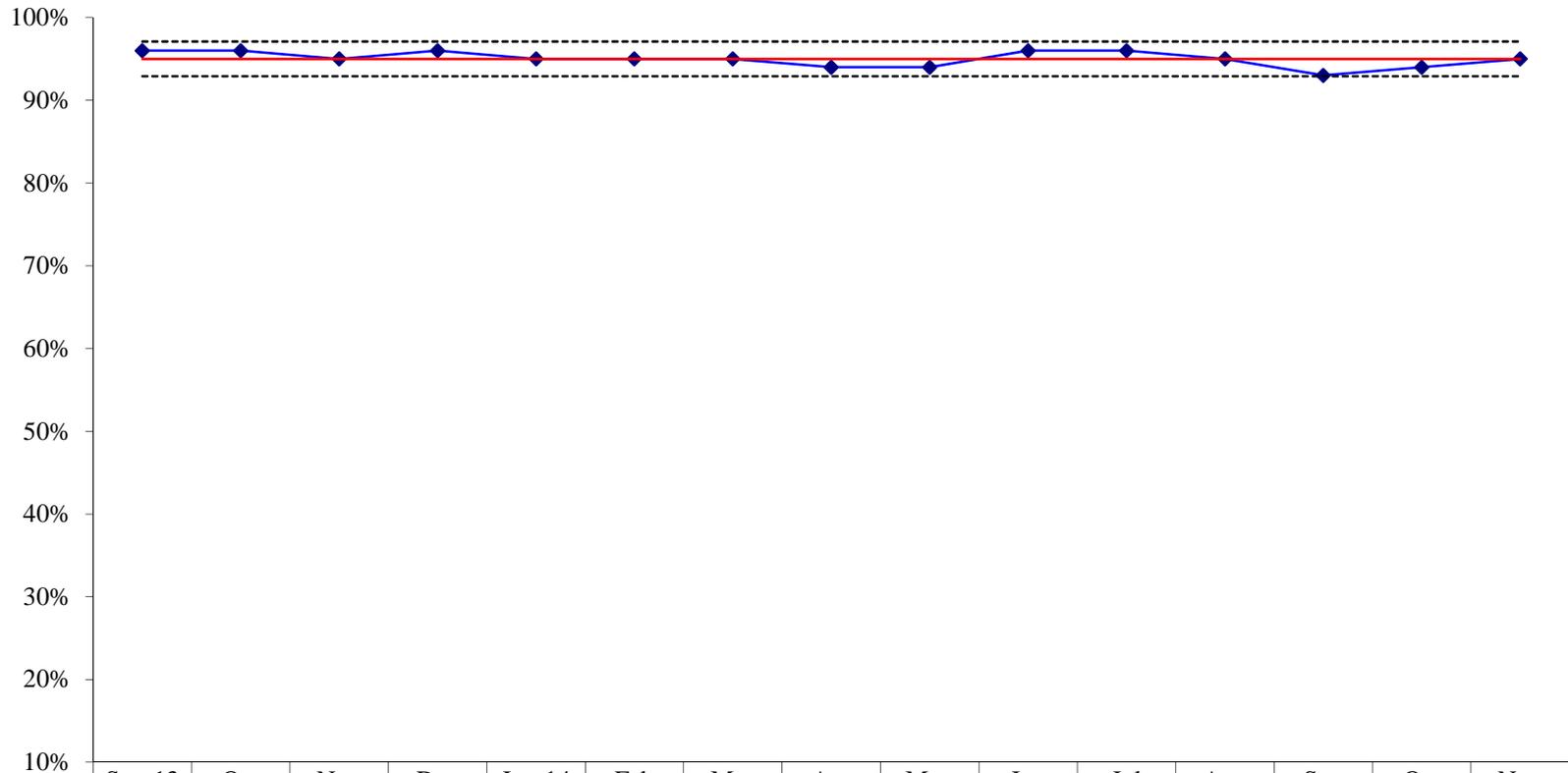
**CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
All State Hospitals**

**CORE and Specialty Training
(As of November 30, 2014)**



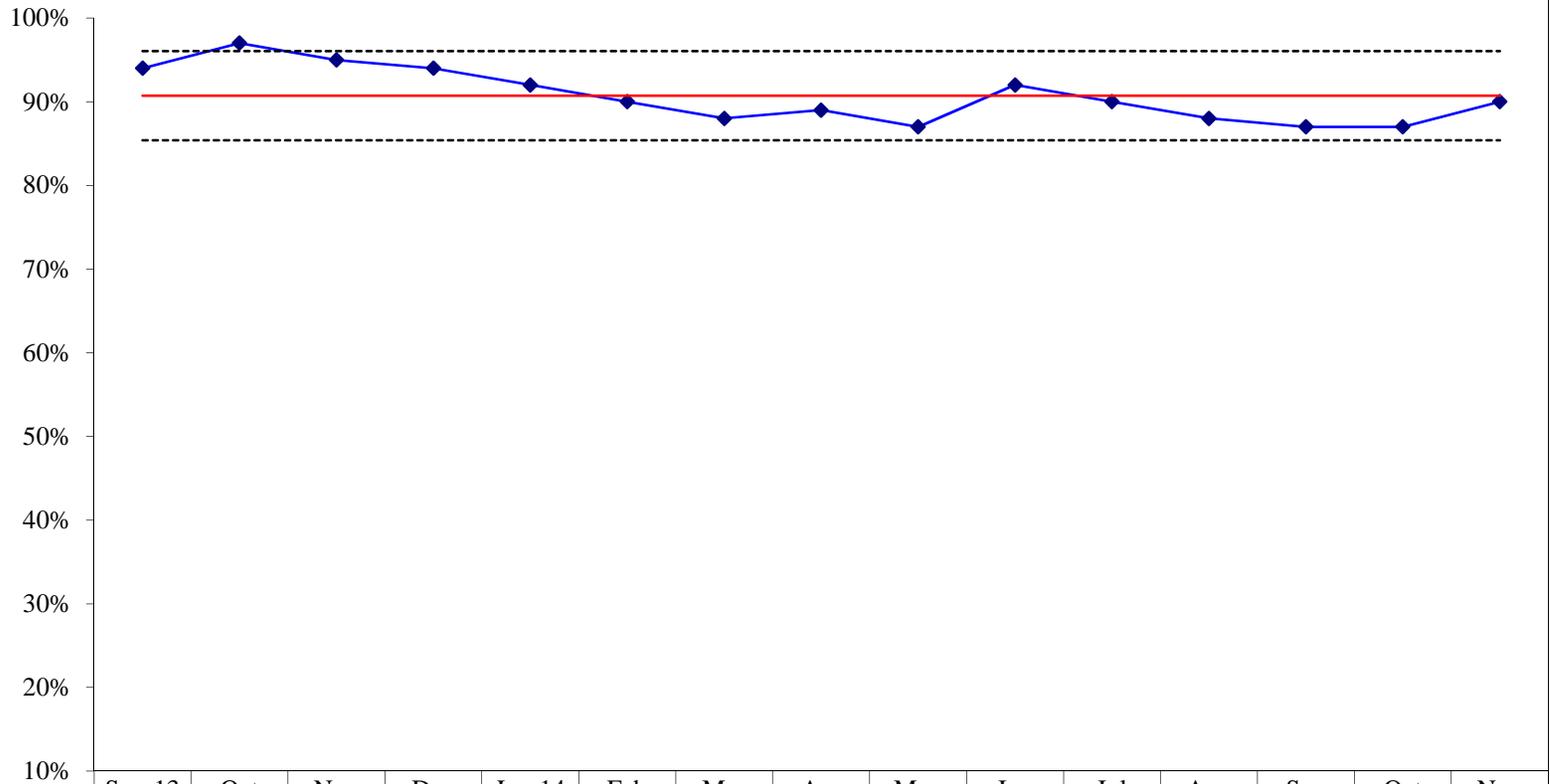
**CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
All State Hospitals**

Percentage of CORE and Specialty Training Completed



CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
Austin State Hospital

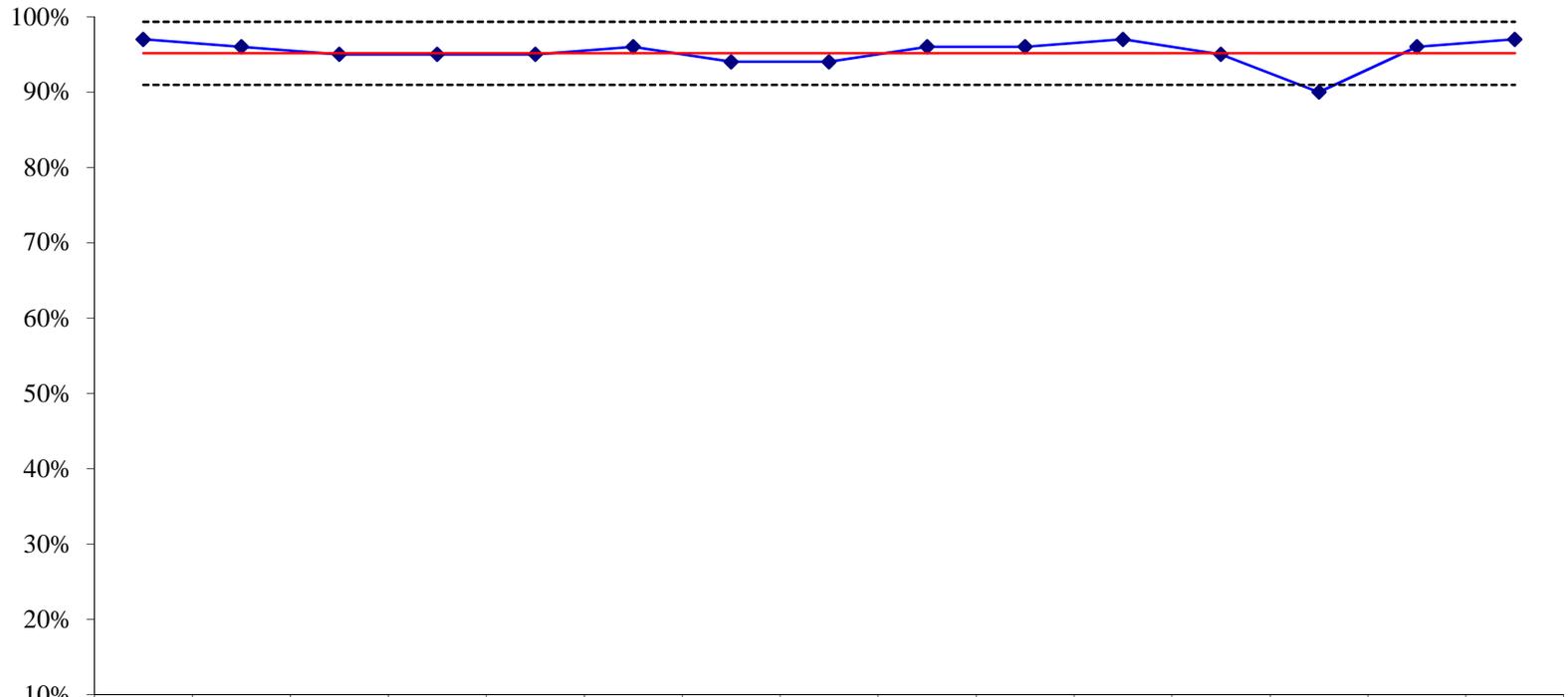
Percentage of CORE and Specialty Training Completed



| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------------|--------|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| ◆ % Training Completed | 94% | 97% | 95% | 94% | 92% | 90% | 88% | 89% | 87% | 92% | 90% | 88% | 87% | 87% | 90% |
| ----- UCL | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% |
| — Avg | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% |
| ----- LCL | 85% | 85% | 85% | 85% | 85% | 85% | 85% | 85% | 85% | 85% | 85% | 85% | 85% | 85% | 85% |

**CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
Big Spring State Hospital**

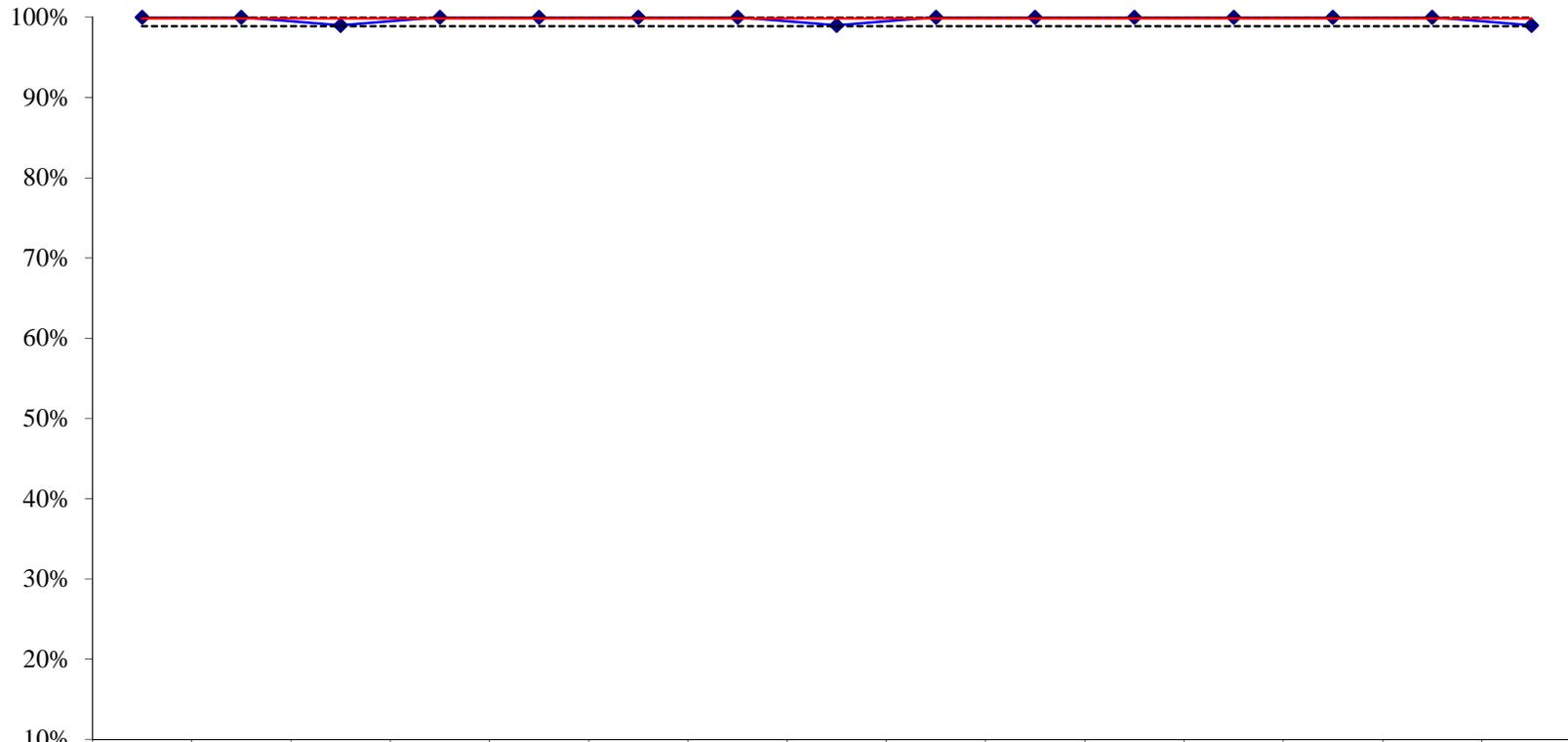
Percentage of CORE and Specialty Training Completed



| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------------|--------|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| ◆ % Training Completed | 97% | 96% | 95% | 95% | 95% | 96% | 94% | 94% | 96% | 96% | 97% | 95% | 90% | 96% | 97% |
| ----- UCL | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% |
| — Avg | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% |
| ----- LCL | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% |

**CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
El Paso Psychiatric Center**

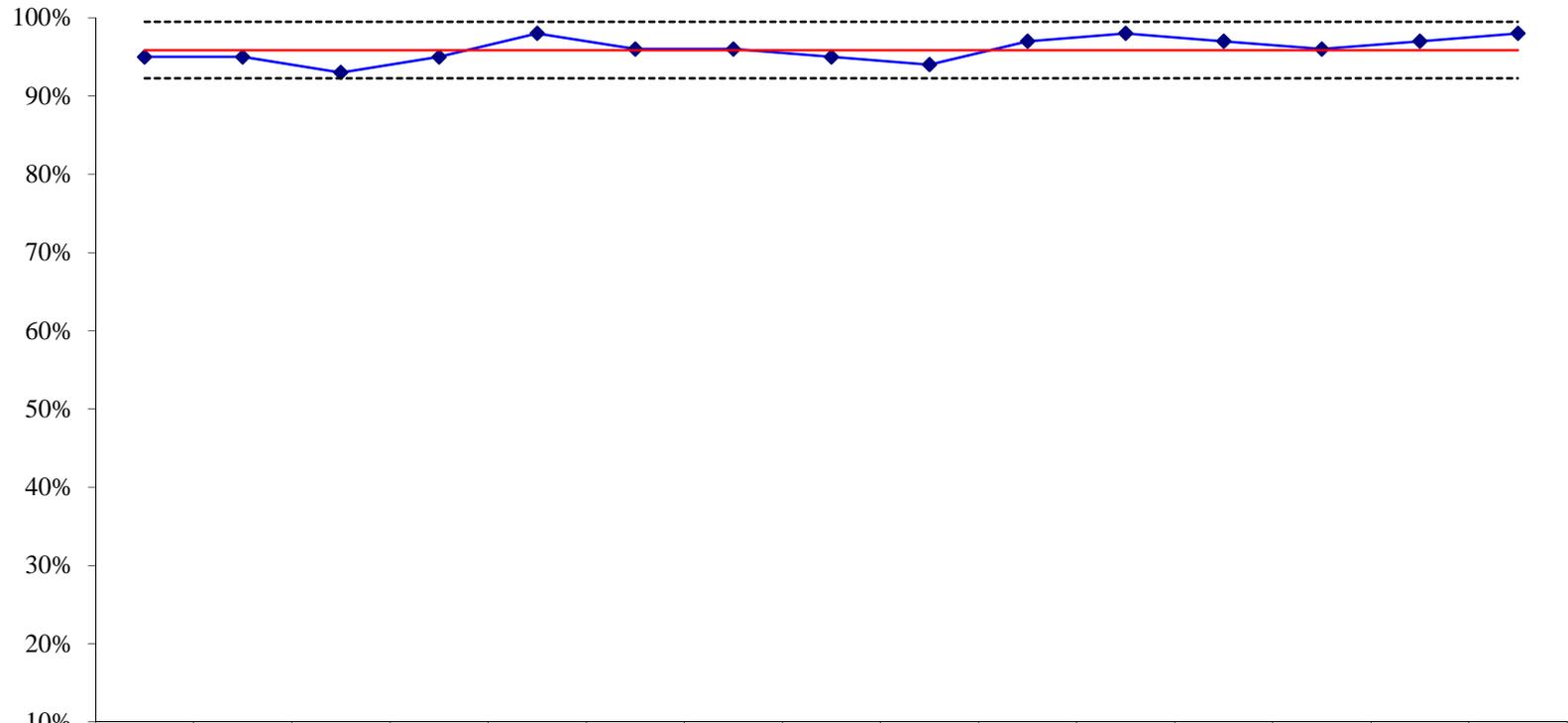
Percentage of CORE and Specialty Training Completed



| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------------|--------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| ◆ % Training Completed | 100% | 100% | 99% | 100% | 100% | 100% | 100% | 99% | 100% | 100% | 100% | 100% | 100% | 100% | 99% |
| ----- UCL | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| — Avg | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| LCL | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% |

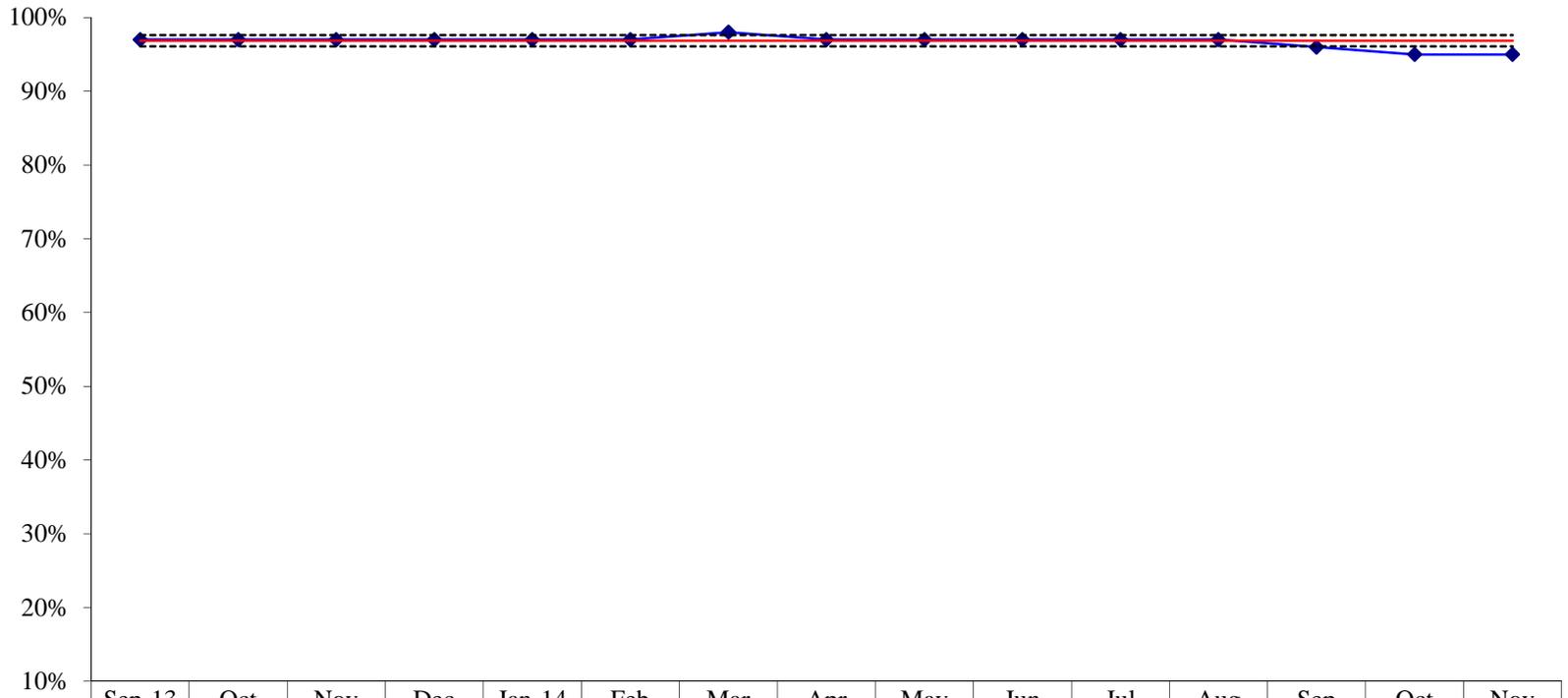
CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
Kerrville State Hospital

Percentage of CORE and Specialty Training Completed



CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
North Texas State Hospital

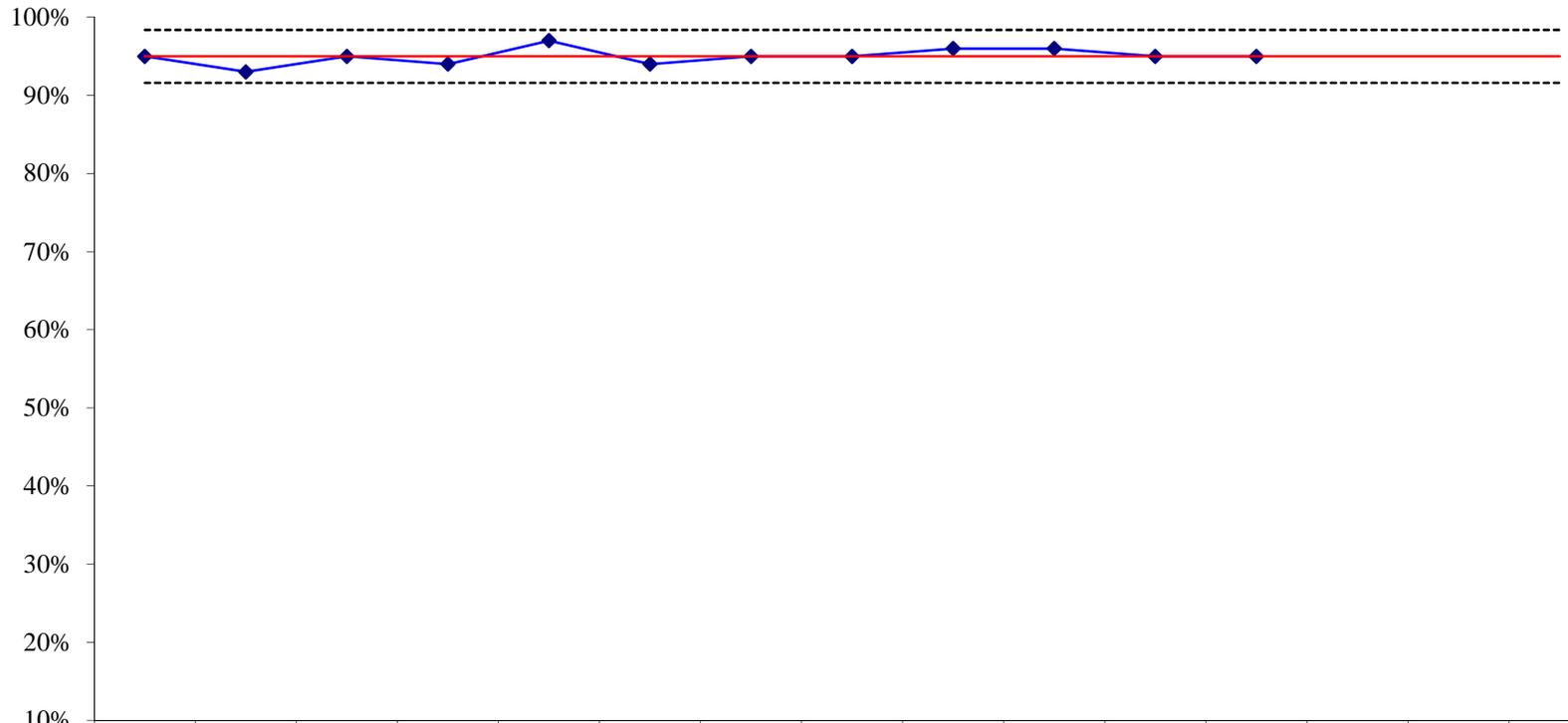
Percentage of CORE and Specialty Training Completed



| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------------|--------|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| ◆ % Training Completed | 97% | 97% | 97% | 97% | 97% | 97% | 98% | 97% | 97% | 97% | 97% | 97% | 96% | 95% | 95% |
| ----- UCL | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% |
| — Avg | 97% | 97% | 97% | 97% | 97% | 97% | 97% | 97% | 97% | 97% | 97% | 97% | 97% | 97% | 97% |
| ----- LCL | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% |

**CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
Rio Grande State Center**

Percentage of CORE and Specialty Training Completed

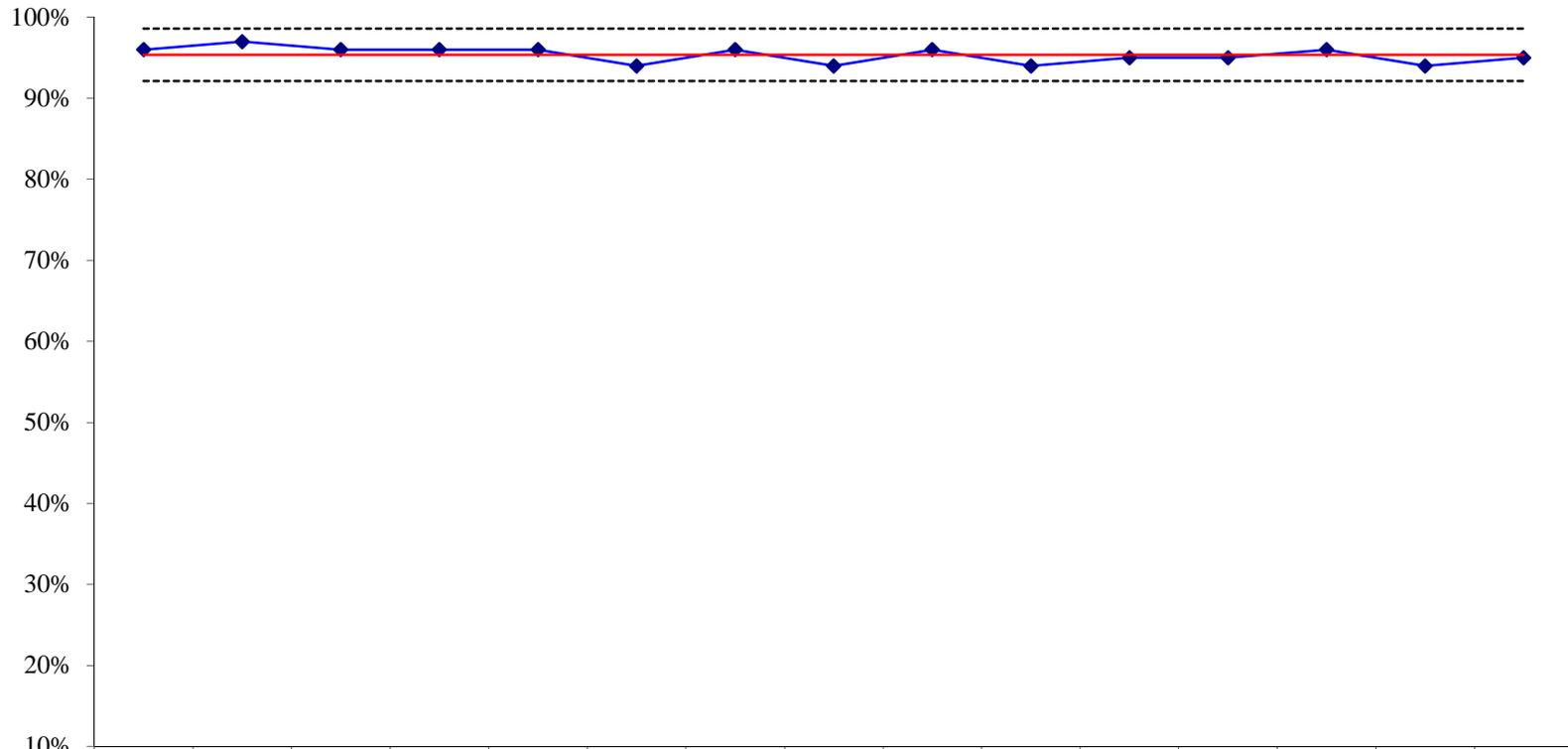


| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------------|--------|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| ◆ % Training Completed | 95% | 93% | 95% | 94% | 97% | 94% | 95% | 95% | 96% | 96% | 95% | 95% | | | |
| ----- UCL | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% | 98% |
| — Avg | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% |
| ----- LCL | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% |

No reports for Q1 FY15

CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
Rusk State Hospital

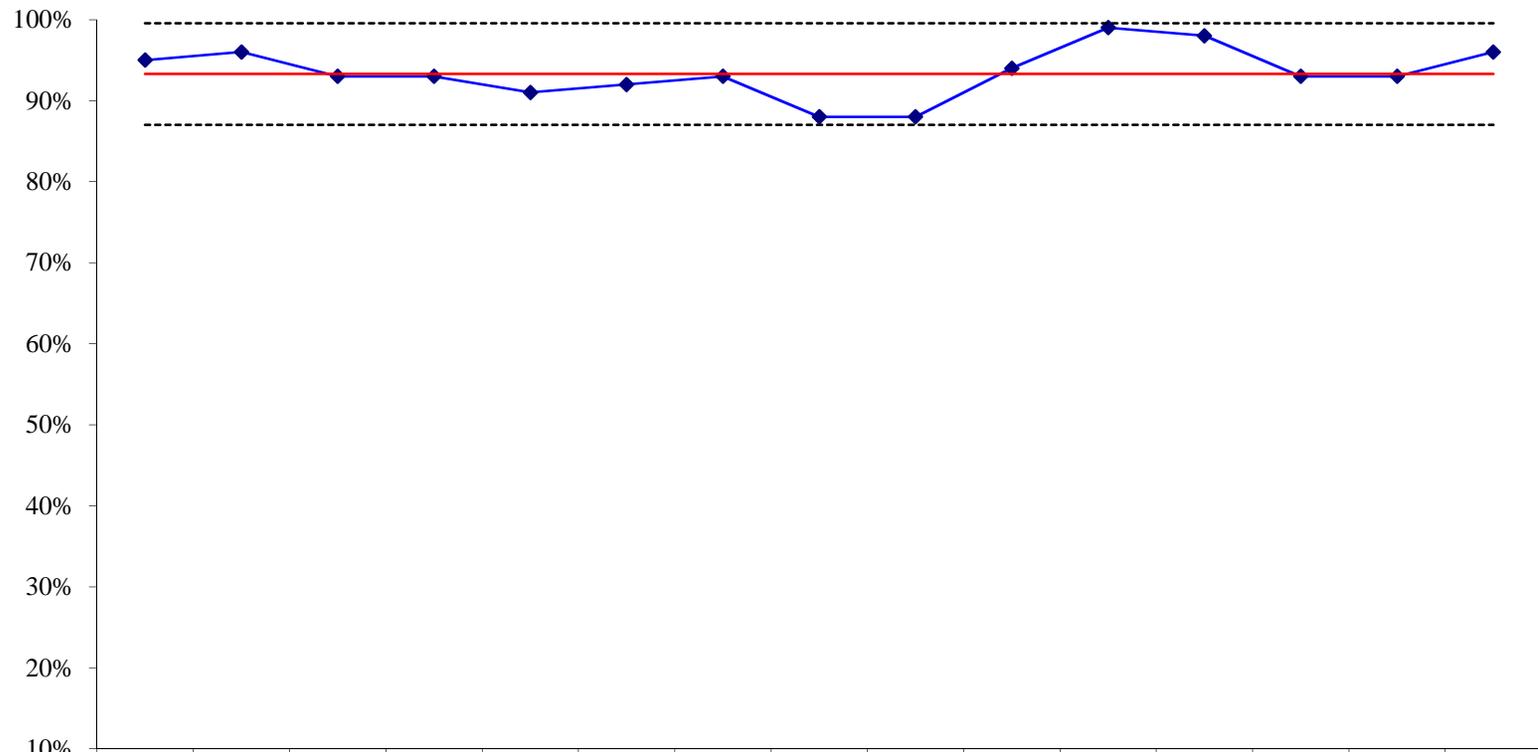
Percentage of CORE and Specialty Training Completed



| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------------|--------|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| ◆ % Training Completed | 96% | 97% | 96% | 96% | 96% | 94% | 96% | 94% | 96% | 94% | 95% | 95% | 96% | 94% | 95% |
| ----- UCL | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% | 99% |
| — Avg | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% |
| ----- LCL | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% | 92% |

CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
San Antonio State Hospital

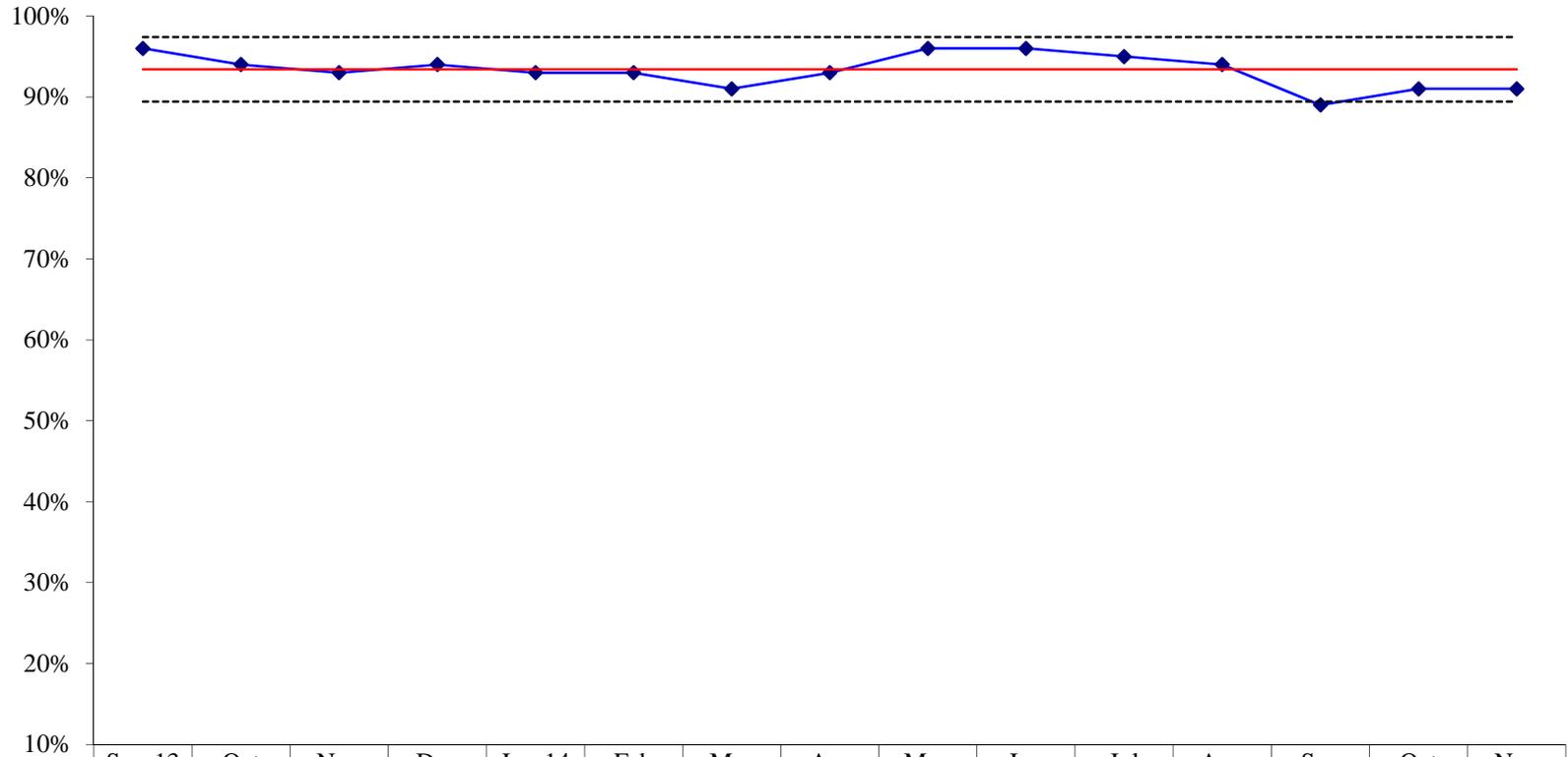
Percentage of CORE and Specialty Training Completed



| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------------|--------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| ◆ % Training Completed | 95% | 96% | 93% | 93% | 91% | 92% | 93% | 88% | 88% | 94% | 99% | 98% | 93% | 93% | 96% |
| ----- UCL | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| — Avg | 93% | 93% | 93% | 93% | 93% | 93% | 93% | 93% | 93% | 93% | 93% | 93% | 93% | 93% | 93% |
| ----- LCL | 87% | 87% | 87% | 87% | 87% | 87% | 87% | 87% | 87% | 87% | 87% | 87% | 87% | 87% | 87% |

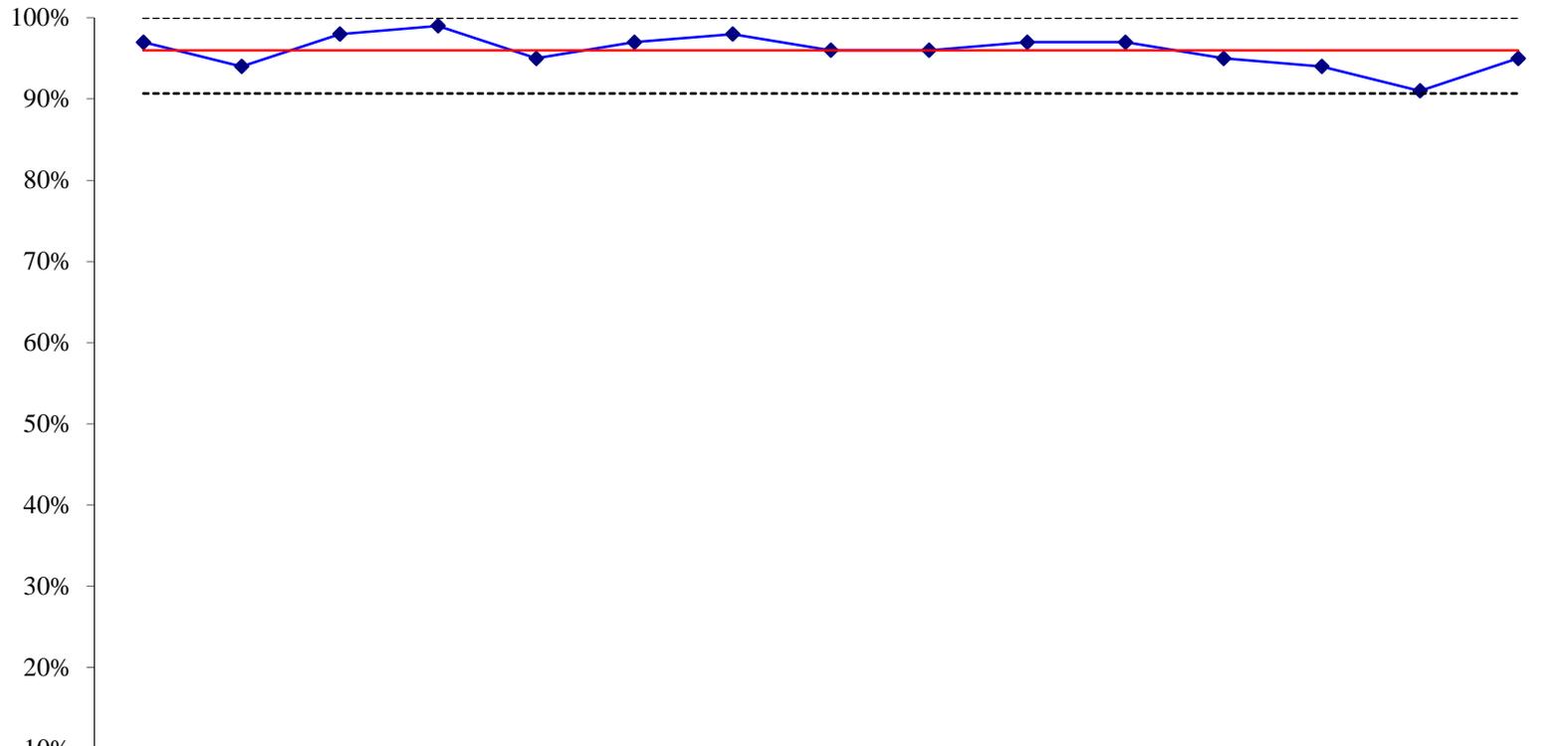
CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
Terrell State Hospital

Percentage of CORE and Specialty Training Completed



**CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
Waco Center for Youth**

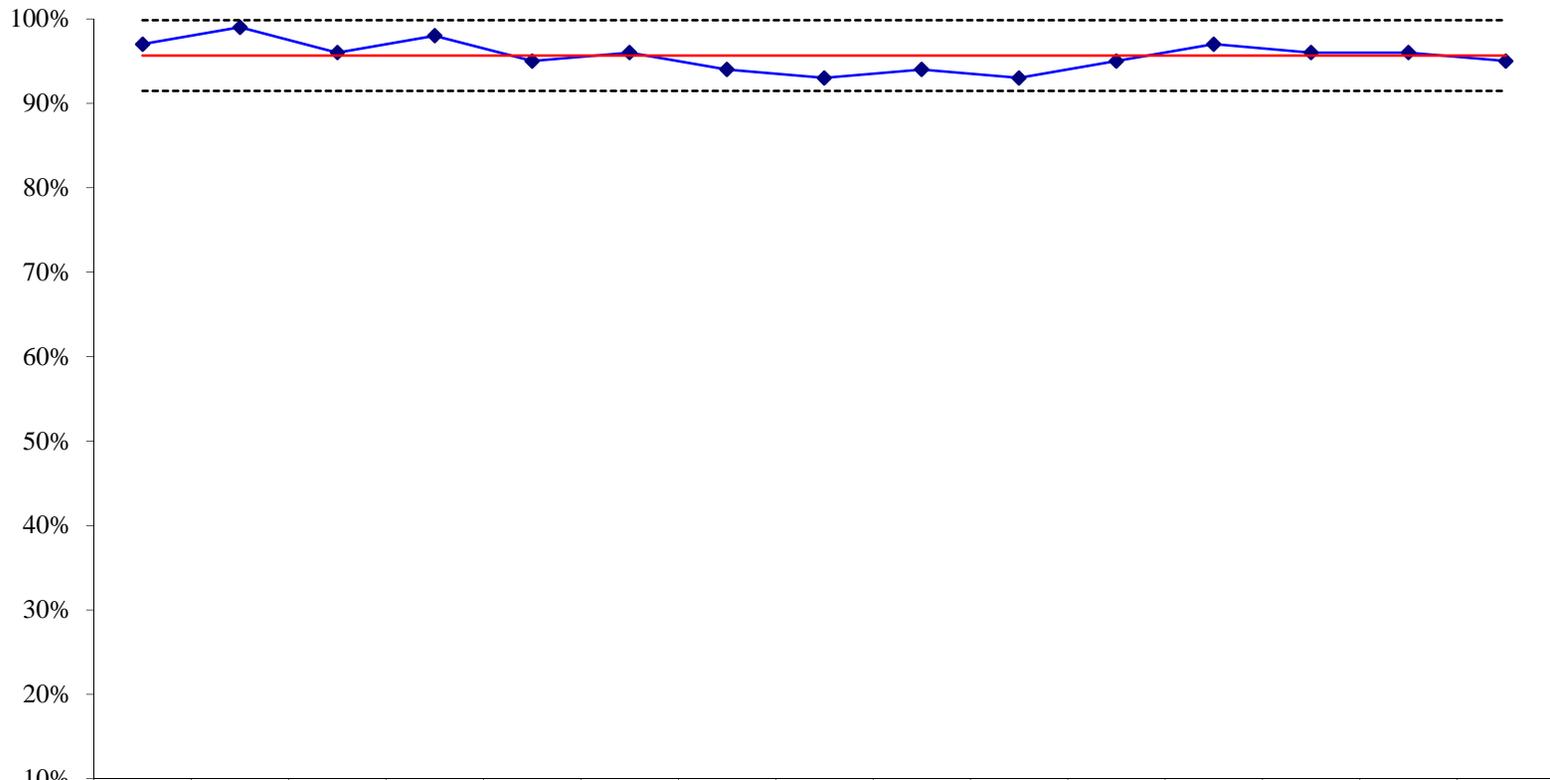
Percentage of CORE and Specialty Training Completed



| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------------|--------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| ◆ % Training Completed | 97% | 94% | 98% | 99% | 95% | 97% | 98% | 96% | 96% | 97% | 97% | 95% | 94% | 91% | 95% |
| ----- UCL | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| — Avg | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% |
| ----- LCL | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% |

CQMO - 7 Staff Competency (Staff Current With CORE and Specialty Training)
Texas Center for Infectious Disease

Percentage of CORE and Specialty Training Completed



| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------------|--------|------|------|------|--------|------|------|------|------|------|------|------|------|------|------|
| ◆ % Training Completed | 97% | 99% | 96% | 98% | 95% | 96% | 94% | 93% | 94% | 93% | 95% | 97% | 96% | 96% | 95% |
| ----- UCL | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| — Avg | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% | 96% |
| ----- LCL | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COMO-8

Measure: Collect, Analyze and Report Turnover Rate and Efforts to Reduce Turnover for Critical Shortage Staff
Timeframe: Monthly

Definition

The state hospital turnover rate for critical shortage staff will be available. Critical shortage job classifications: direct care; case workers; nurses; pharmacists; physicians, psychologists; and therapists.

Data Source

PeopleSoft HSAS0805 Report (Turnover Job Code/Facility)

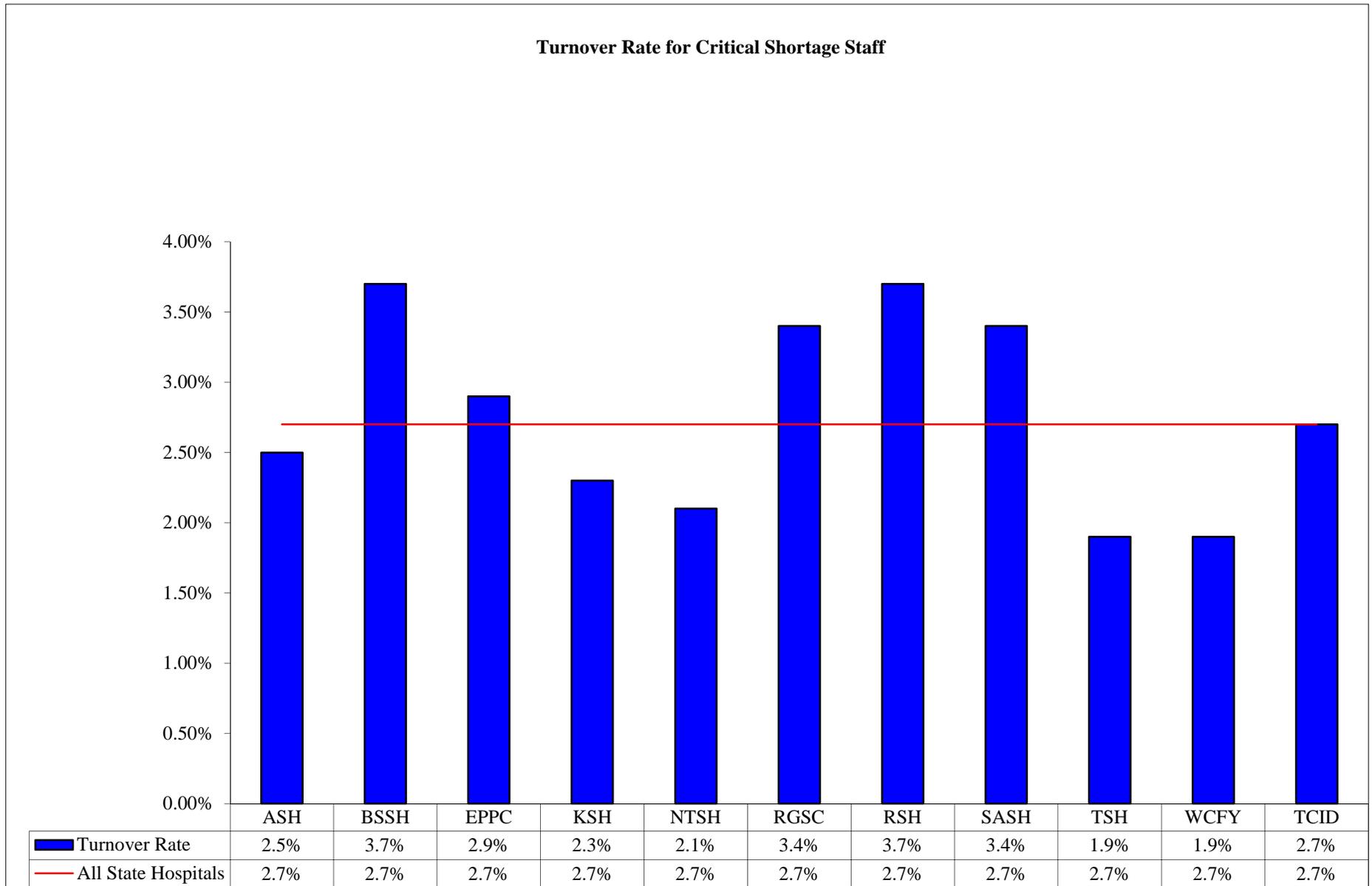
Data Display and Chart Description

Chart with monthly data points of turnover rate for individual state hospitals and system-wide.

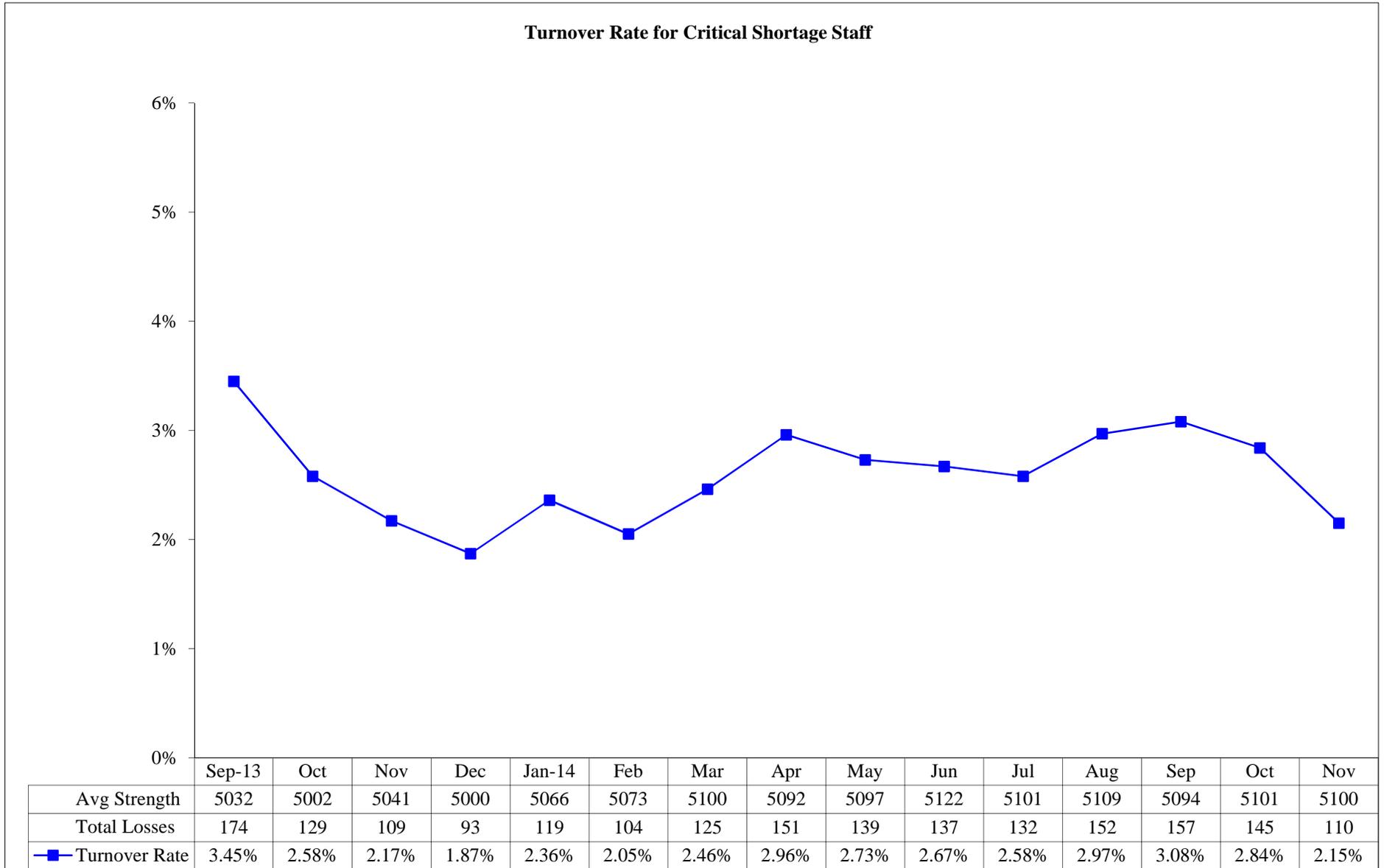
Purpose

Monitor critical shortage staff turnover.

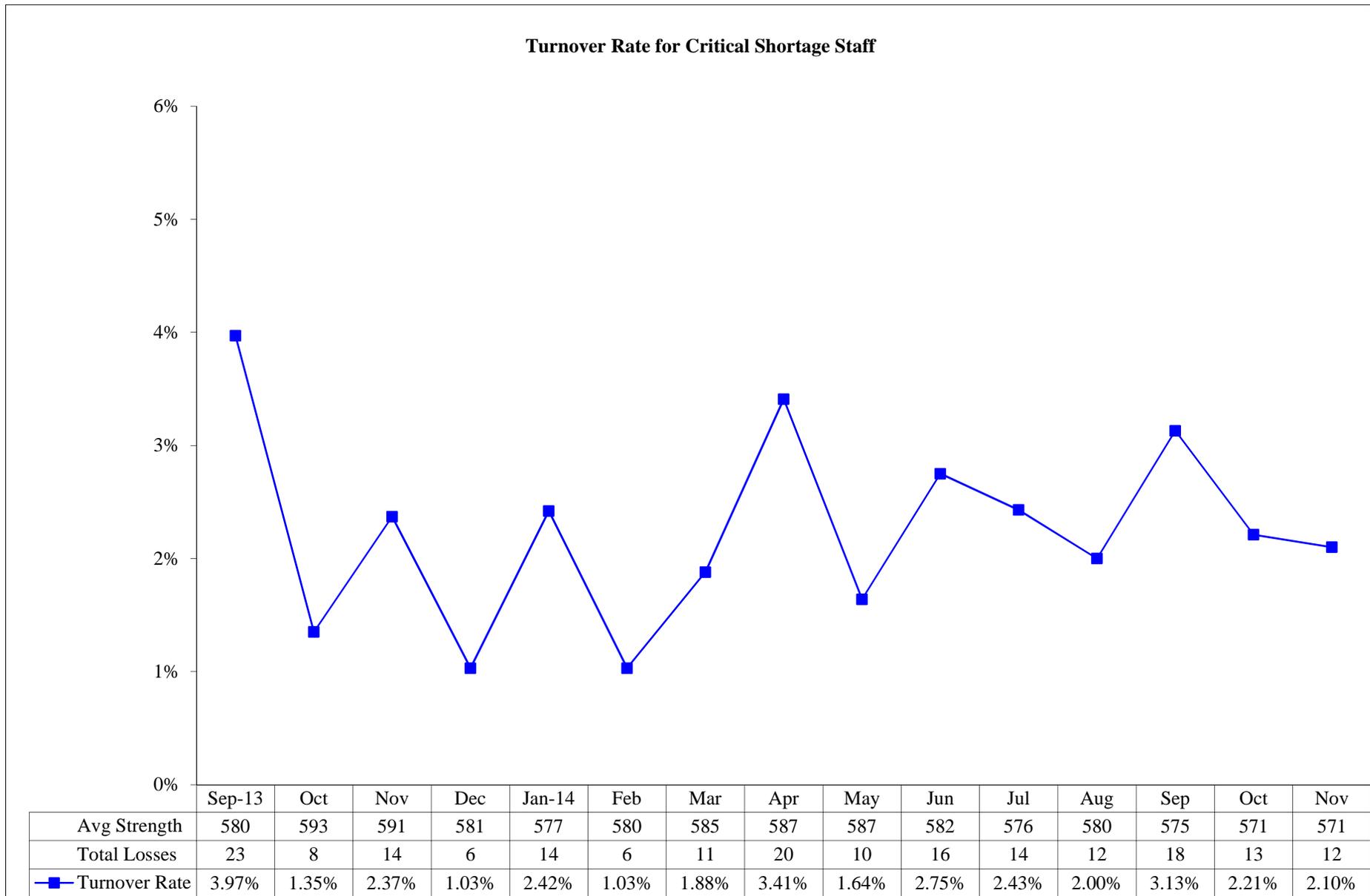
**CQMO - 8 Turnover Rate for Critical Shortage Staff
All State Hospitals - FY15 Q1 Average**



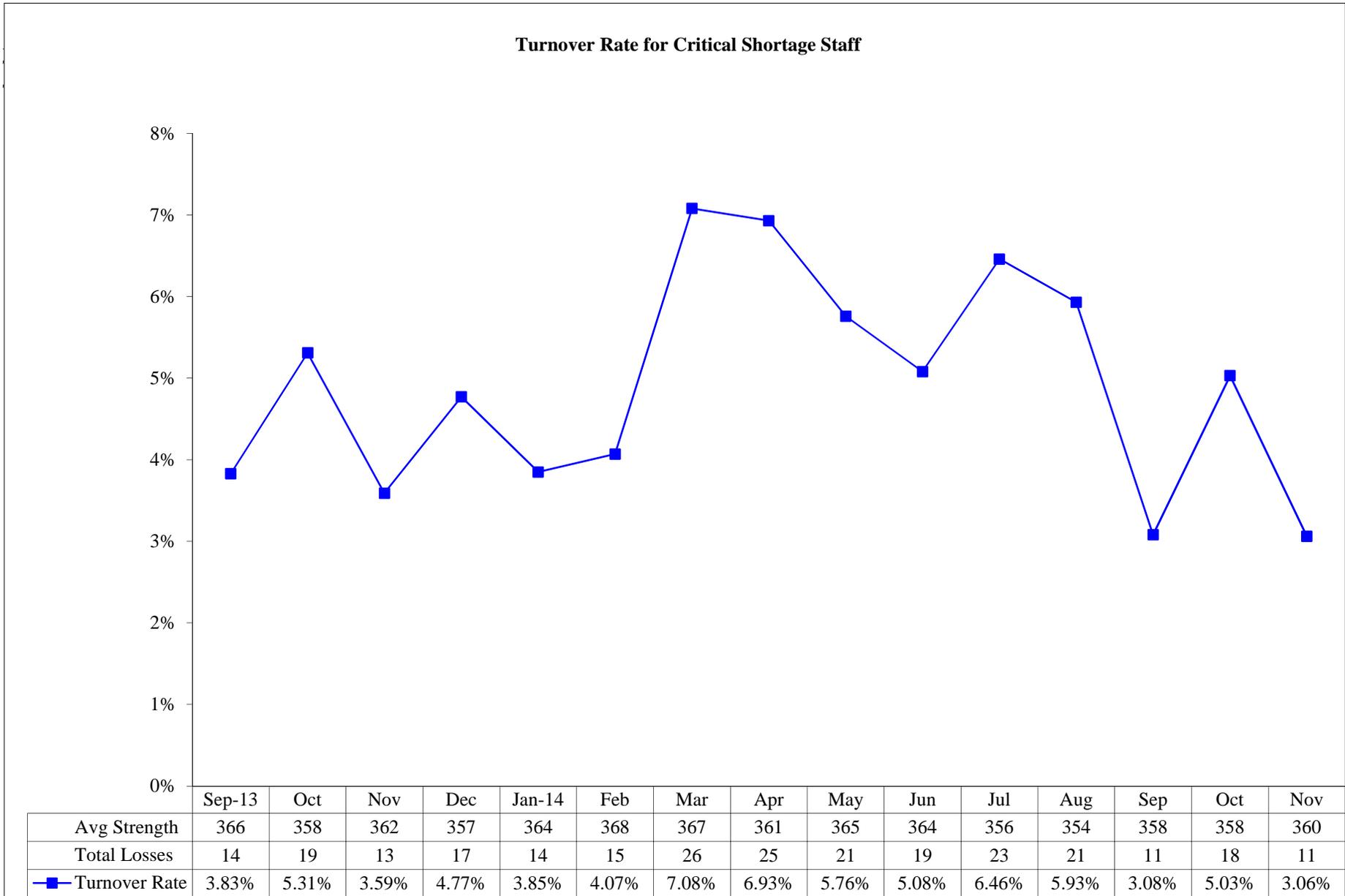
**CQMO - 8 Turnover Rate for Critical Shortage Staff
All State Hospitals**



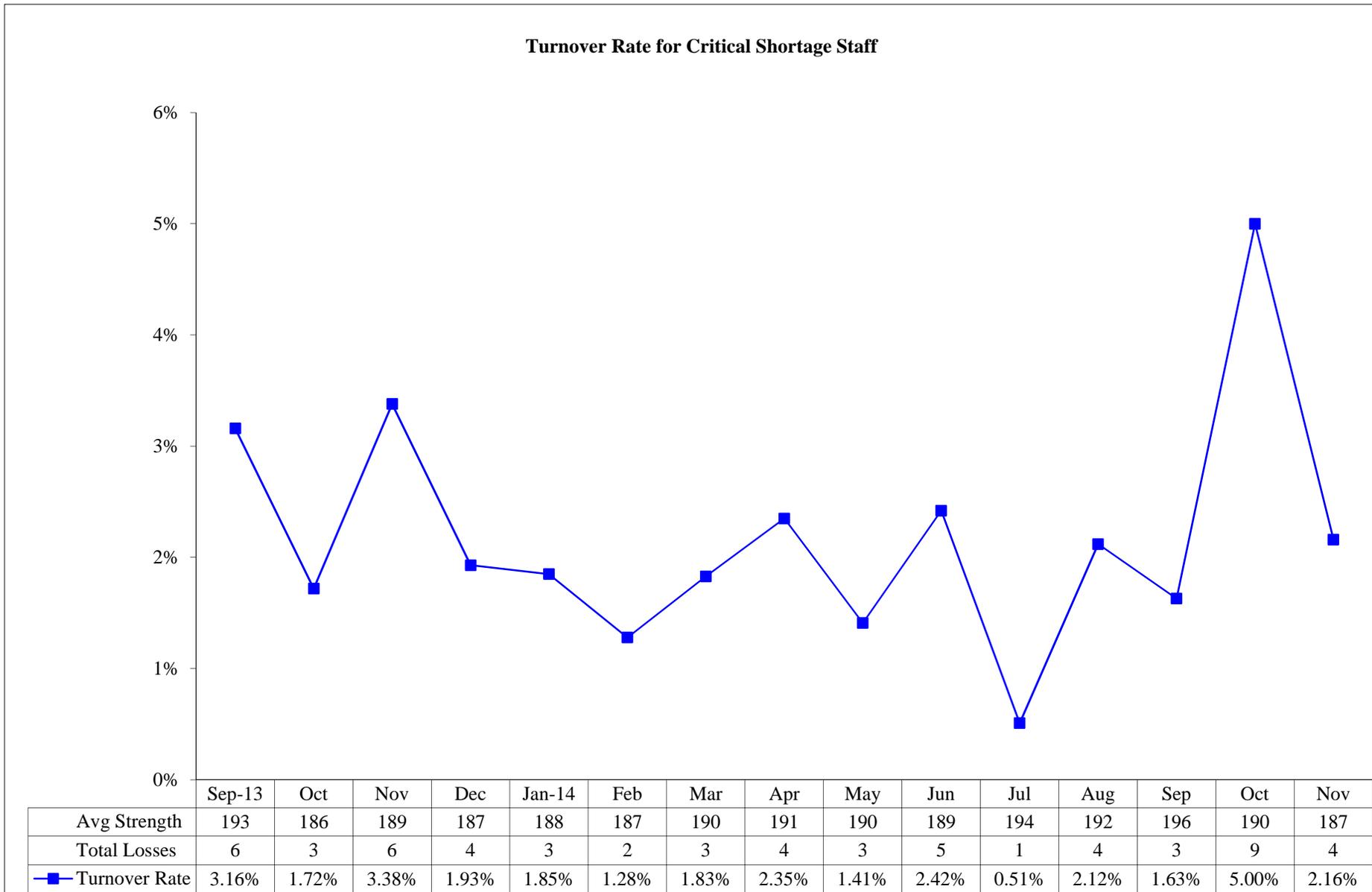
**CQMO - 8 Turnover Rate for Critical Shortage Staff
Austin State Hospital**



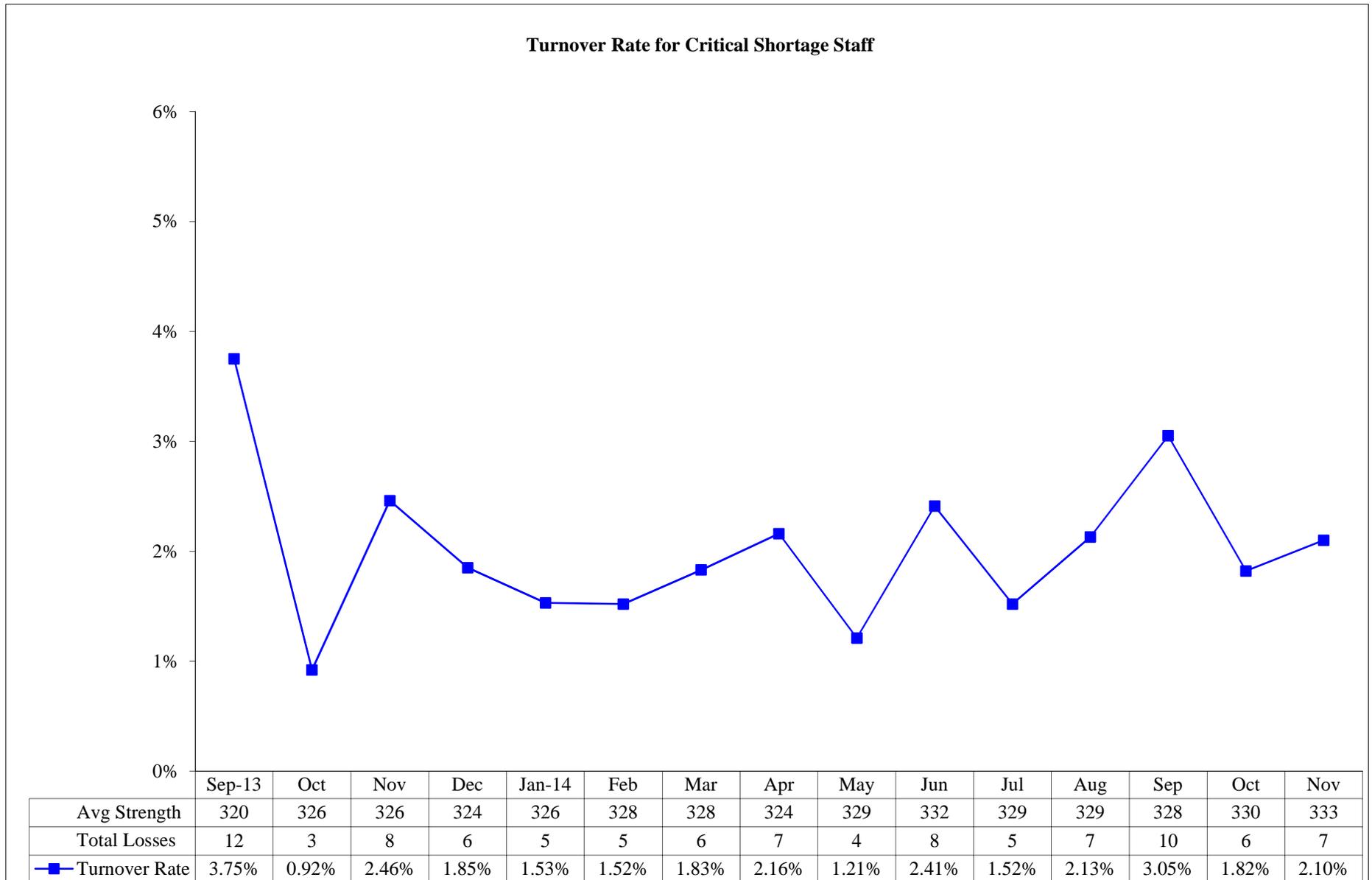
**CQMO - 8 Turnover Rate for Critical Shortage Staff
Big Spring State Hospital**



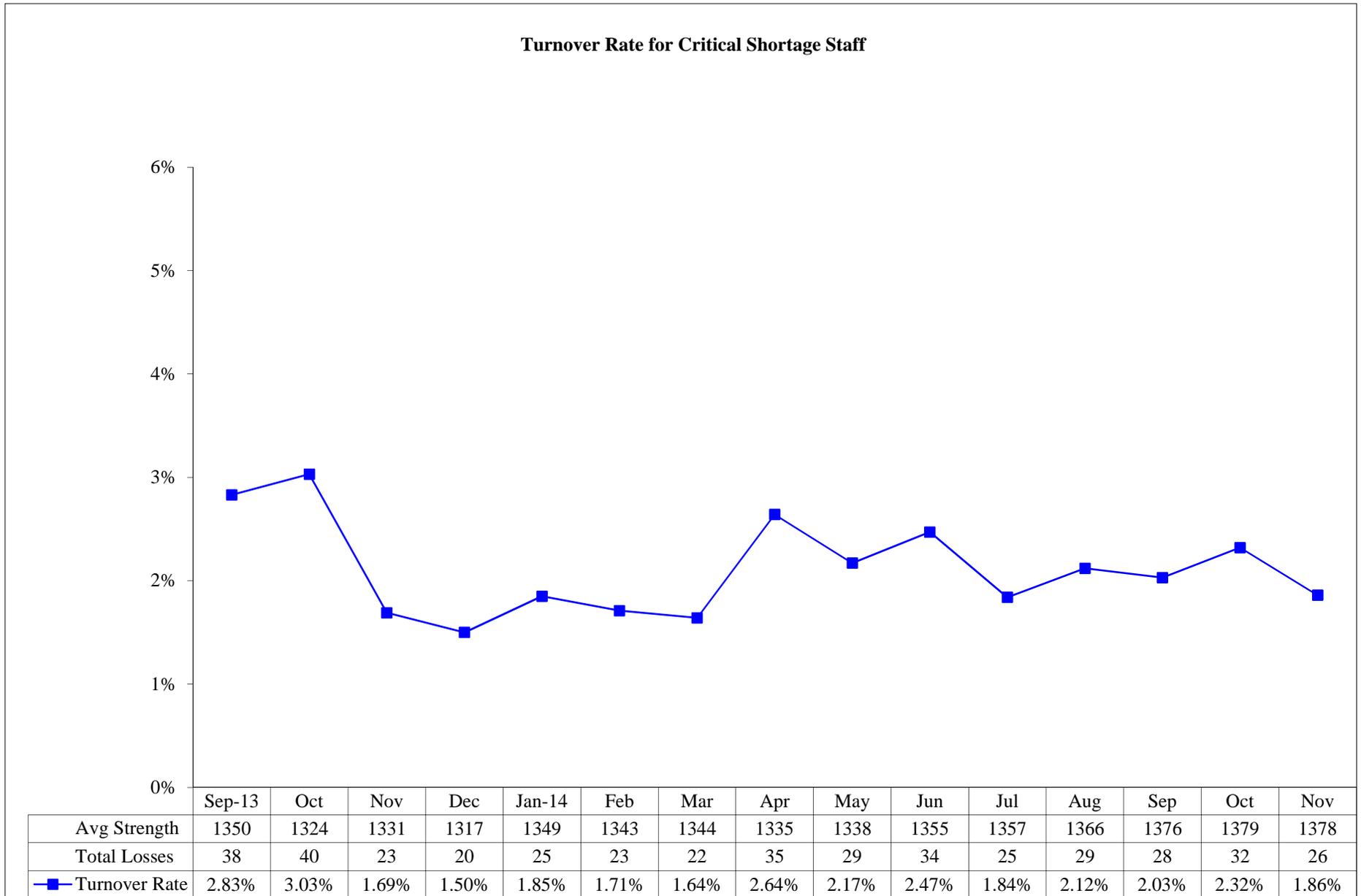
**CQMO - 8 Turnover Rate for Critical Shortage Staff
El Paso Psychiatric Center**



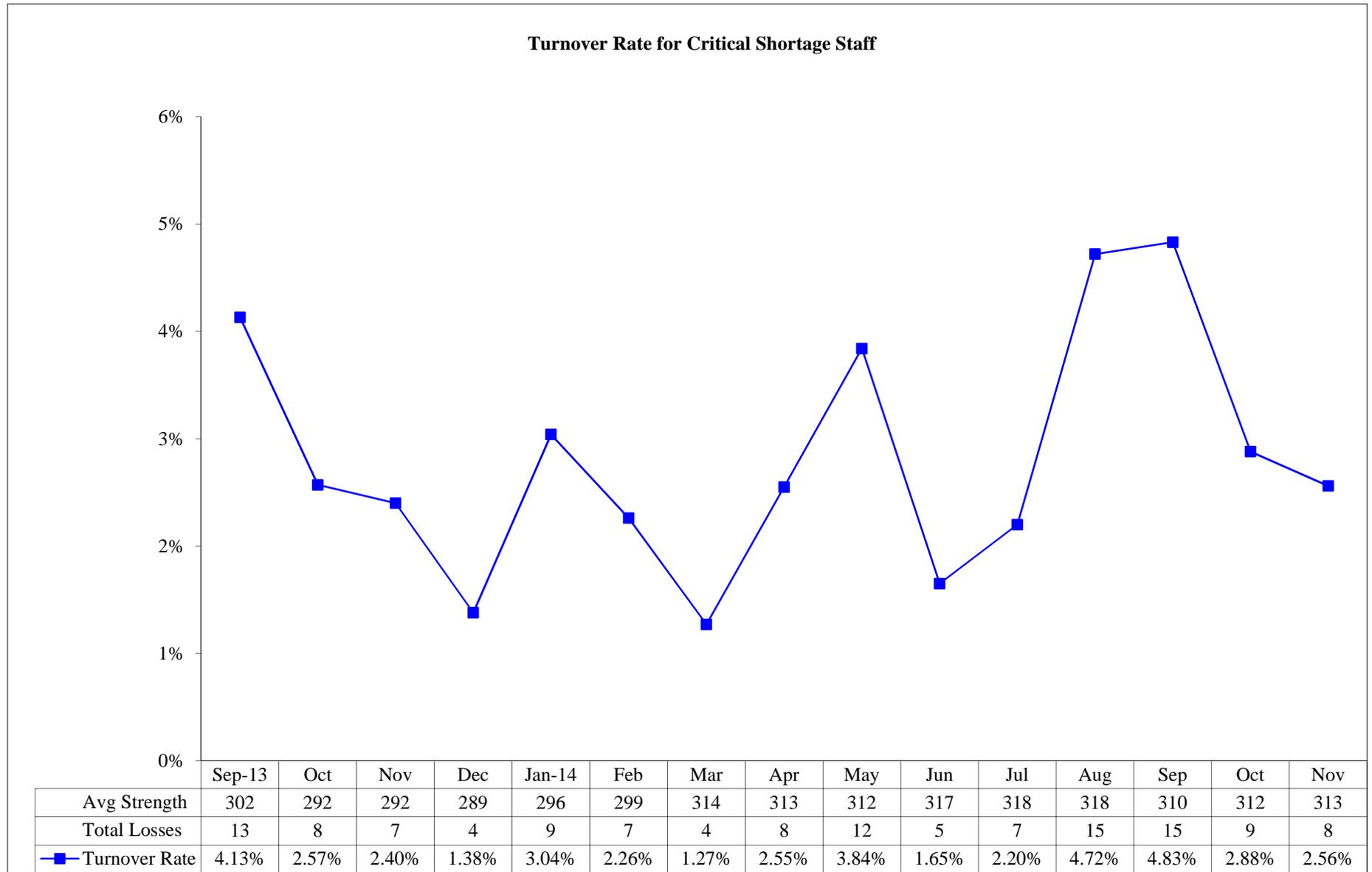
**CQMO - 8 Turnover Rate for Critical Shortage Staff
Kerrville State Hospital**



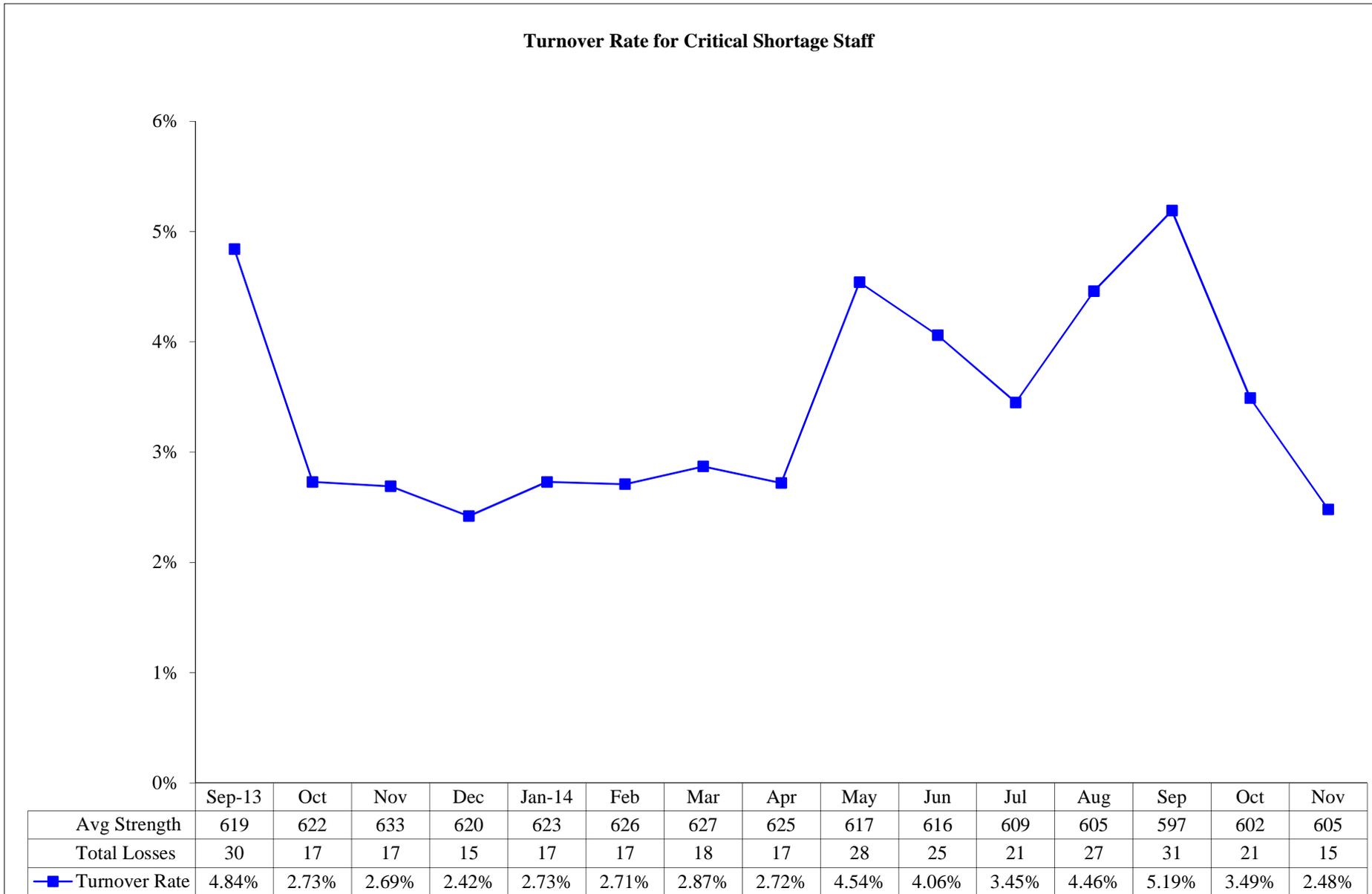
**CQMO - 8 Turnover Rate for Critical Shortage Staff
North Texas State Hospital**



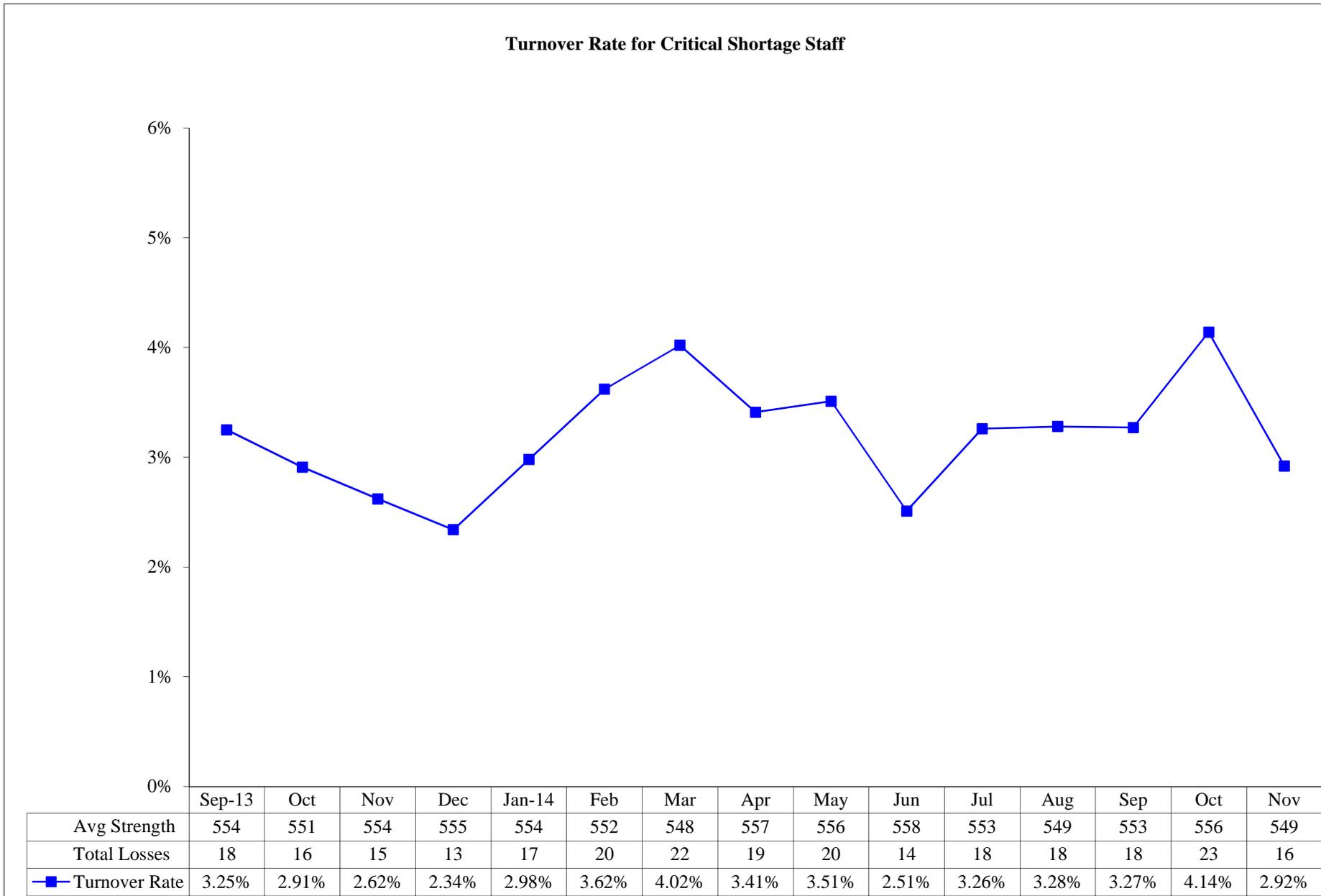
**CQMO - 8 Turnover Rate for Critical Shortage Staff
Rio Grande State Center**



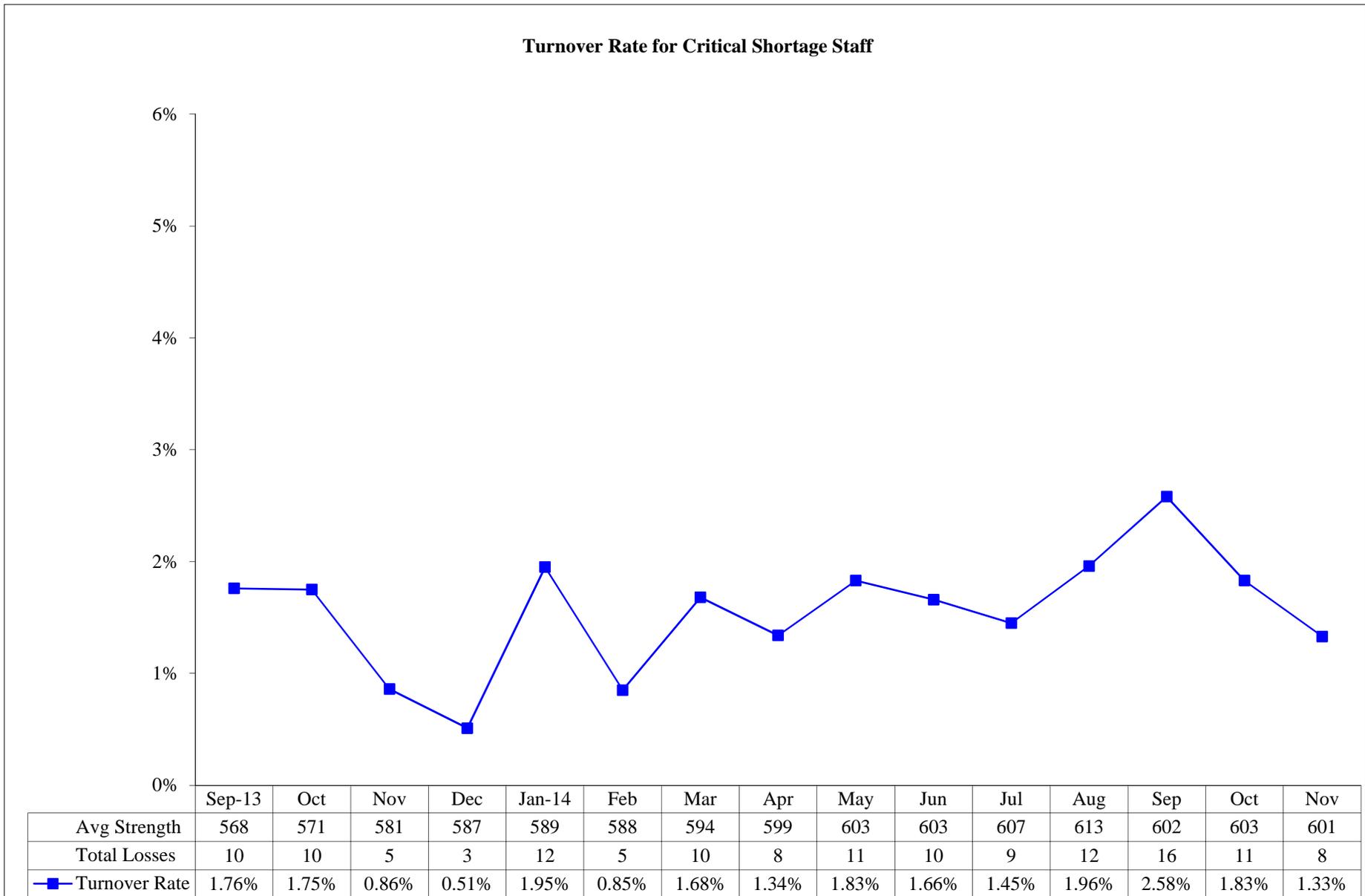
**CQMO - 8 Turnover Rate for Critical Shortage Staff
Rusk State Hospital**



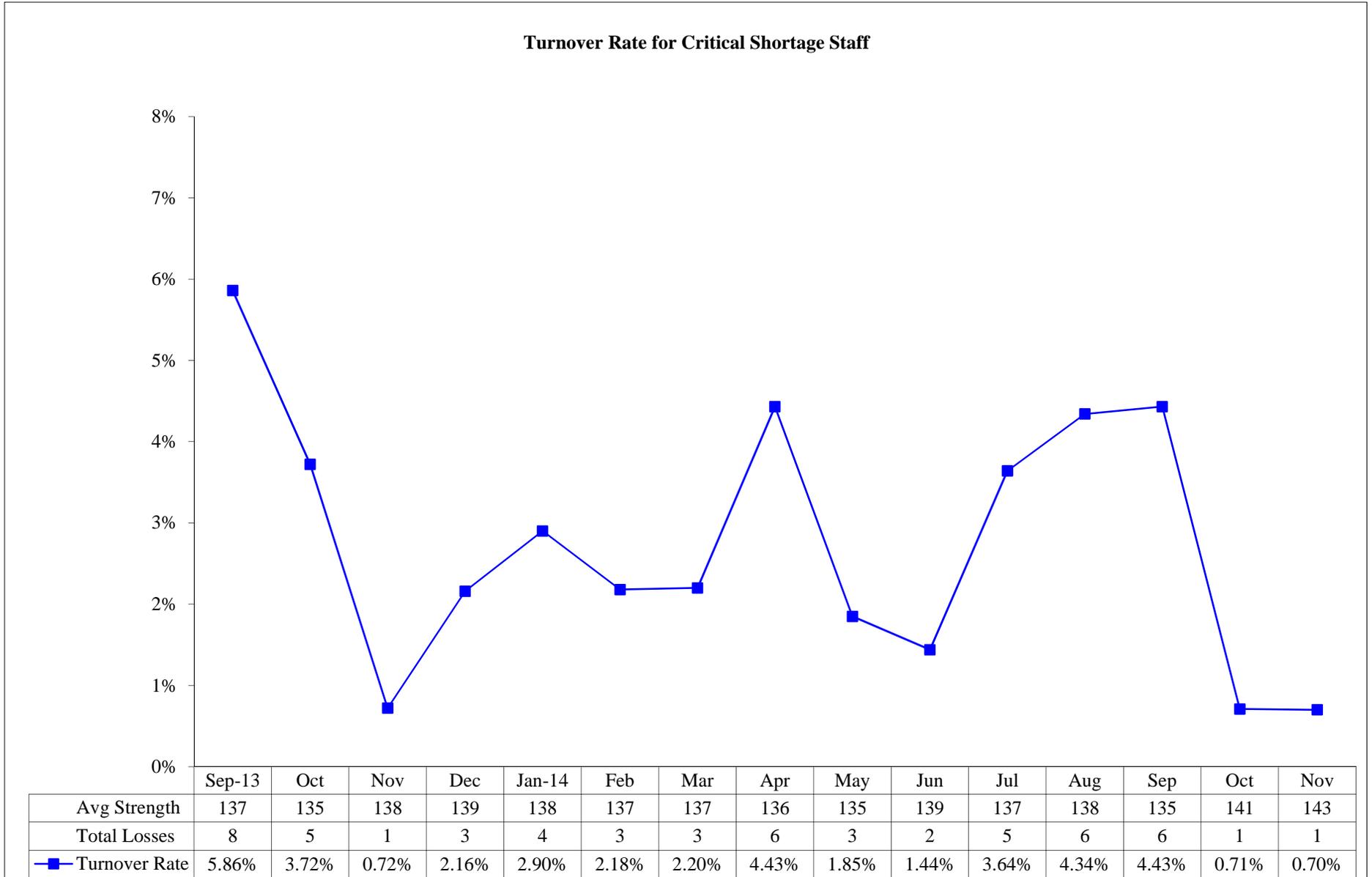
**CQMO - 8 Turnover Rate for Critical Shortage Staff
San Antonio State Hospital**



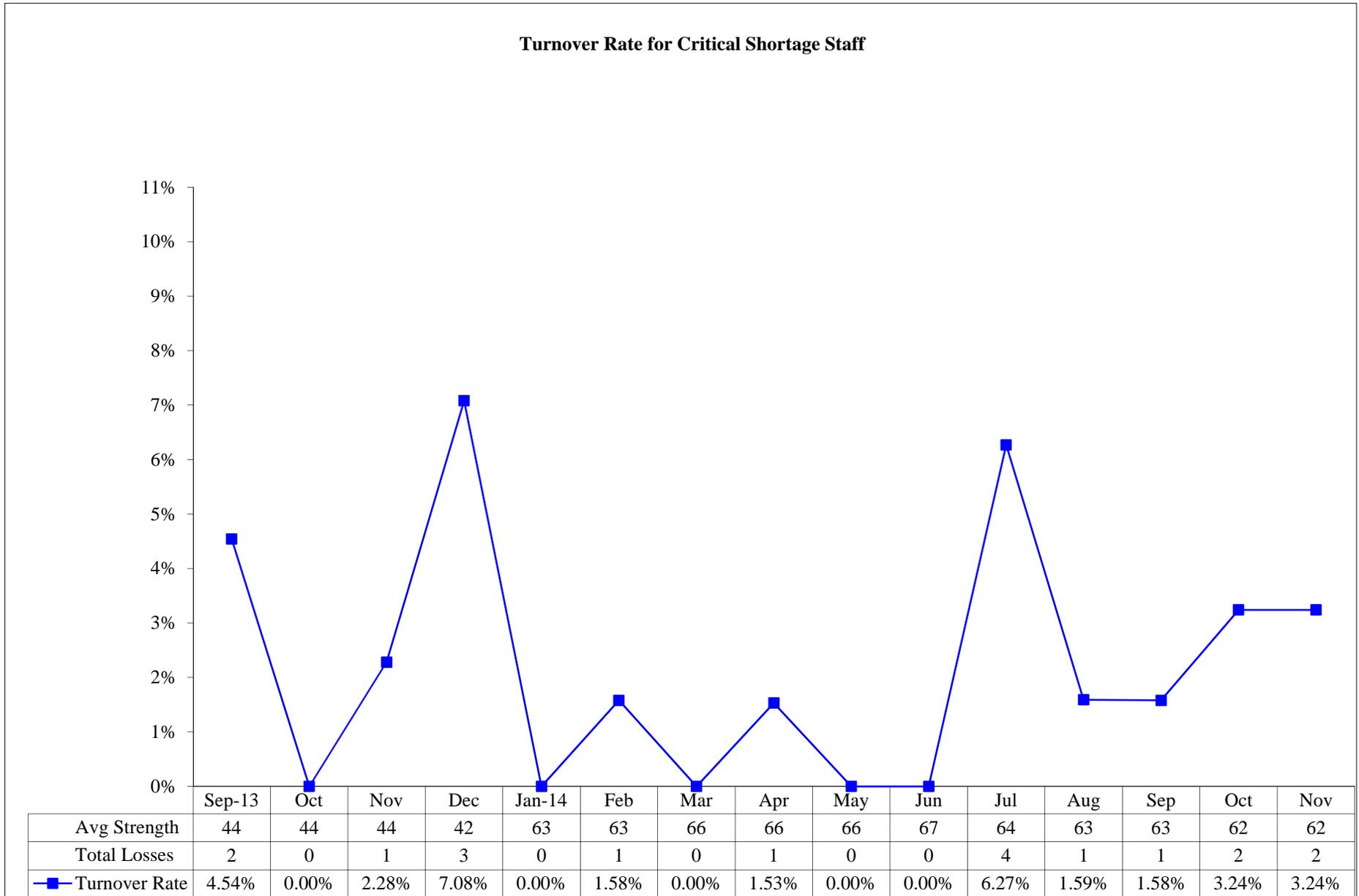
**CQMO - 8 Turnover Rate for Critical Shortage Staff
Terrell State Hospital**



**CQMO - 8 Turnover Rate for Critical Shortage Staff
Waco Center for Youth**



**CQMO - 8 Turnover Rate for Critical Shortage Staff
Texas Center for Infectious Disease**



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COMO-9

Measure: Collect, Analyze and Report Staff Vacancy Rates for Critical Shortage Staff

Timeframe: Monthly

Definition

The statewide vacancies rate for critical shortage staff will be maintained. Critical shortage job classifications: direct care; case workers; nurses; pharmacists; physicians, psychologists; and therapists.

Data Source

PeopleSoft HSAS0704 Report (Vacancy Report)

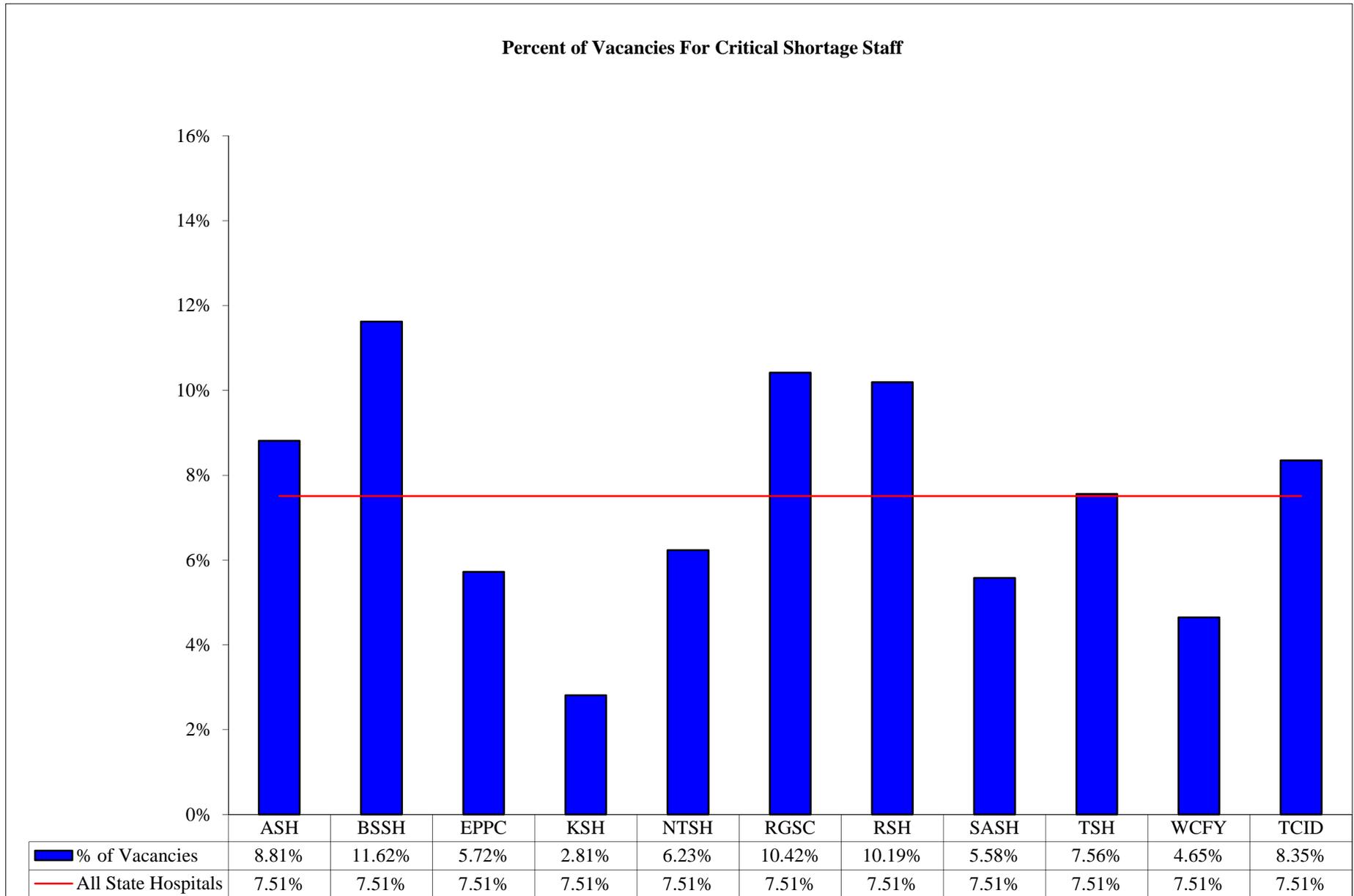
Data Display and Chart Description

Chart with monthly data points of vacancies rate (physicians, RNs, LVNs, Pharmacist, and PNAs) for individual state hospitals and system-wide. Chart with monthly data points of percent of vacancies for critical shortage staff for individual state hospitals and system-wide. Chart with FYTD percent of vacancies for critical shortage staff for individual state hospitals and system-wide.

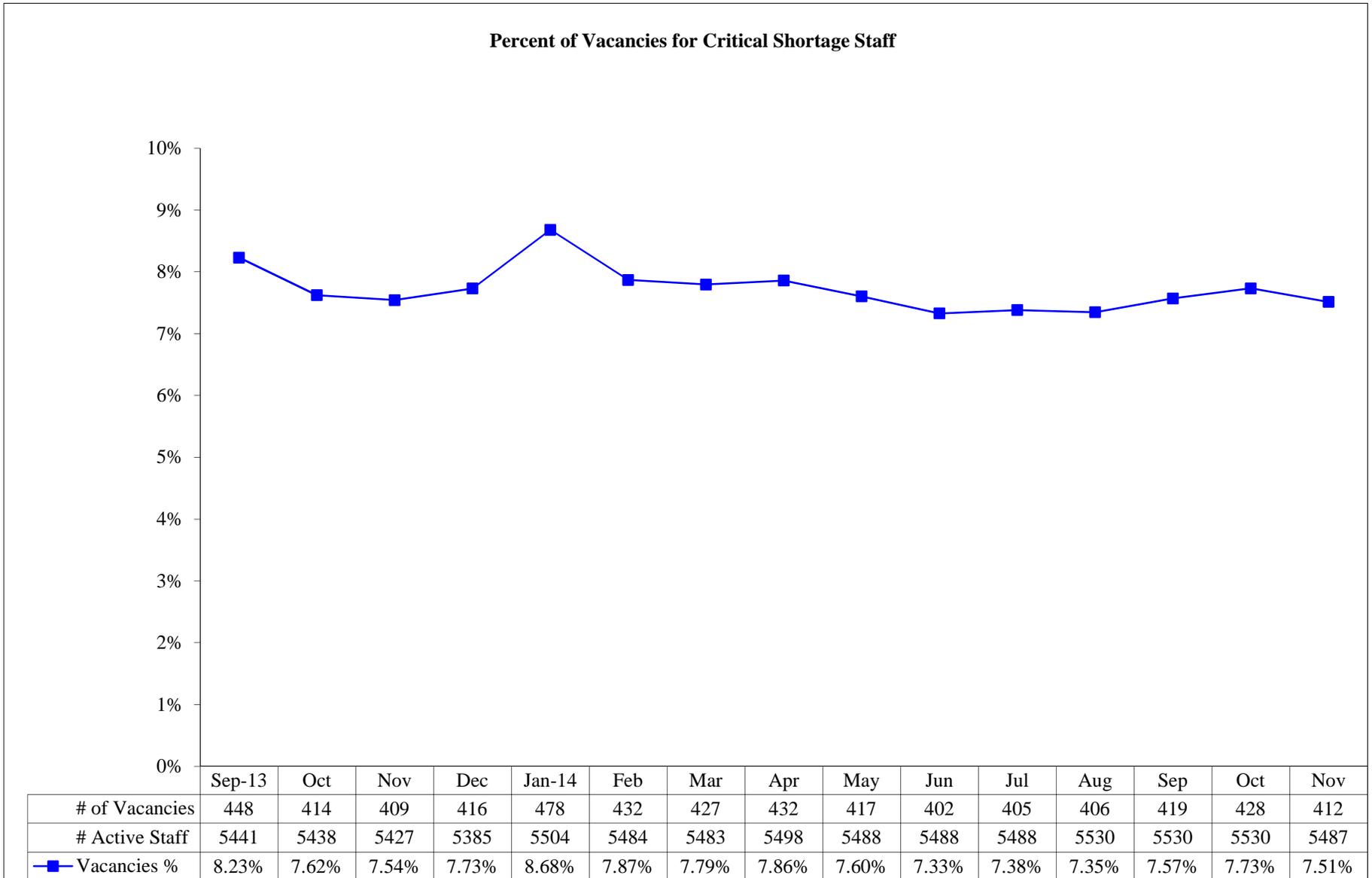
Purpose

Monitor critical shortage staff vacancies.

**CQMO - 9 Vacancies for Critical Shortage Staff
All State Hospitals - As of November 30, 2014**

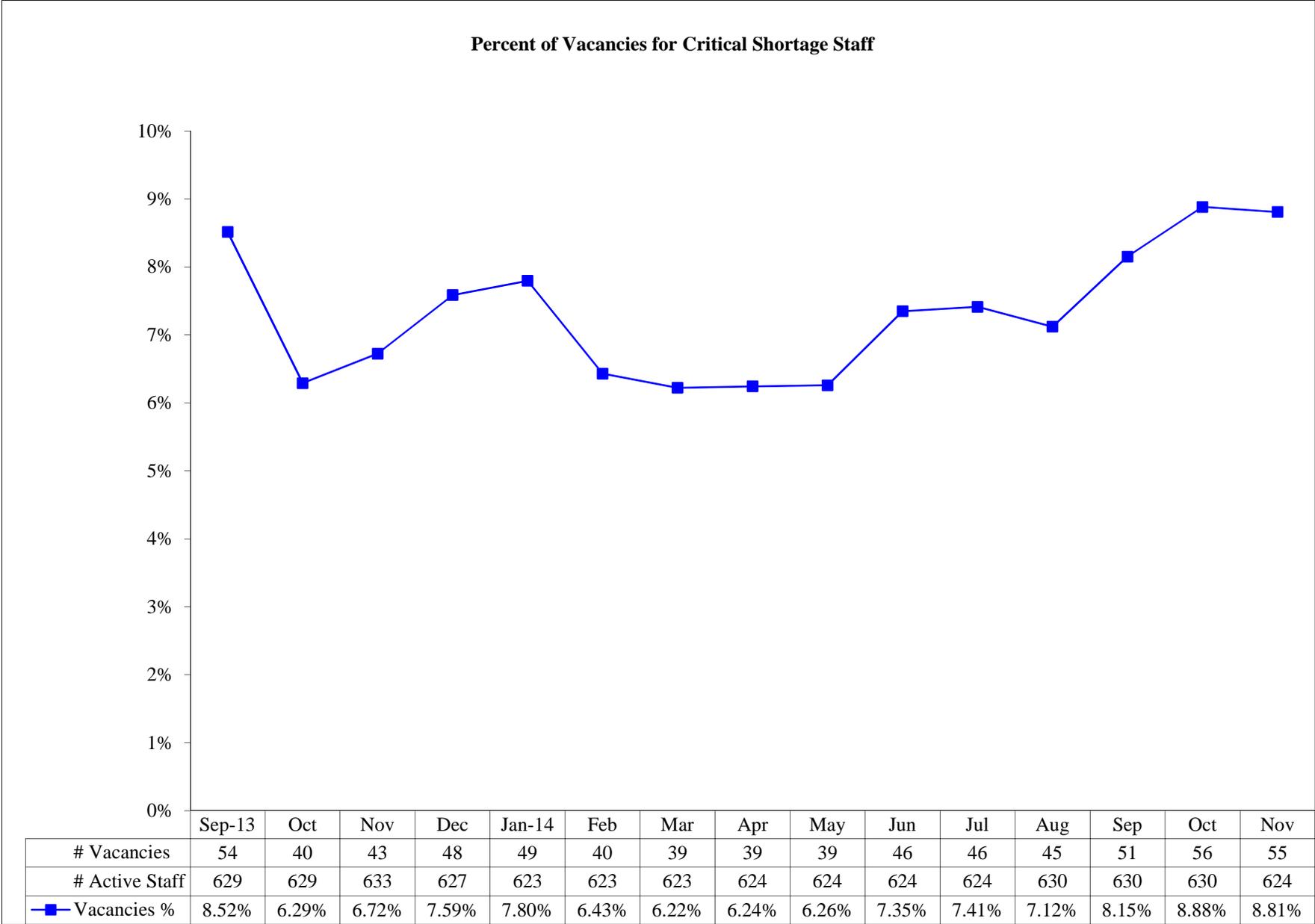


**CQMO - 9 Vacancies for Critical Shortage Staff
All State Hospitals**

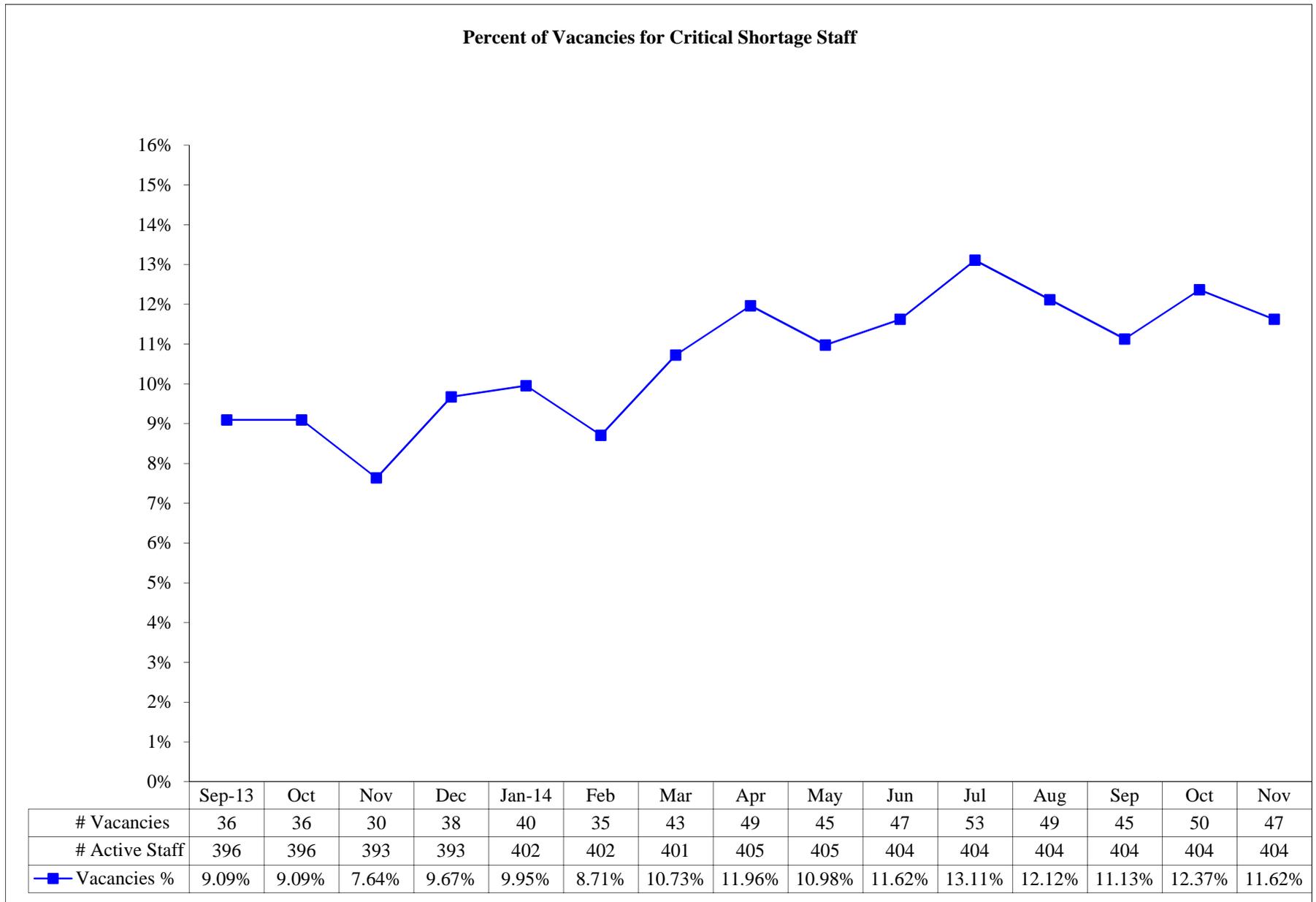


Additional staff added in April at NTSH (97) and RSH (35) due to expanding maximum security beds

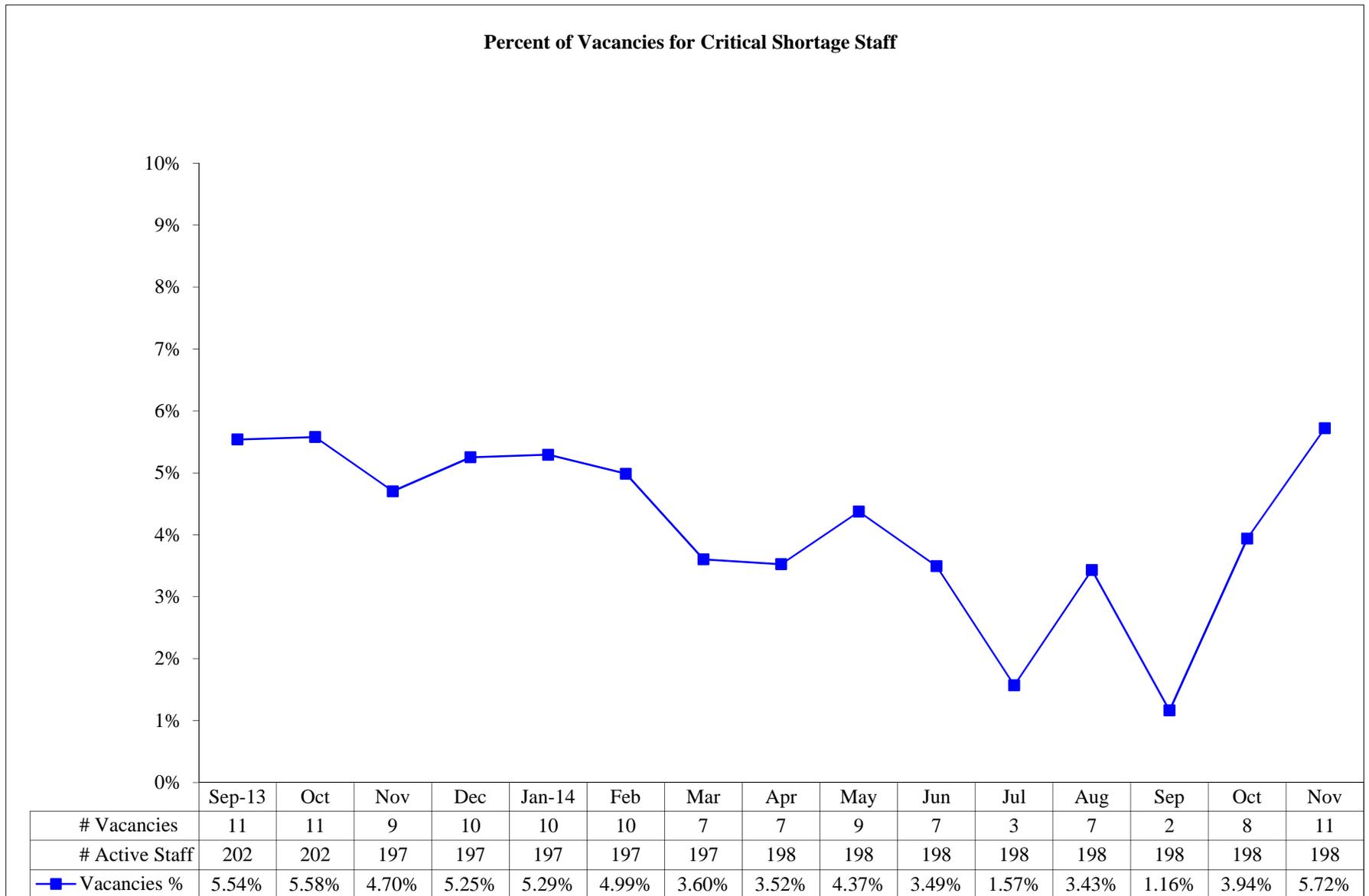
**CQMO - 9 Vacancies for Critical Shortage Staff
Austin State Hospital**



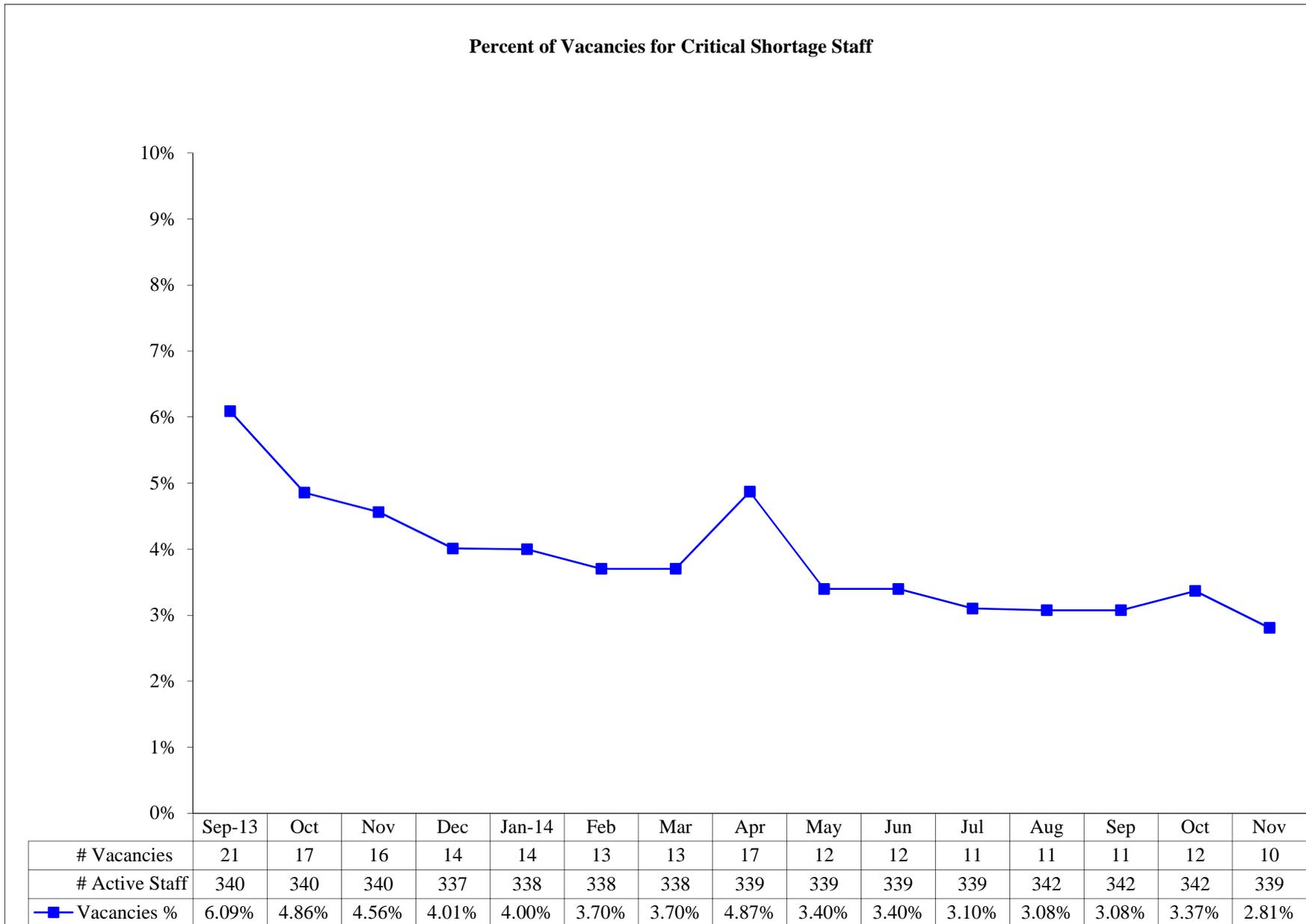
**CQMO - 9 Vacancies for Critical Shortage Staff
Big Spring State Hospital**



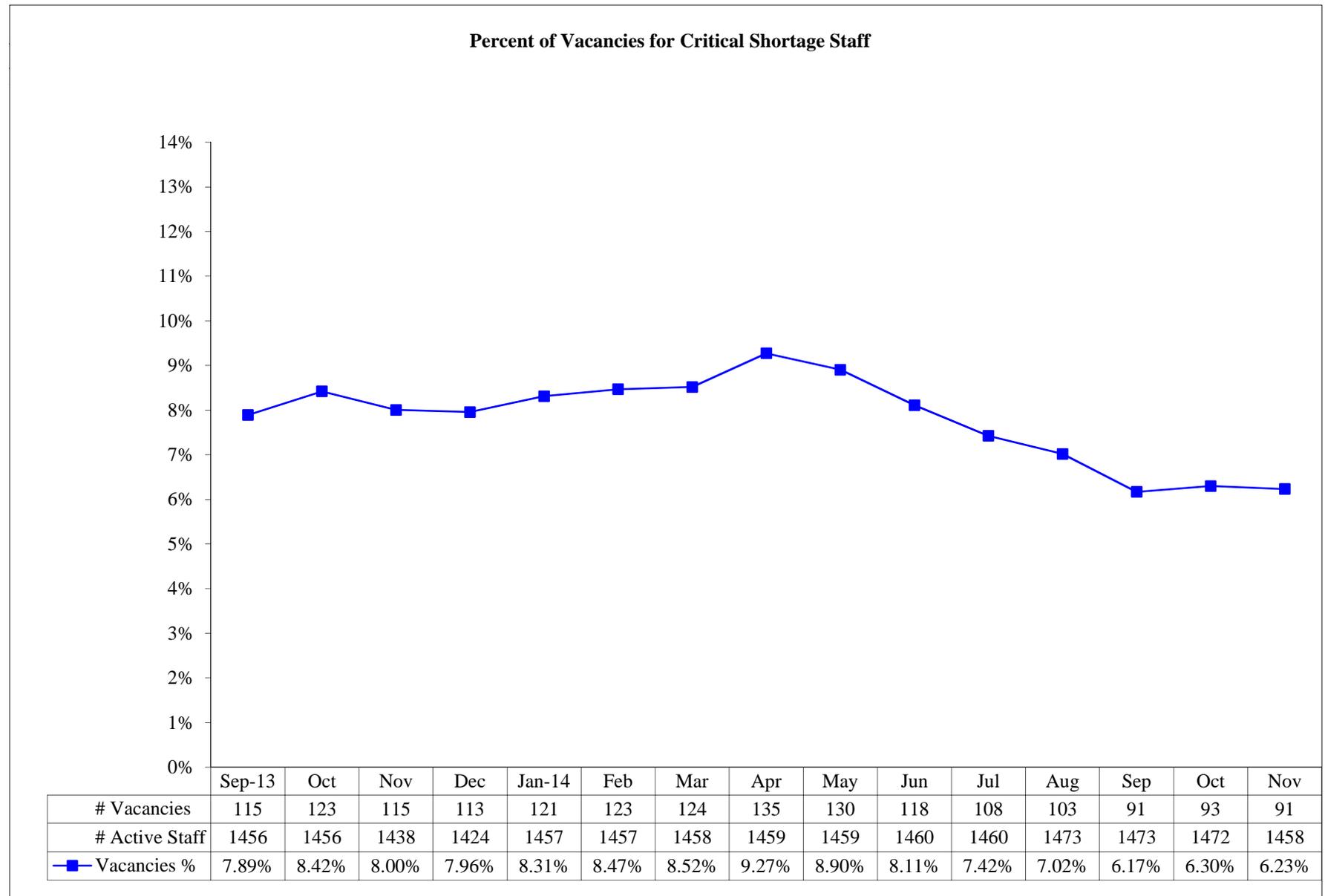
**CQMO - 9 Vacancies for Critical Shortage Staff
El Paso Psychiatric Center**



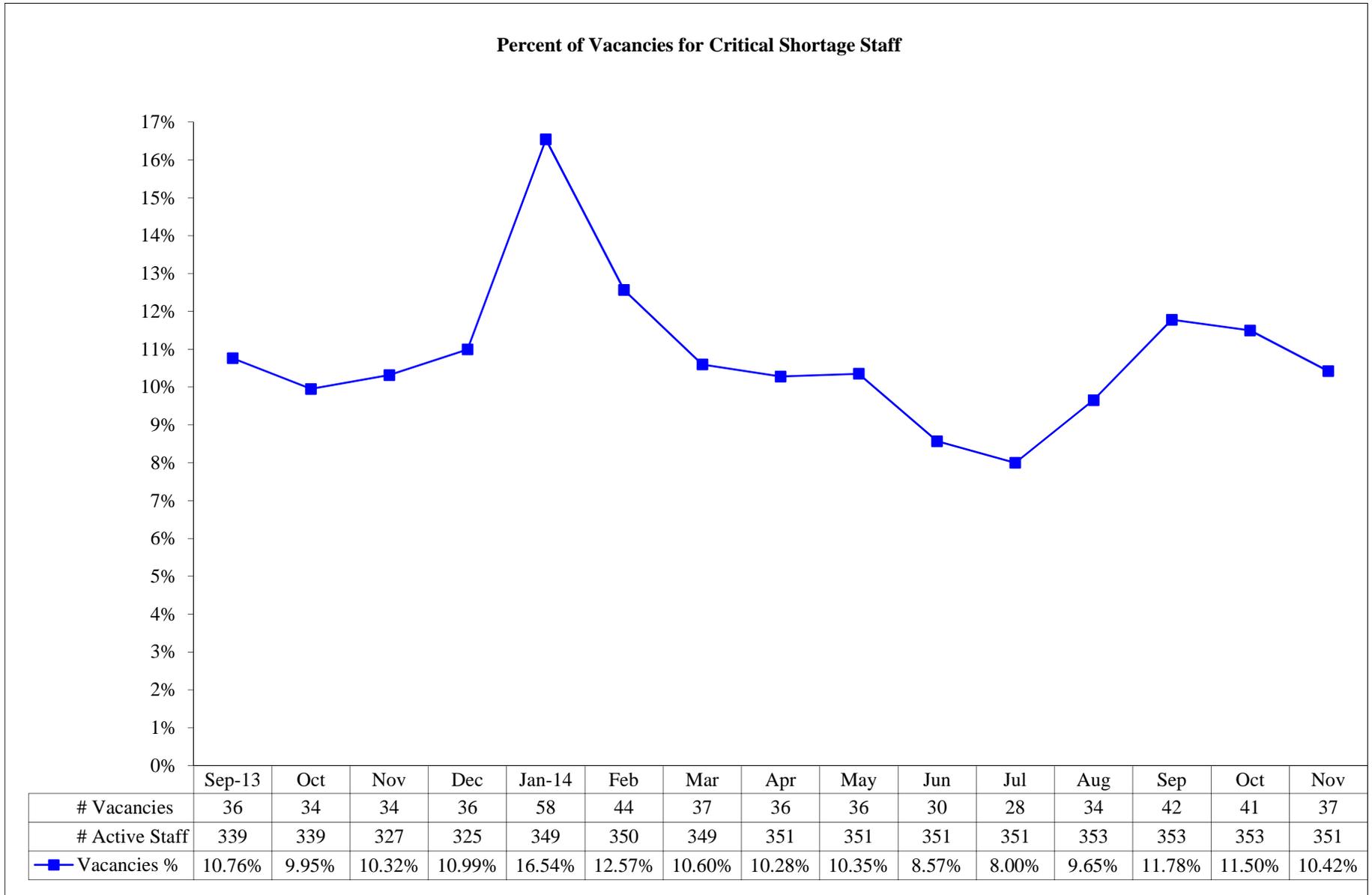
**CQMO - 9 Vacancies for Critical Shortage Staff
Kerrville State Hospital**



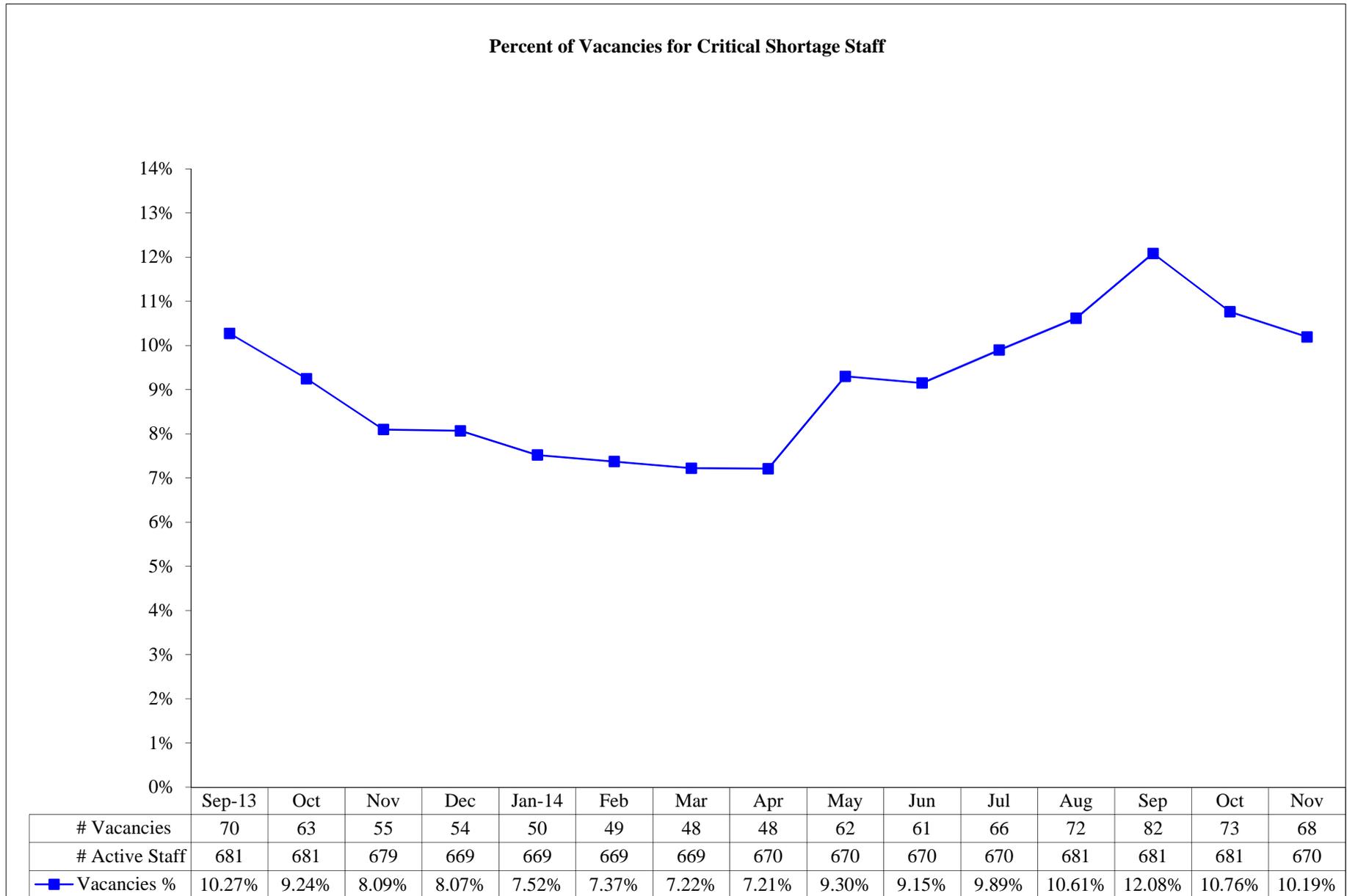
**CQMO - 9 Vacancies for Critical Shortage Staff
North Texas State Hospital**



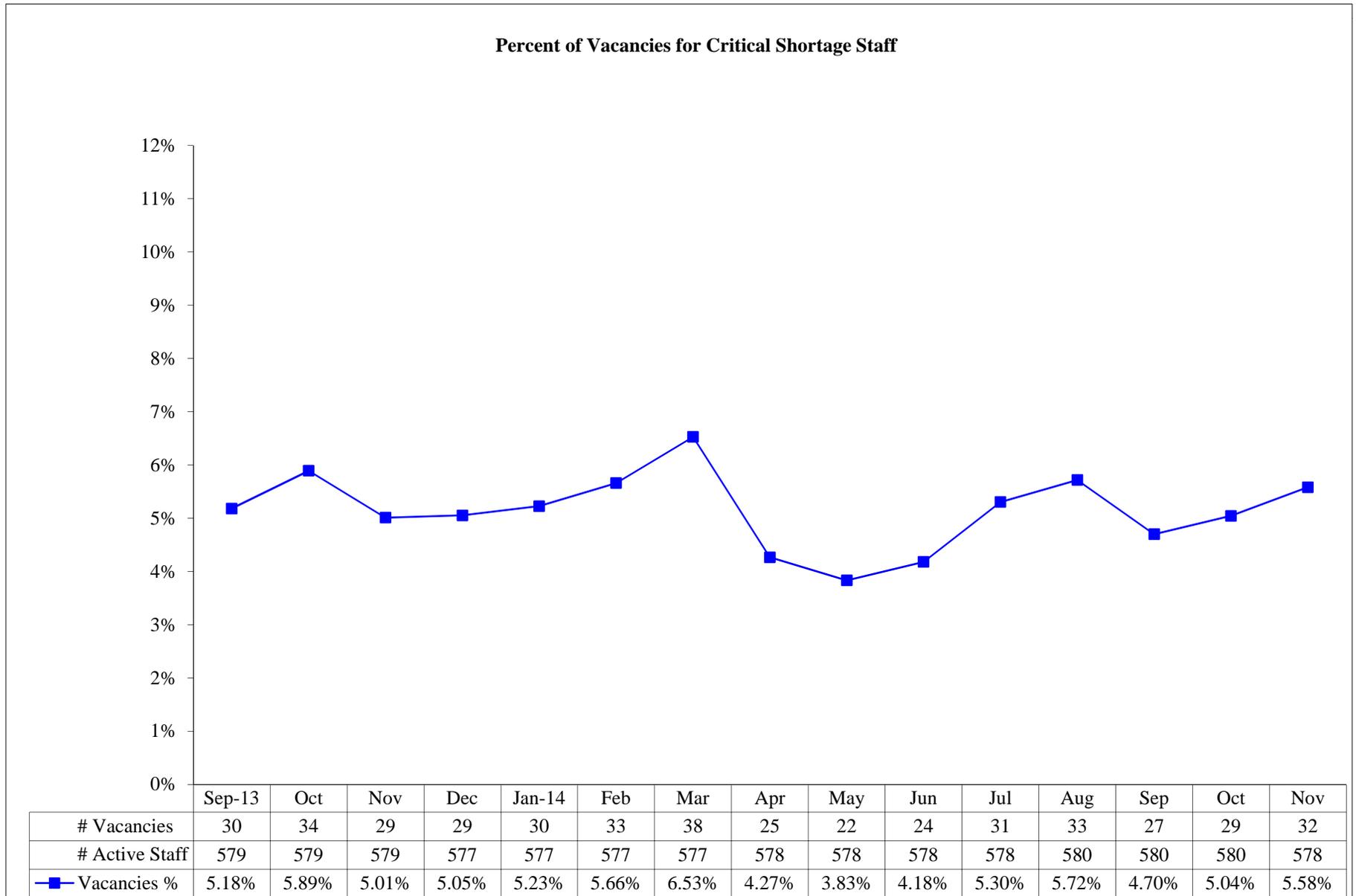
**CQMO - 9 Vacancies for Critical Shortage Staff
Rio Grande State Center**



**CQMO - 9 Vacancies for Critical Shortage Staff
Rusk State Hospital**

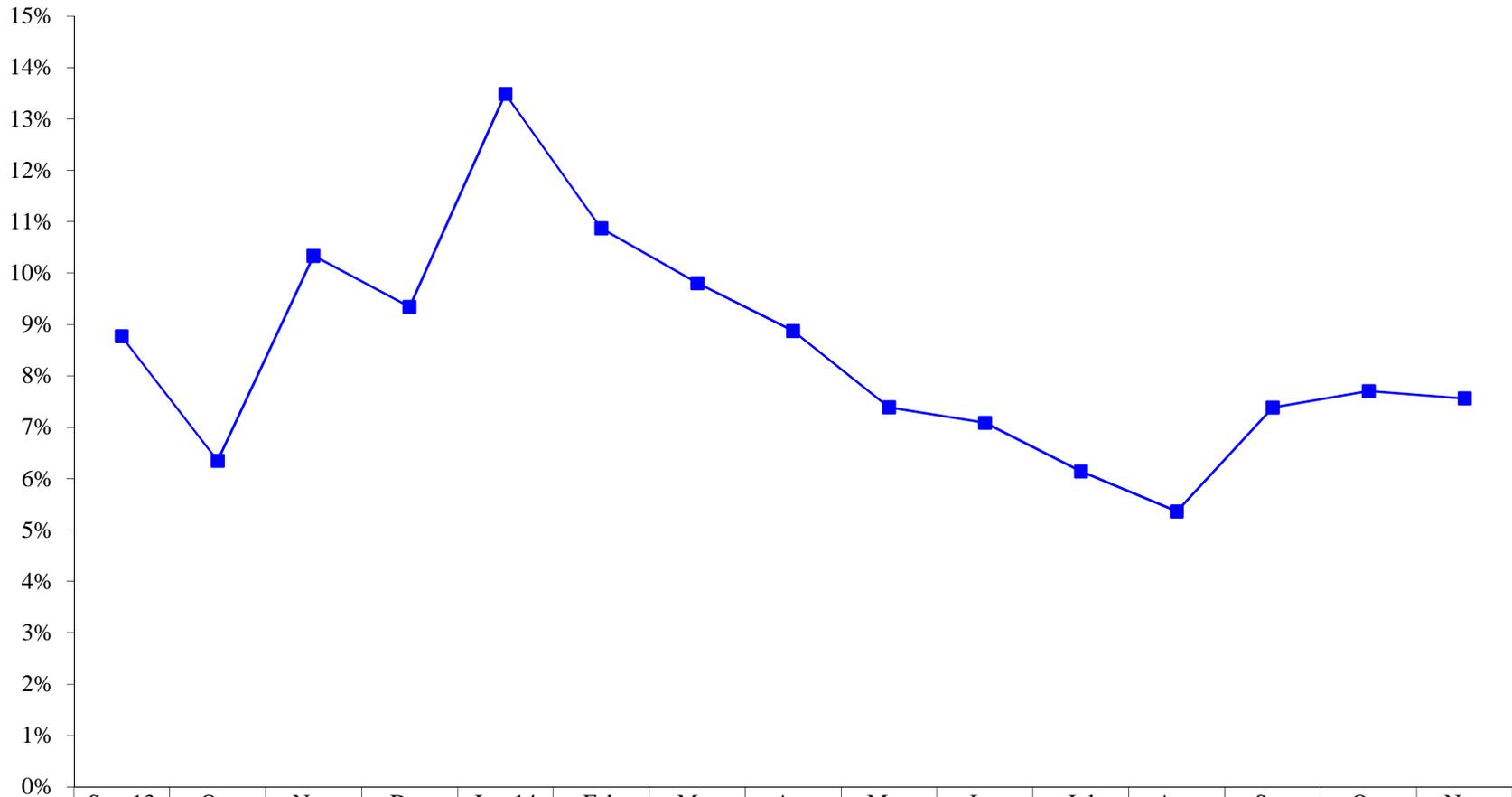


**CQMO - 9 Vacancies for Critical Shortage Staff
San Antonio State Hospital**

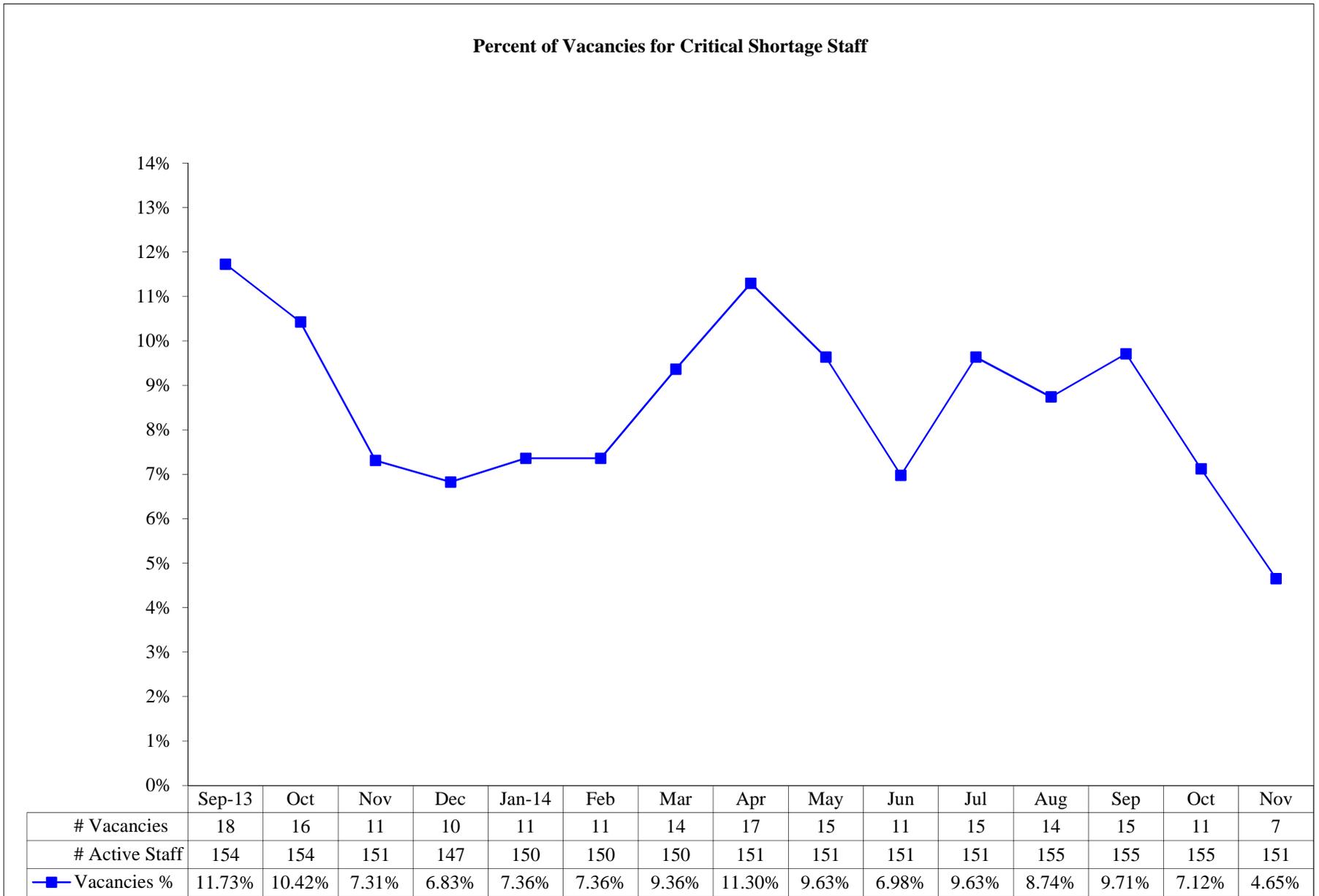


**CQMO - 9 Vacancies for Critical Shortage Staff
Terrell State Hospital**

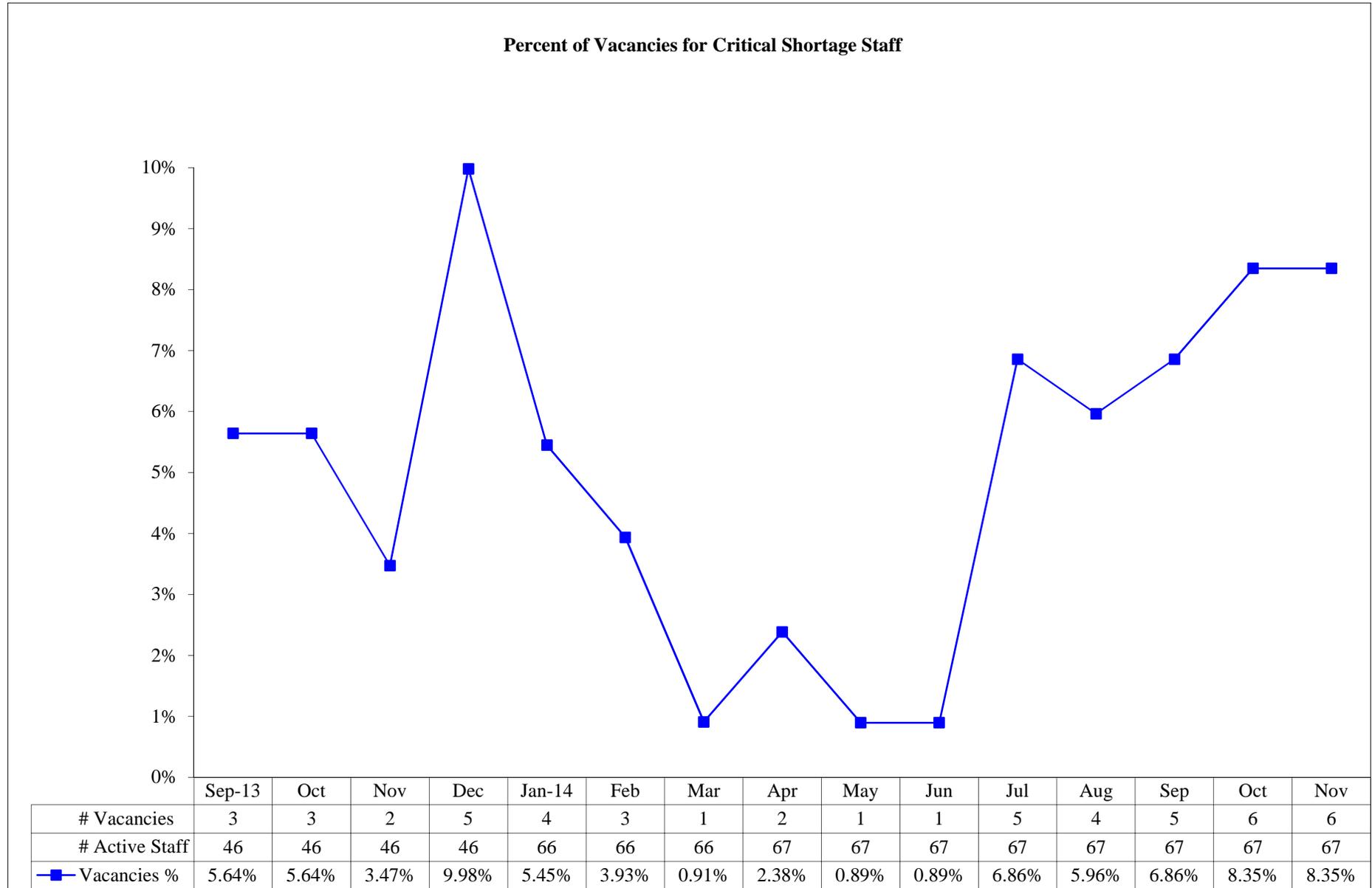
Percent of Vacancies for Critical Shortage Staff



**CQMO - 9 Vacancies for Critical Shortage Staff
Waco Center for Youth**

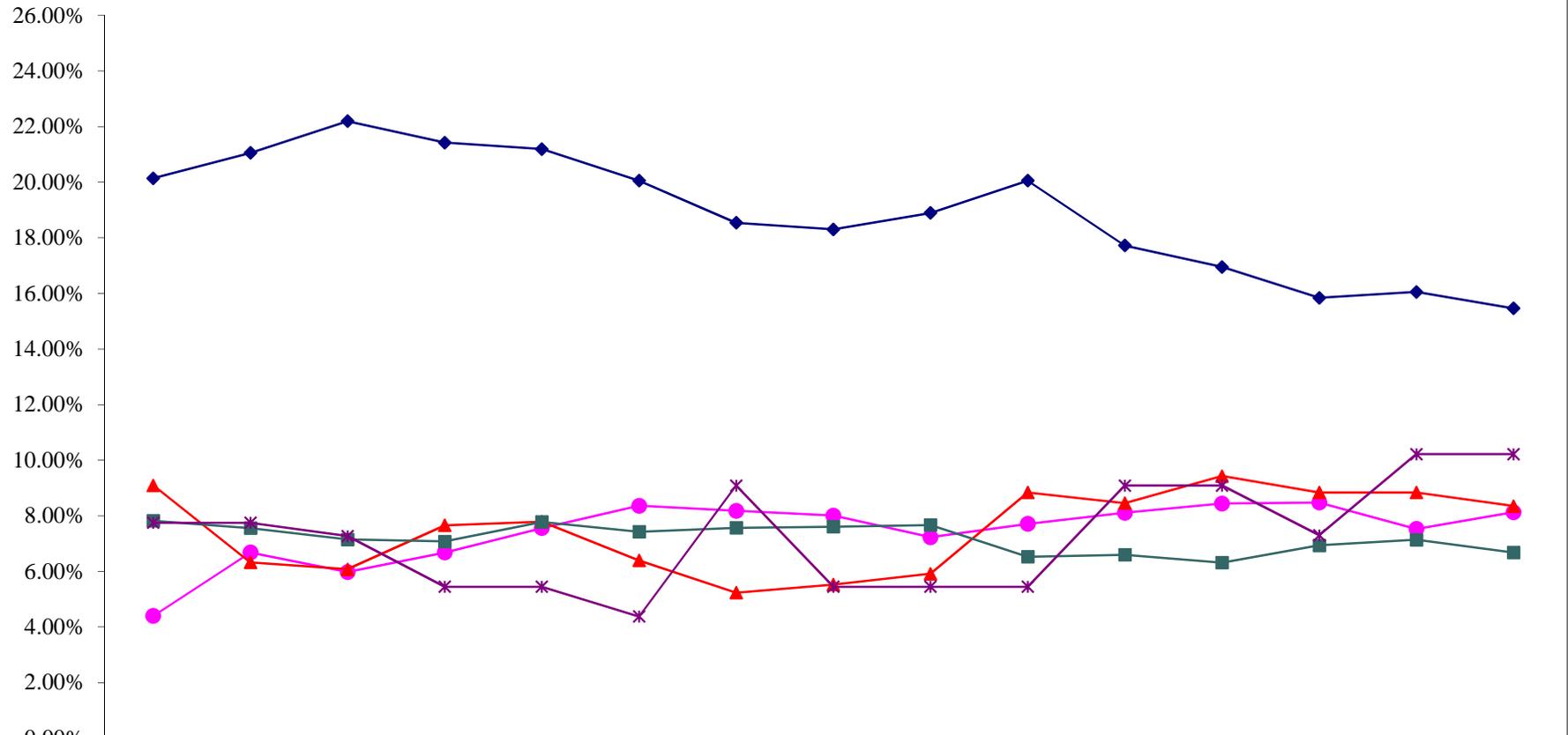


**CQMO - 9 Vacancies for Critical Shortage Staff
Texas Center for Infectious Disease**



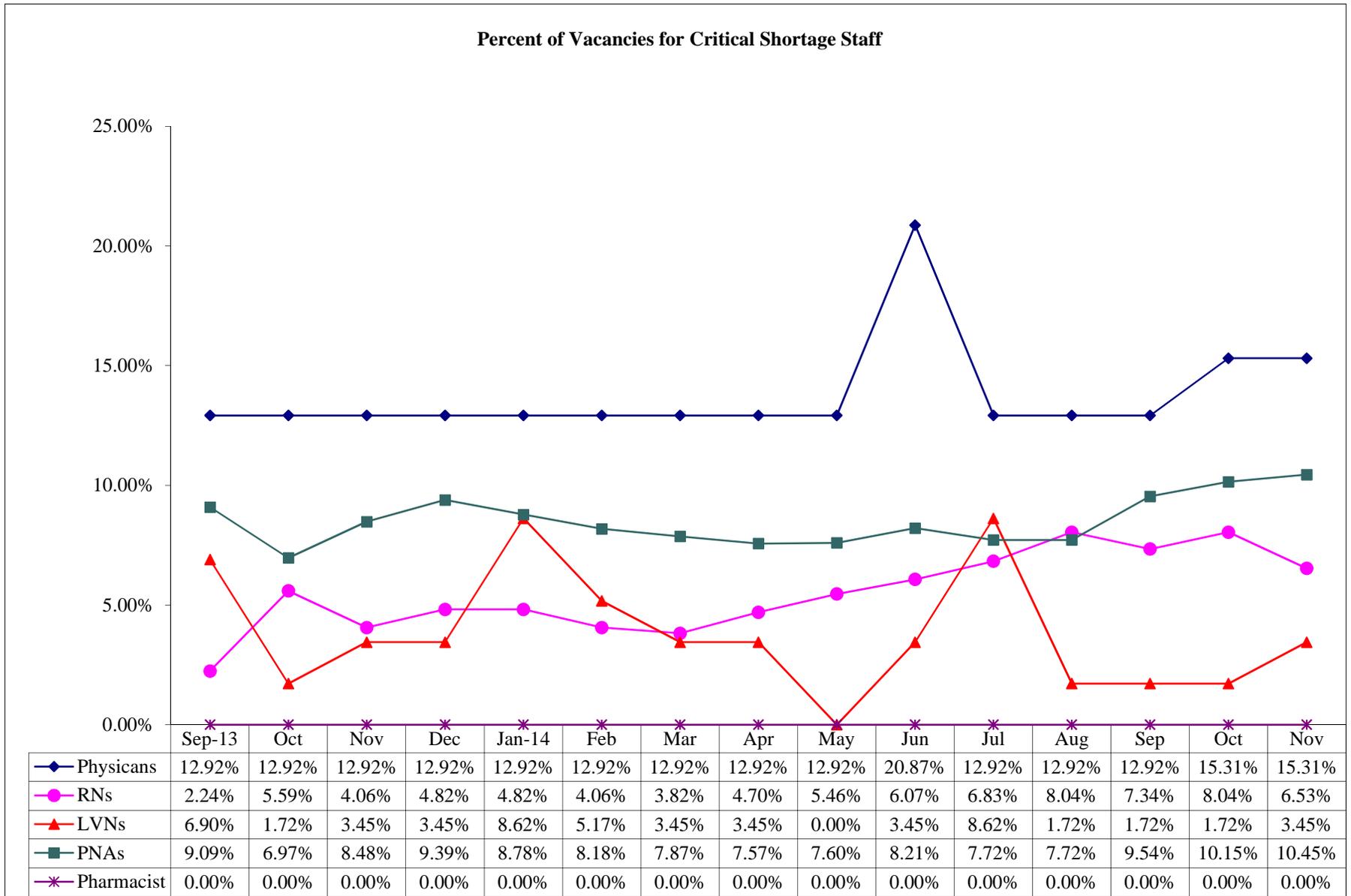
**CQMO - 9 Vacancies for Critical Shortage Staff
All State Hospitals**

Percent of Vacancies for Critical Shortage Staff

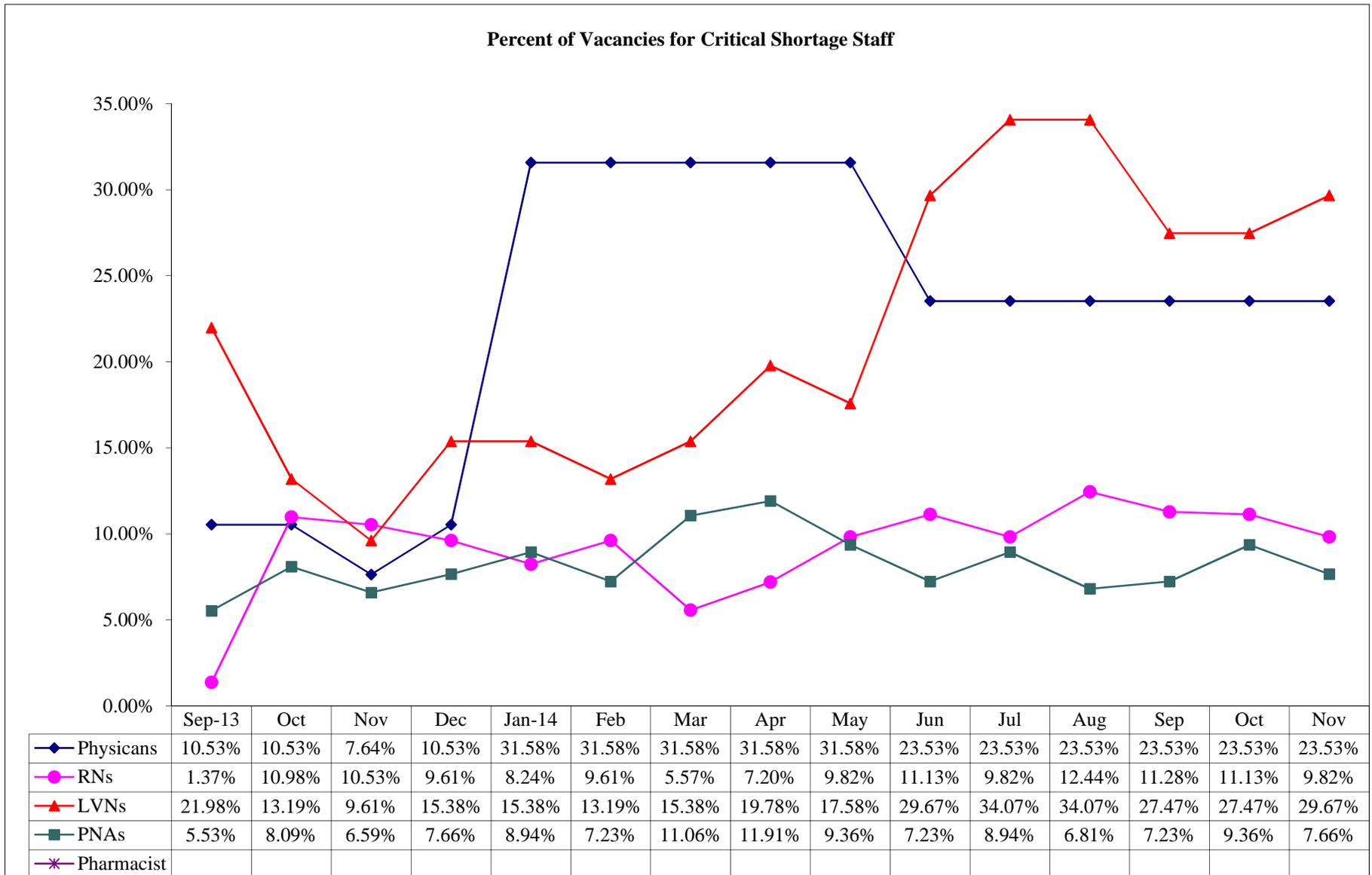


| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|---------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| ◆ Physicians | 20.14% | 21.05% | 22.19% | 21.42% | 21.19% | 20.05% | 18.54% | 18.30% | 18.89% | 20.05% | 17.72% | 16.95% | 15.84% | 16.05% | 15.46% |
| ● RNs | 4.40% | 6.68% | 5.98% | 6.68% | 7.56% | 8.36% | 8.18% | 8.01% | 7.23% | 7.71% | 8.11% | 8.44% | 8.48% | 7.53% | 8.13% |
| ▲ LVNs | 9.10% | 6.33% | 6.08% | 7.66% | 7.79% | 6.40% | 5.24% | 5.53% | 5.92% | 8.84% | 8.46% | 9.43% | 8.84% | 8.84% | 8.35% |
| ■ PNAs | 7.82% | 7.56% | 7.15% | 7.08% | 7.78% | 7.43% | 7.57% | 7.61% | 7.67% | 6.53% | 6.60% | 6.32% | 6.94% | 7.14% | 6.68% |
| * Pharmacists | 7.75% | 7.75% | 7.27% | 5.45% | 5.45% | 4.38% | 9.09% | 5.45% | 5.45% | 5.45% | 9.09% | 9.09% | 7.30% | 10.22% | 10.22% |

**CQMO - 9 Vacancies for Critical Shortage Staff
Austin State Hospital**



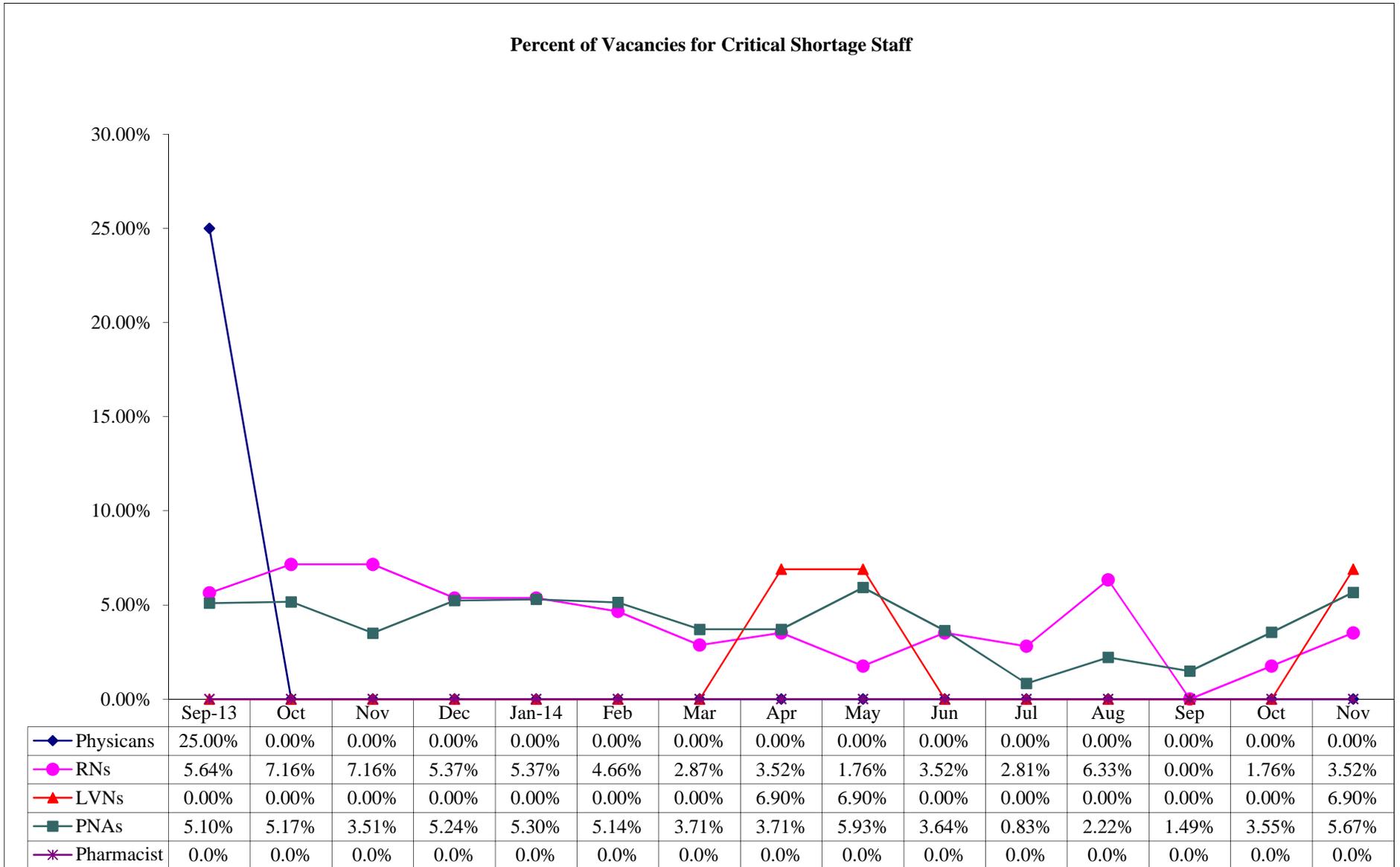
**CQMO - 9 Vacancies for Critical Shortage Staff
Big Spring State Hospital**



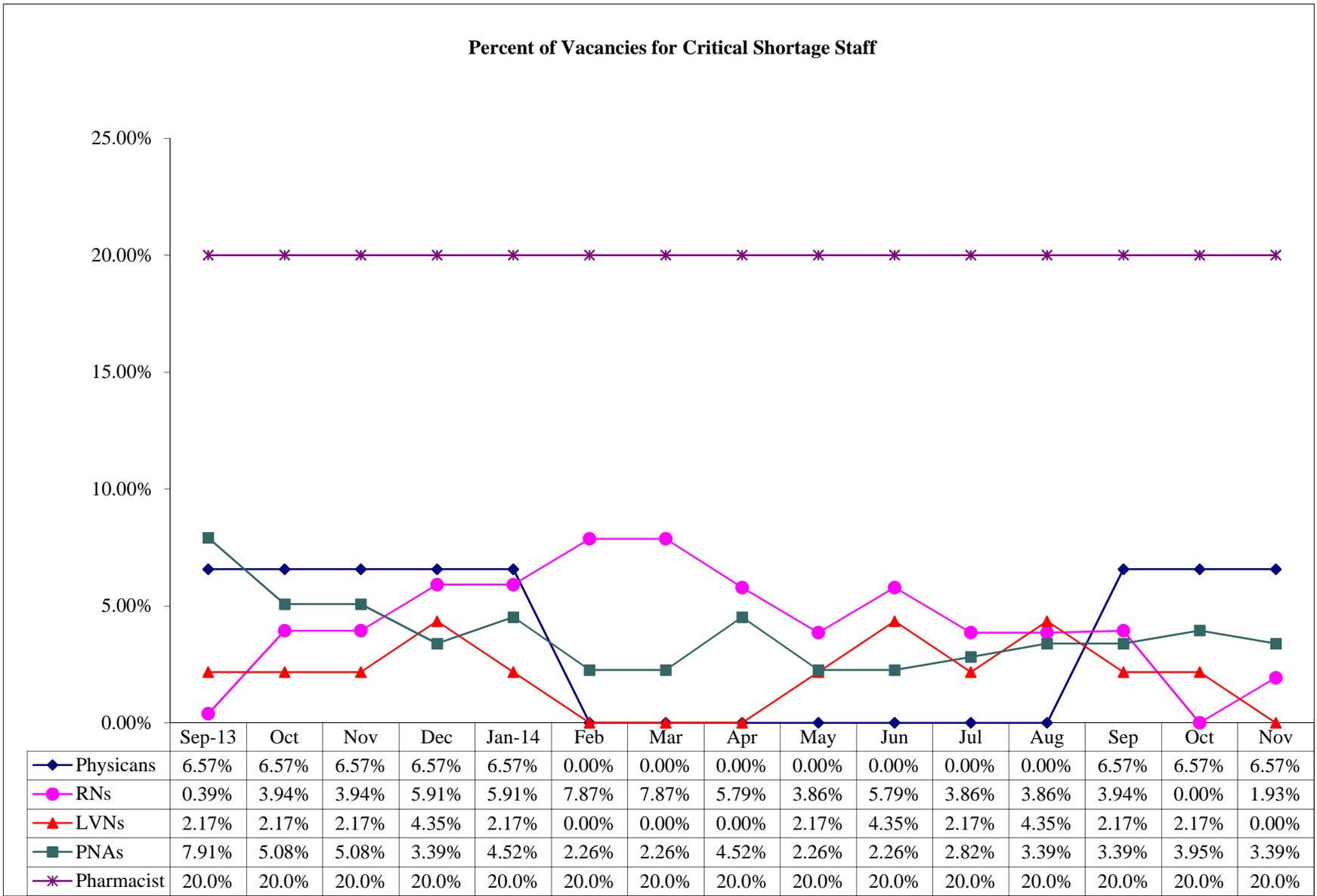
Pharmacist - privatized

**CQMO - 9 Vacancies for Critical Shortage Staff
El Paso Psychiatric Center**

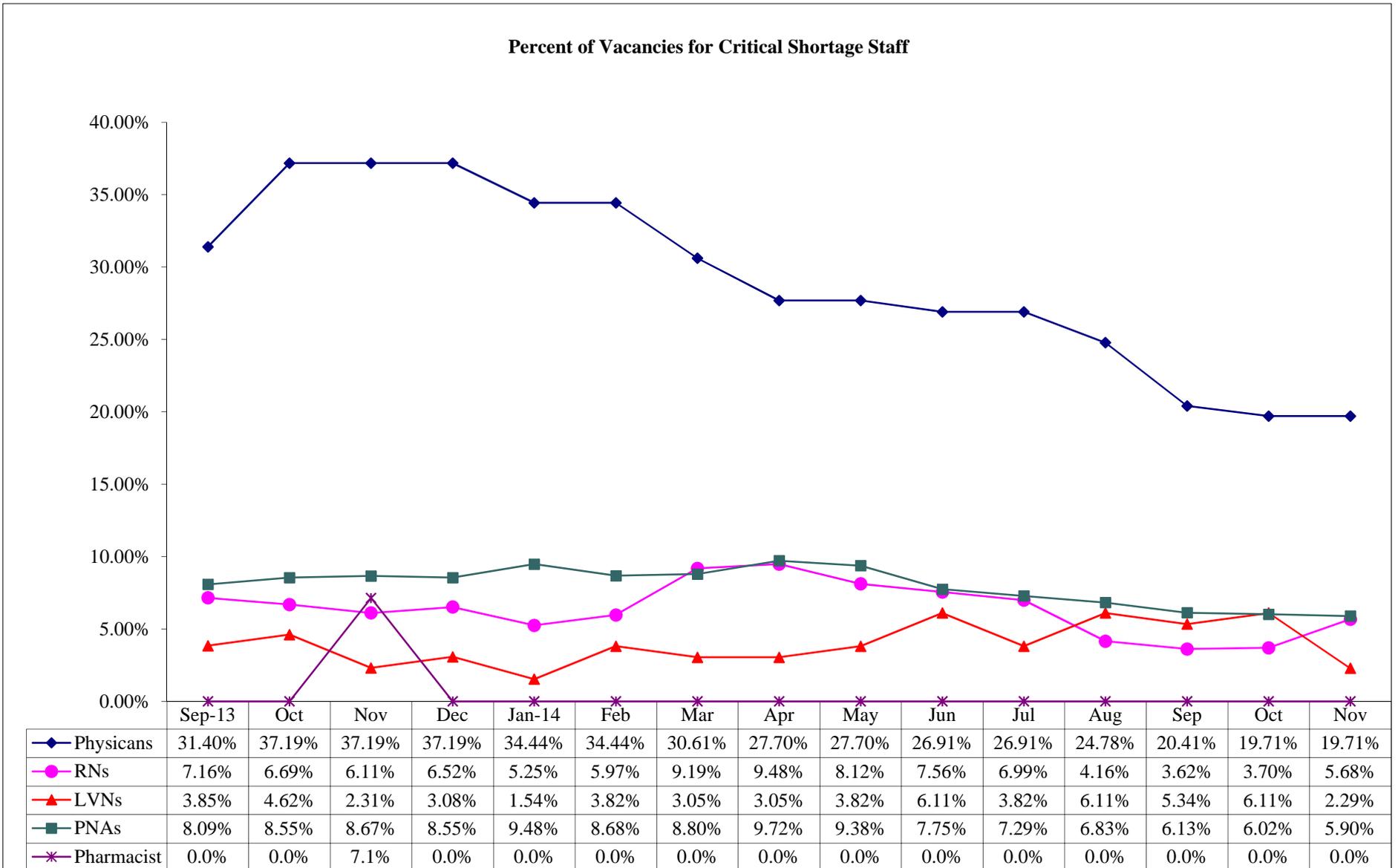
Percent of Vacancies for Critical Shortage Staff



**CQMO - 9 Vacancies for Critical Shortage Staff
Kerrville State Hospital**

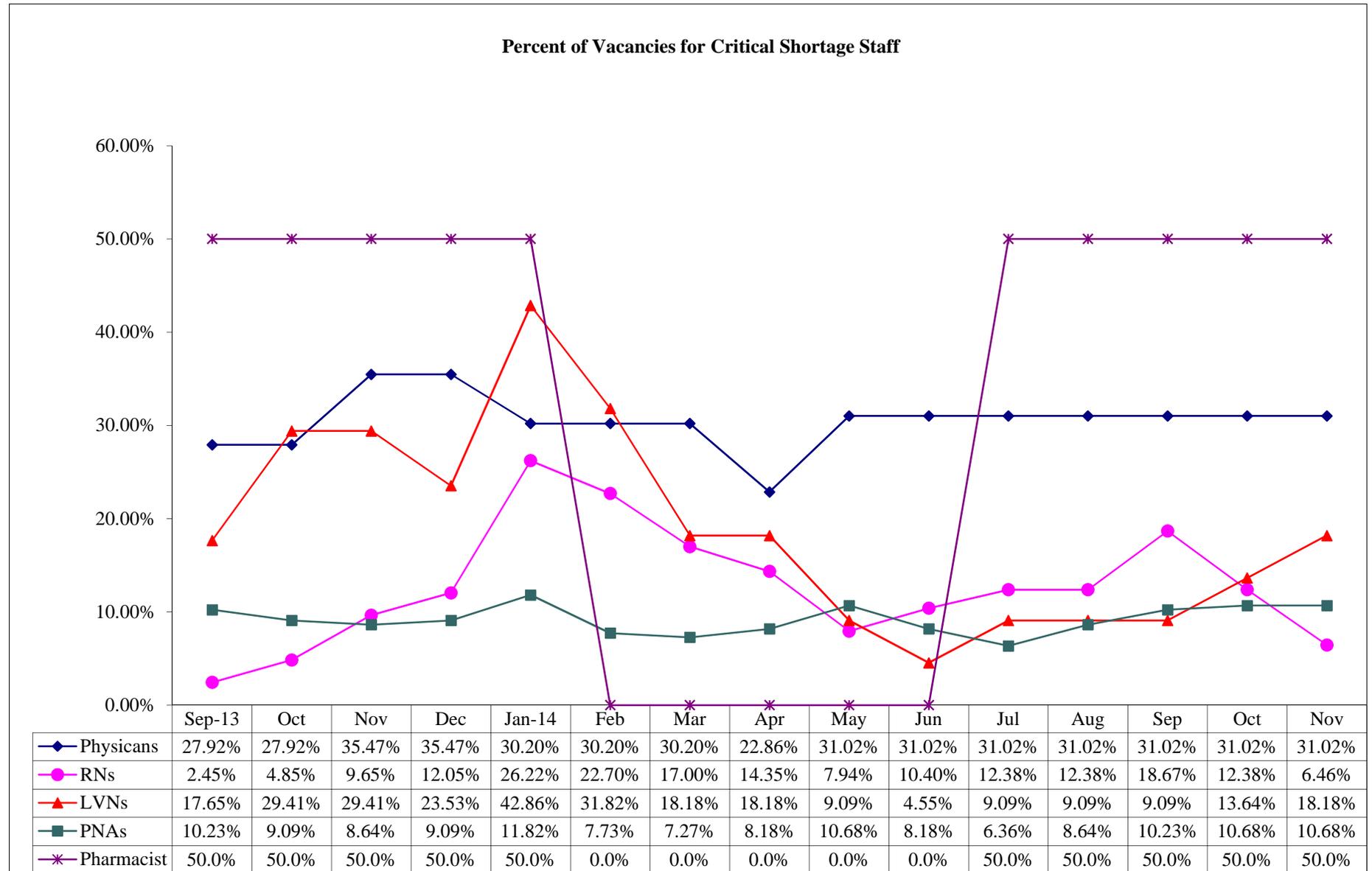


**CQMO - 9 Vacancies for Critical Shortage Staff
North Texas State Hospital**

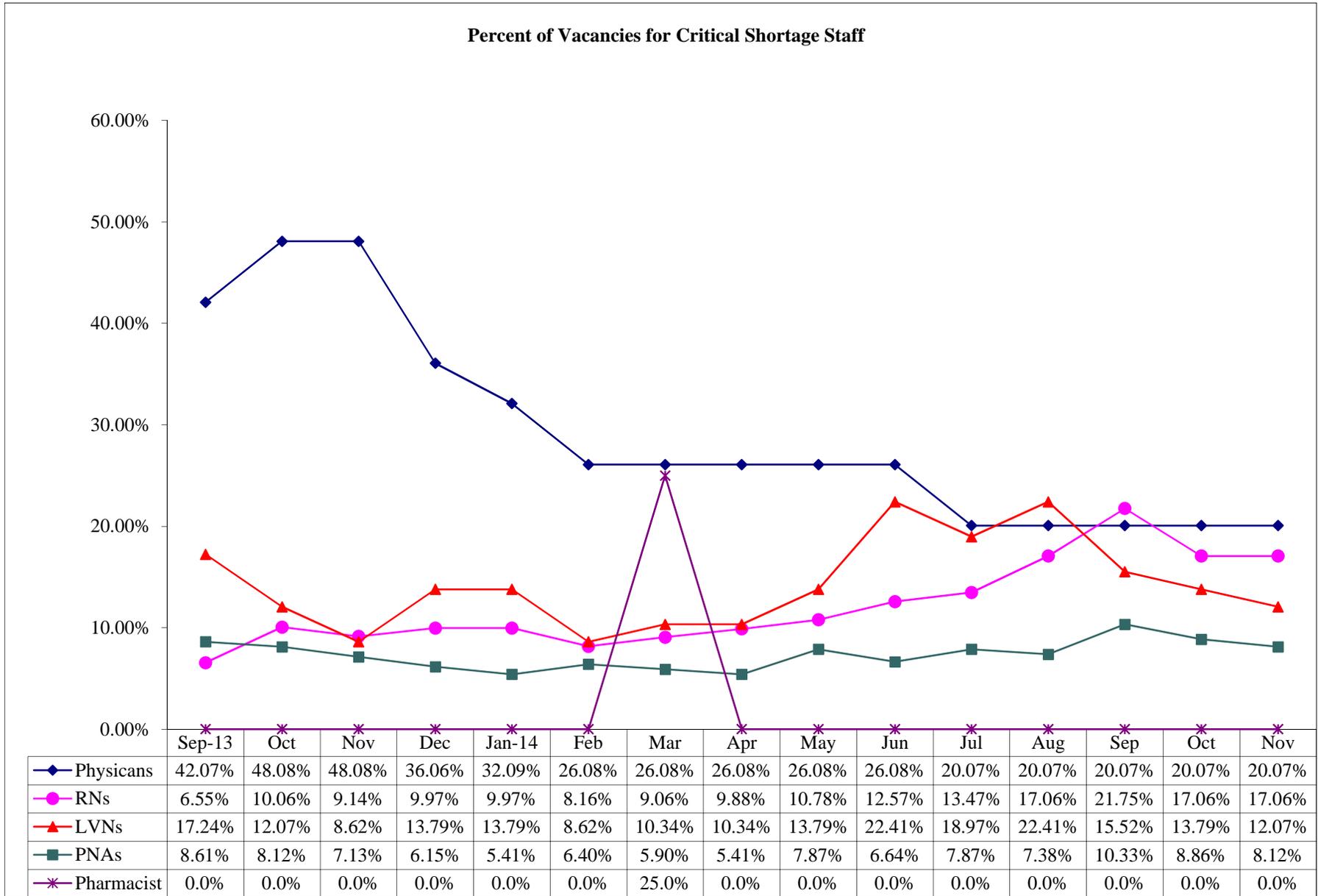


*Apr - Additional 97 staff added

**CQMO - 9 Vacancies for Critical Shortage Staff
Rio Grande State Center**



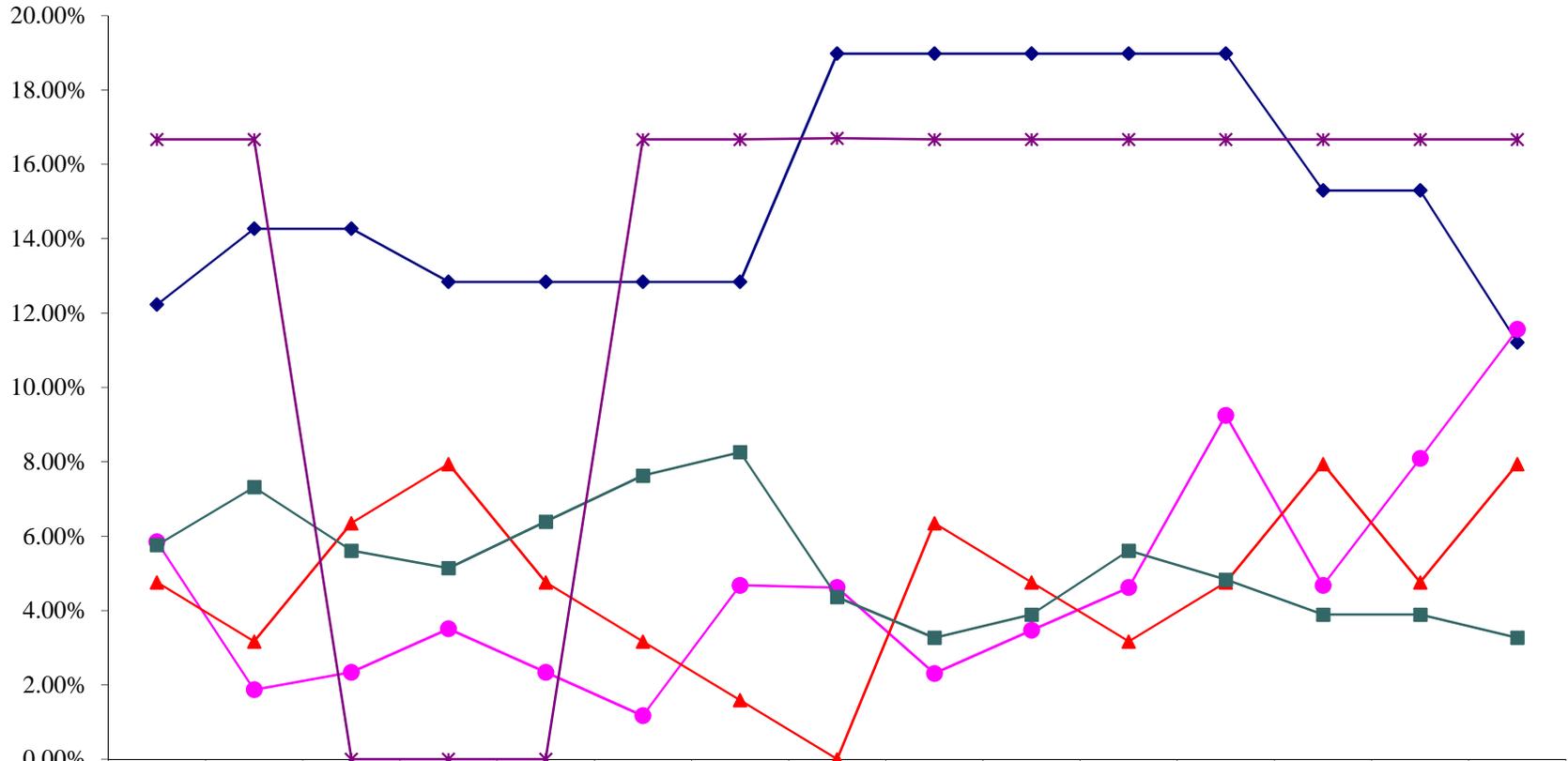
**CQMO - 9 Vacancies for Critical Shortage Staff
Rusk State Hospital**



*Apr - Additional 35 staff added

**CQMO - 9 Vacancies for Critical Shortage Staff
San Antonio State Hospital**

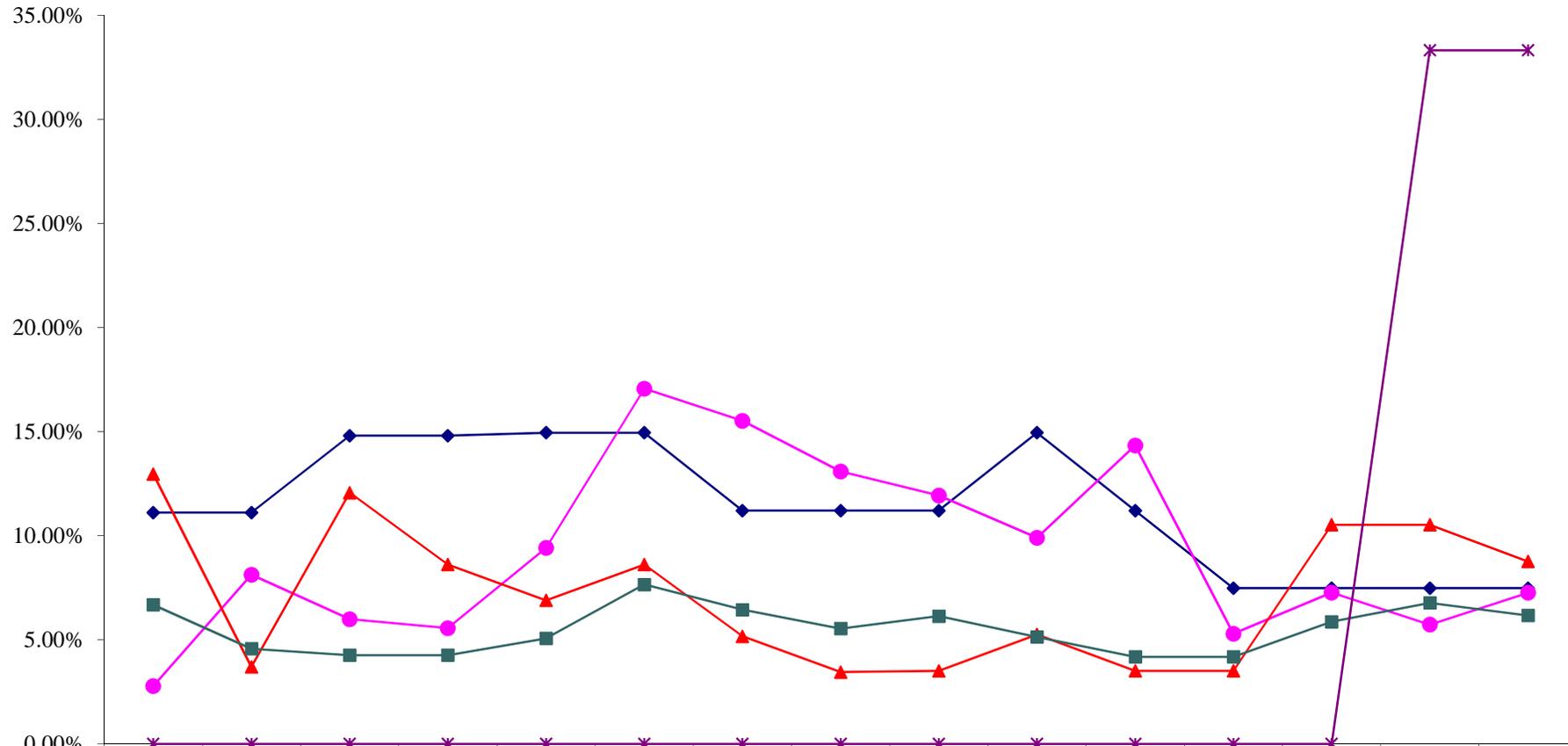
Percent of Vacancies for Critical Shortage Staff



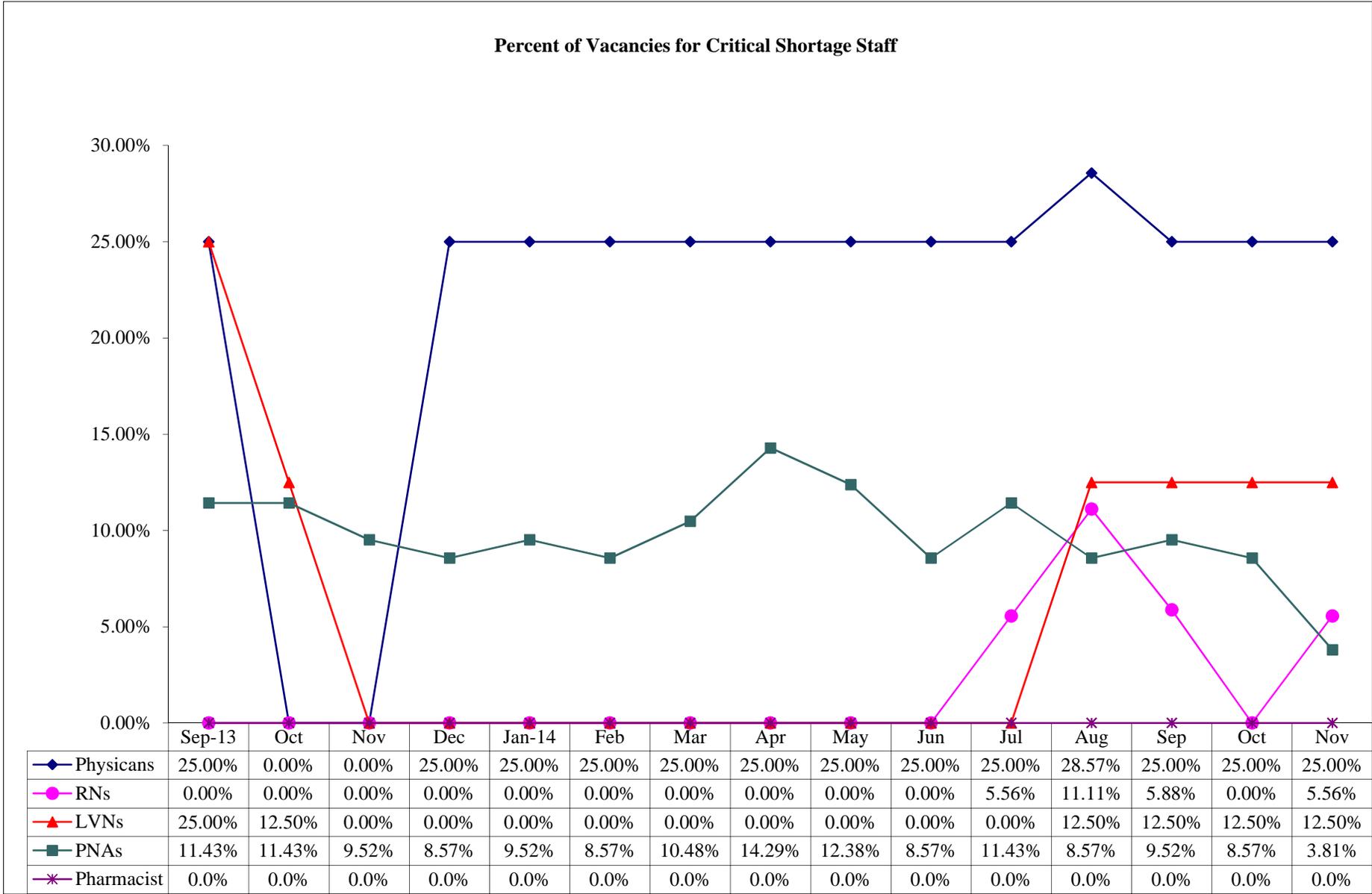
| | Sep-13 | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|--------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| ◆ Physicians | 12.23% | 14.27% | 14.27% | 12.84% | 12.84% | 12.84% | 12.84% | 18.98% | 18.98% | 18.98% | 18.98% | 18.98% | 15.30% | 15.30% | 11.21% |
| ● RNs | 5.85% | 1.87% | 2.34% | 3.51% | 2.34% | 1.17% | 4.68% | 4.62% | 2.31% | 3.47% | 4.62% | 9.25% | 4.68% | 8.09% | 11.56% |
| ▲ LVNs | 4.76% | 3.17% | 6.35% | 7.94% | 4.76% | 3.17% | 1.59% | 0.00% | 6.35% | 4.76% | 3.17% | 4.76% | 7.94% | 4.76% | 7.94% |
| ■ PNAs | 5.76% | 7.32% | 5.61% | 5.14% | 6.39% | 7.63% | 8.26% | 4.36% | 3.27% | 3.89% | 5.61% | 4.83% | 3.89% | 3.89% | 3.27% |
| * Pharmacist | 16.7% | 16.7% | 0.0% | 0.0% | 0.0% | 16.7% | 16.7% | 16.7% | 16.7% | 16.7% | 16.7% | 16.7% | 16.7% | 16.7% | 16.7% |

**CQMO - 9 Vacancies for Critical Shortage Staff
Terrell State Hospital**

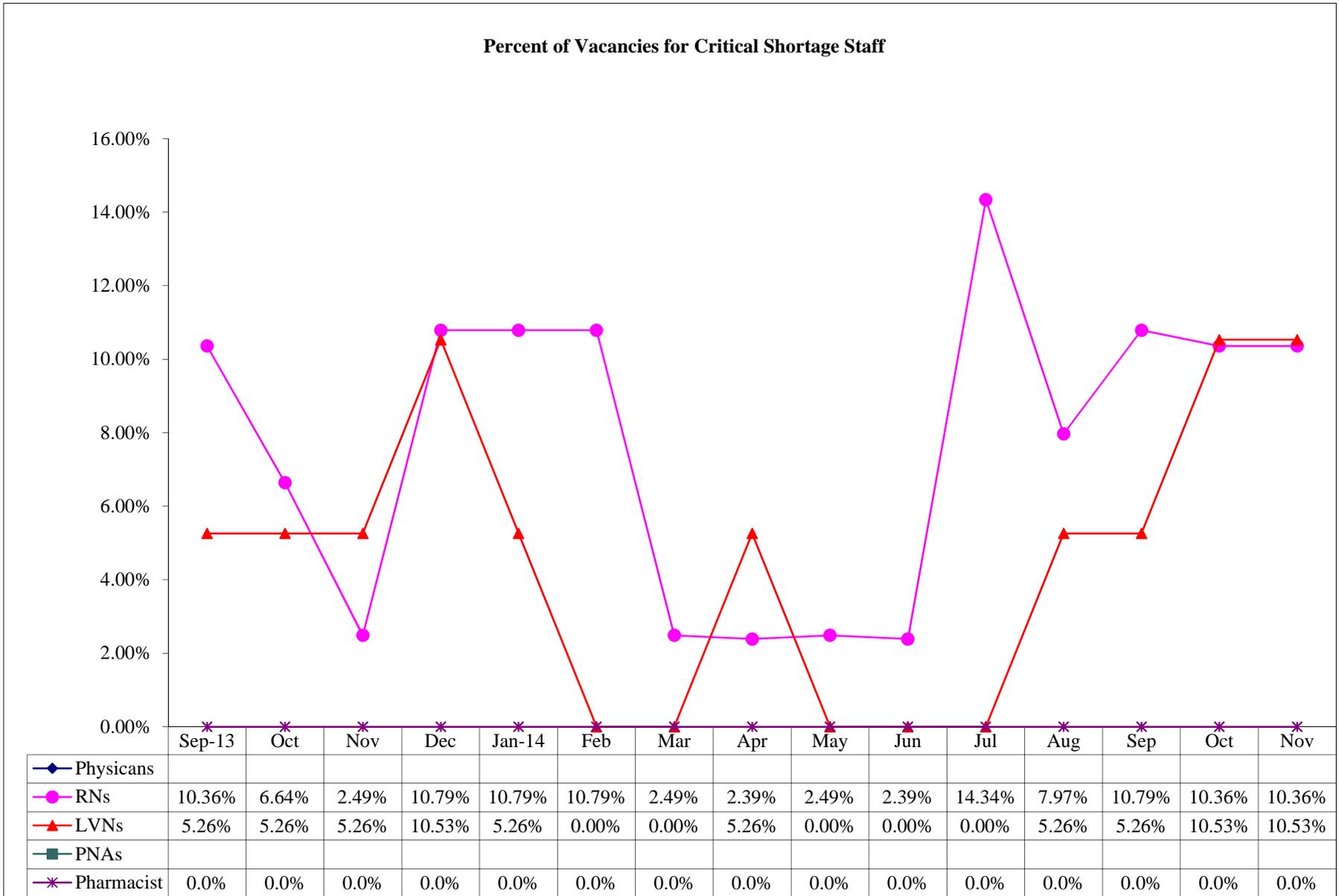
Percent of Vacancies for Critical Shortage Staff



**CQMO - 9 Vacancies for Critical Shortage Staff
Waco Center for Youth**



**CQMO - 9 Vacancies for Critical Shortage Staff
Texas Center for Infectious Disease**



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COMO-10

Measure: Report Number of Staff Members Currently Utilizing Education Leave and the Area of Study

Timeframe: Quarterly

Definition

The statewide number of staff members currently utilizing education leave will be maintained.

Data Source

Facility Form (Education Leave Reporting)

Data Display and Chart Description

Table shows number of staff members currently utilizing education leave and the area of study for individual state hospitals and system-wide.

Purpose

Monitor staff members utilizing education leave.

**CQMO - 10 Staff Members Utilizing Education Leave
All State Hospitals - FY2015**

| | Q1 | Q2 | Q3 | Q4 |
|--------------------------------|------------|----------|----------|----------|
| Austin State Hospital | 20 | | | |
| Big Spring State Hospital | 6 | | | |
| El Paso Psychiatric Center | 1 | | | |
| Kerrville State Hospital | 3 | | | |
| North Texas State Hospital | 34 | | | |
| Rio Grande State Center | 0 | | | |
| Rusk State Hospital | 6 | | | |
| San Antonio State Hospital | 8 | | | |
| Terrell State Hospital | 17 | | | |
| Waco Center for Youth | 2 | | | |
| TCID | 9 | | | |
| All State Hospitals | 106 | 0 | 0 | 0 |
| | Q1 | Q2 | Q3 | Q4 |
| Associate Degree | 0 | | | |
| Coding | 0 | | | |
| Criminal Justice | 1 | | | |
| Dietician/Nutrition | 0 | | | |
| Engineering | 0 | | | |
| IT | 0 | | | |
| Medical Doctor | 0 | | | |
| Nursing | 81 | | | |
| Nurse Practitioner | 2 | | | |
| O. Therapy or Physical Therapy | 1 | | | |
| Pharmacist | 1 | | | |
| Pharmacy Tech | 0 | | | |
| Phlebotomy | 0 | | | |
| Post-Doctoral Neuropsychology | 0 | | | |
| Psychology | 3 | | | |
| Public Health | 0 | | | |
| Rehabilitation | 0 | | | |
| Social Work | 5 | | | |
| Sociology | 0 | | | |
| Therapeutic Recreation | 0 | | | |
| Other | 12 | | | |
| All State Hospitals | 106 | 0 | 0 | 0 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COMO-11

Measure: Collect, Compare, and Report Data on Healthcare Associated Infections According to Centers for Disease Control (CDC) Categories.

Timeframe: Quarterly

Definition

The state hospital rate of healthcare associated infections by ages 0-17, 18-64, and 65+ per 1,000 bed days will be collected.

Data Source

Facility Form (HAI)

ODS Bed day Report (Age groups 0-17, 18-64, and 65+)

Data Display and Chart Description

Table shows quarterly numbers of nosocomial infection type by ages 0-17, 18-64, and 65+ for individual state hospitals and system-wide.

Purpose

Monitor healthcare associated infections.

**CQMO - 11 Healthcare Associated Infection Rate
All State Hospitals - FY2015 (As of November 30, 2014)**

Age 0 - 17

| Nosocomial Infection Type | ASH | EPPC | NTSH | SASH | TSH | WCFY | System Total |
|---|------------|-------------|-------------|-------------|------------|-------------|---------------------|
| Urinary Tract Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Surgical Site Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Pneumonia | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Blood Stream Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bone and Joint Infections | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Central Nervous System Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Cardiovascular System Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Ear, Eyes, Nose, Throat Infection | 0 | 0 | 1 | 1 | 0 | 1 | 3 |
| Gastrointestinal System Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Lower Respiratory Infection, other than Pneumonia | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Upper Respiratory Infection | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Reproductive Tract Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Skin and Soft Tissue Infection | 0 | 0 | 1 | 2 | 0 | 0 | 3 |
| Systemic Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 2 | 3 | 1 | 1 | 7 |
| Rate Per 1,000 Beddays | 0.0 | 0.0 | 0.2 | 1.5 | 0.4 | 0.1 | 0.3 |

CQMO - 11 Healthcare Associated Infection Rate
All State Hospitals - FY2015 (As of November 30, 2014)

Age 18 - 64

| Nosocomial Infection Type | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | TCID | System Total |
|---|------------|-------------|-------------|------------|-------------|-------------|------------|-------------|------------|-------------|---------------------|
| Urinary Tract Infection | 0 | 7 | 0 | 2 | 6 | 0 | 0 | 7 | 2 | 1 | 25 |
| Surgical Site Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| Pneumonia | 0 | 3 | 0 | 1 | 2 | 0 | 5 | 0 | 1 | 0 | 12 |
| Blood Stream Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bone and Joint Infections | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Central Nervous System Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Cardiovascular System Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Ear, Eyes, Nose, Throat Infection | 0 | 17 | 1 | 7 | 0 | 0 | 6 | 5 | 0 | 0 | 36 |
| Gastrointestinal System Infection | 0 | 3 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 4 |
| Lower Respiratory Infection, other than Pneumonia | 0 | 14 | 0 | 0 | 2 | 0 | 1 | 1 | 0 | 0 | 18 |
| Upper Respiratory Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 7 | 2 | 9 |
| Reproductive Tract Infection | 0 | 9 | 0 | 0 | 0 | 0 | 0 | 9 | 0 | 0 | 18 |
| Skin and Soft Tissue Infection | 10 | 22 | 5 | 2 | 13 | 0 | 14 | 16 | 0 | 0 | 82 |
| Systemic Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 10 | 75 | 6 | 12 | 23 | 0 | 26 | 39 | 10 | 4 | 205 |
| Rate Per 1,000 Beddays | 0.5 | 4.8 | 1.1 | 0.7 | 0.5 | 0.0 | 1.0 | 1.9 | 0.5 | 1.2 | 1.2 |

CQMO - 11 Healthcare Associated Infection Rate
All State Hospitals - FY2015 (As of November 30, 2014)

Age 65+

| Nosocomial Infection Type | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | System Total |
|---|------------|-------------|-------------|------------|-------------|-------------|------------|-------------|------------|---------------------|
| Urinary Tract Infection | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 4 |
| Surgical Site Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Pneumonia | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| Blood Stream Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bone and Joint Infections | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Central Nervous System Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Cardiovascular System Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Ear, Eyes, Nose, Throat Infection | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 3 |
| Gastrointestinal System Infection | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 |
| Lower Respiratory Infection, other than Pneumonia | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Upper Respiratory Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Reproductive Tract Infection | 0 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3 |
| Skin and Soft Tissue Infection | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 3 | 0 | 4 |
| Systemic Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 9 | 0 | 1 | 0 | 0 | 0 | 4 | 3 | 17 |
| Rate Per 1,000 Beddays | 0.0 | 7.7 | 0.0 | 0.7 | 0.0 | 0.0 | 0.0 | 1.8 | 2.7 | 1.3 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COMO-12

Measure: Analyze and Report the Number of Patients Receiving New Generation Atypical Antipsychotic Medication
Timeframe: Monthly

Definition

The hospital count of patients who receive new generation medications (risperidone, clozapine, olanzapine, quetiapine, ziprasidone, aripiprazole, asenapine, iloperidone, lurasidone and invega sustenna [paliperidone]).

Data Source

ODS Ad Hoc Report (Number of Patients on NGM)
CARE Report HC027245 (Persons Served)

Data Display and Chart Description

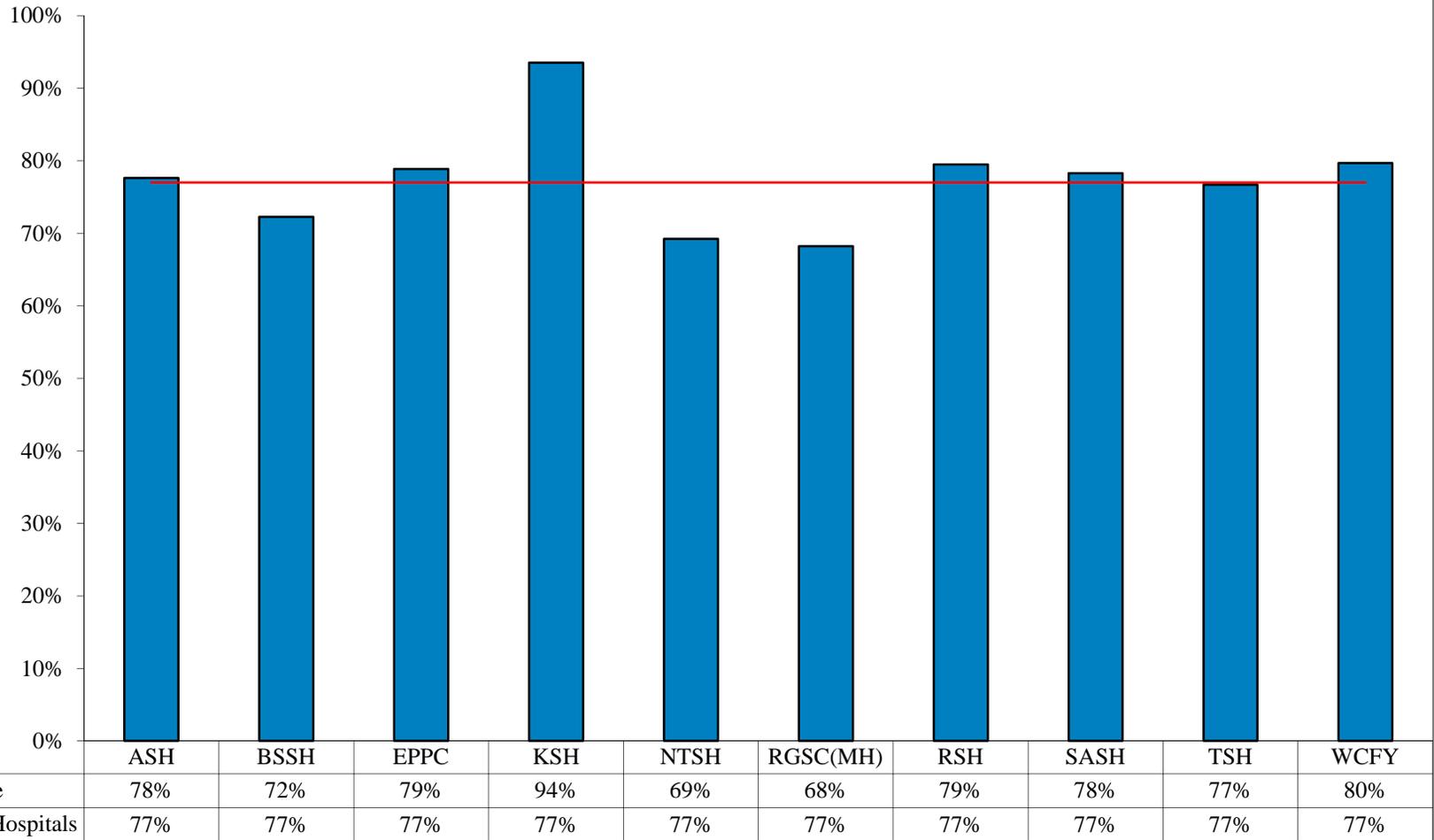
Chart of quarterly percentage of patients receiving NGM for individual state hospitals and system-wide. Chart with monthly data points of number of patients receiving NGM and number of patients served for individual state hospitals and system-wide. Chart with monthly data points of percentage of patients receiving NGM for individual state hospitals and system-wide.

Purpose

Monitor new generation medication.

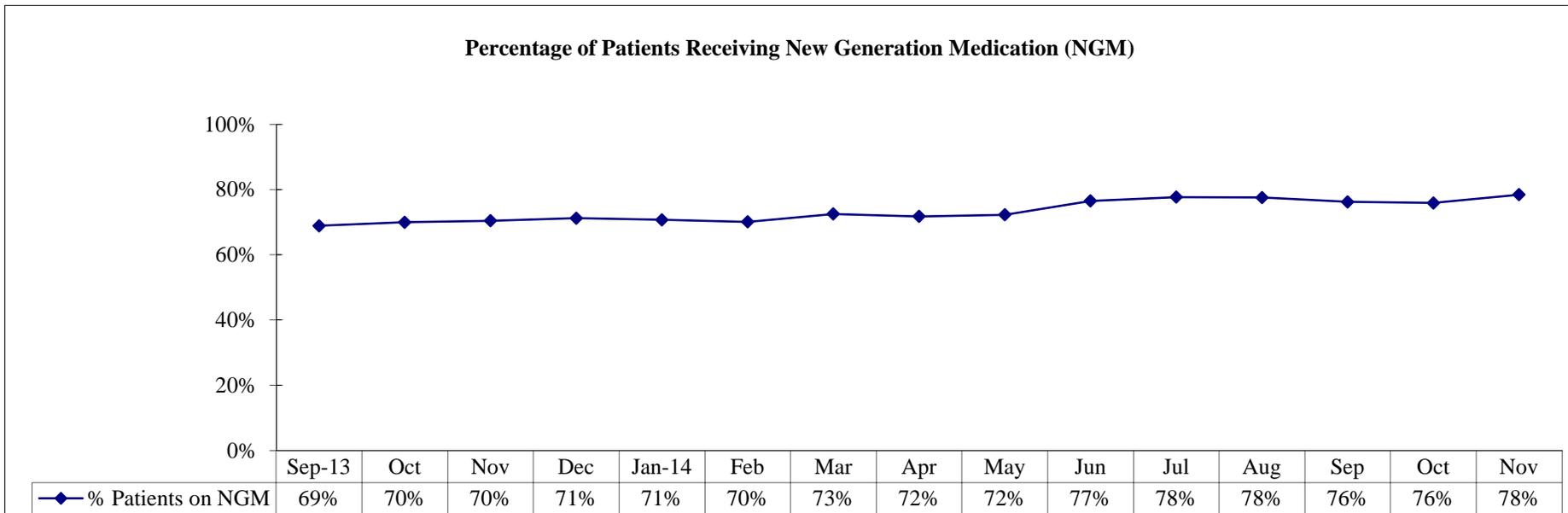
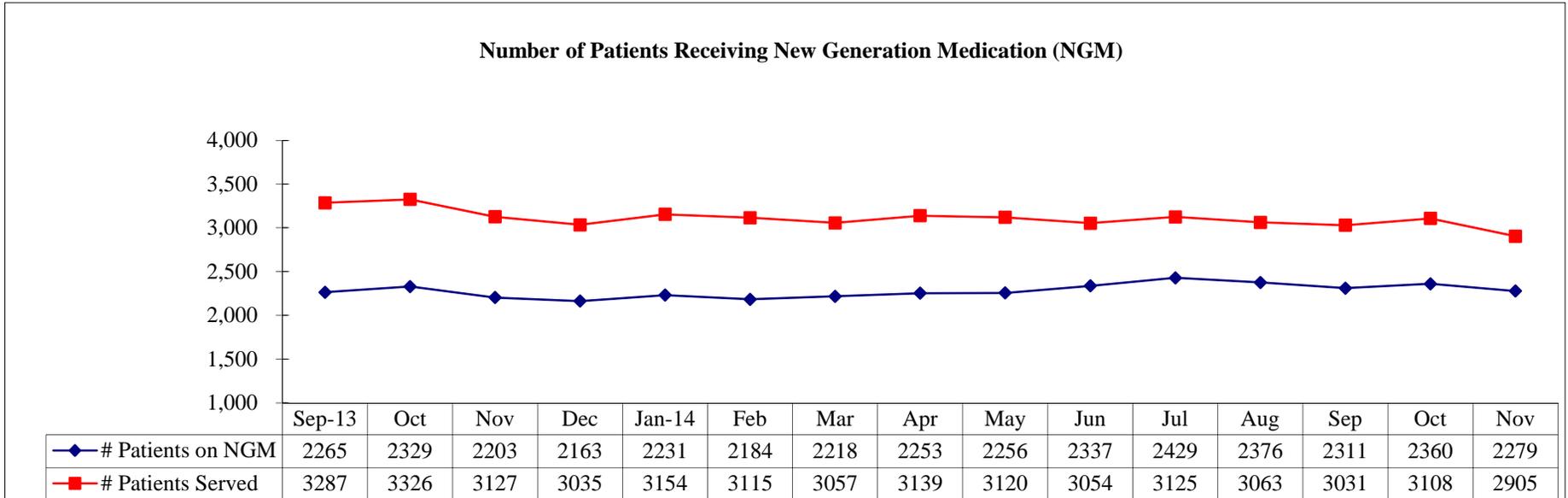
**CQMO - 12 Patients Receiving New Generation Medication (NGM)
All State MH Hospitals**

**Percentage of Patients Receiving New Generation Medication (NGM)
Monthly Average for
Q1 - FY2015**



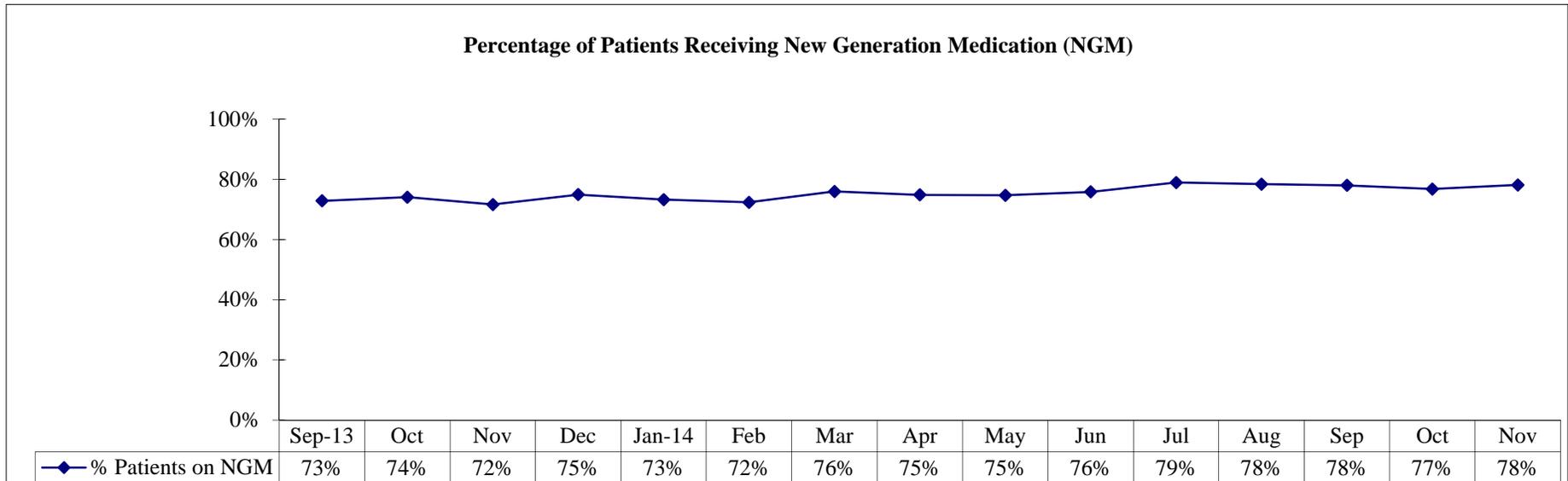
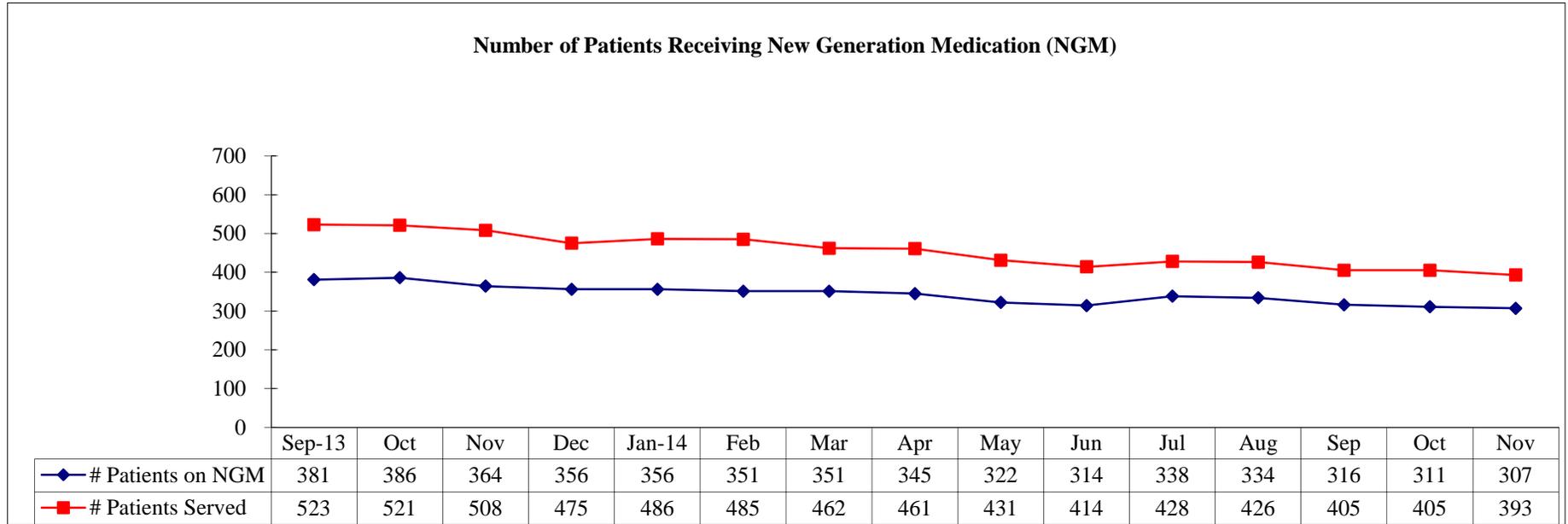
Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
All State MH Hospitals**



Source: ODS # of Pts on NGM Report;
CARE Report HC027245

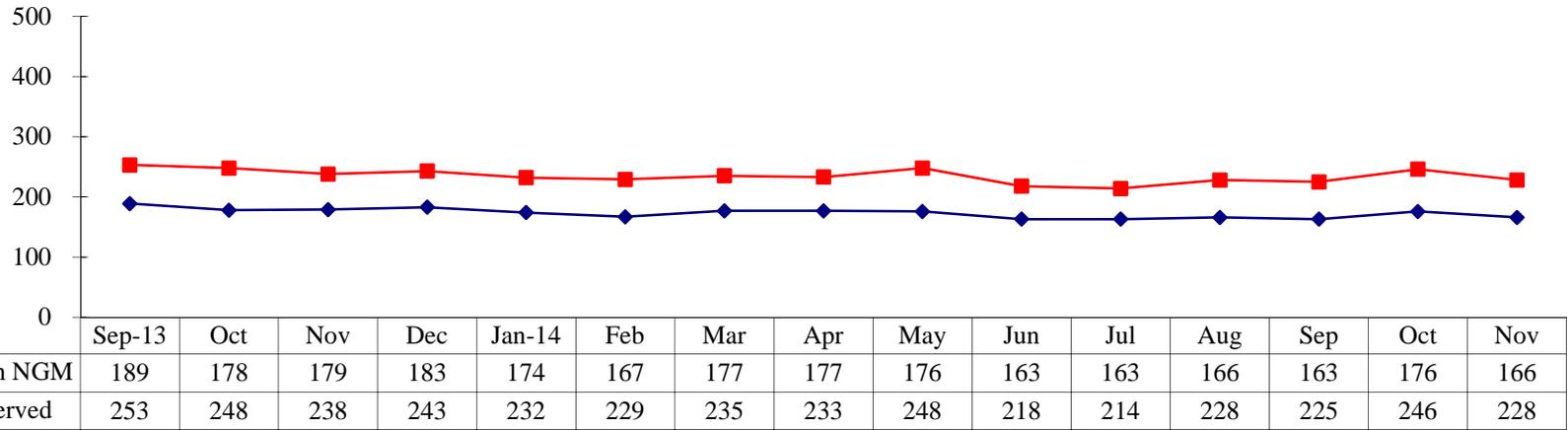
**CQMO - 12 Patients Receiving New Generation Medication (NGM)
Austin State Hospital**



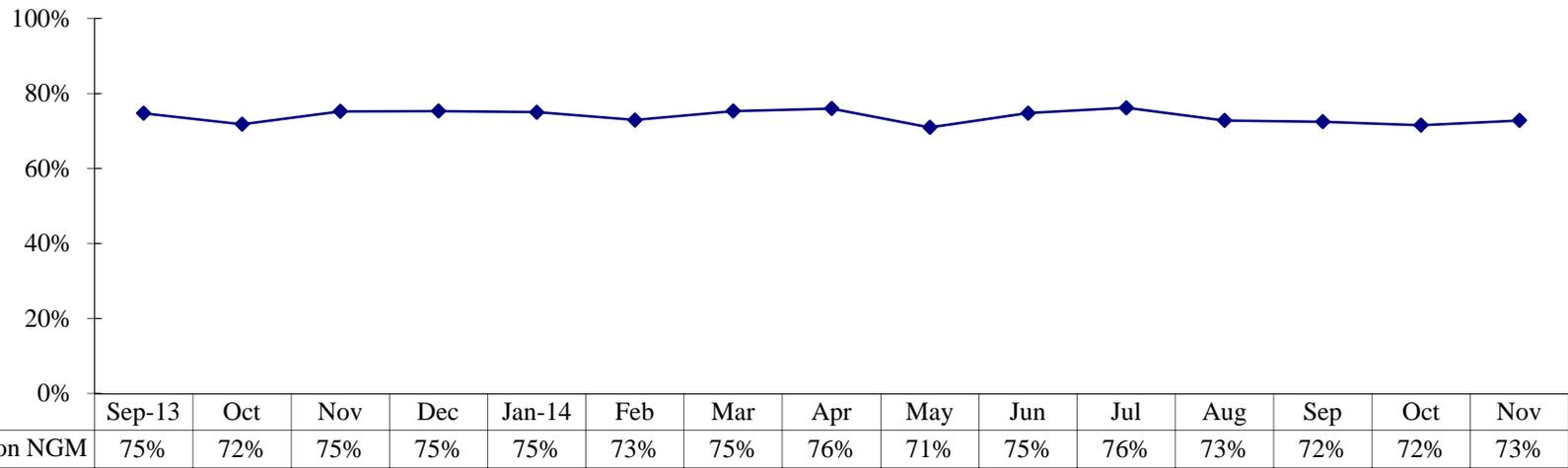
Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
Big Spring State Hospital**

Number of Patients Receiving New Generation Medication (NGM)

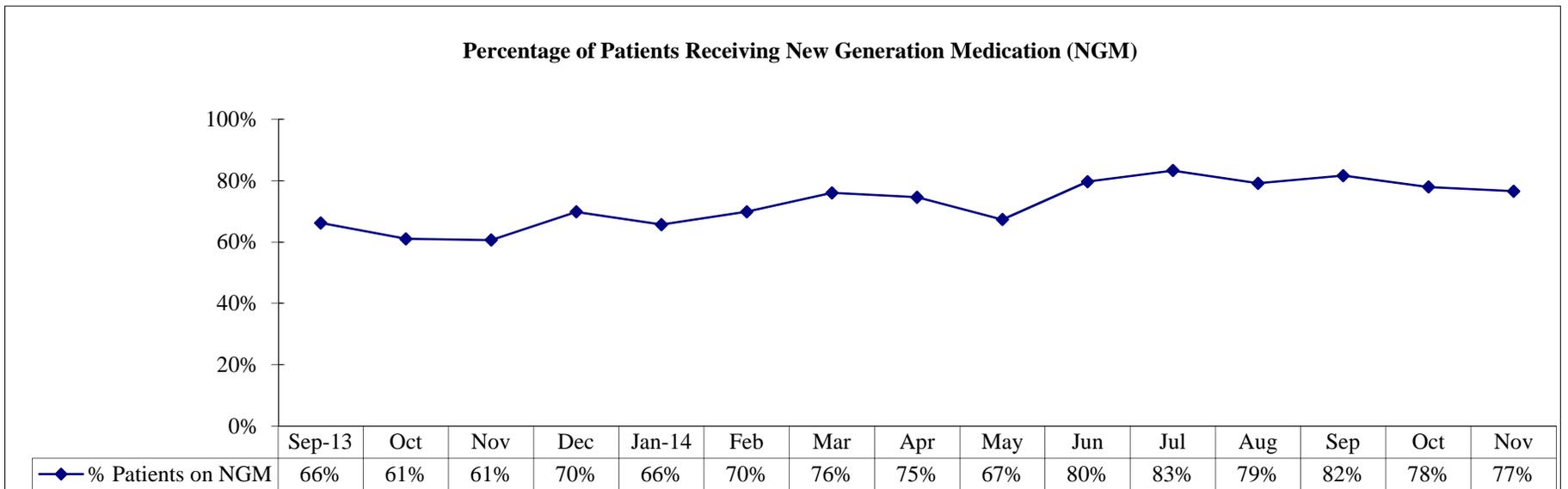
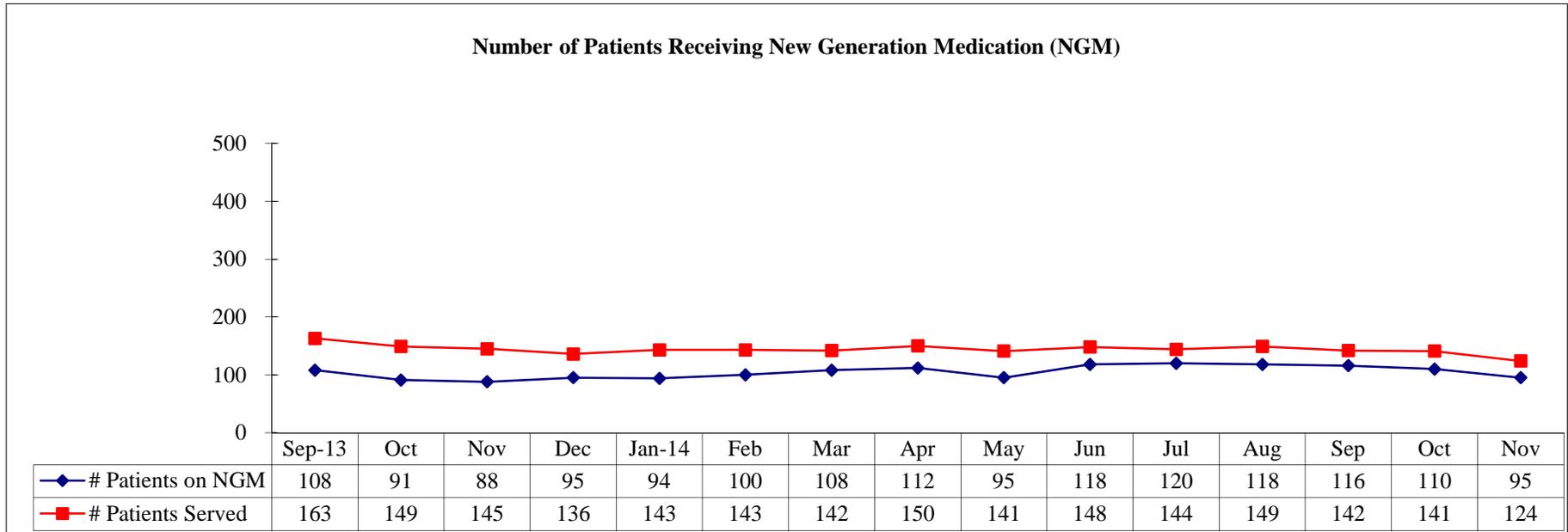


Percentage of Patients Receiving New Generation Medication (NGM)



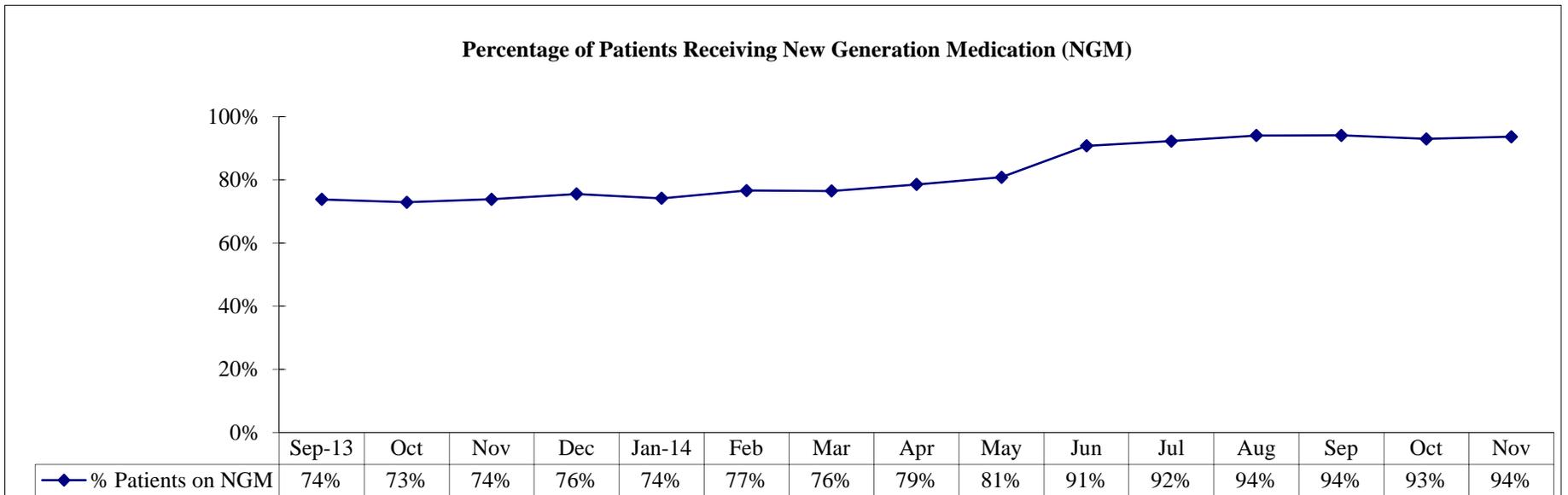
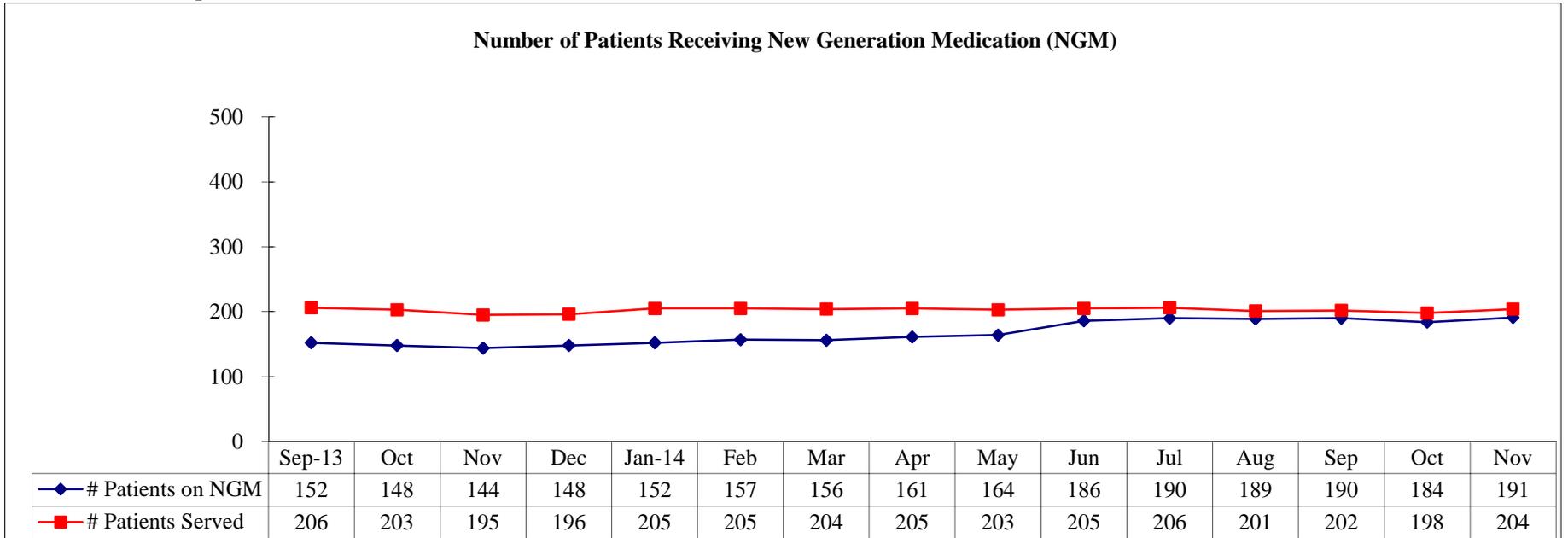
Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
El Paso Psychiatric Center**



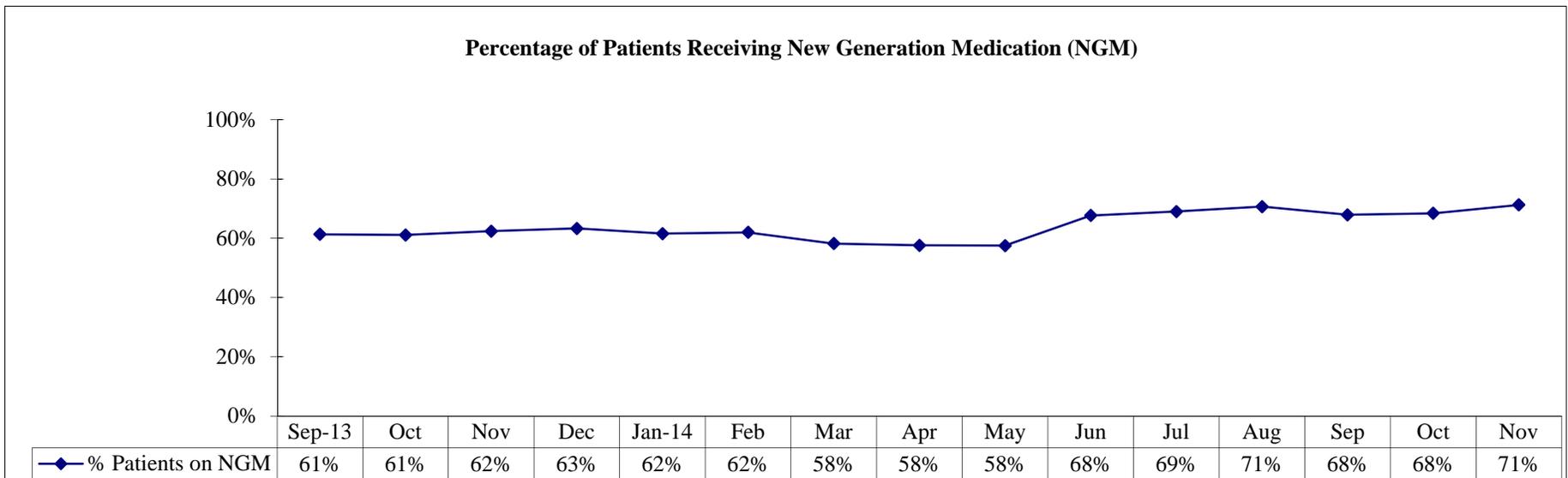
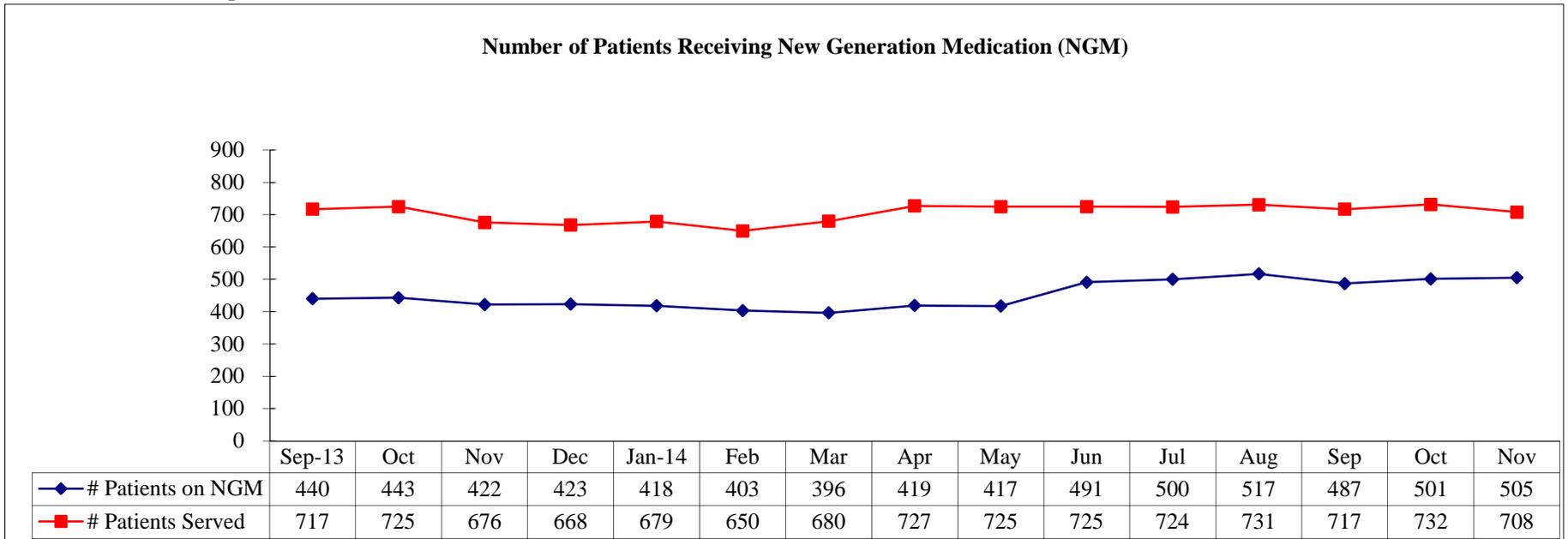
Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
Kerrville State Hospital**



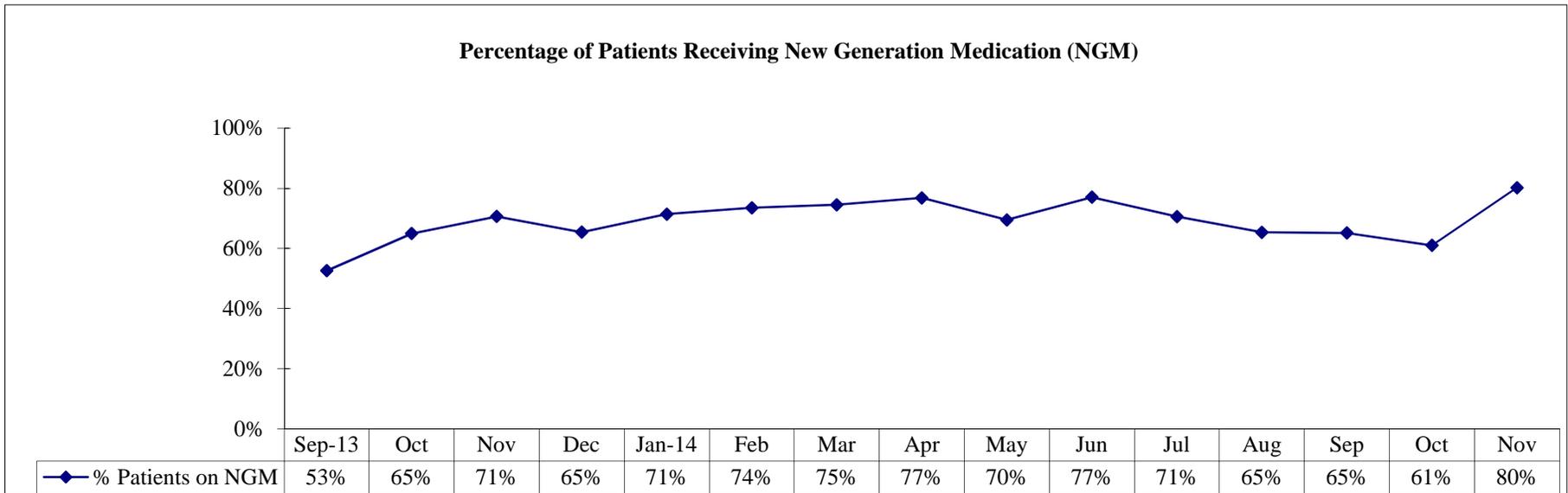
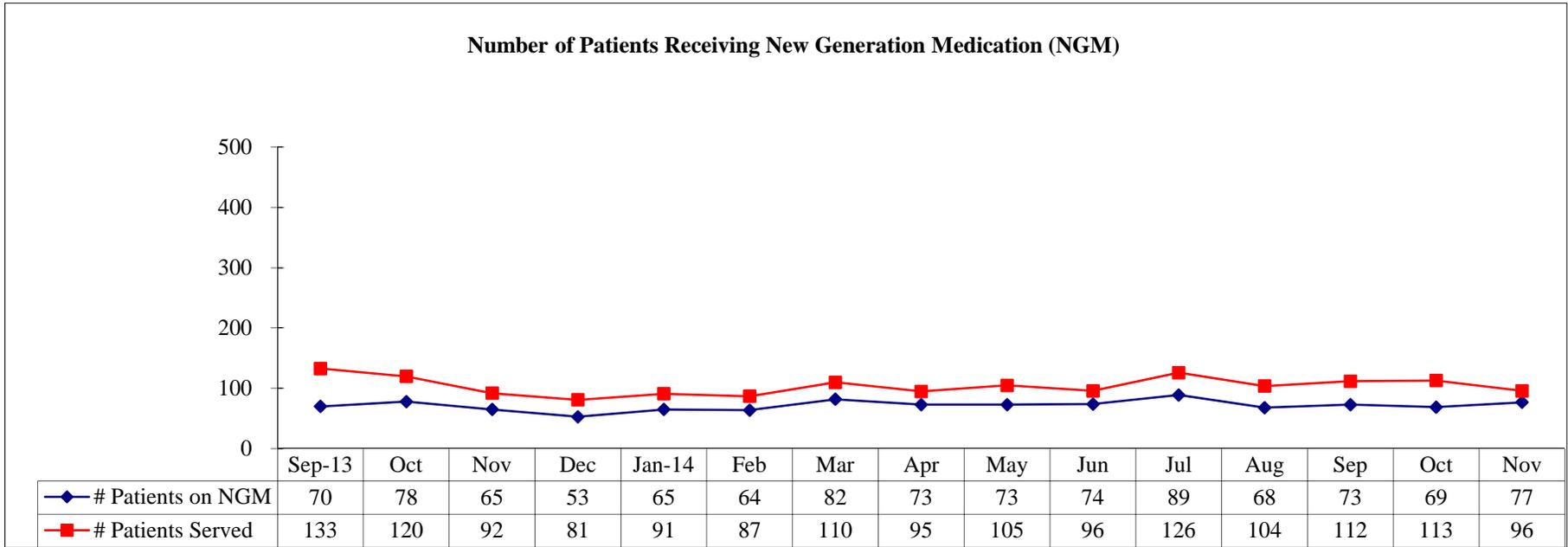
Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
North Texas State Hospital**



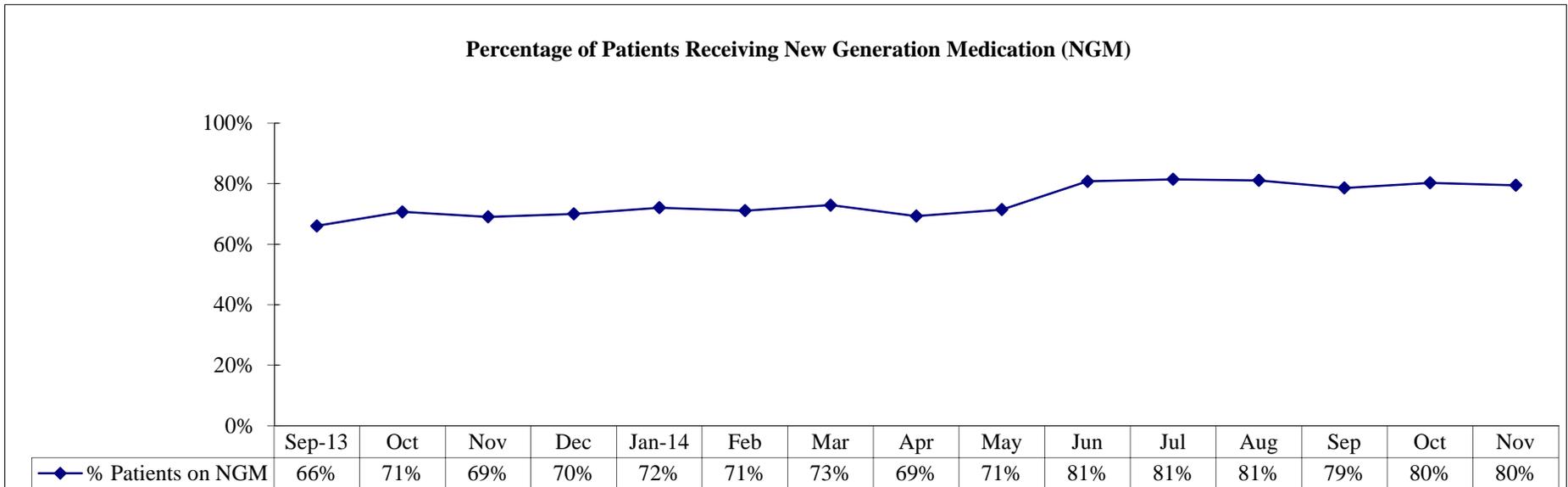
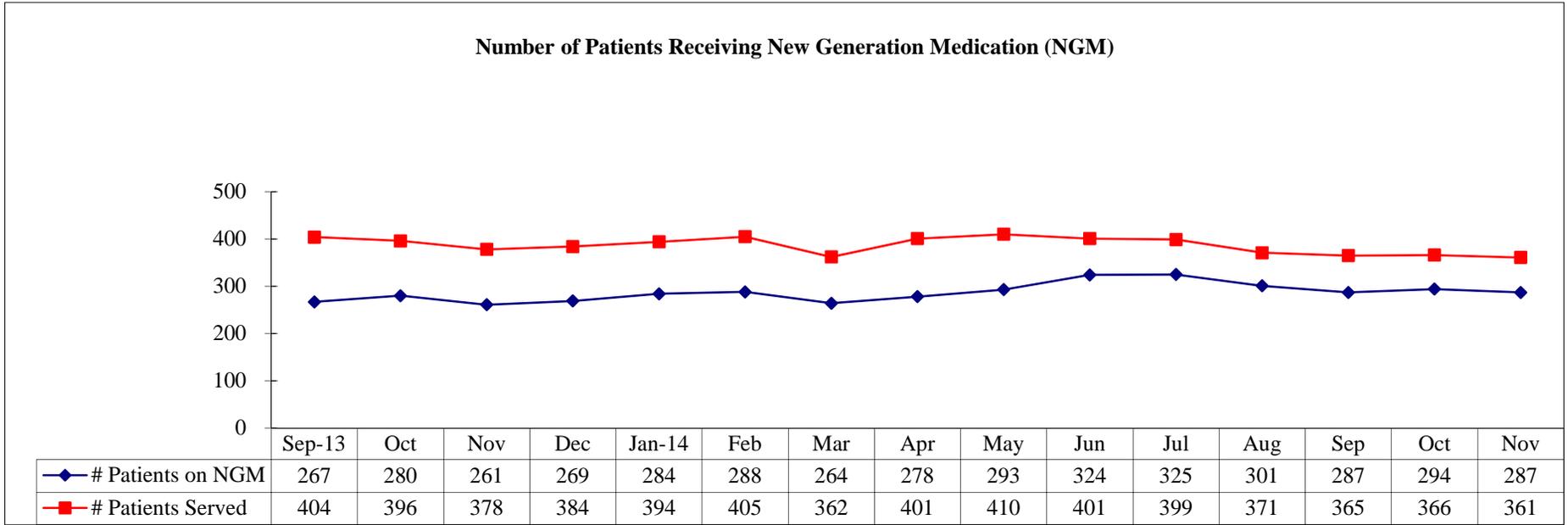
Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
Rio Grande State Center**



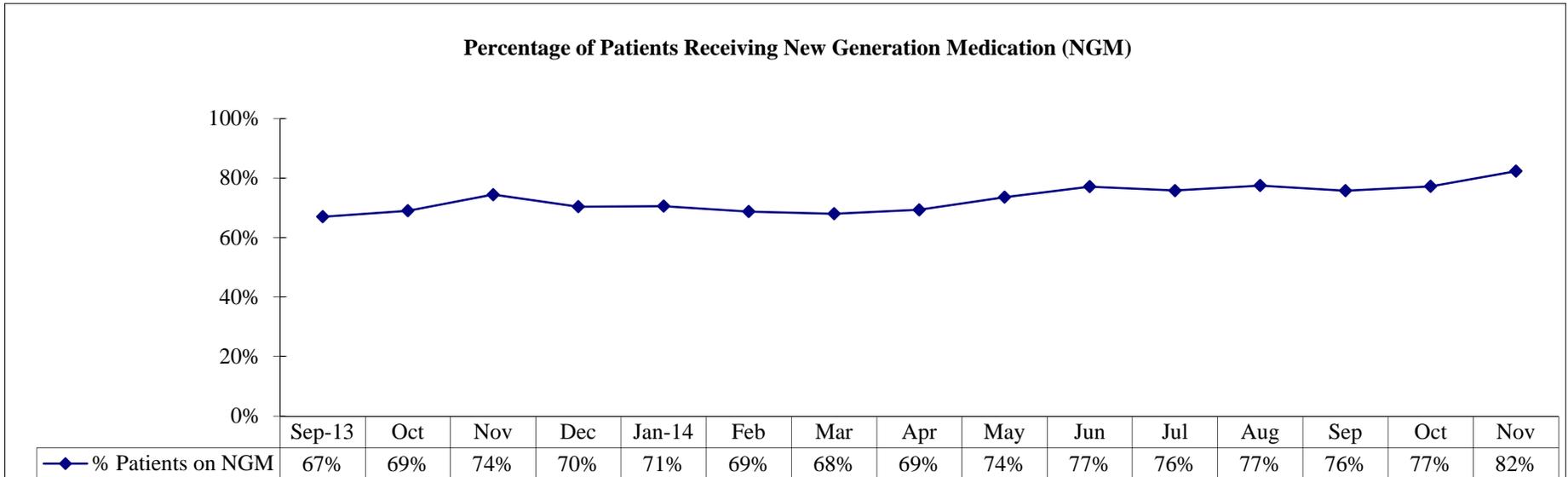
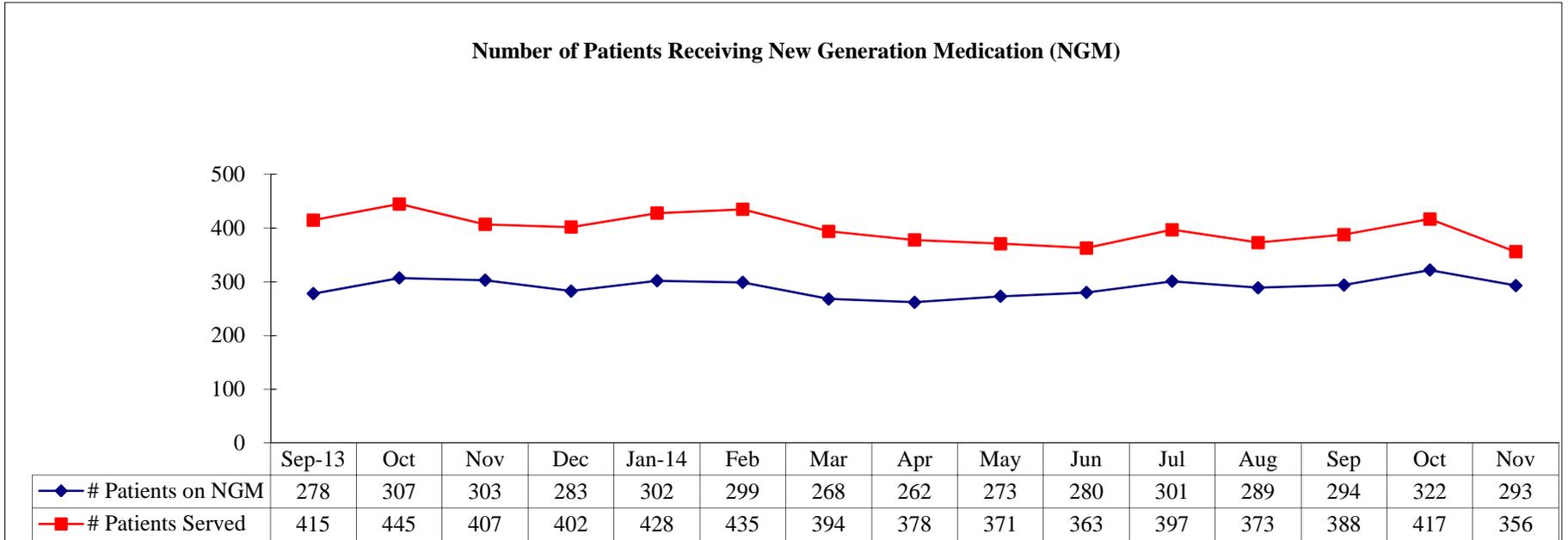
Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
Rusk State Hospital**



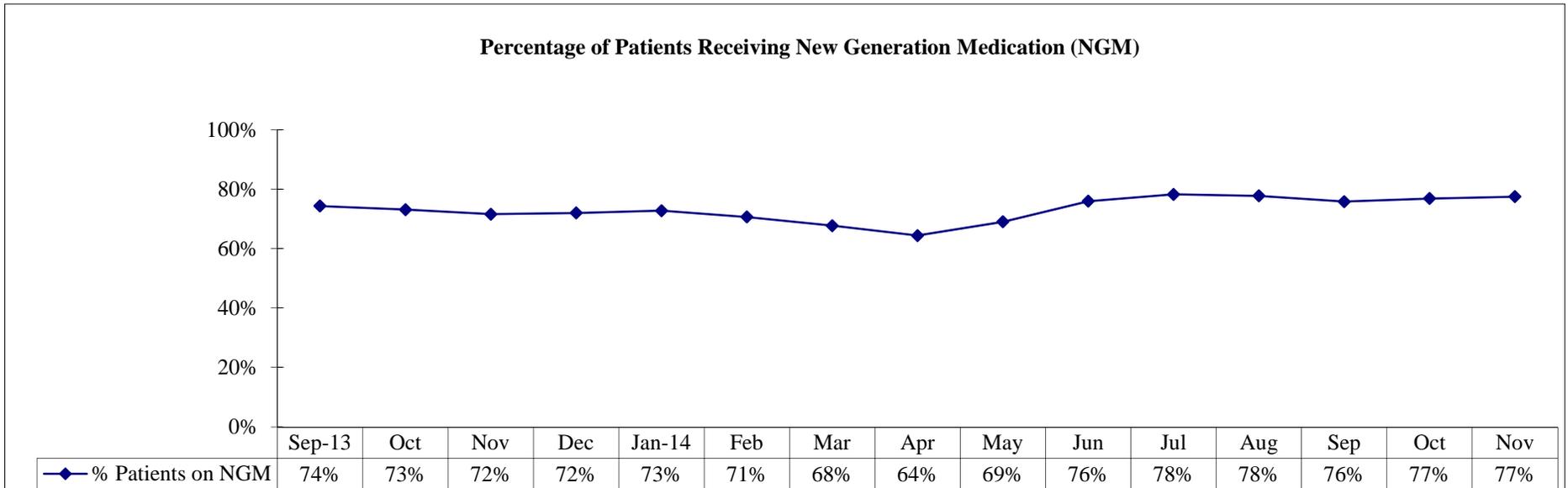
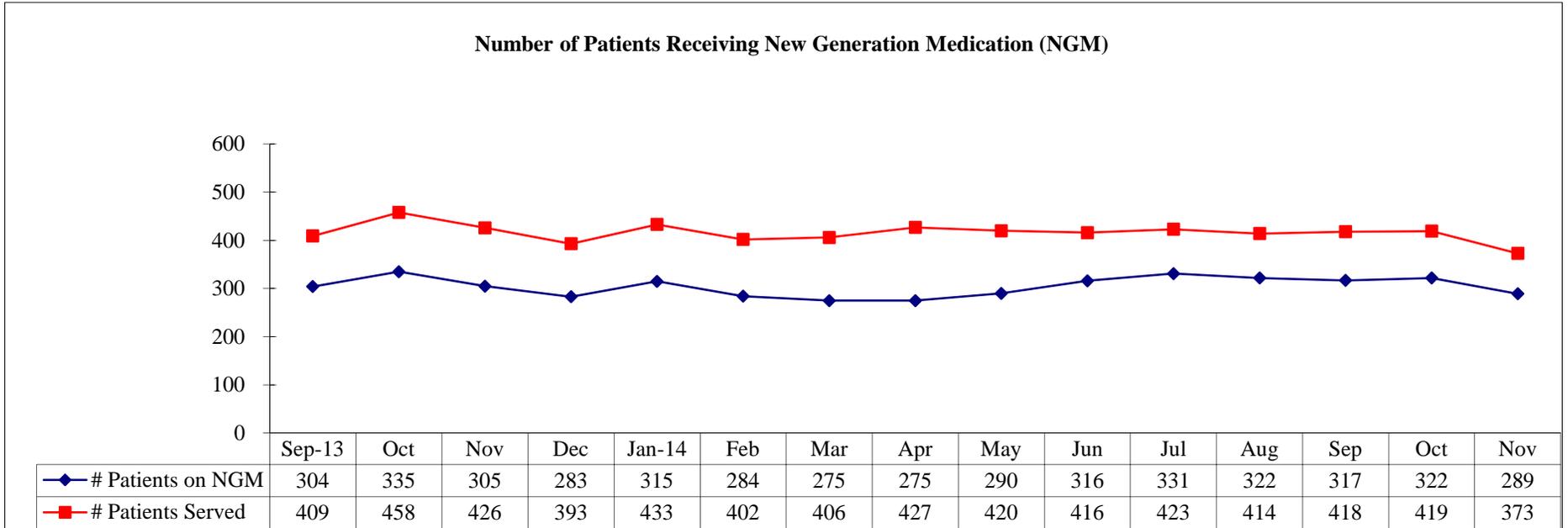
Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
San Antonio State Hospital**



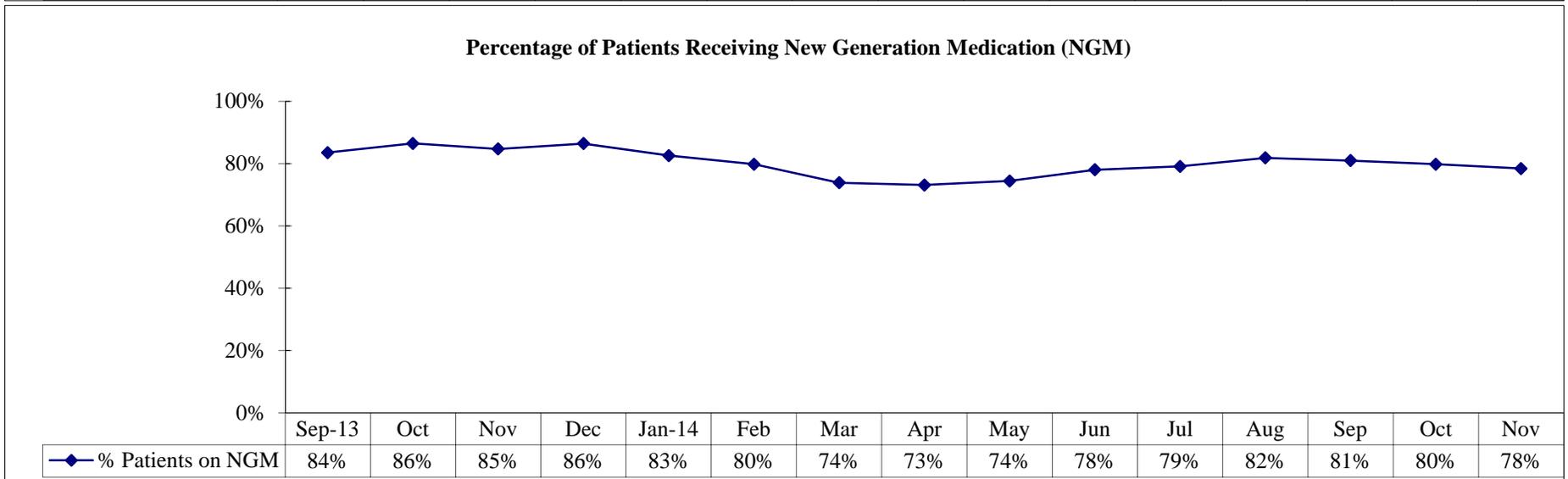
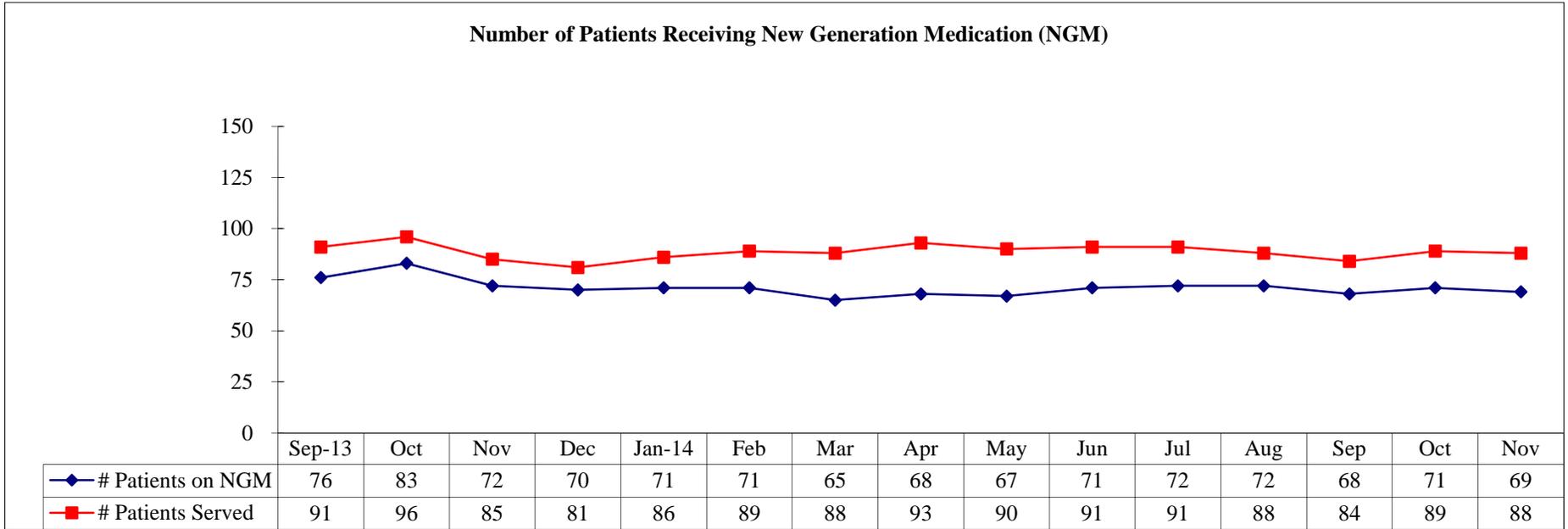
Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
Terrell State Hospital**



Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**CQMO - 12 Patients Receiving New Generation Medication (NGM)
Waco Center for Youth**



Source: ODS # of Pts on NGM Report;
CARE Report HC027245

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COMO-13

Measure: Analyze and Report the Cost of Antipsychotic Medication

Timeframe: Monthly

Definition

The state hospitals average monthly cost for antipsychotic medications (risperidone, clozapine, olanzapine, quetiapine, ziprasidone, aripiprazole, asenapine, iloperidone, lurasidone and invega sustenna [paliperidone]).

Data Source

ODS Ad Hoc Report (Number of Patients on NGM)

Finance Report (Dashboard Report)

Data Display and Chart Description

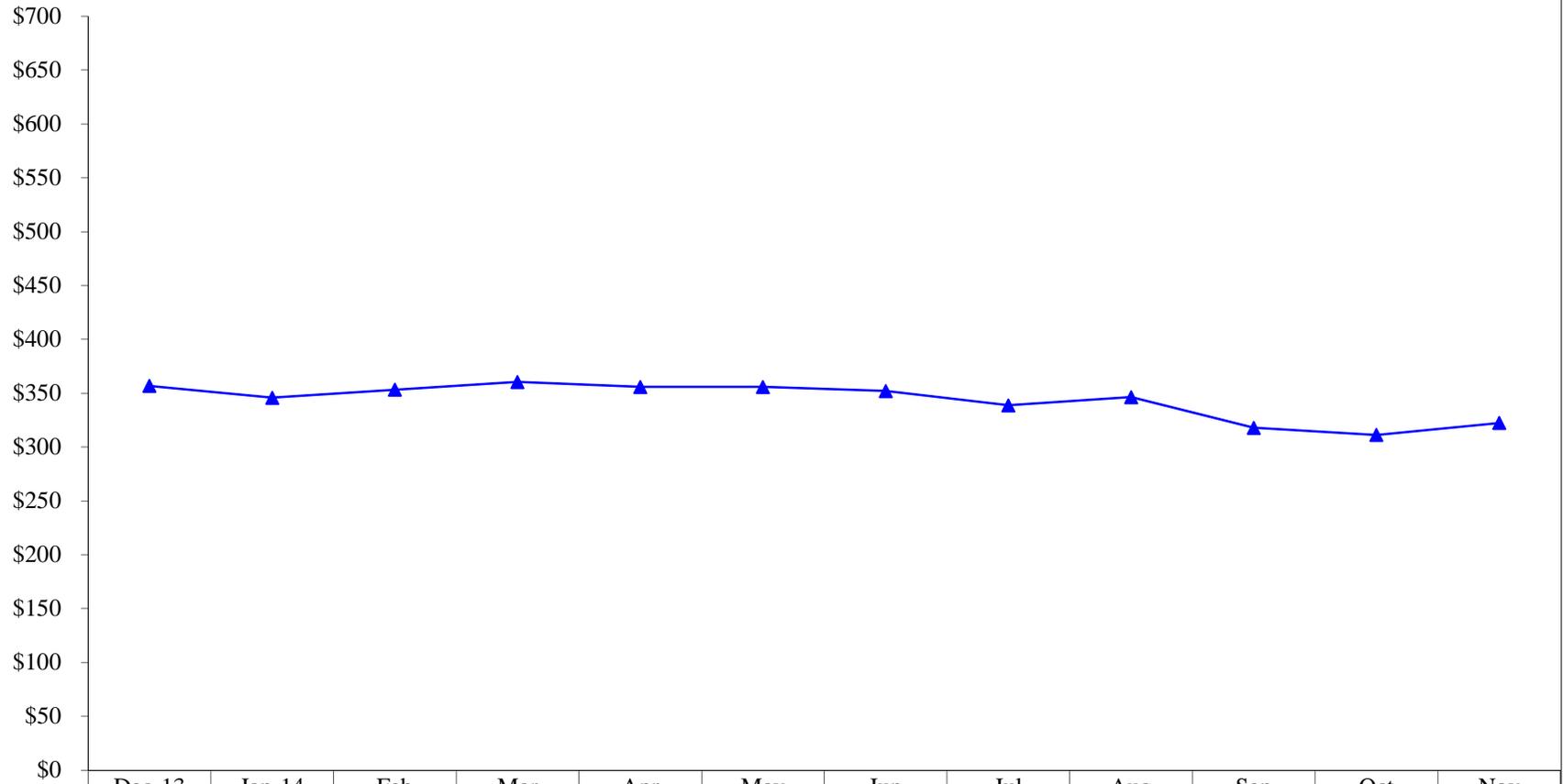
Chart with monthly data points of average cost of antipsychotic medications per patient for individual state hospitals and system-wide.

Purpose

Monitor antipsychotic medication cost.

**CQMO - 13 Cost of Antipsychotic Medications
All State MH Hospitals**

Average Cost of Antipsychotic Medications per Patient per Month



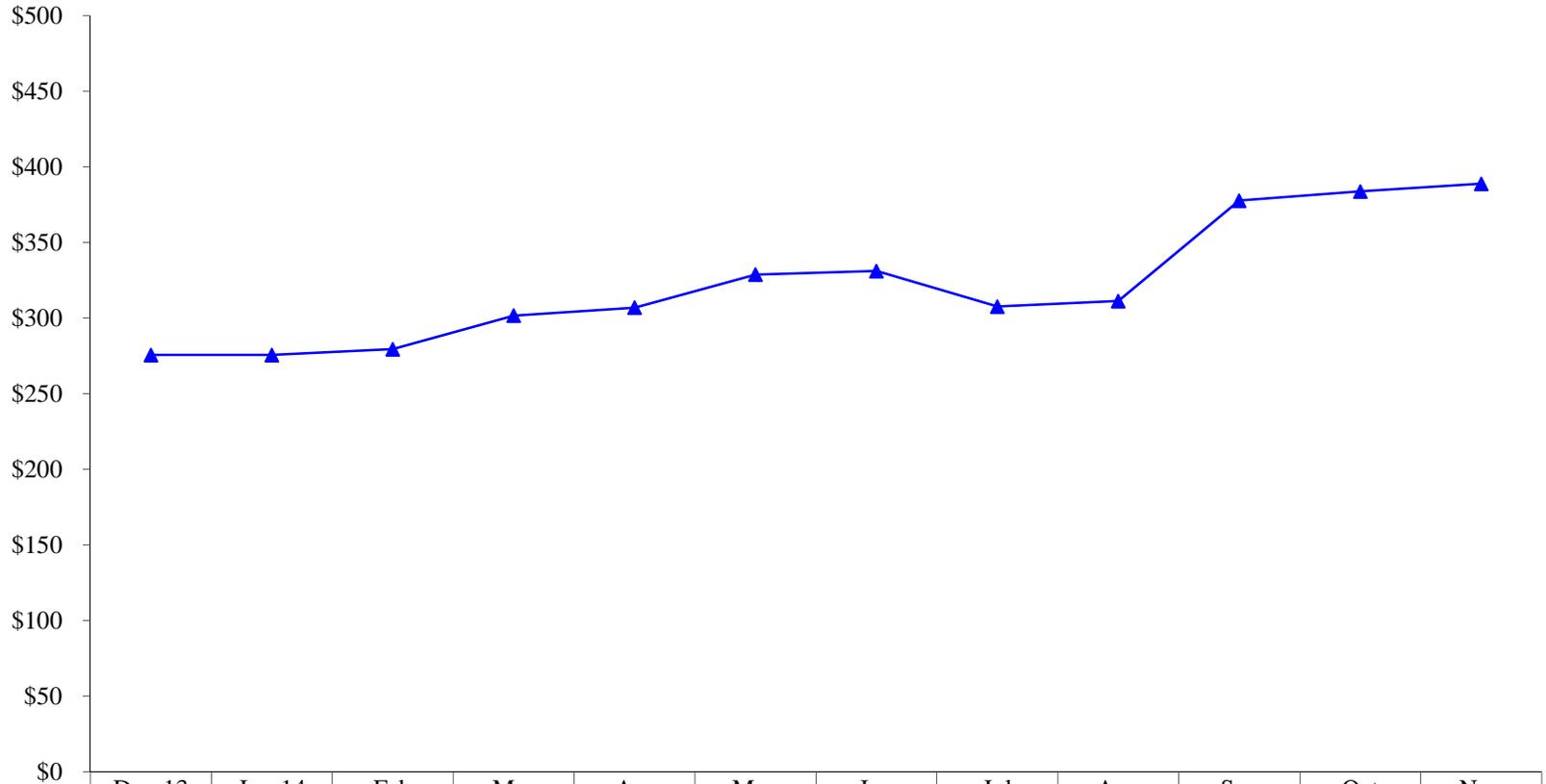
* Average Monthly Cost per Quarter

Chart: Office of Decision Support

Source: ODS CWS Report - Number of Patients on New Generation Medications;
Budget, Forecasting Reporting Unit Report - NGM Quarterly Report

**CQMO - 13 Cost of Antipsychotic Medications
Austin State Hospital**

Average Cost of Antipsychotic Medications per Patient per Month



| | Dec-13 | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|----------------------------|----------|----------|----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Cost* | \$98,107 | \$98,107 | \$98,107 | \$105,888 | \$105,888 | \$105,888 | \$103,980 | \$103,980 | \$103,980 | \$119,368 | \$119,368 | \$119,368 |
| # of Pts on NGM | 356 | 356 | 351 | 351 | 345 | 322 | 314 | 338 | 334 | 316 | 311 | 307 |
| ▲ Average Cost per Patient | \$276 | \$276 | \$280 | \$302 | \$307 | \$329 | \$331 | \$308 | \$311 | \$378 | \$384 | \$389 |

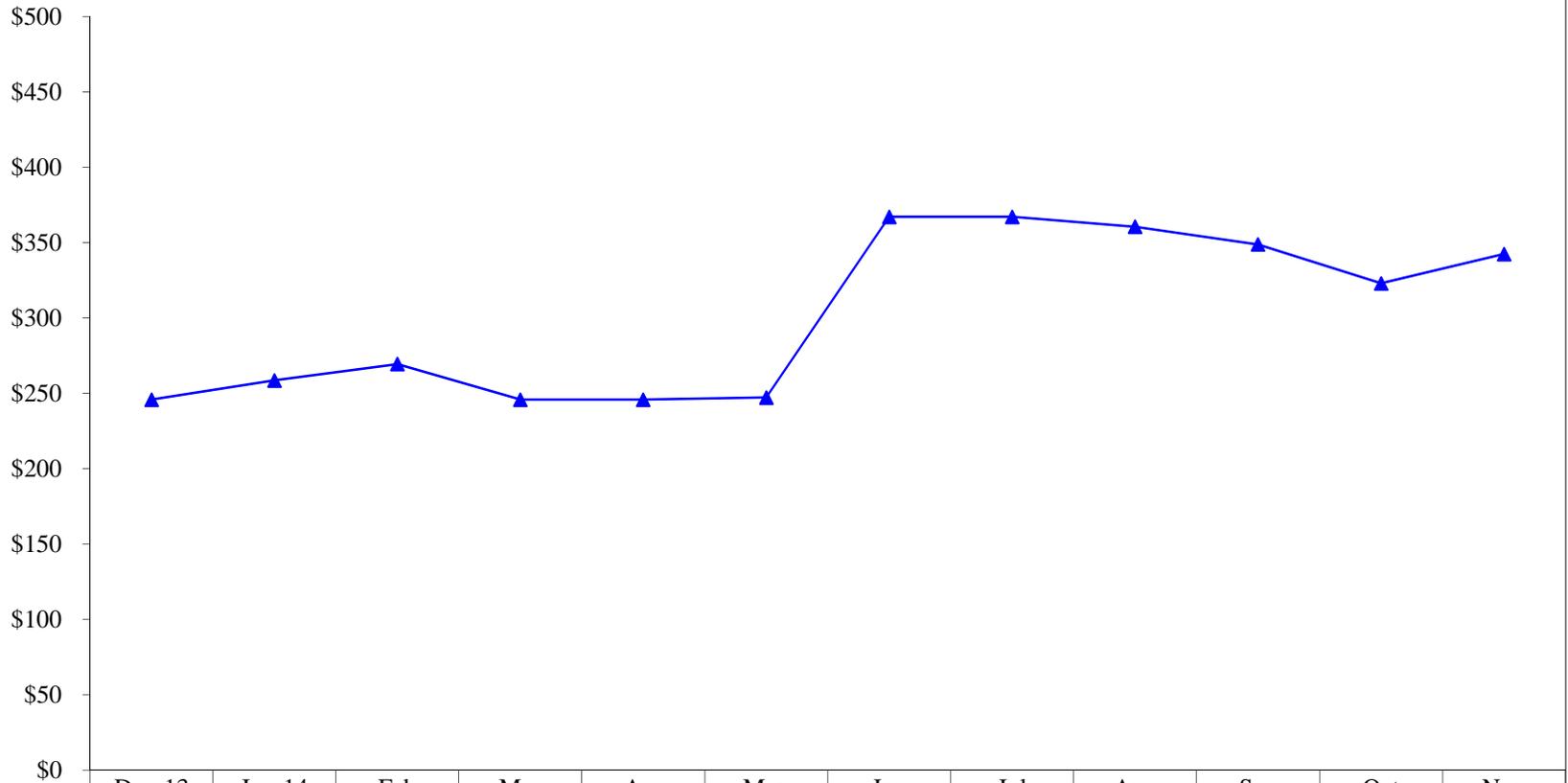
* Average Monthly Cost per Quarter

Chart: Office of Decision Support

Source: ODS CWS Report - Number of Patients on New Generation Medications;
Budget, Forecasting Reporting Unit Report - NGM Quarterly Report

**CQMO - 13 Cost of Antipsychotic Medications
Big Spring State Hospital**

Average Cost of Antipsychotic Medications per Patient per Month

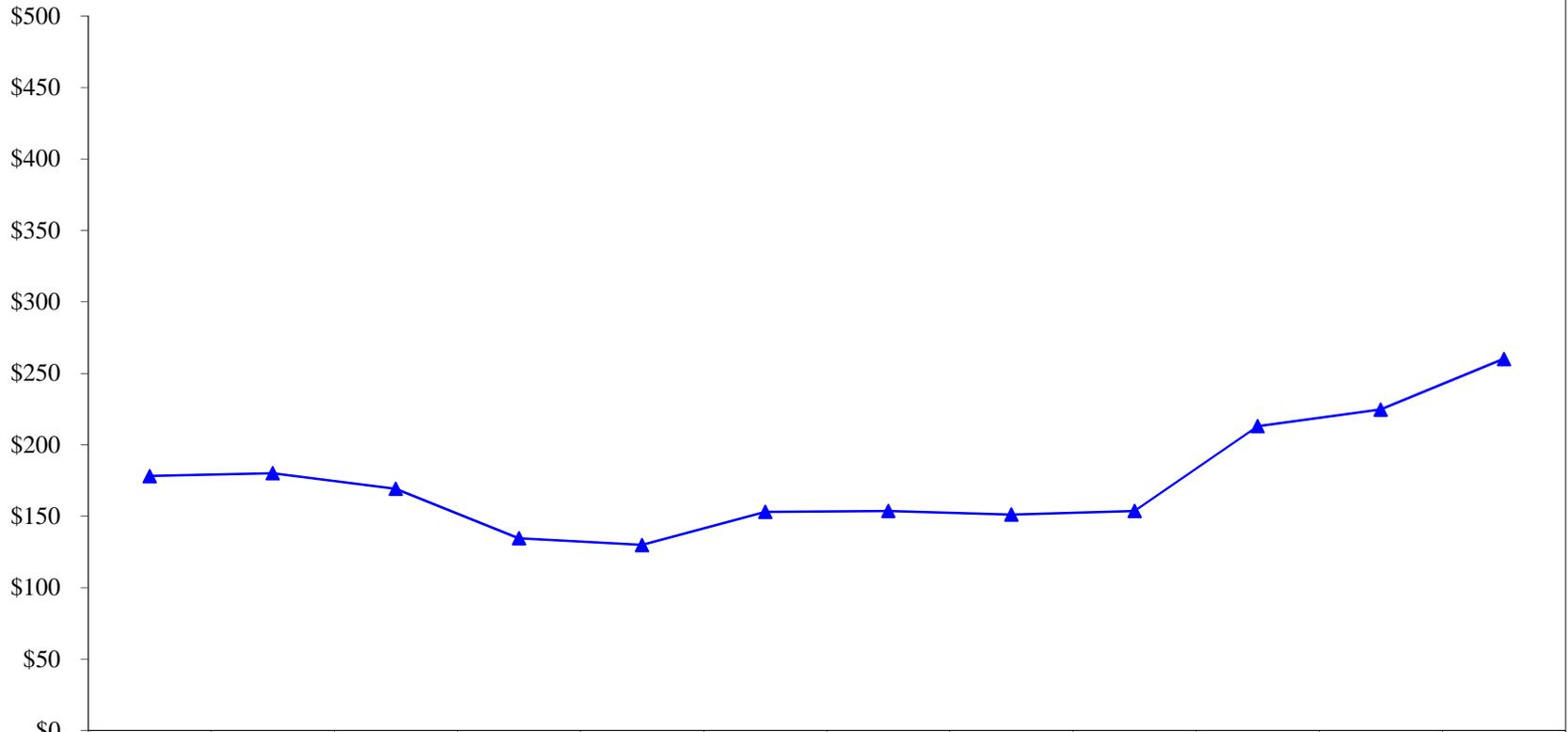


| | Dec-13 | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|----------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Cost* | \$45,004 | \$45,004 | \$45,004 | \$43,528 | \$43,528 | \$43,528 | \$59,862 | \$59,862 | \$59,862 | \$56,865 | \$56,865 | \$56,865 |
| # of Pts on NGM | 183 | 174 | 167 | 177 | 177 | 176 | 163 | 163 | 166 | 163 | 176 | 166 |
| ▲ Average Cost per Patient | \$246 | \$259 | \$269 | \$246 | \$246 | \$247 | \$367 | \$367 | \$361 | \$349 | \$323 | \$343 |

* Average Monthly Cost per Quarter

**CQMO - 13 Cost of Antipsychotic Medications
El Paso Psychiatric Center**

Average Cost of Antipsychotic Medications per Patient per Month

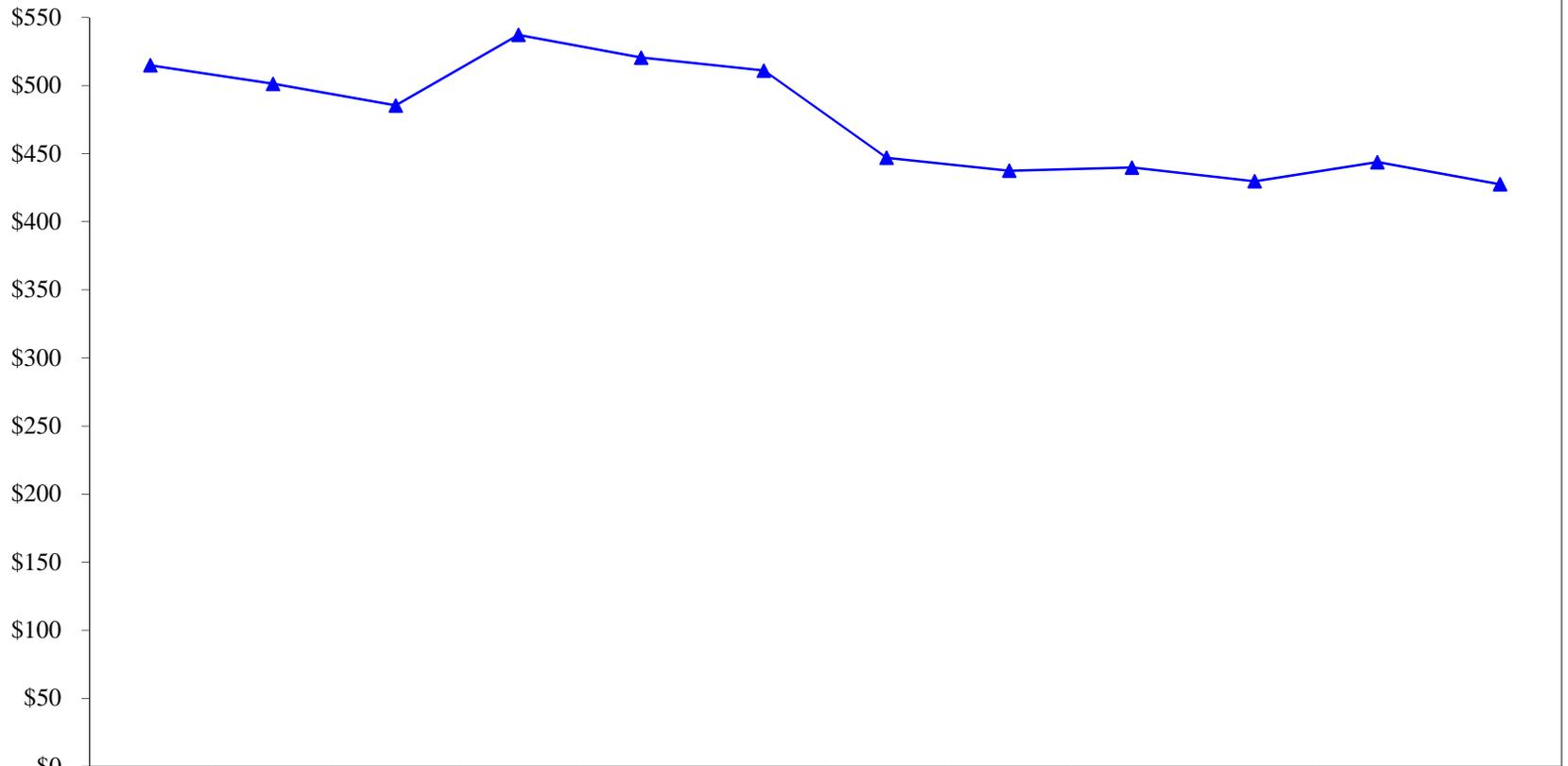


| | Dec-13 | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|----------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Cost* | \$16,927 | \$16,927 | \$16,927 | \$14,543 | \$14,543 | \$14,543 | \$18,139 | \$18,139 | \$18,139 | \$24,710 | \$24,710 | \$24,710 |
| # of Pts on NGM | 95 | 94 | 100 | 108 | 112 | 95 | 118 | 120 | 118 | 116 | 110 | 95 |
| ▲ Average Cost per Patient | \$178 | \$180 | \$169 | \$135 | \$130 | \$153 | \$154 | \$151 | \$154 | \$213 | \$225 | \$260 |

* Average Monthly Cost per Quarter

**CQMO - 13 Cost of Antipsychotic Medications
Kerrville State Hospital**

Average Cost of Antipsychotic Medications per Patient per Month

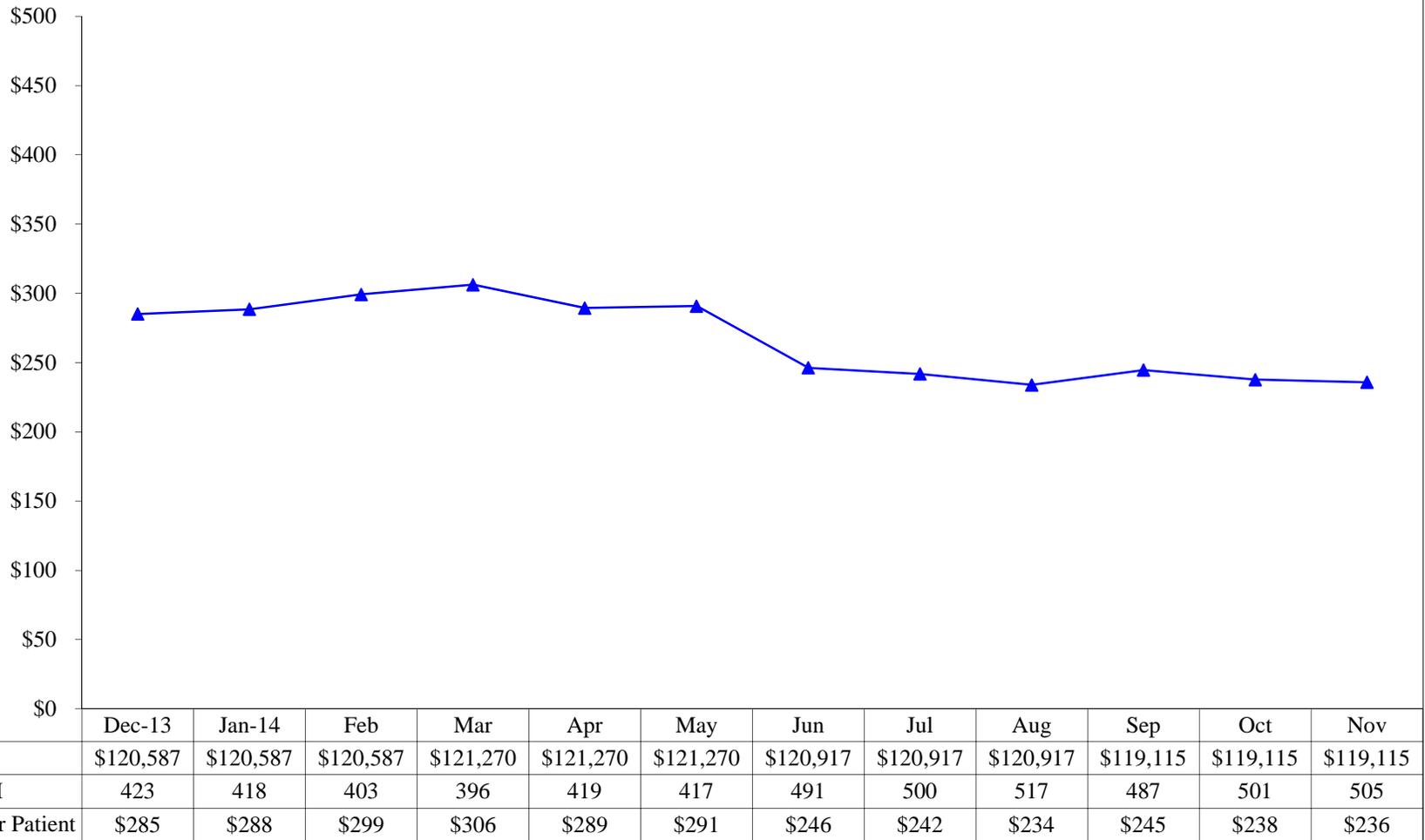


| | Dec-13 | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|----------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Cost* | \$76,208 | \$76,208 | \$76,208 | \$83,811 | \$83,811 | \$83,811 | \$83,142 | \$83,142 | \$83,142 | \$81,663 | \$81,663 | \$81,663 |
| # of Pts on NGM | 148 | 152 | 157 | 156 | 161 | 164 | 186 | 190 | 189 | 190 | 184 | 191 |
| ▲ Average Cost per Patient | \$515 | \$501 | \$485 | \$537 | \$521 | \$511 | \$447 | \$438 | \$440 | \$430 | \$444 | \$428 |

* Average Monthly Cost per Quarter

**CQMO - 13 Cost of Antipsychotic Medications
North Texas State Hospital**

Average Cost of Antipsychotic Medications per Patient per Month



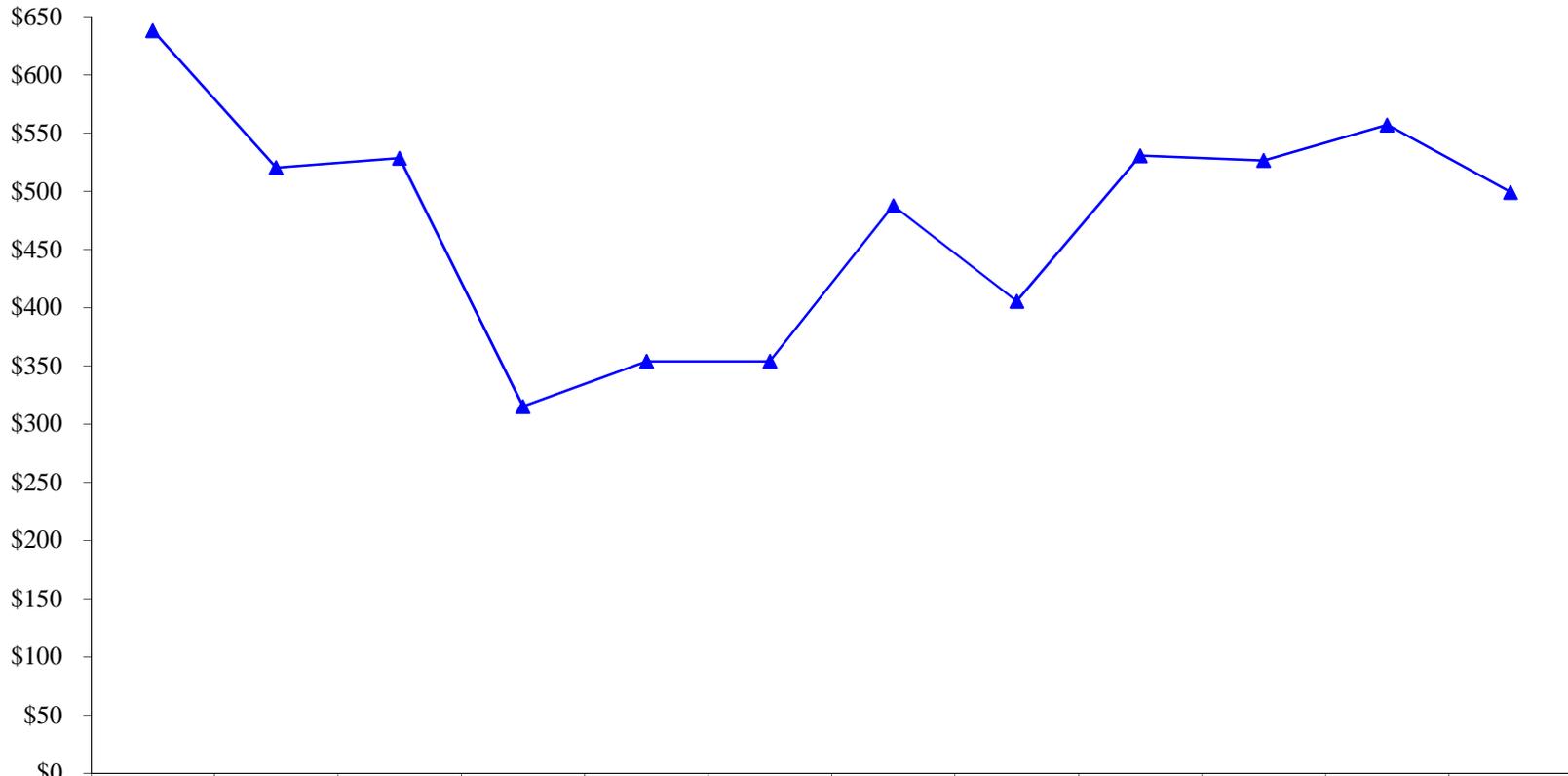
* Average Monthly Cost per Quarter

Chart: Office of Decision Support

Source: ODS CWS Report - Number of Patients on New Generation Medications;
Budget, Forecasting Reporting Unit Report - NGM Quarterly Report

**CQMO - 13 Cost of Antipsychotic Medications
Rio Grande State Center (MH only)**

Average Cost of Antipsychotic Medications per Patient per Month

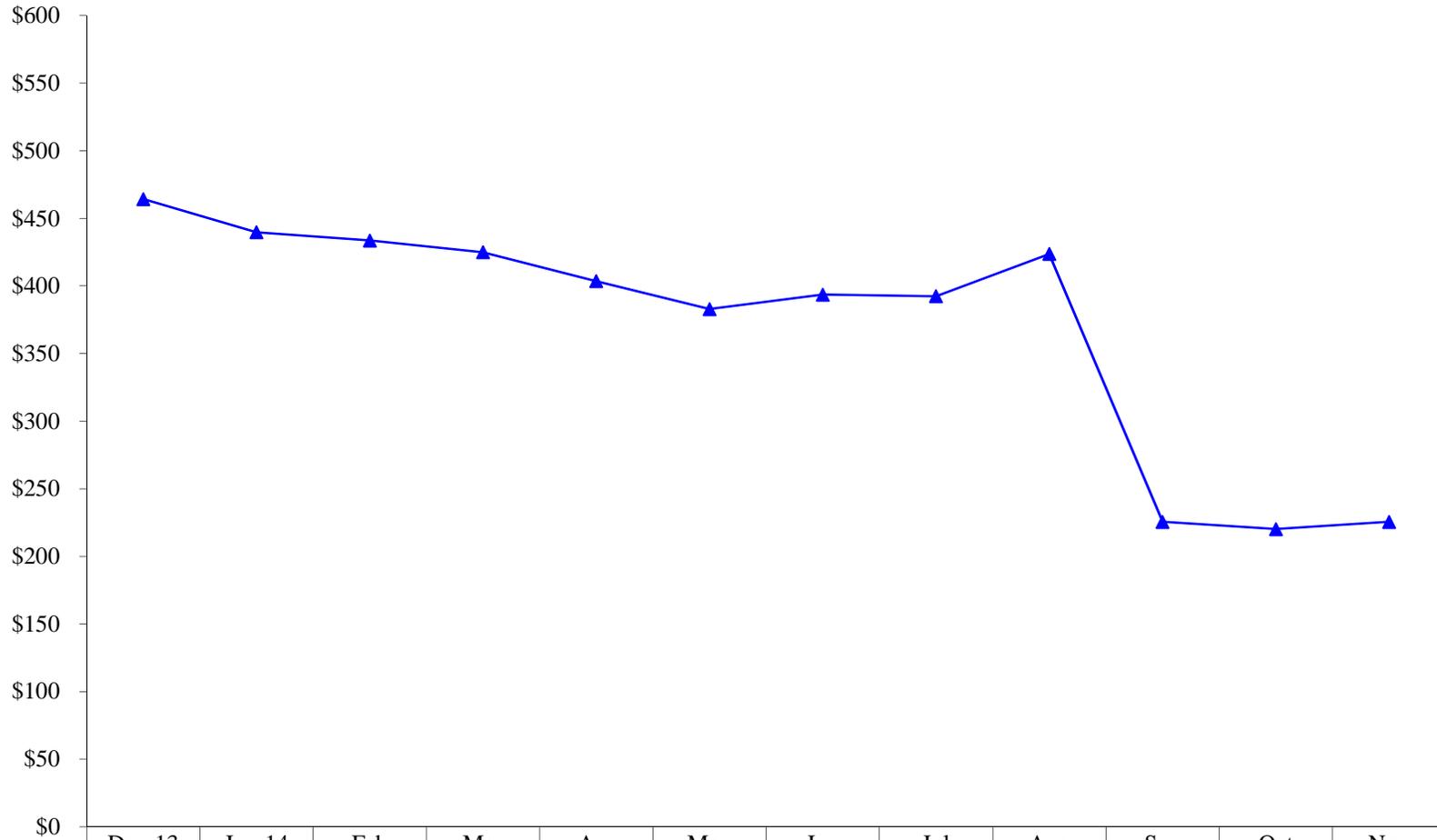


| | Dec-13 | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|----------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Cost* | \$33,819 | \$33,819 | \$33,819 | \$25,832 | \$25,832 | \$25,832 | \$36,082 | \$36,082 | \$36,082 | \$38,426 | \$38,426 | \$38,426 |
| # of Pts on NGM | 53 | 65 | 64 | 82 | 73 | 73 | 74 | 89 | 68 | 73 | 69 | 77 |
| ▲ Average Cost per Patient | \$638 | \$520 | \$528 | \$315 | \$354 | \$354 | \$488 | \$405 | \$531 | \$526 | \$557 | \$499 |

* Average Monthly Cost per Quarter

**CQMO - 13 Cost of Antipsychotic Medications
Rusk State Hospital**

Average Cost of Antipsychotic Medications per Patient per Month

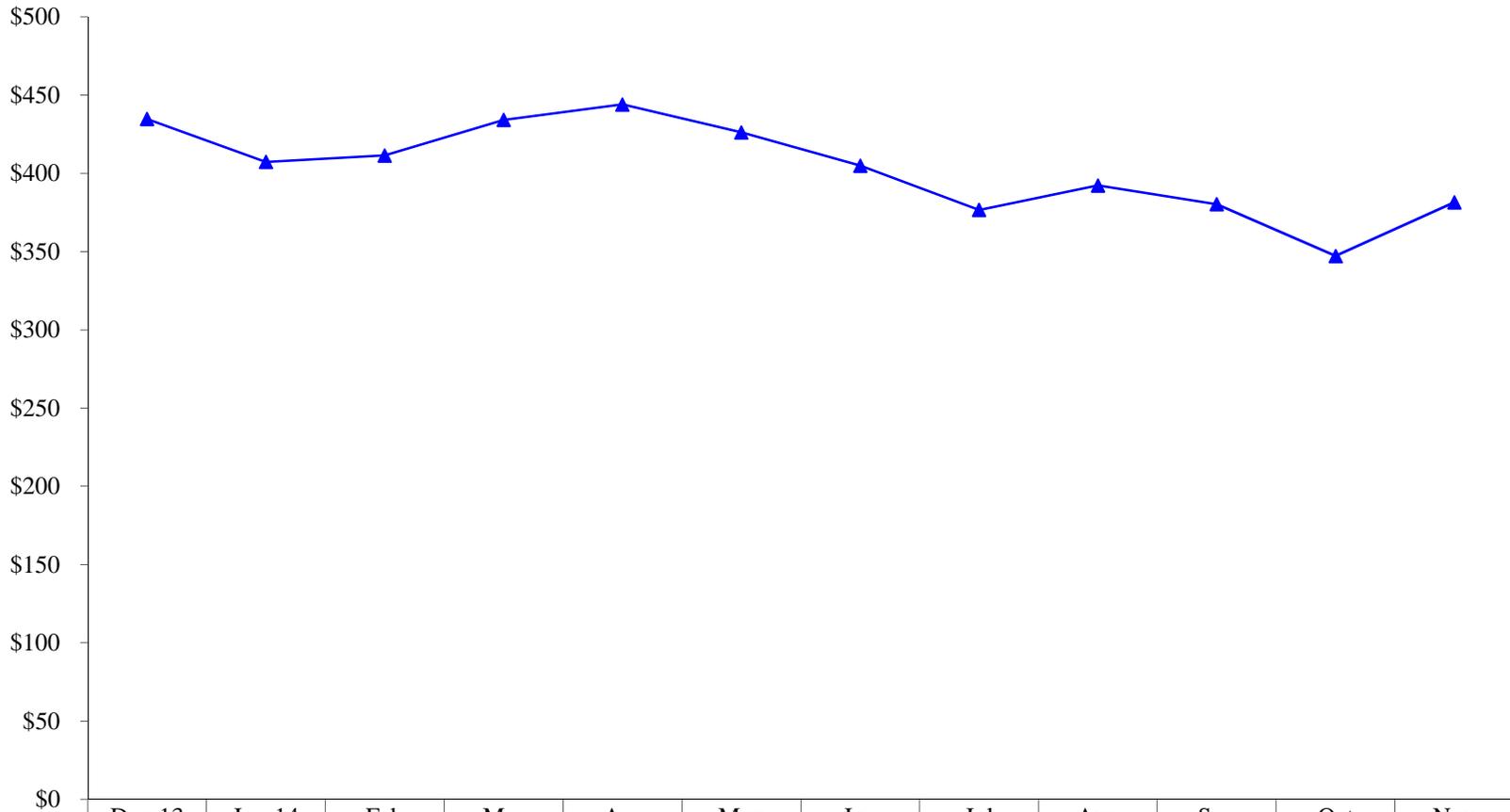


* Average Monthly Cost per Quarter

Source: ODS CWS Report - Number of Patients on New Generation Medications;
Budget, Forecasting Reporting Unit Report - NGM Quarterly Report

**CQMO - 13 Cost of Antipsychotic Medications
San Antonio State Hospital**

Average Cost of Antipsychotic Medications per Patient per Month



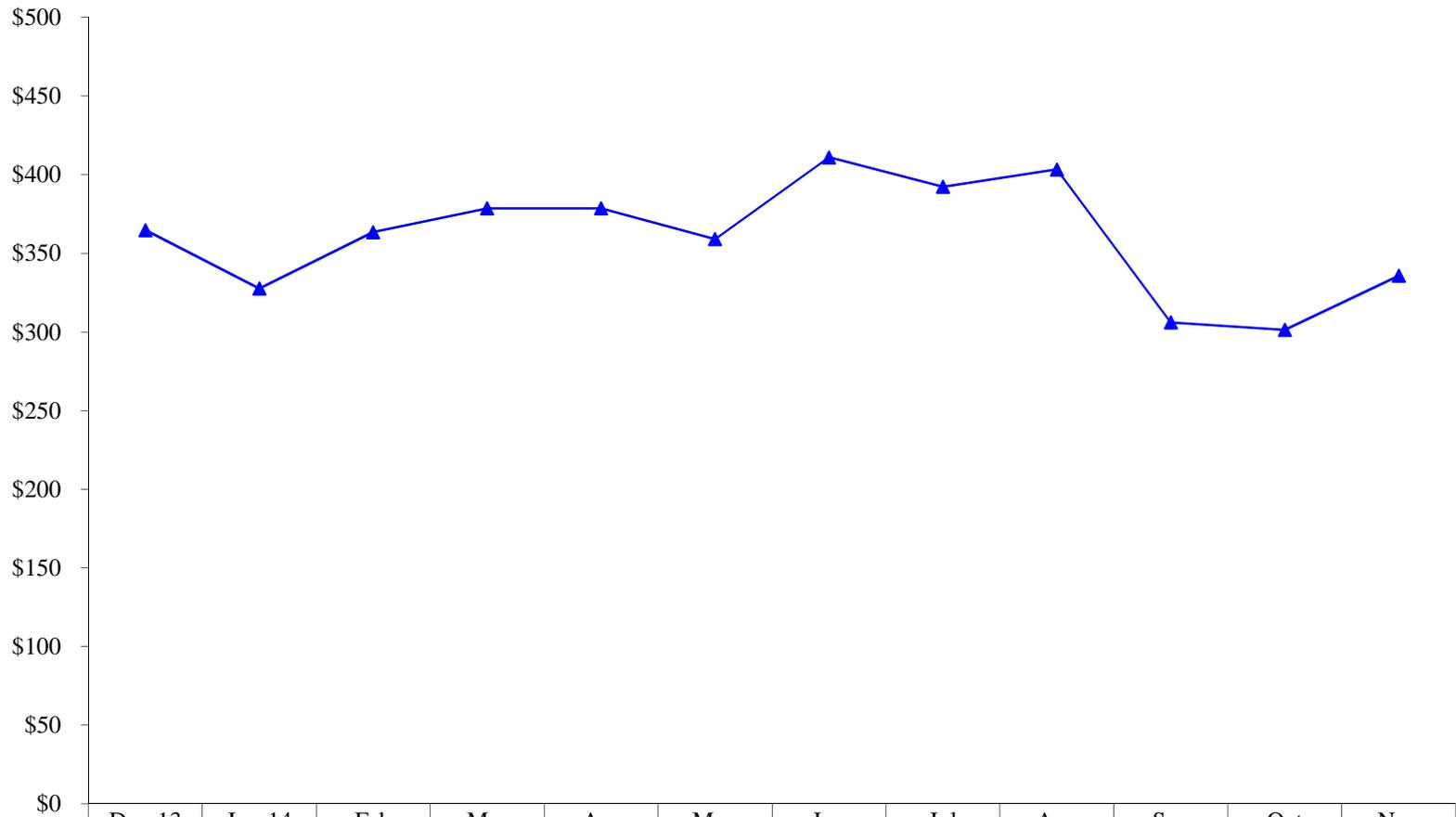
* Average Monthly Cost per Quarter

Source: ODS CWS Report - Number of Patients on New Generation Medications;
Budget, Forecasting Reporting Unit Report - NGM Quarterly Report

Chart: Office of Decision Support

**CQMO - 13 Cost of Antipsychotic Medications
Terrell State Hospital**

Average Cost of Antipsychotic Medications per Patient per Month

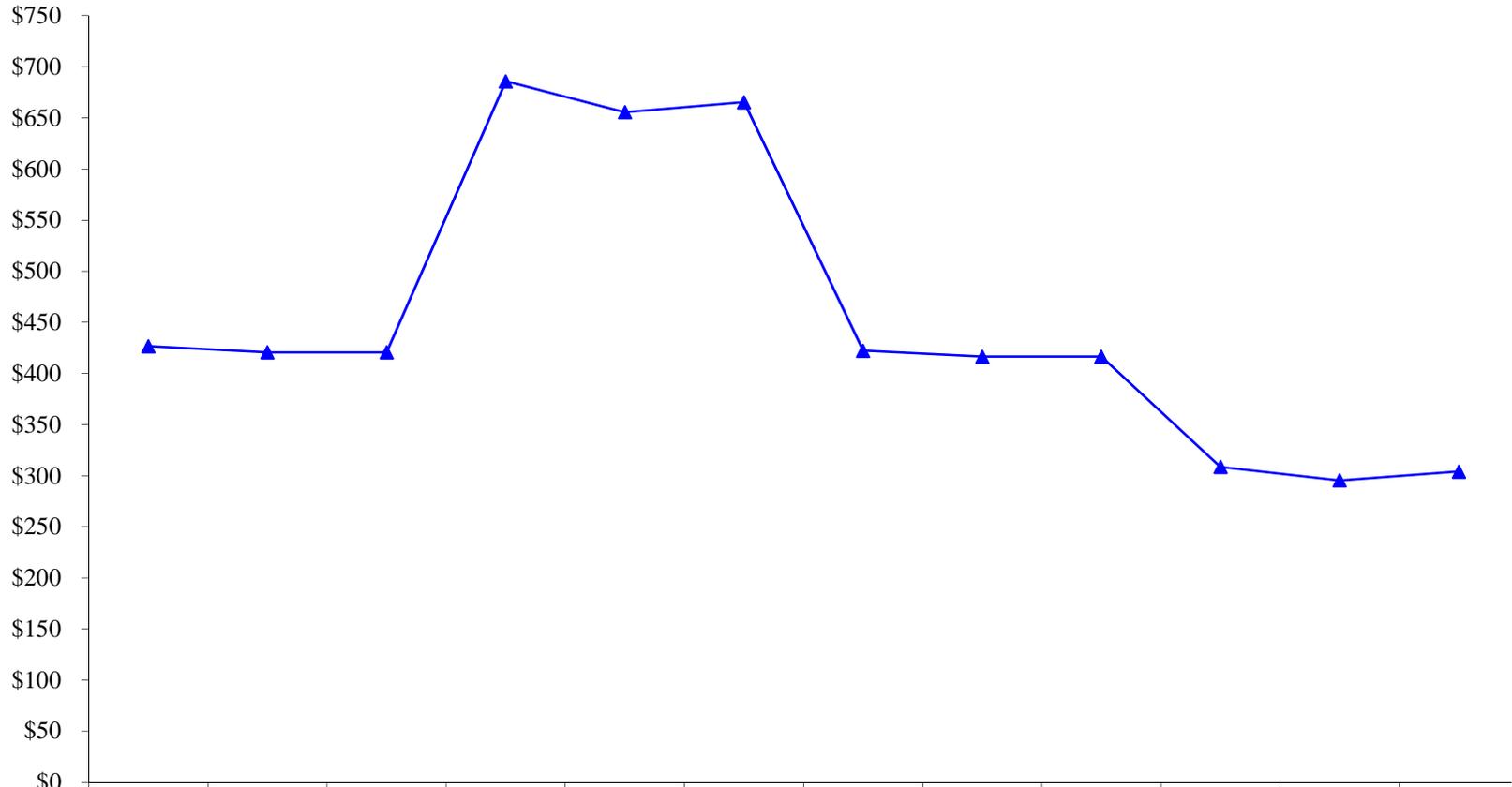


| | Dec-13 | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|----------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|----------|----------|----------|
| Cost* | \$103,232 | \$103,232 | \$103,232 | \$104,132 | \$104,132 | \$104,132 | \$129,887 | \$129,887 | \$129,887 | \$97,038 | \$97,038 | \$97,038 |
| # of Pts on NGM | 283 | 315 | 284 | 275 | 275 | 290 | 316 | 331 | 322 | 317 | 322 | 289 |
| ▲ Average Cost per Patient | \$365 | \$328 | \$363 | \$379 | \$379 | \$359 | \$411 | \$392 | \$403 | \$306 | \$301 | \$336 |

* Average Monthly Cost per Quarter

**CQMO - 13 Cost of Antipsychotic Medications
Waco Center for Youth**

Average Cost of Antipsychotic Medications per Patient per Month



| | Dec-13 | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|----------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Cost* | \$29,863 | \$29,863 | \$29,863 | \$44,583 | \$44,583 | \$44,583 | \$29,979 | \$29,979 | \$29,979 | \$20,978 | \$20,978 | \$20,978 |
| # of Pts on NGM | 70 | 71 | 71 | 65 | 68 | 67 | 71 | 72 | 72 | 68 | 71 | 69 |
| ▲ Average Cost per Patient | \$427 | \$421 | \$421 | \$686 | \$656 | \$665 | \$422 | \$416 | \$416 | \$309 | \$295 | \$304 |

* Average Monthly Cost per Quarter

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Clinical Quality Measure

COMO-14

Measure: Analyze and Report the Cost of TB Medications at TCID

Timeframe: Monthly

Definition

TCID cost of TB medications will be monitored.

Data Source

TCID data form

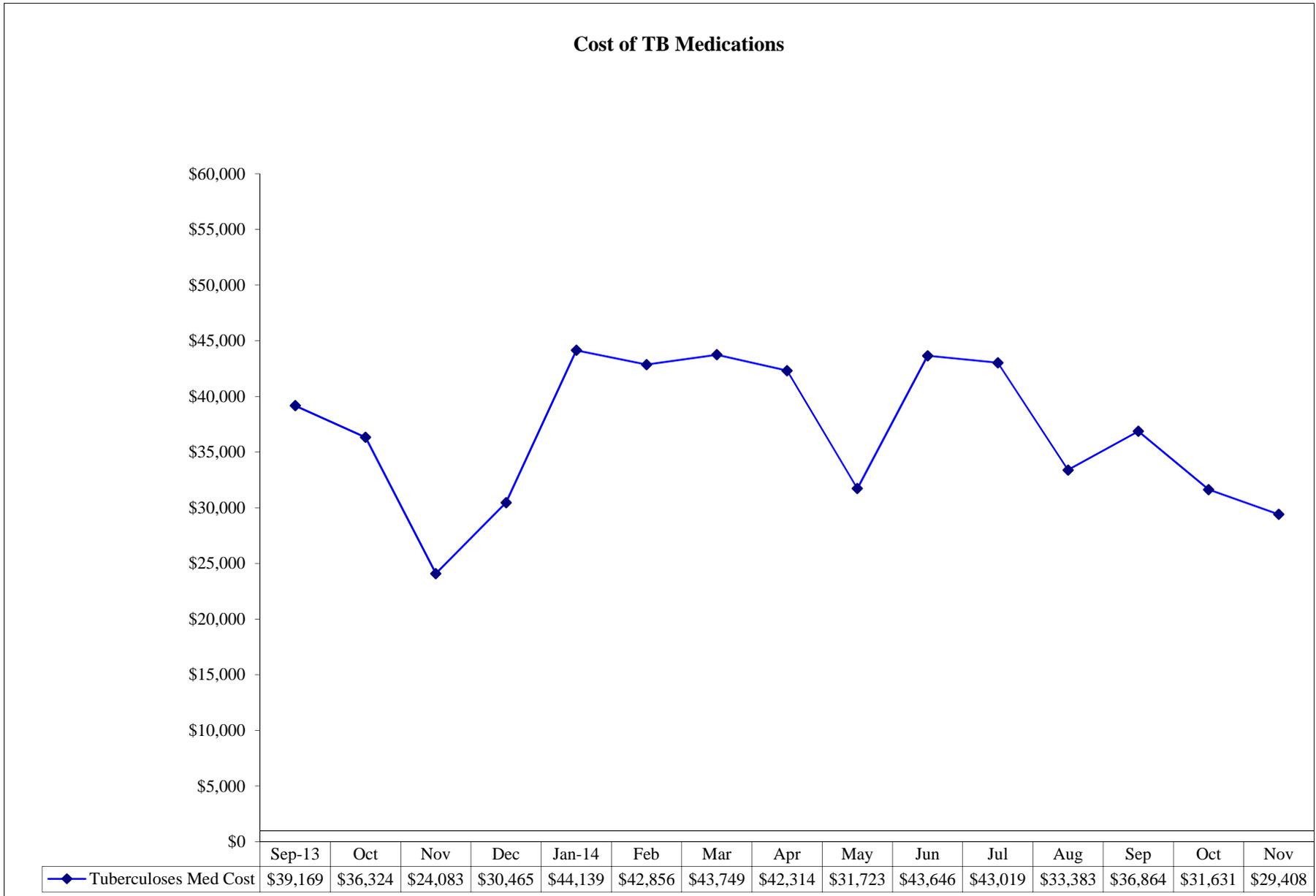
Data Display and Chart Description

Table shows monthly cost of TB medications.

Purpose

Monitor TB medications

**CQMO-14
TCID**



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Access Measure

AM-1

Measure: Average Length of Stay, Weekly on Day or Record, for Currently Admitted

Timeframe: Weekly

Measure: Calculate the Average Length of Stay in the Hospital for Patients: Admitted and Discharged Within 12 Months, All Discharges, and All Residents.

Timeframe: Quarterly

Definition

The state hospital average length of stay at discharged using admissions, absence and discharge data. Net length of stay calculated by subtracting the date of admission from the date of discharge, and then subtracting days absent. Length of stay for admitted and discharged during prior twelve months shows how many people were both admitted and discharged during the prior twelve months.

Data Source

ODS AD Hoc Report

CARE Report HC022260 (Average Length of Stay)

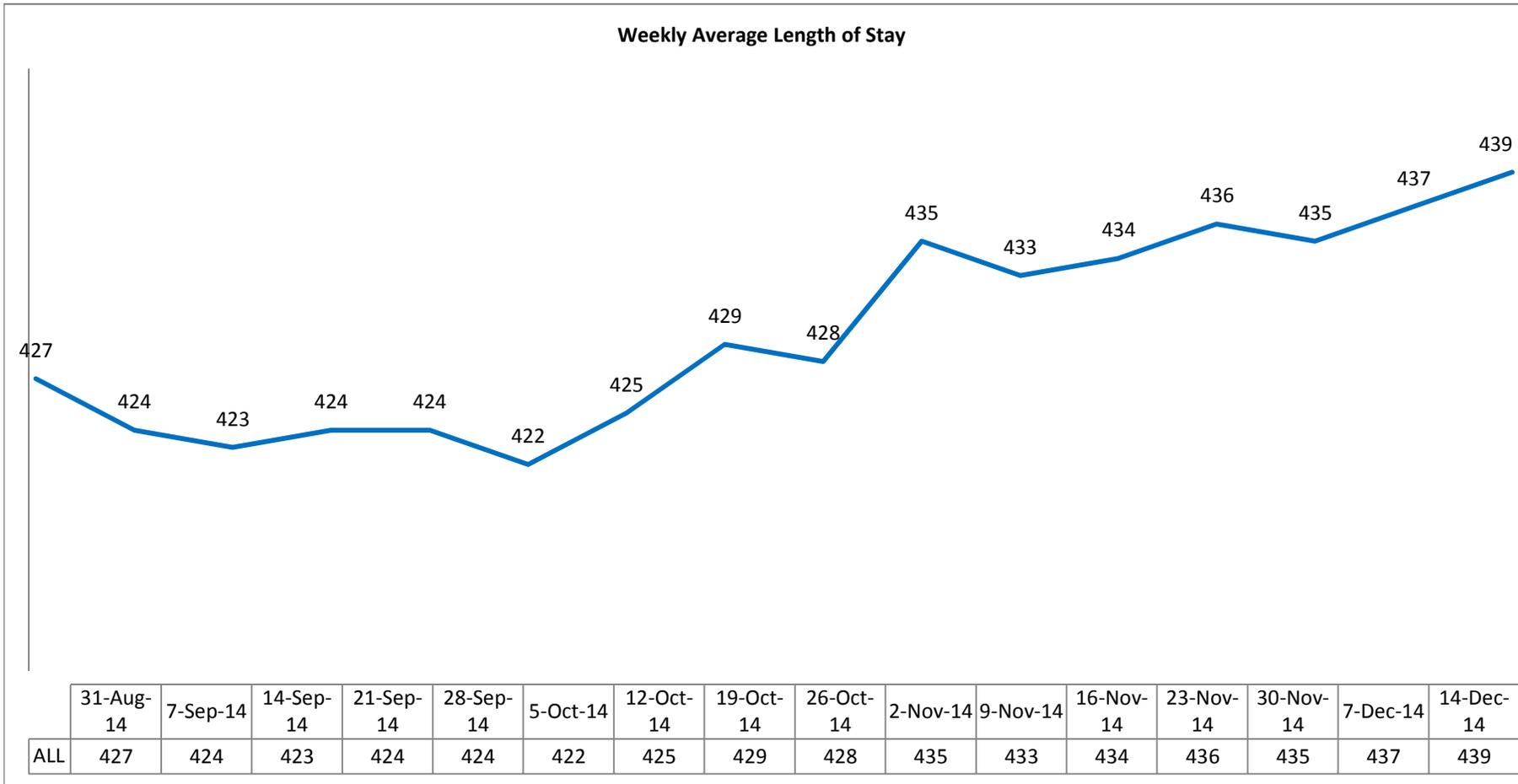
Data Display and Chart Description

Chart with quarterly data points showing average length of stay at discharge by category; average length of stay for admitted and discharged during prior 12 months by category; and average length of stay for all residents by category for individual state hospitals and system-wide. Chart with weekly data points showing weekly average length of stay for individual state hospitals and system-wide.

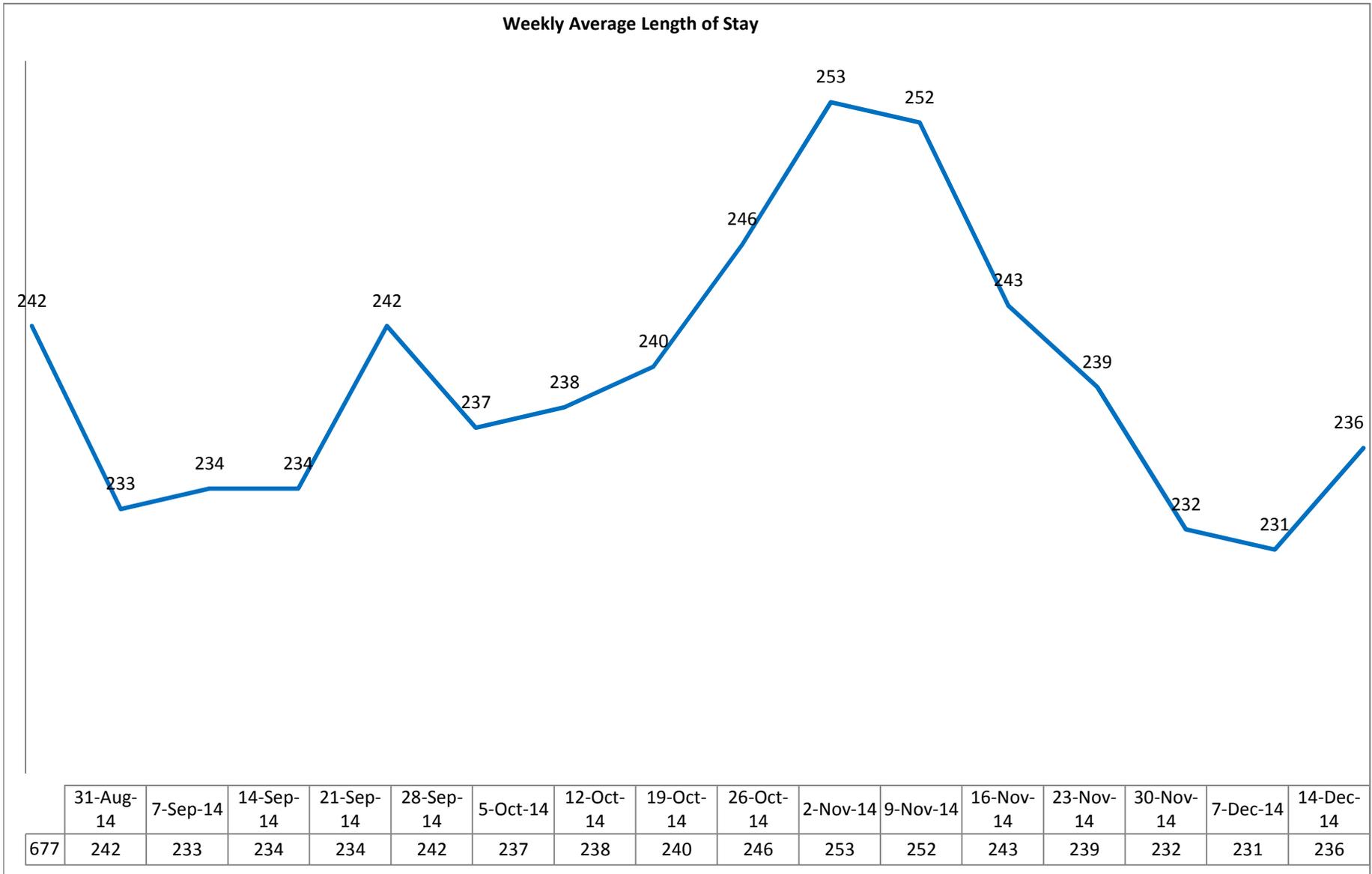
Purpose

Measure length of stay.

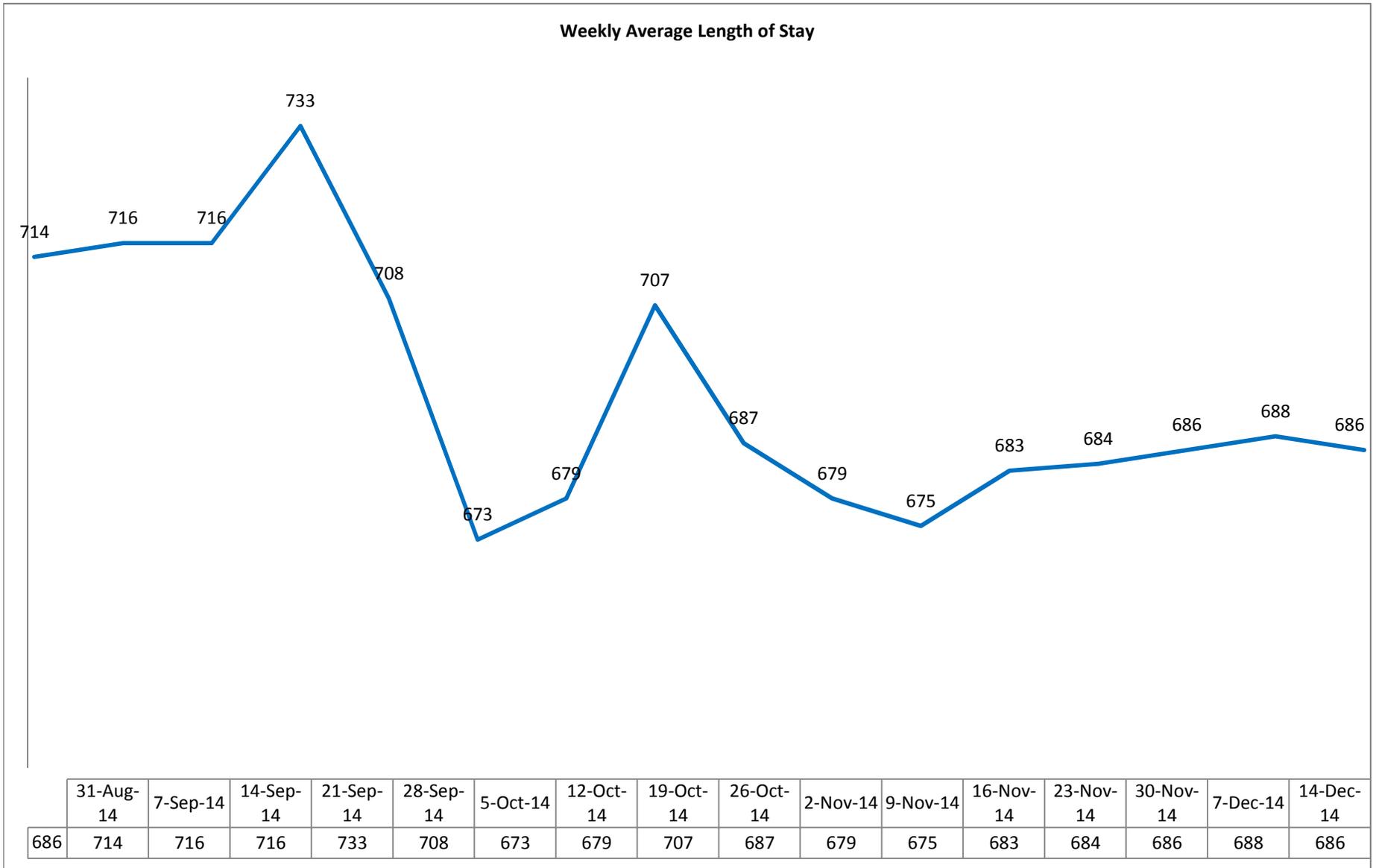
**AM - 1 Weekly Average Length of Stay for Current Patients
All State MH Hospitals**



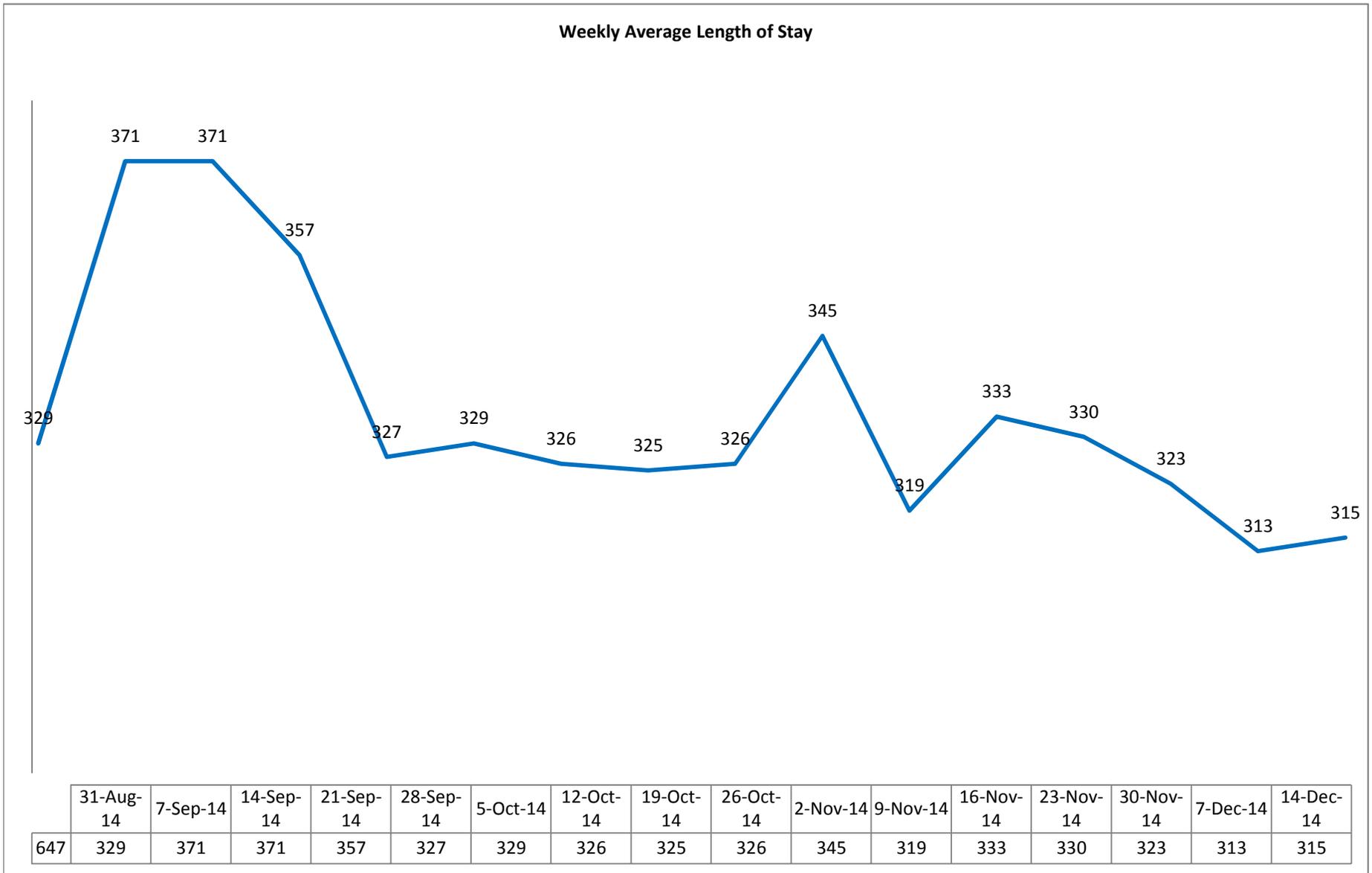
**AM - 1 Weekly Average Length of Stay for Current Patients
Austin State Hospital**



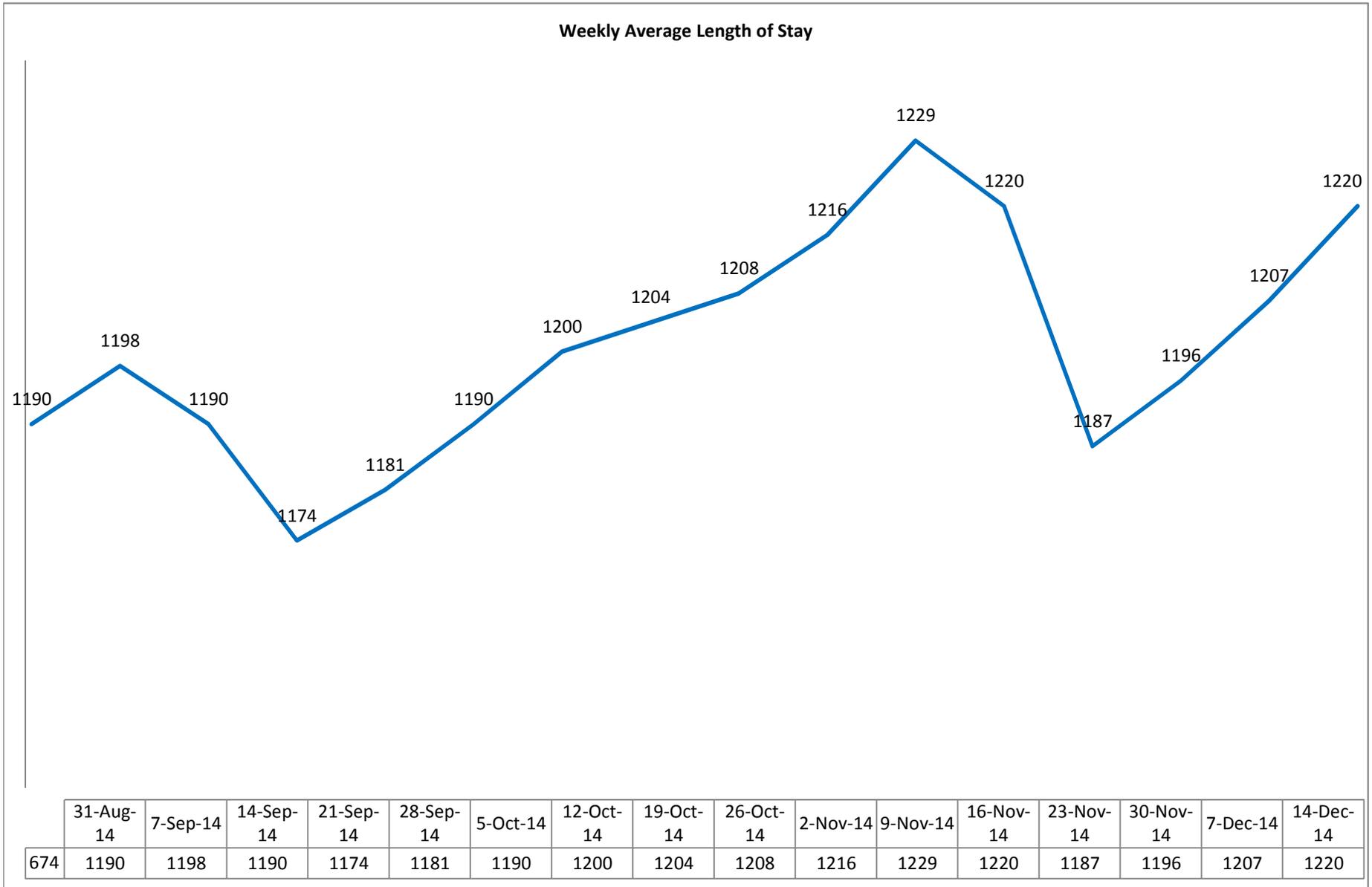
**AM - 1 Weekly Average Length of Stay for Current Patients
Big Spring State Hospital**



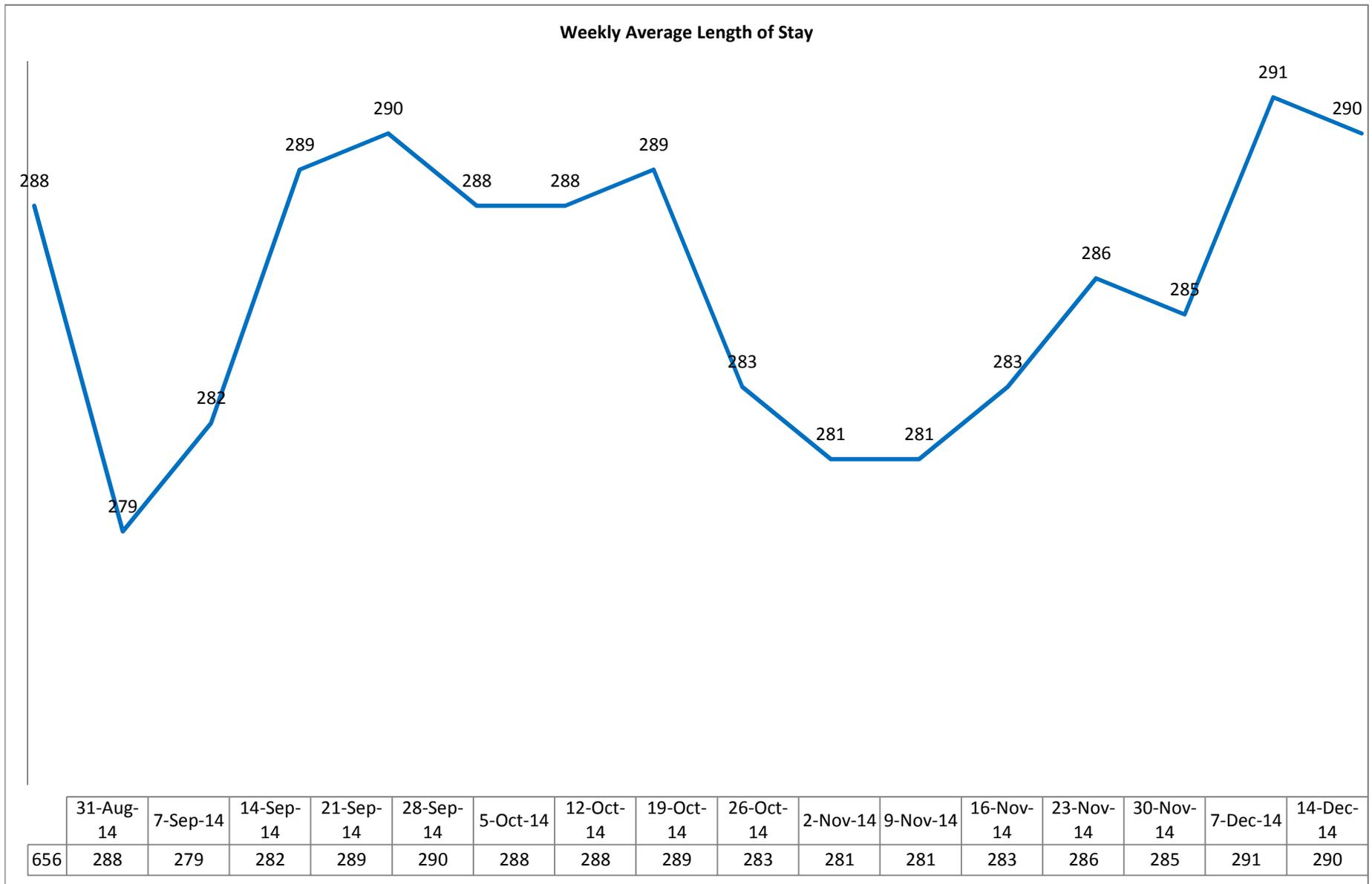
**AM - 1 Weekly Average Length of Stay for Current Patients
El Paso Psychiatric Center**



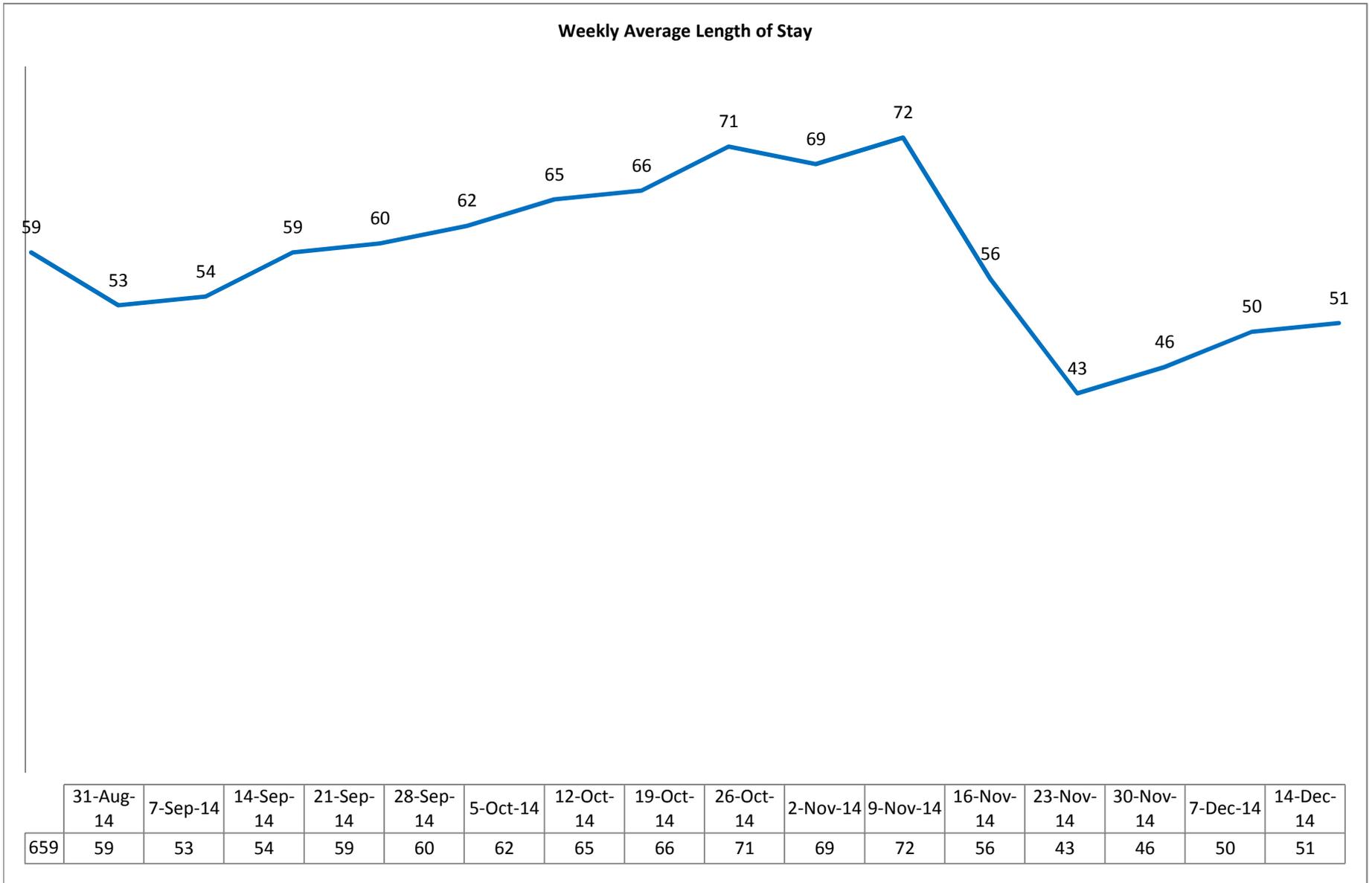
**AM - 1 Weekly Average Length of Stay for Current Patients
Kerrville State Hospital**



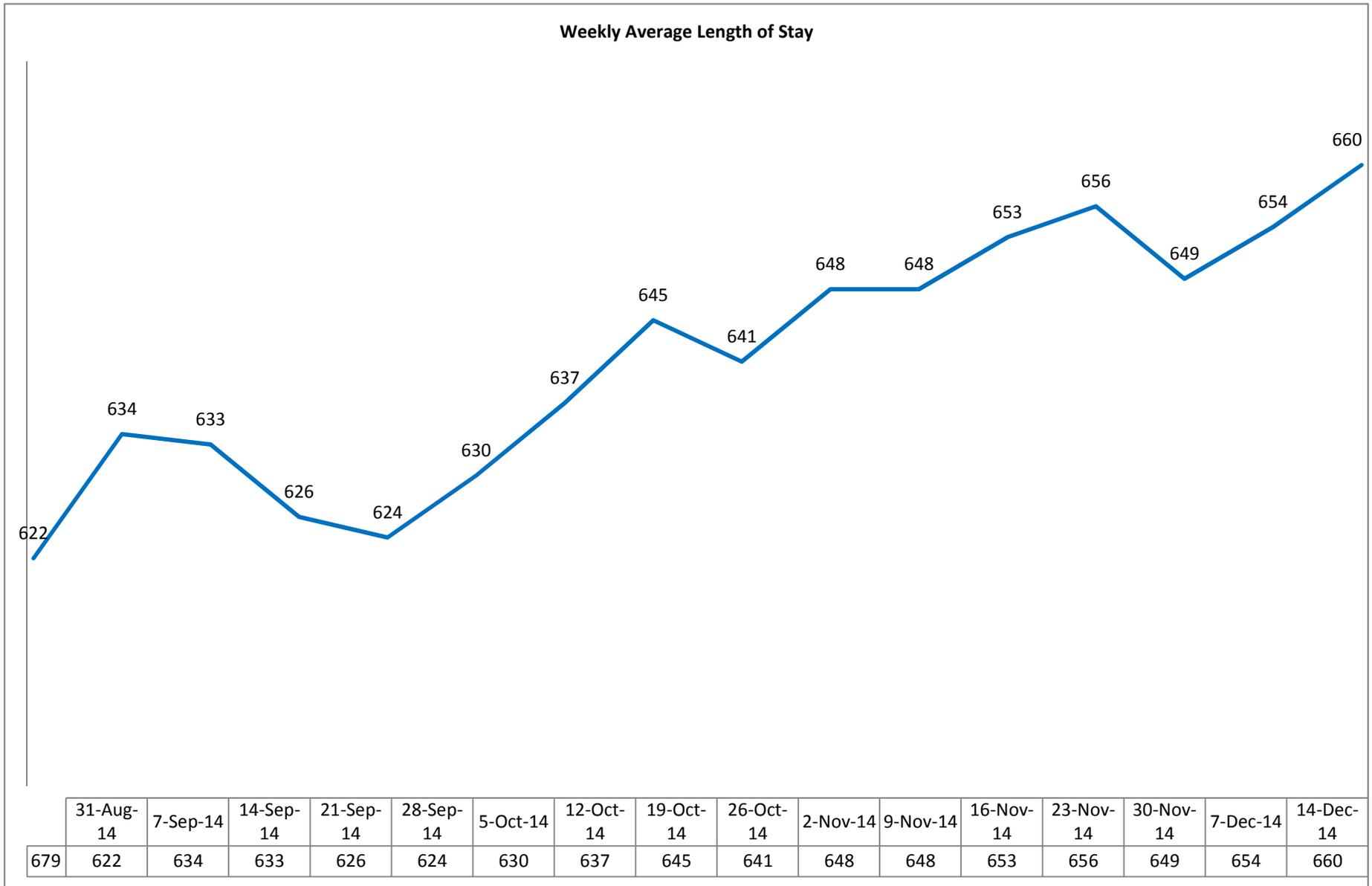
**AM - 1 Weekly Average Length of Stay for Current Patients
North Texas State Hospital**



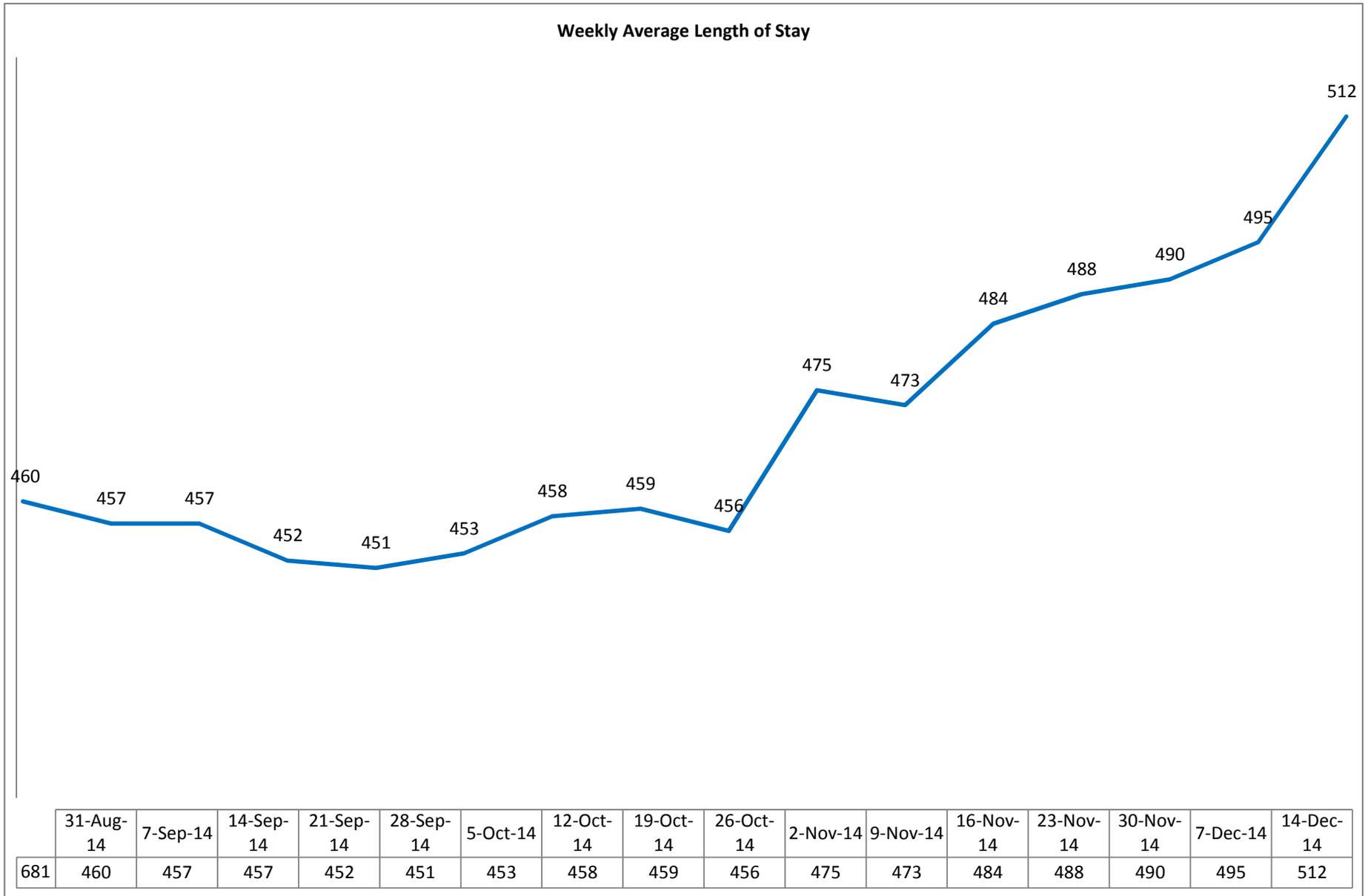
**AM - 1 Weekly Average Length of Stay for Current Patients
Rio Grande State Center**



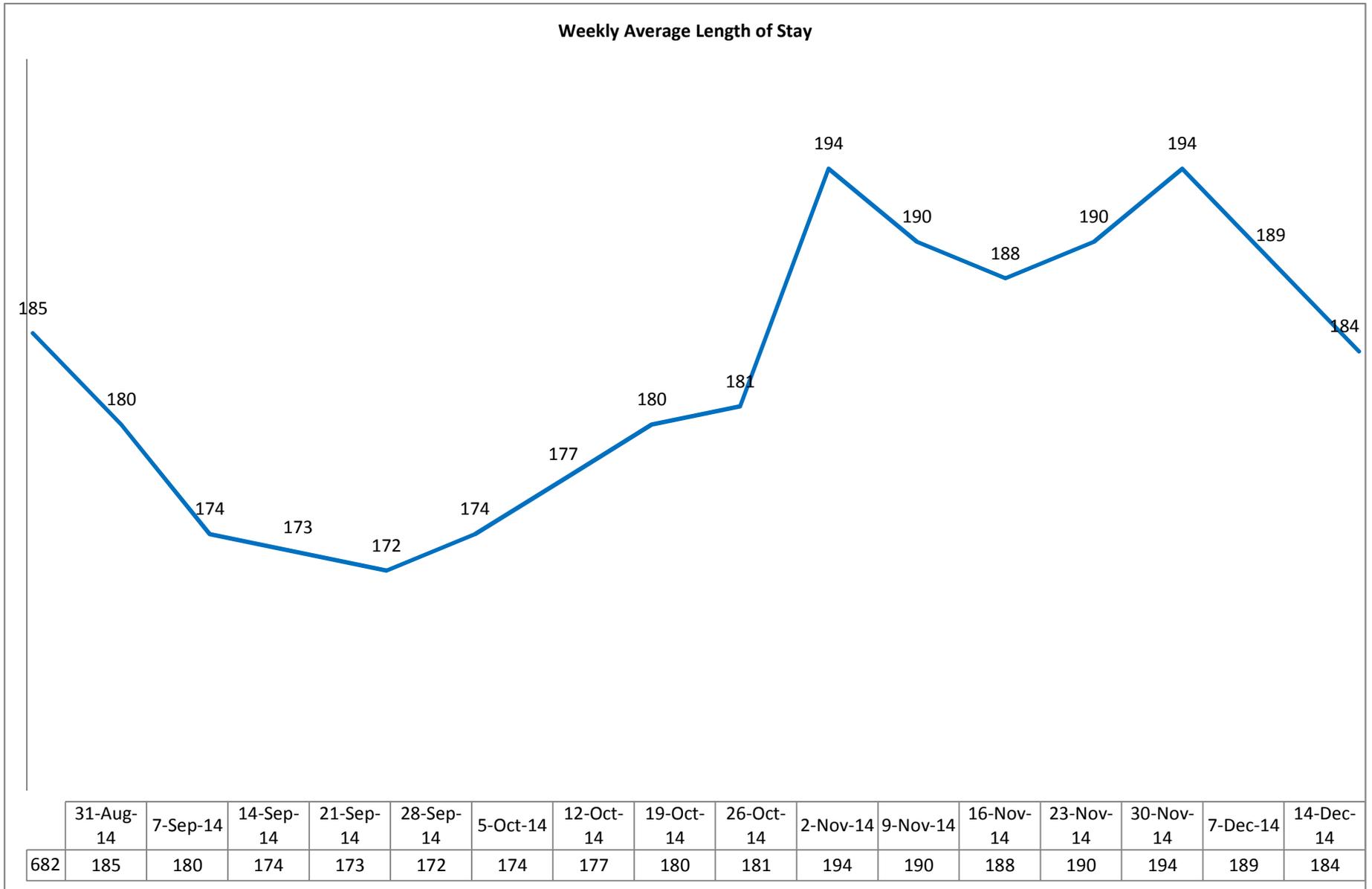
**AM - 1 Weekly Average Length of Stay for Current Patients
Rusk State Hospital**



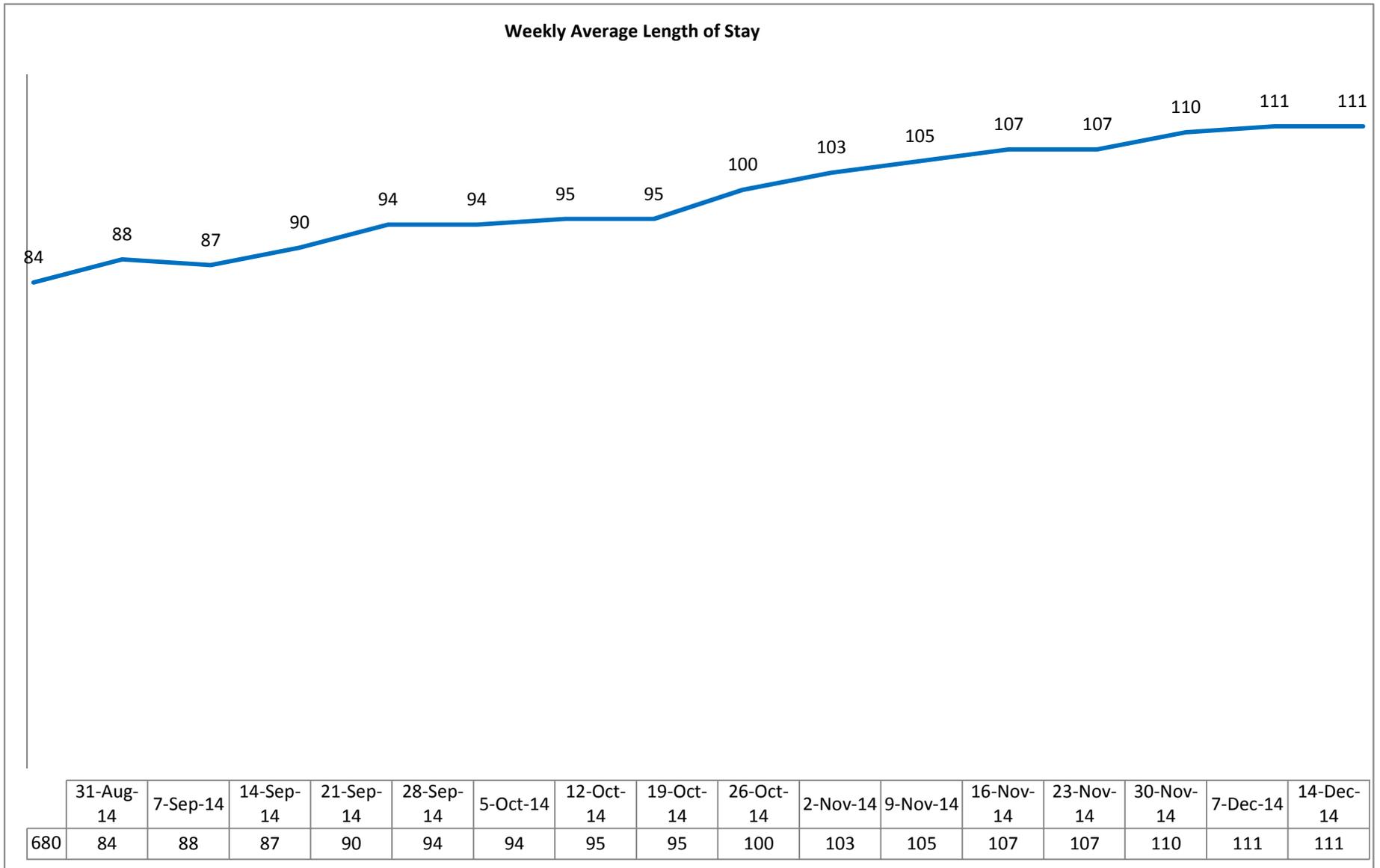
**AM - 1 Weekly Average Length of Stay for Current Patients
San Antonio State Hospital**



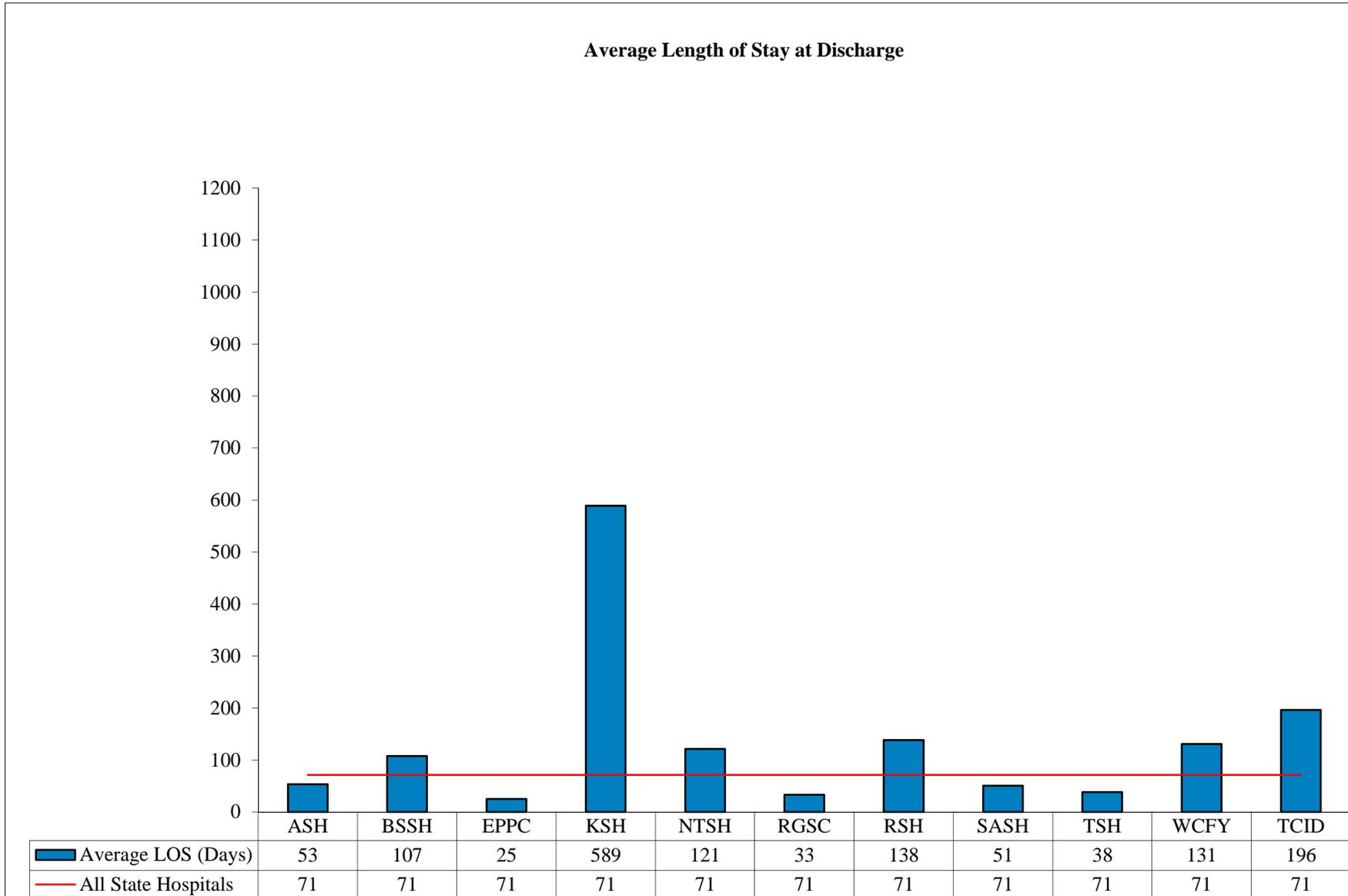
**AM - 1 Weekly Average Length of Stay for Current Patients
Terrell State Hospital**



**AM - 1 Weekly Average Length of Stay for Current Patients
Waco Center for Youth**



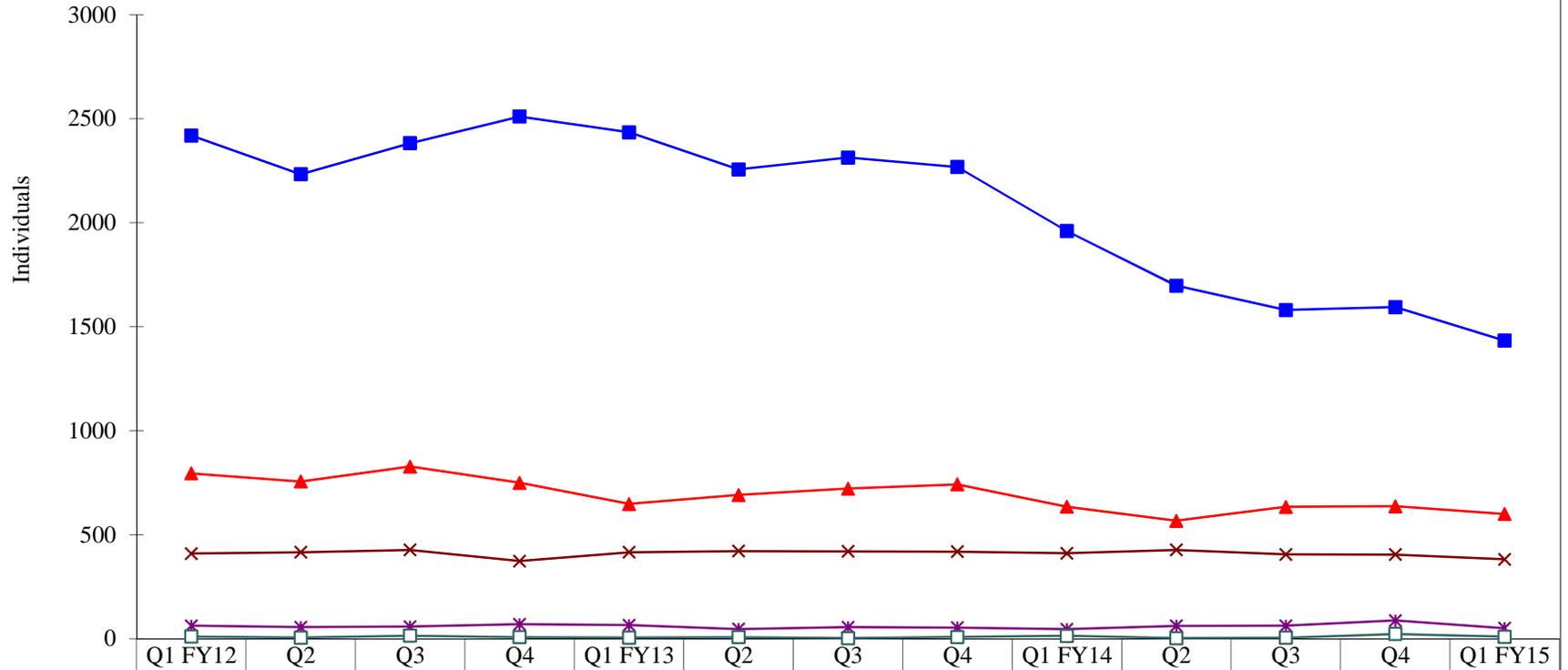
**AM - 1 Average Length of Stay at Discharge
All State Hospitals**



TCID - not included in All State Hospitals Average

**AM - 1 Average Length of Stay at Discharge
All State MH Hospitals**

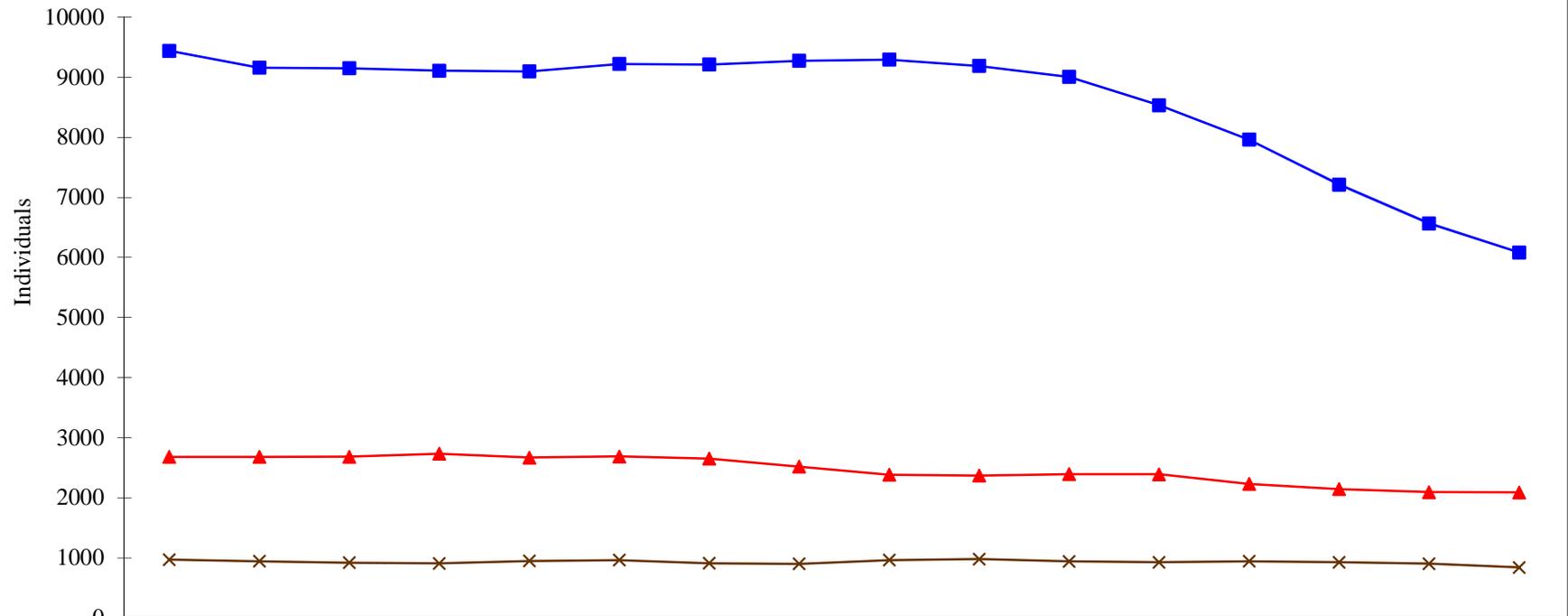
Average Length of Stay at Discharge by Category



| | Q1 FY12 | Q2 | Q3 | Q4 | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|------|------|------|---------|------|------|------|---------|------|------|------|---------|
| Average LOS | 58 | 56 | 64 | 54 | 50 | 56 | 54 | 57 | 64 | 65 | 67 | 91 | 71 |
| ■ 30 Days or Less | 2419 | 2233 | 2382 | 2510 | 2434 | 2256 | 2313 | 2268 | 1960 | 1697 | 1580 | 1594 | 1433 |
| ▲ 31 - 90 Days | 795 | 756 | 828 | 750 | 648 | 691 | 722 | 742 | 635 | 567 | 634 | 637 | 600 |
| × 91 - 365 Days | 410 | 416 | 427 | 374 | 416 | 422 | 420 | 419 | 411 | 427 | 406 | 405 | 382 |
| * 1 - 5 Years | 63 | 56 | 59 | 70 | 66 | 47 | 56 | 54 | 46 | 62 | 63 | 88 | 51 |
| □ Over 5 Years | 11 | 6 | 15 | 8 | 6 | 8 | 3 | 9 | 14 | 3 | 5 | 23 | 10 |

**AM - 1 Average Length of Stay at Discharge
All State MH Hospitals**

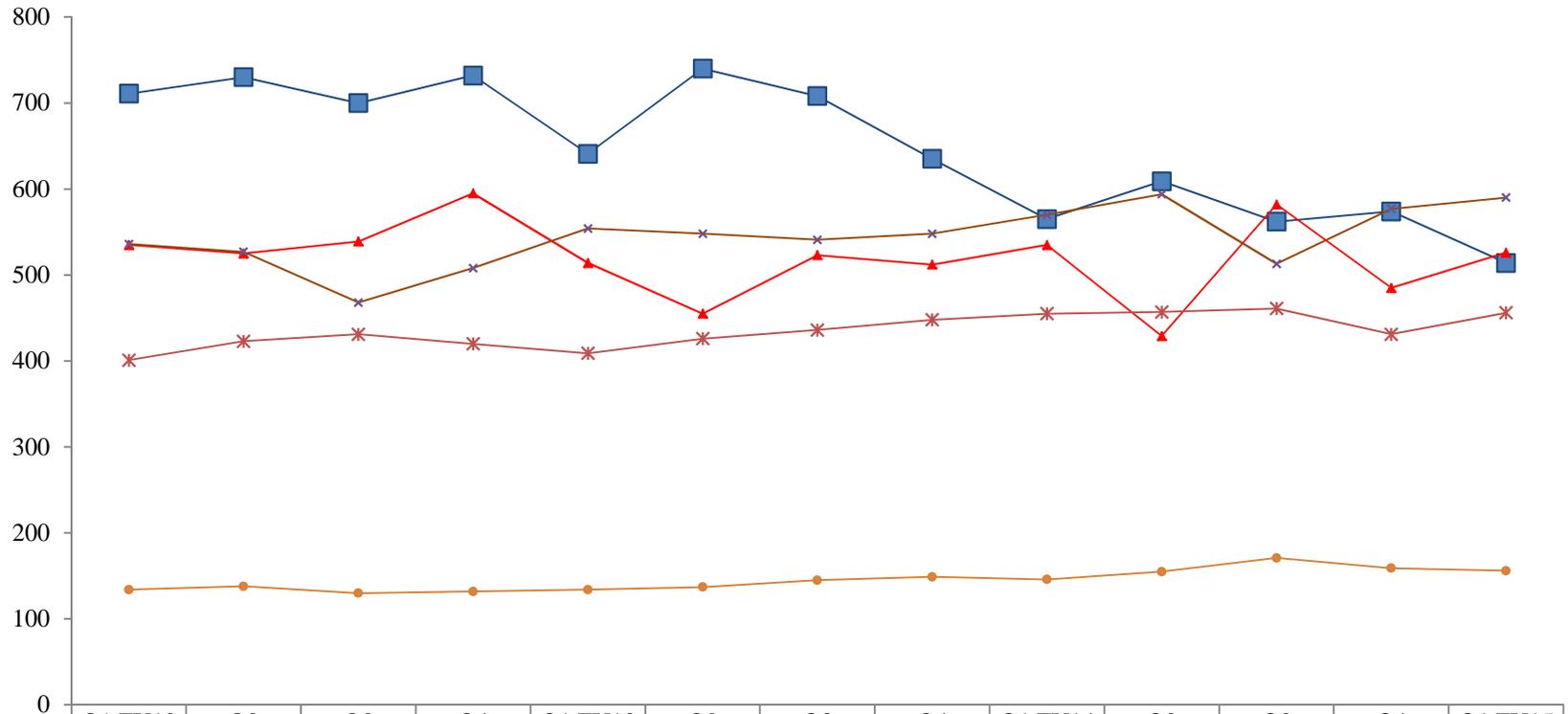
Average Length of Stay for Admitted and Discharged During Prior 12 Months



| | 3/10-2/11 | 6/10-5/11 | 9/10-8/11 | 12/10-11/11 | 3/11-2/12 | 6/11-5/12 | 9/11-8/12 | 12/11-11/12 | 3/12-2/13 | 6/12-5/13 | 9/12-8/13 | 12/12-11/13 | 3/13-2/14 | 6/13-5/14 | 9/13-8/14 | 12/13-11/14 |
|-------------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|
| Average LOS | 29 | 30 | 30 | 30 | 31 | 31 | 30 | 29 | 29 | 29 | 29 | 30 | 31 | 32 | 33 | 33 |
| ■ 30 Days or Less | 9440 | 9158 | 9150 | 9108 | 9096 | 9222 | 9211 | 9274 | 9293 | 9187 | 9005 | 8533 | 7962 | 7212 | 6566 | 6082 |
| ▲ 31-90 Days | 2681 | 2680 | 2682 | 2732 | 2669 | 2688 | 2652 | 2518 | 2383 | 2370 | 2393 | 2390 | 2231 | 2144 | 2093 | 2089 |
| × 91-365 Days | 968 | 942 | 918 | 906 | 947 | 962 | 909 | 898 | 962 | 979 | 939 | 926 | 941 | 925 | 901 | 840 |

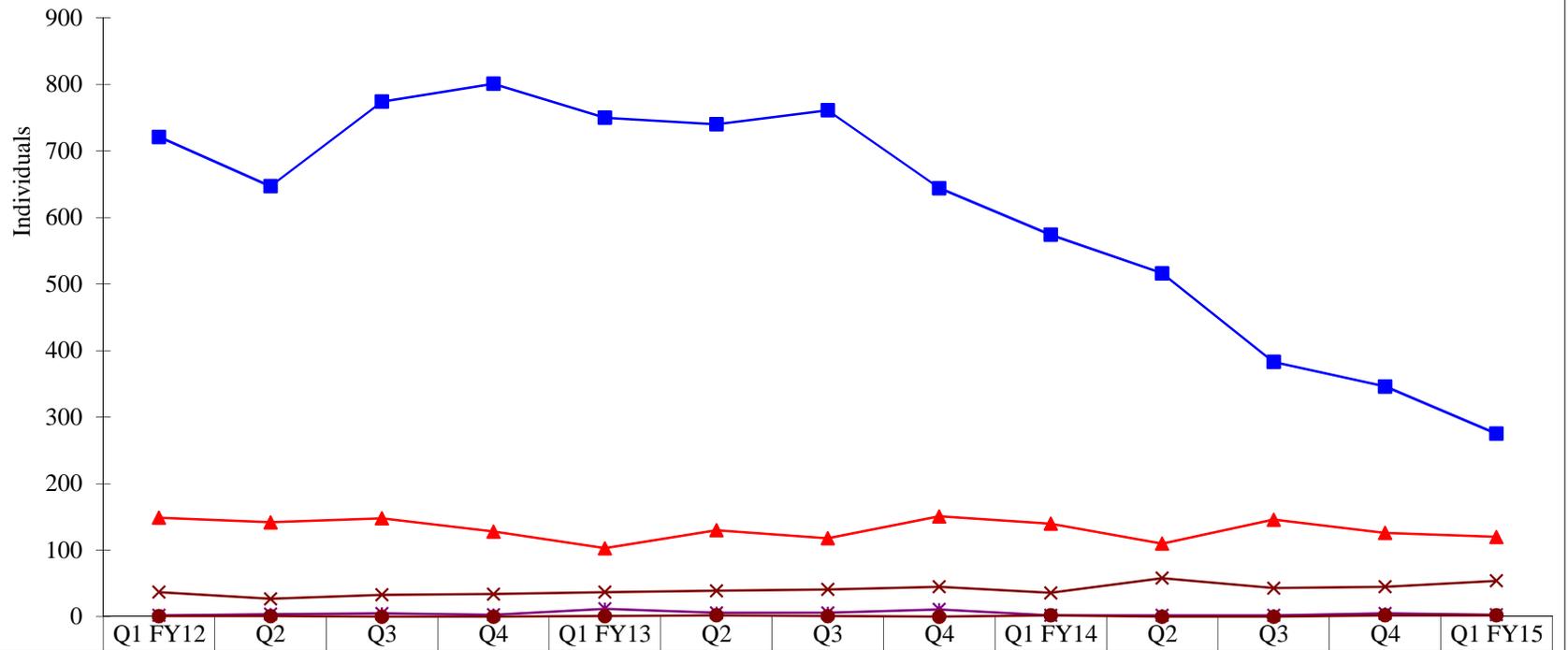
**AM - 1 Average Length of Stay at Discharge
All State MH Hospitals**

Average Length of Stay for All Residents



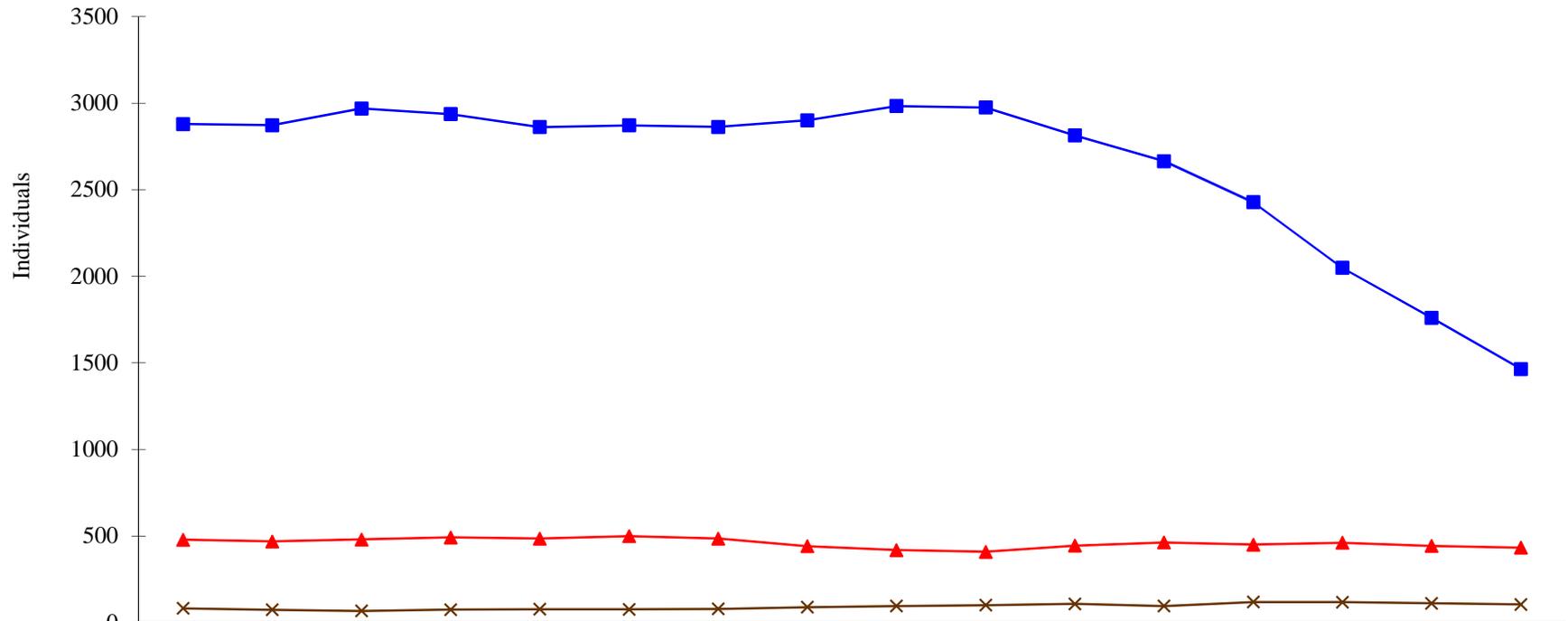
**AM - 1 Average Length of Stay at Discharge
Austin State Hospital**

Length of Stay at Discharge by Category



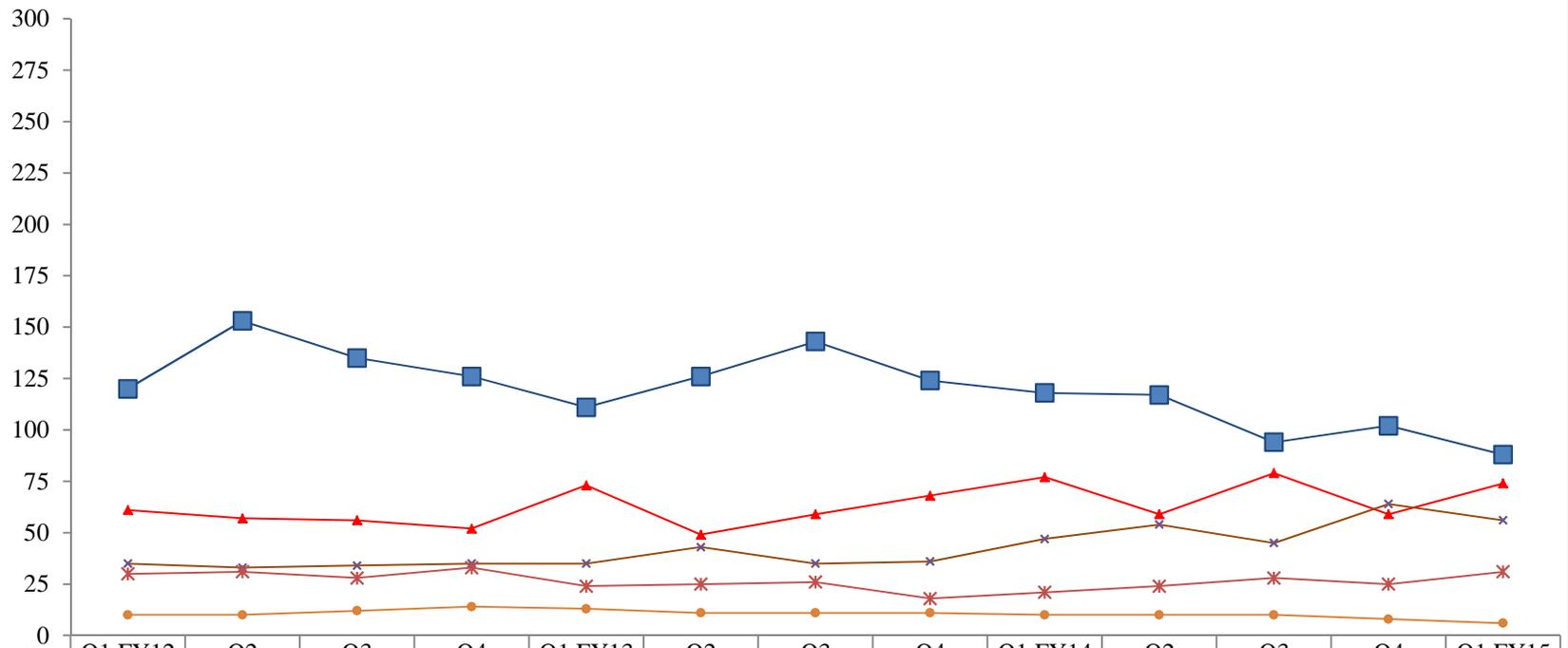
**AM - 1 Average Length of Stay at Discharge
Austin State Hospital**

Average Length of Stay For Admitted and Discharged During Prior 12 Months



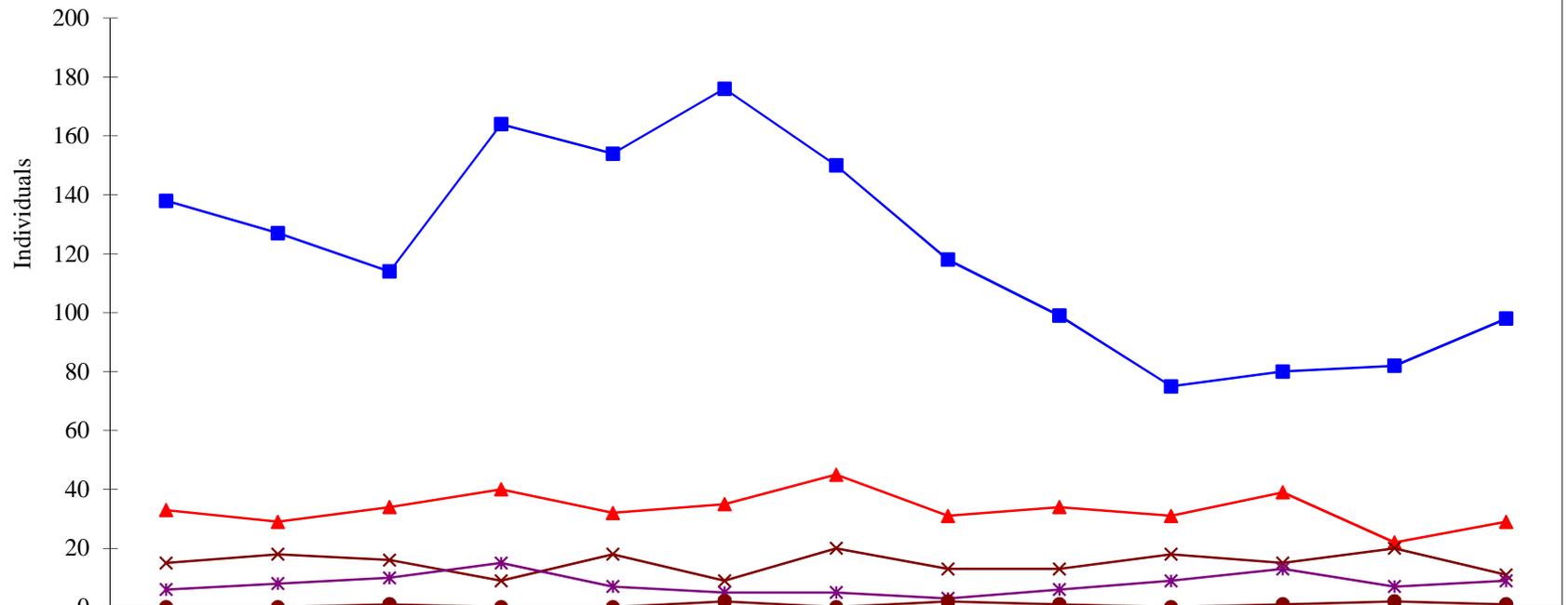
**AM - 1 Average Length of Stay at Discharge
Austin State Hospital**

Average Length of Stay for All Residents



**AM - 1 Average Length of Stay at Discharge
Big Spring State Hospital**

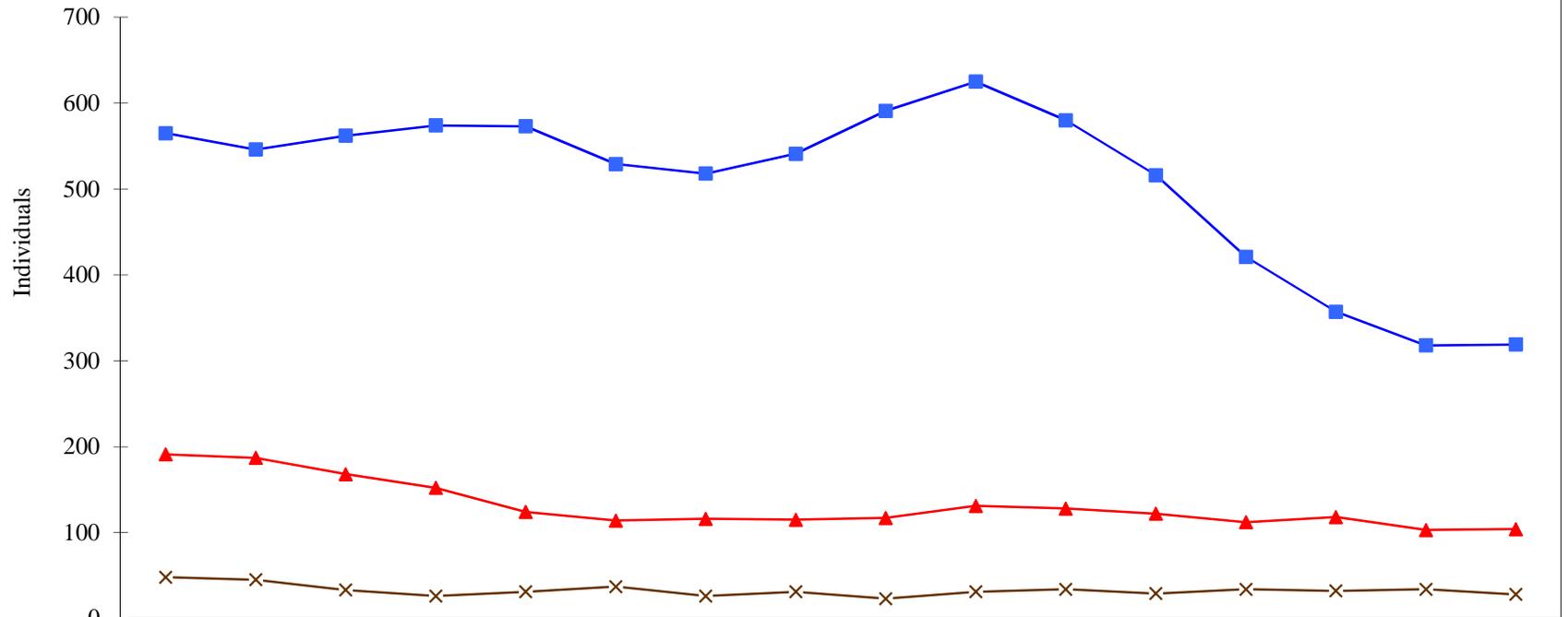
Length of Stay at Discharge by Category



| | Q1 FY12 | Q2 | Q3 | Q4 | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|-----|-----|-----|---------|-----|-----|-----|---------|----|-----|-----|---------|
| Average LOS | 55 | 69 | 103 | 74 | 57 | 67 | 54 | 75 | 78 | 92 | 136 | 123 | 107 |
| ■ 30 Days or Less | 138 | 127 | 114 | 164 | 154 | 176 | 150 | 118 | 99 | 75 | 80 | 82 | 98 |
| ▲ 31 - 90 Days | 33 | 29 | 34 | 40 | 32 | 35 | 45 | 31 | 34 | 31 | 39 | 22 | 29 |
| × 91 - 365 Days | 15 | 18 | 16 | 9 | 18 | 9 | 20 | 13 | 13 | 18 | 15 | 20 | 11 |
| * 1 - 5 Years | 6 | 8 | 10 | 15 | 7 | 5 | 5 | 3 | 6 | 9 | 13 | 7 | 9 |
| ● Over 5 Years | 0 | 0 | 1 | 0 | 0 | 2 | 0 | 2 | 1 | 0 | 1 | 2 | 1 |

**AM - 1 Average Length of Stay at Discharge
Big Spring State Hospital**

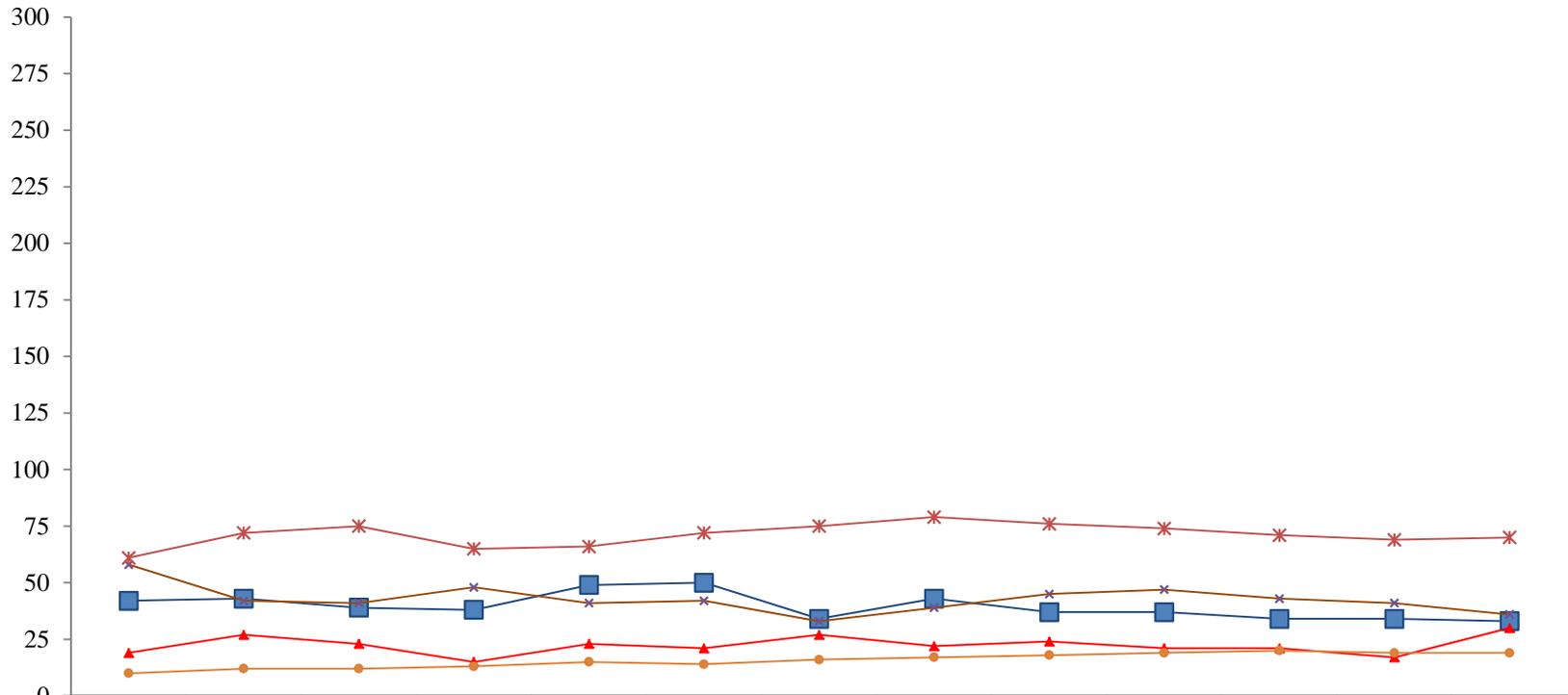
Average Length of Stay for Admitted and Discharged During Prior 12 Months



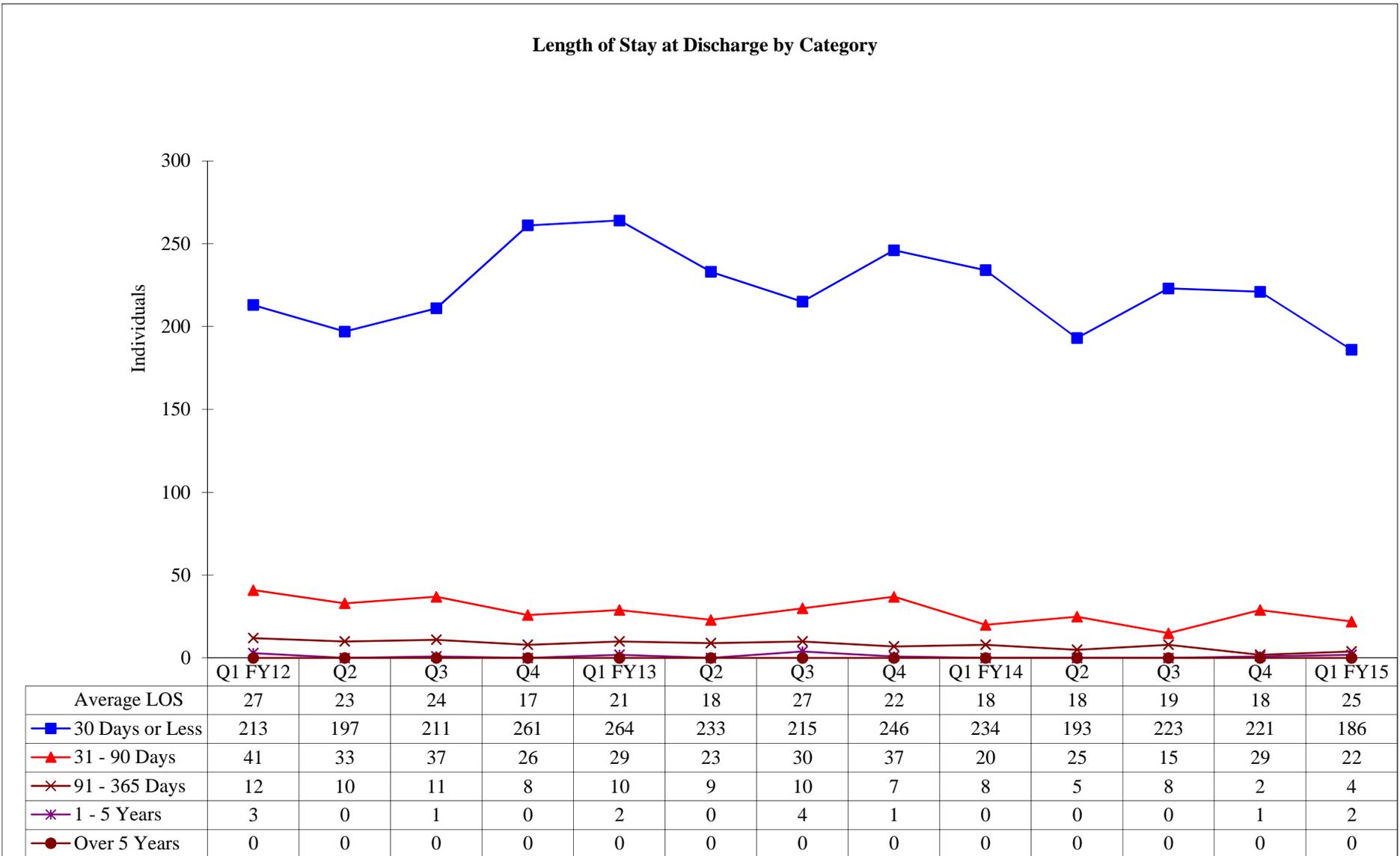
| | 3/10-2/11 | 6/10-5/11 | 9/10-8/11 | 12/10-11/11 | 3/11-2/12 | 6/11-5/12 | 9/11-8/12 | 12/11-11/12 | 3/12-2/13 | 6/12-5/13 | 9/12-8/13 | 12/12-11/13 | 3/13-2/14 | 6/13-5/14 | 9/13-8/14 | 12/13-11/14 |
|-------------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|
| Average LOS | 29 | 29 | 27 | 26 | 25 | 28 | 25 | 26 | 23 | 23 | 25 | 24 | 29 | 30 | 32 | 30 |
| ■ 30 Days or Less | 565 | 546 | 562 | 574 | 573 | 529 | 518 | 541 | 591 | 625 | 580 | 516 | 421 | 357 | 318 | 319 |
| ▲ 31-90 Days | 191 | 187 | 168 | 152 | 124 | 114 | 116 | 115 | 117 | 131 | 128 | 122 | 112 | 118 | 103 | 104 |
| × 91-365 Days | 48 | 45 | 33 | 26 | 31 | 37 | 26 | 31 | 23 | 31 | 34 | 29 | 34 | 32 | 34 | 28 |

**AM - 1 Average Length of Stay at Discharge
Big Spring State Hospital**

Average Length of Stay for All Residents

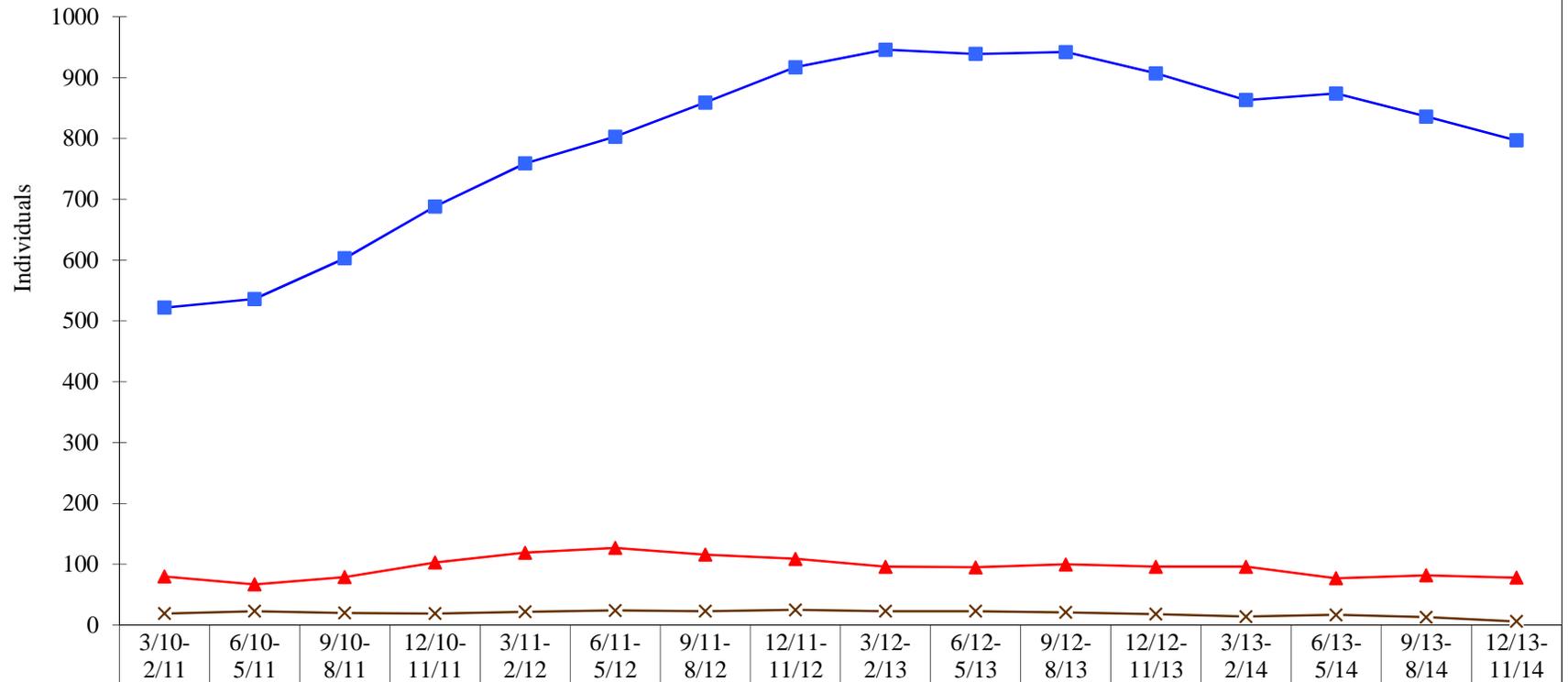


**AM - 1 Average Length of Stay at Discharge
El Paso Psychiatric Center**



**AM - 1 Average Length of Stay at Discharge
El Paso Psychiatric Center**

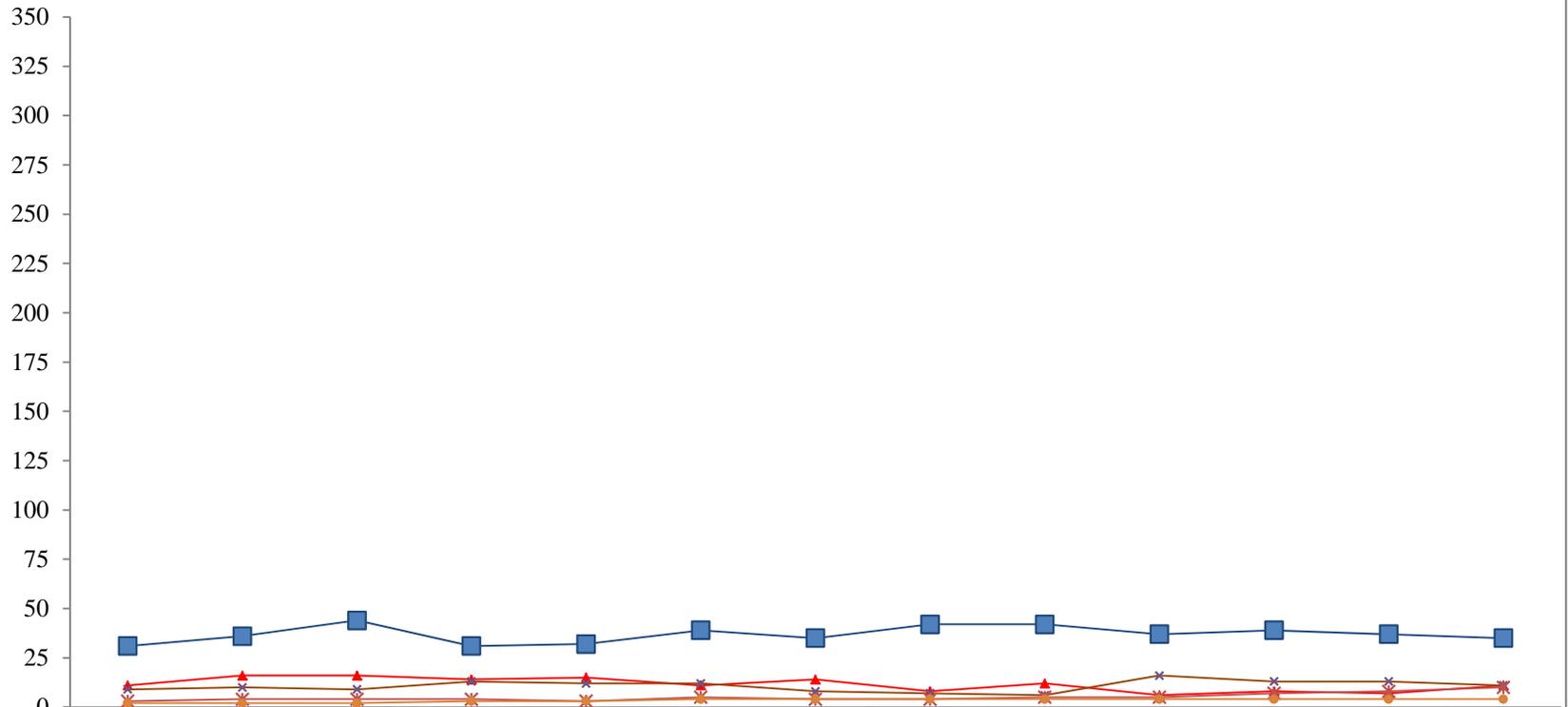
Average Length of Stay for Admitted and Discharged During Prior 12 Months



| | 3/10-2/11 | 6/10-5/11 | 9/10-8/11 | 12/10-11/11 | 3/11-2/12 | 6/11-5/12 | 9/11-8/12 | 12/11-11/12 | 3/12-2/13 | 6/12-5/13 | 9/12-8/13 | 12/12-11/13 | 3/13-2/14 | 6/13-5/14 | 9/13-8/14 | 12/13-11/14 |
|-----------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|
| Average LOS | 20 | 21 | 19 | 19 | 19 | 18 | 17 | 17 | 16 | 16 | 16 | 16 | 16 | 16 | 16 | 15 |
| 30 Days or Less | 522 | 536 | 603 | 688 | 759 | 803 | 859 | 917 | 946 | 939 | 942 | 907 | 863 | 874 | 836 | 797 |
| 31-90 Days | 80 | 67 | 79 | 103 | 119 | 127 | 116 | 109 | 96 | 95 | 100 | 96 | 96 | 77 | 82 | 78 |
| 91-365 Days | 19 | 23 | 20 | 19 | 22 | 24 | 23 | 25 | 23 | 23 | 21 | 18 | 14 | 17 | 13 | 6 |

**AM - 1 Average Length of Stay at Discharge
El Paso Psychiatric Center**

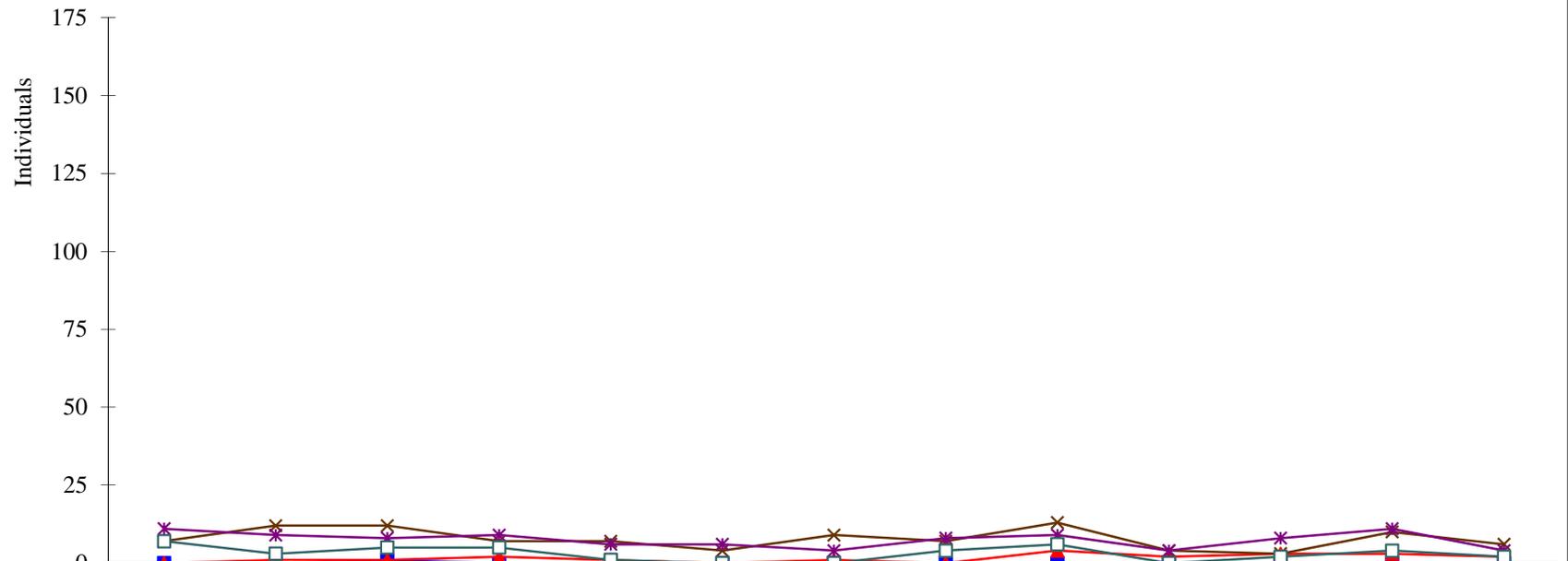
Average Length of Stay for All Residents



| | Q1 FY12 | Q2 | Q3 | Q4 | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|-----|-----|-----|---------|-----|-----|-----|---------|-----|-----|-----|---------|
| Average LOS | 221 | 195 | 181 | 234 | 233 | 233 | 244 | 243 | 244 | 279 | 289 | 317 | 317 |
| ■ 30 Days or Less | 31 | 36 | 44 | 31 | 32 | 39 | 35 | 42 | 42 | 37 | 39 | 37 | 35 |
| ▲ 31 - 90 Days | 11 | 16 | 16 | 14 | 15 | 11 | 14 | 8 | 12 | 6 | 8 | 7 | 11 |
| × 91 - 365 Days | 9 | 10 | 9 | 13 | 12 | 12 | 8 | 7 | 6 | 16 | 13 | 13 | 11 |
| * 1 - 5 Years | 3 | 4 | 4 | 4 | 3 | 5 | 4 | 4 | 5 | 5 | 7 | 8 | 10 |
| ● Over 5 Years | 2 | 2 | 2 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |

**AM - 1 Average Length of Stay at Discharge
Kerrville State Hospital**

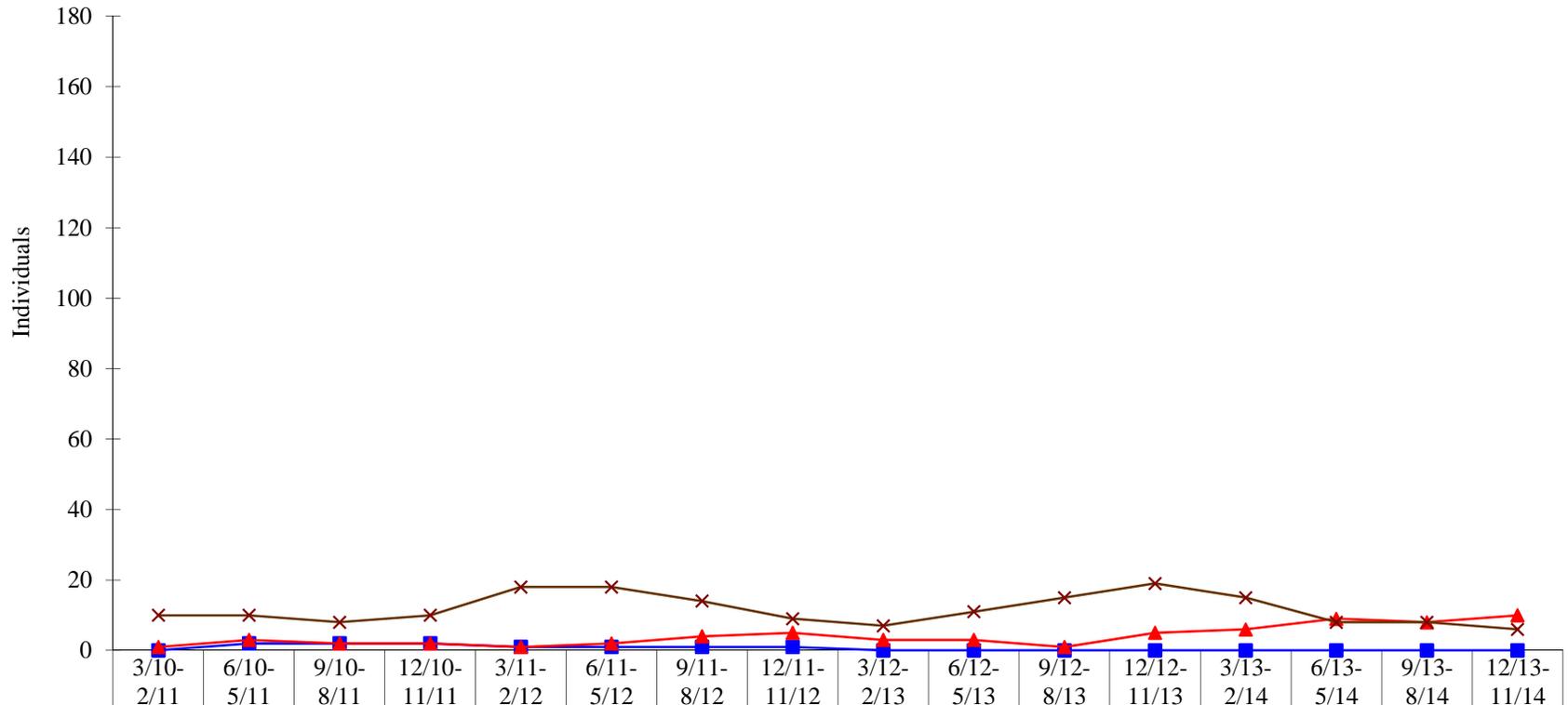
Length of Stay at Discharge by Category



| | Q1 FY12 | Q2 | Q3 | Q4 | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|-----|-----|------|---------|-----|-----|------|---------|-----|-----|-----|---------|
| Average LOS | 1258 | 774 | 921 | 1088 | 587 | 664 | 296 | 1076 | 842 | 357 | 909 | 871 | 589 |
| ■ 30 Days or Less | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ▲ 31 - 90 Days | 0 | 1 | 1 | 2 | 1 | 0 | 1 | 0 | 4 | 2 | 3 | 3 | 2 |
| × 91 - 365 Days | 7 | 12 | 12 | 7 | 7 | 4 | 9 | 7 | 13 | 4 | 3 | 10 | 6 |
| * 1 - 5 Years | 11 | 9 | 8 | 9 | 6 | 6 | 4 | 8 | 9 | 4 | 8 | 11 | 4 |
| □ Over 5 Years | 7 | 3 | 5 | 5 | 1 | 0 | 0 | 4 | 6 | 0 | 2 | 4 | 2 |

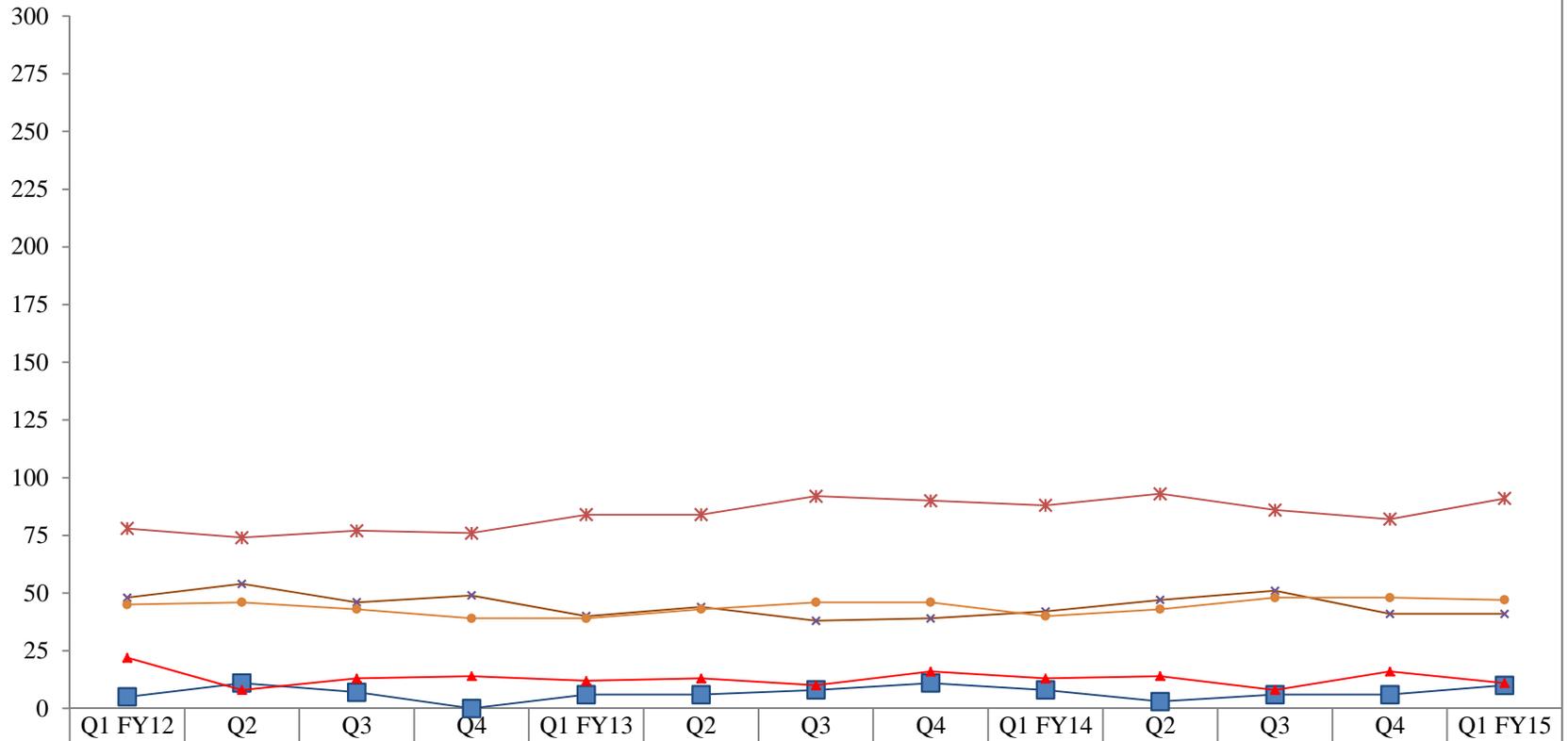
**AM - 1 Average Length of Stay at Discharge
Kerrville State Hospital**

Average Length of Stay for Admitted and Discharged During Prior 12 Months



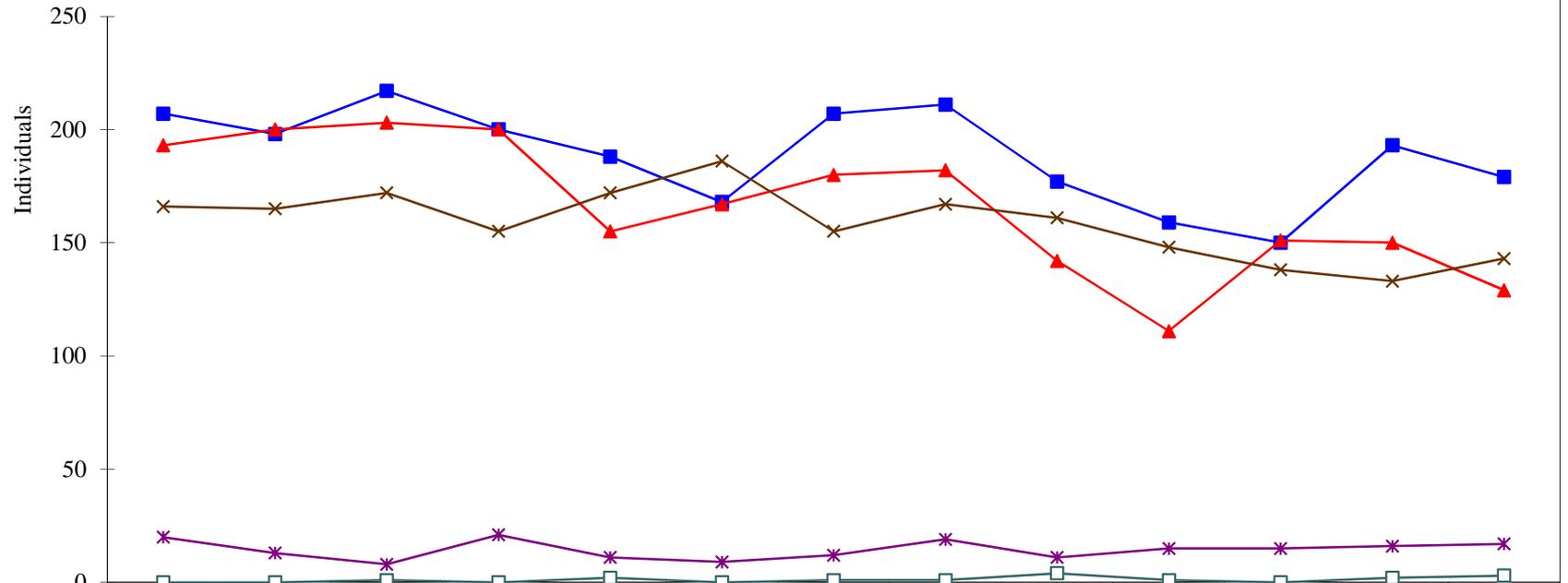
**AM - 1 Average Length of Stay at Discharge
Kerrville State Hospital**

Average Length of Stay for All Residents



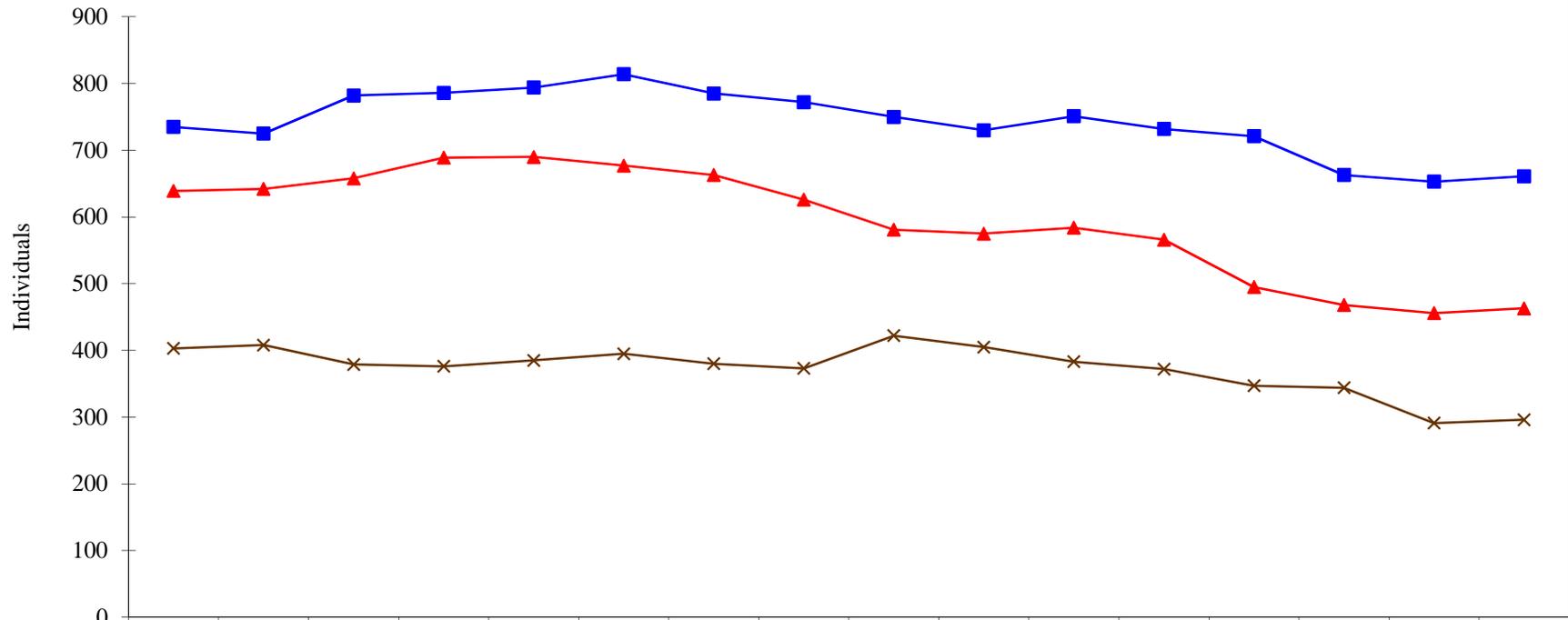
**AM - 1 Average Length of Stay at Discharge
North Texas State Hospital**

Length of Stay at Discharge by Category



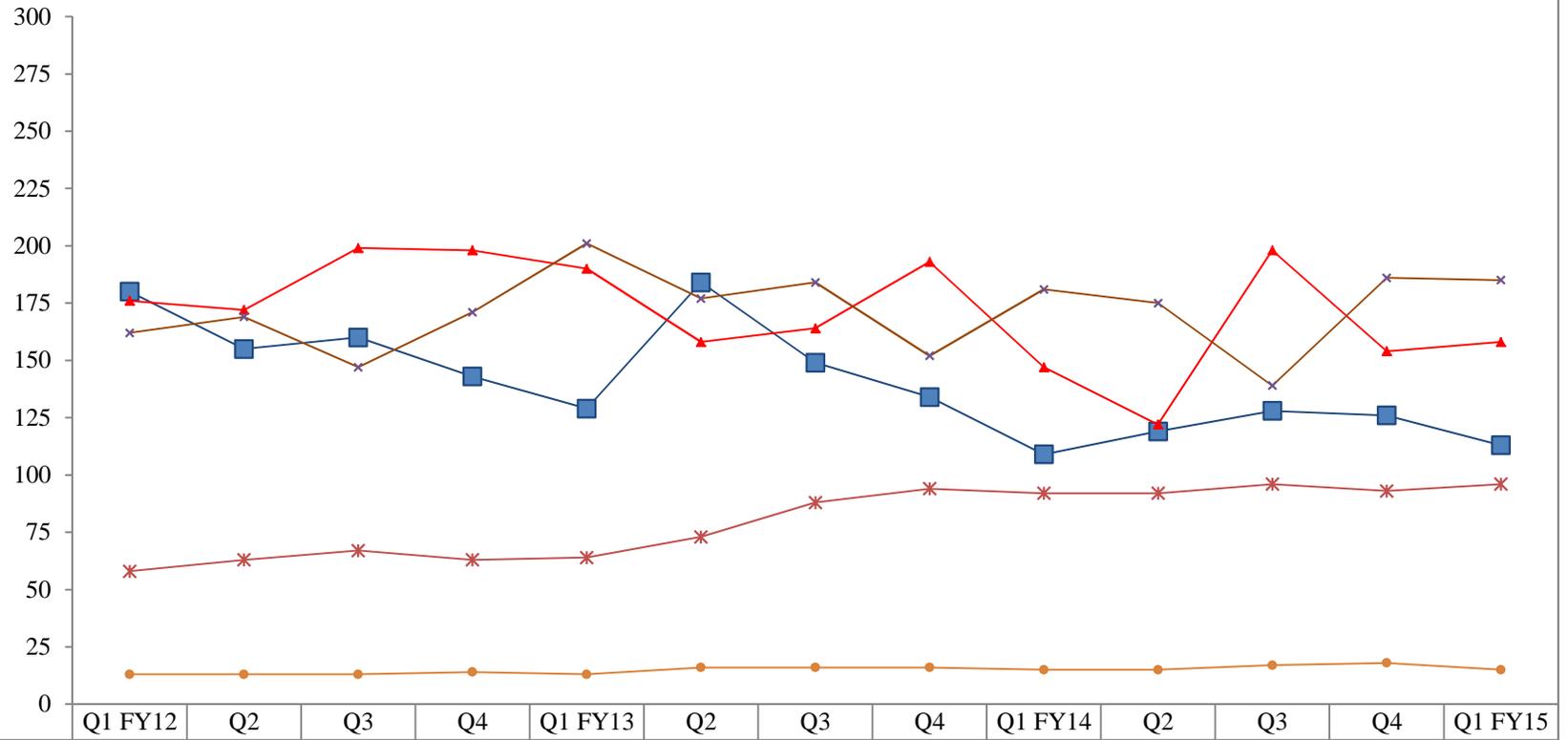
**AM - 1 Average Length of Stay at Discharge
North Texas State Hospital**

Average Length of Stay for Admitted and Discharged During Prior 12 Months



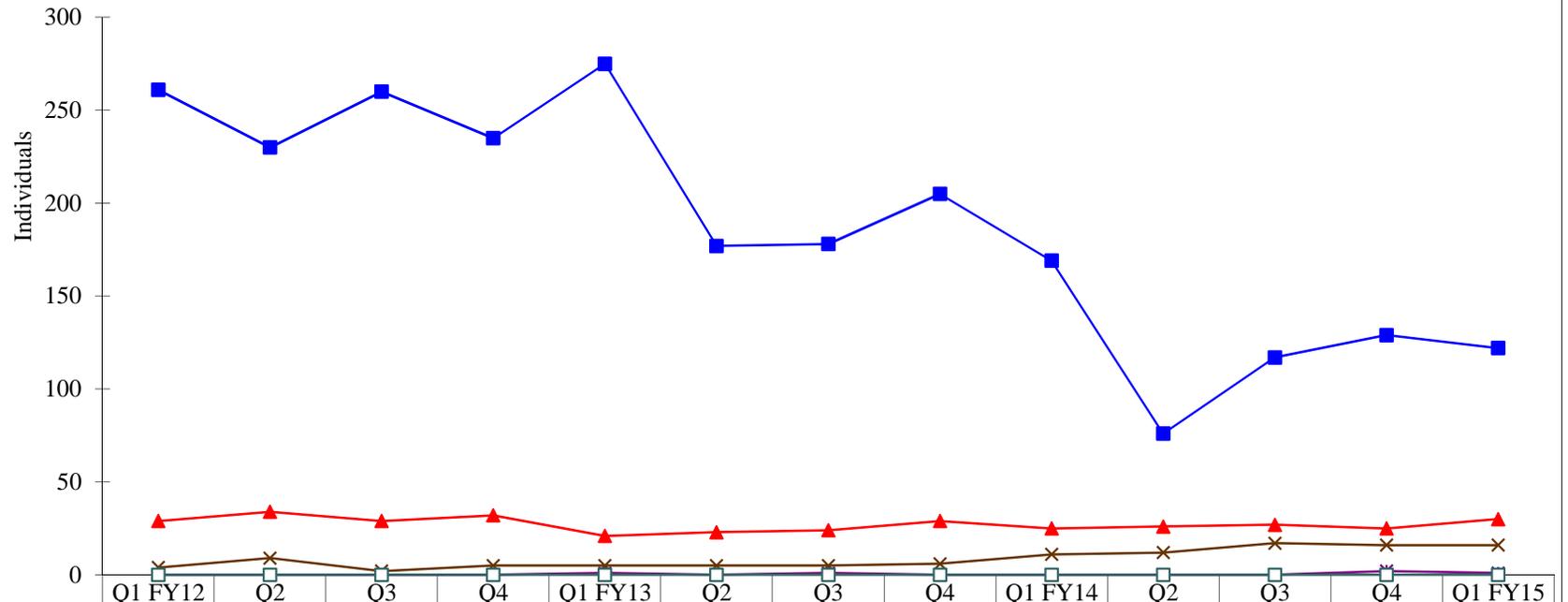
**AM - 1 Average Length of Stay at Discharge
North Texas State Hospital**

Average Length of Stay for All Residents



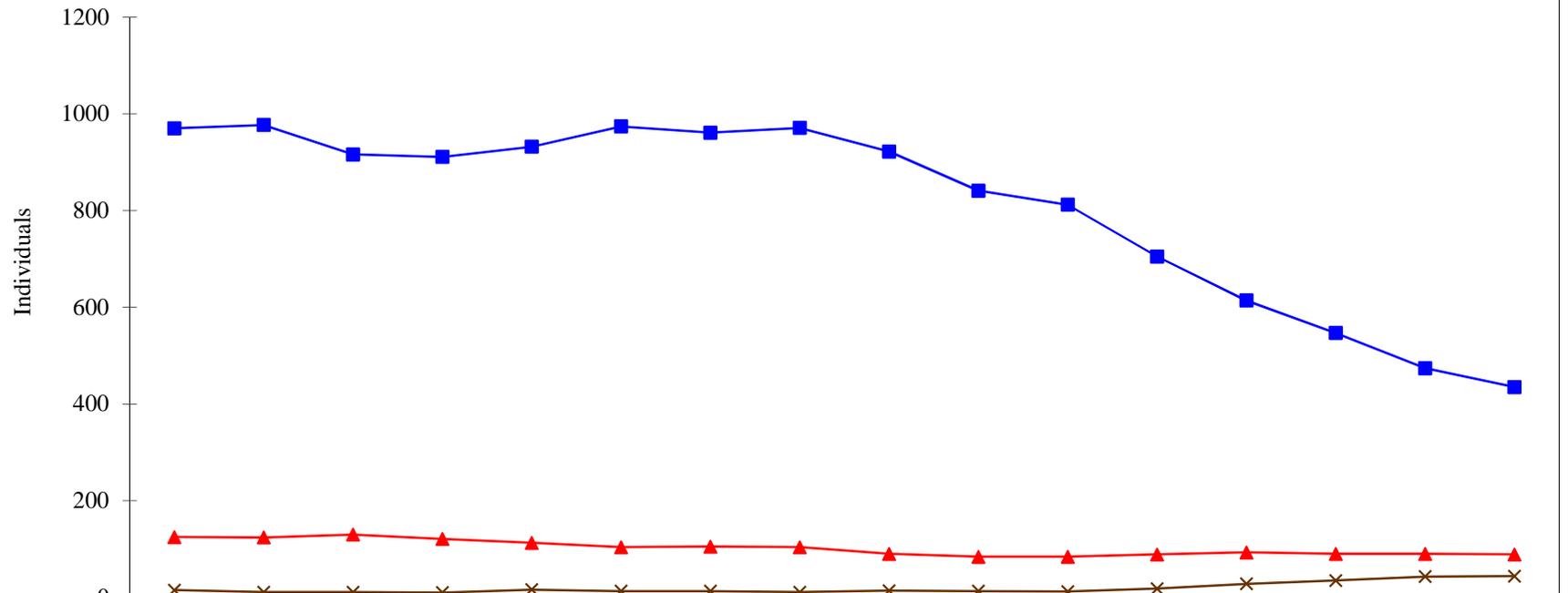
**AM - 1 Average Length of Stay at Discharge
Rio Grande State Center**

Average Length of Stay at Discharge by Category



**AM - 1 Average Length of Stay at Discharge
Rio Grande State Center**

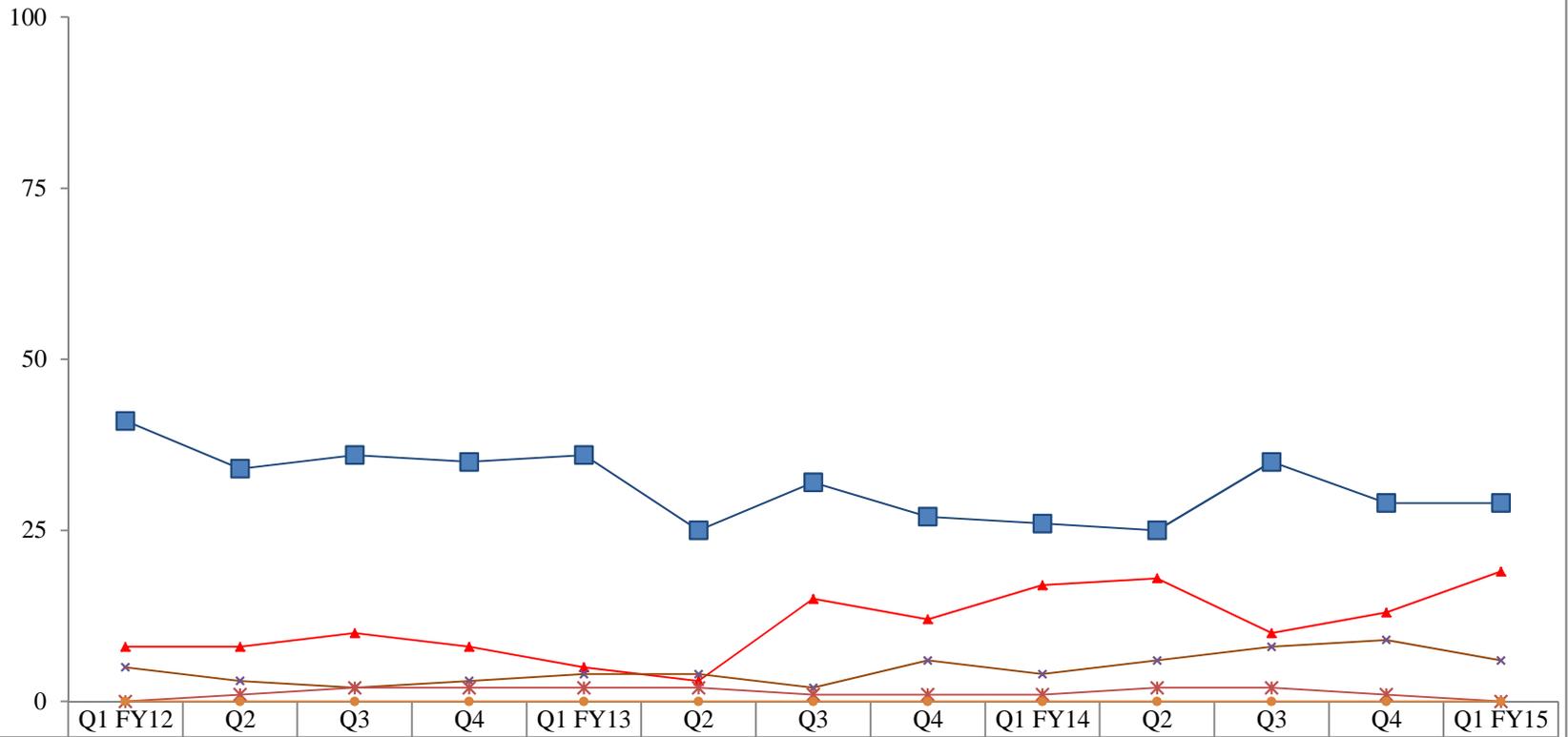
Average Length of Stay for Admitted and Discharged During Prior 12 Months



| | 3/10-2/11 | 6/10-5/11 | 9/10-8/11 | 12/10-11/11 | 3/11-2/12 | 6/11-5/12 | 9/11-8/12 | 12/11-11/12 | 3/12-2/13 | 6/12-5/13 | 9/12-8/13 | 12/12-11/13 | 3/13-2/14 | 6/13-5/14 | 9/13-8/14 | 12/13-11/14 |
|-------------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|
| Average LOS | 15 | 15 | 16 | 15 | 16 | 15 | 15 | 14 | 15 | 15 | 14 | 16 | 19 | 21 | 24 | 24 |
| ■ 30 Days or Less | 970 | 977 | 916 | 911 | 932 | 974 | 961 | 971 | 922 | 841 | 812 | 705 | 614 | 547 | 474 | 435 |
| ▲ 31-90 Days | 125 | 124 | 130 | 121 | 113 | 104 | 105 | 104 | 90 | 84 | 84 | 89 | 93 | 90 | 90 | 89 |
| × 91-365 Days | 15 | 11 | 11 | 10 | 16 | 13 | 13 | 11 | 14 | 13 | 12 | 18 | 28 | 35 | 43 | 44 |

**AM - 1 Average Length of Stay at Discharge
Rio Grande State Center**

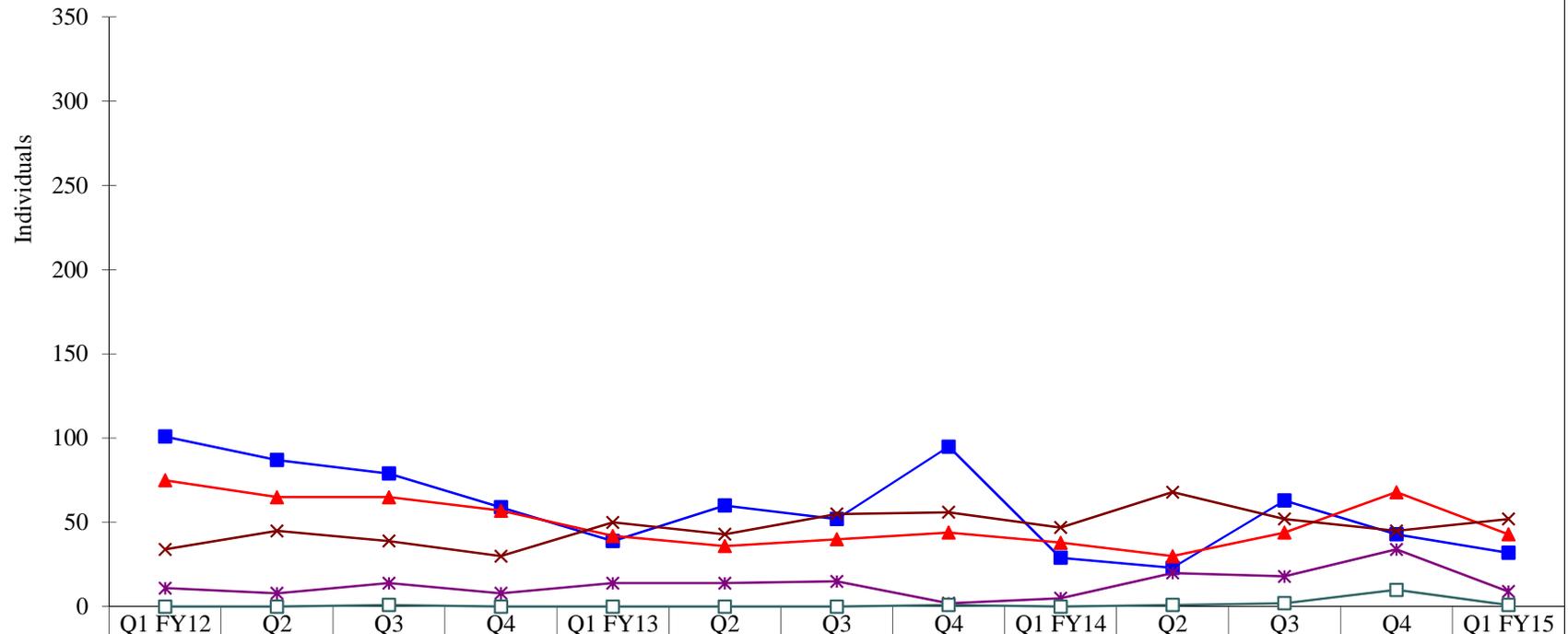
Average Length of Stay for All Residents



| | Q1 FY12 | Q2 | Q3 | Q4 | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-----------------|---------|----|----|----|---------|----|----|----|---------|----|----|----|---------|
| Average LOS | 36 | 36 | 45 | 53 | 45 | 66 | 41 | 59 | 63 | 72 | 71 | 63 | 46 |
| 30 Days or Less | 41 | 34 | 36 | 35 | 36 | 25 | 32 | 27 | 26 | 25 | 35 | 29 | 29 |
| 31 - 90 Days | 8 | 8 | 10 | 8 | 5 | 3 | 15 | 12 | 17 | 18 | 10 | 13 | 19 |
| 91 - 365 Days | 5 | 3 | 2 | 3 | 4 | 4 | 2 | 6 | 4 | 6 | 8 | 9 | 6 |
| 1 - 5 Years | 0 | 1 | 2 | 2 | 2 | 2 | 1 | 1 | 1 | 2 | 2 | 1 | 0 |
| Over 5 Years | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

**AM - 1 Average Length of Stay at Discharge
Rusk State Hospital**

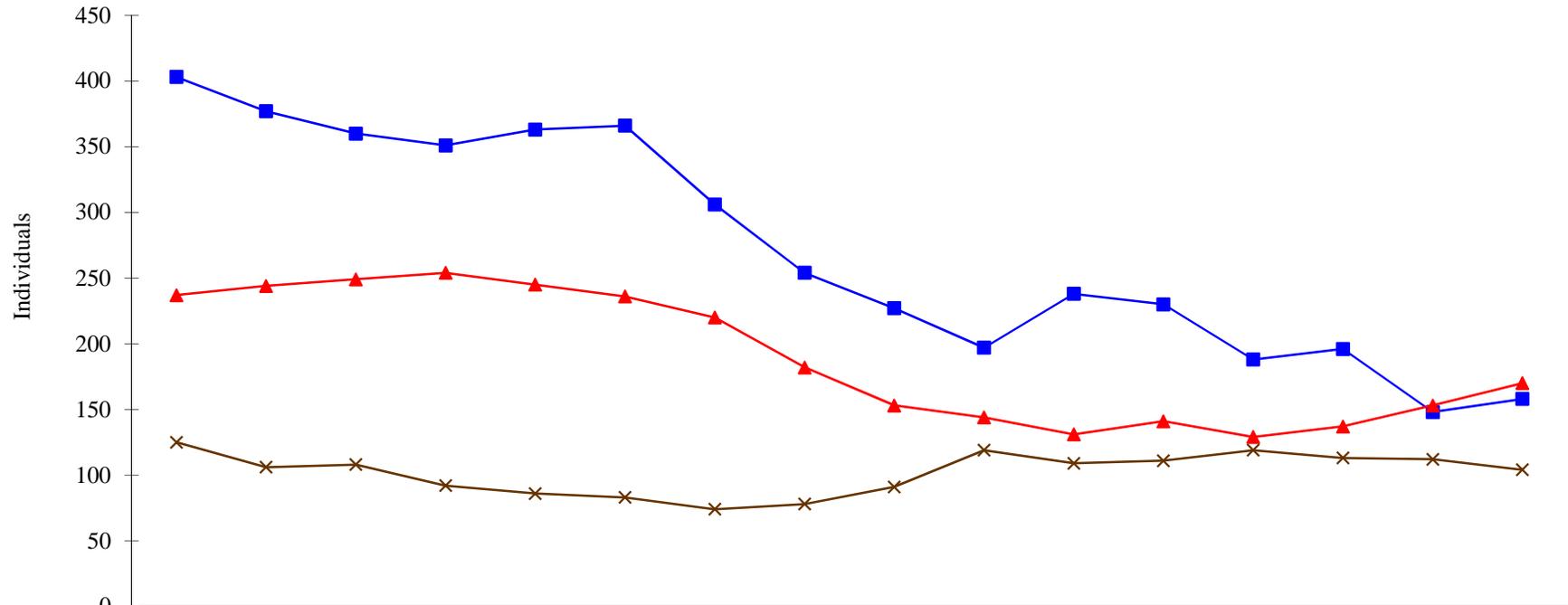
Length of Stay at Discharge by Category



| | Q1 FY12 | Q2 | Q3 | Q4 | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|----|-----|----|---------|-----|-----|----|---------|-----|-----|-----|---------|
| Average LOS | 88 | 95 | 134 | 97 | 151 | 131 | 147 | 89 | 118 | 264 | 163 | 320 | 138 |
| ■ 30 Days or Less | 101 | 87 | 79 | 59 | 39 | 60 | 52 | 95 | 29 | 23 | 63 | 43 | 32 |
| ▲ 31 - 90 Days | 75 | 65 | 65 | 57 | 42 | 36 | 40 | 44 | 38 | 30 | 44 | 68 | 43 |
| × 91 - 365 Days | 34 | 45 | 39 | 30 | 50 | 43 | 55 | 56 | 47 | 68 | 52 | 45 | 52 |
| * 1 - 5 Years | 11 | 8 | 14 | 8 | 14 | 14 | 15 | 2 | 5 | 20 | 18 | 34 | 9 |
| □ Over 5 Years | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 2 | 10 | 1 |

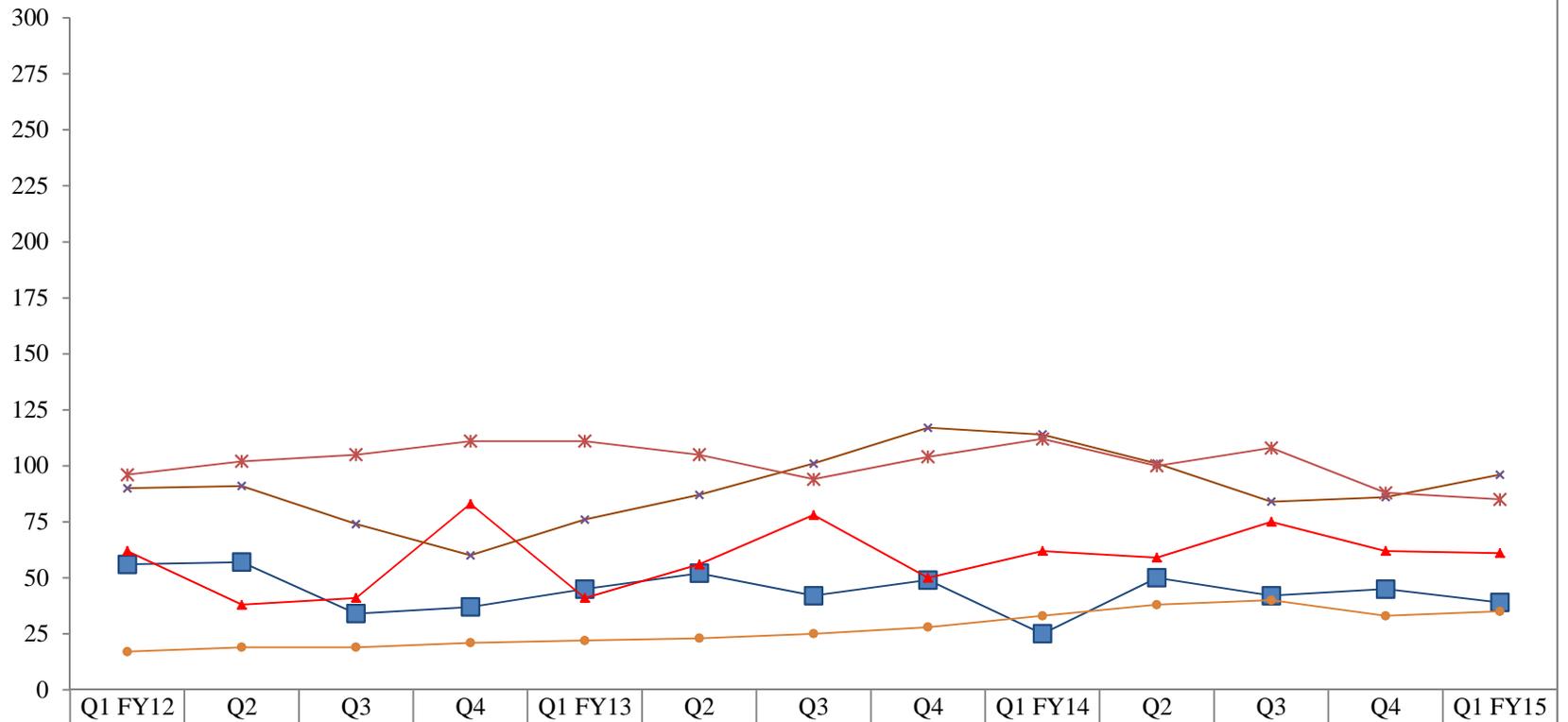
**AM - 1 Average Length of Stay at Discharge
Rusk State Hospital**

Average Length of Stay for Admitted and Discharged During Prior 12 Months



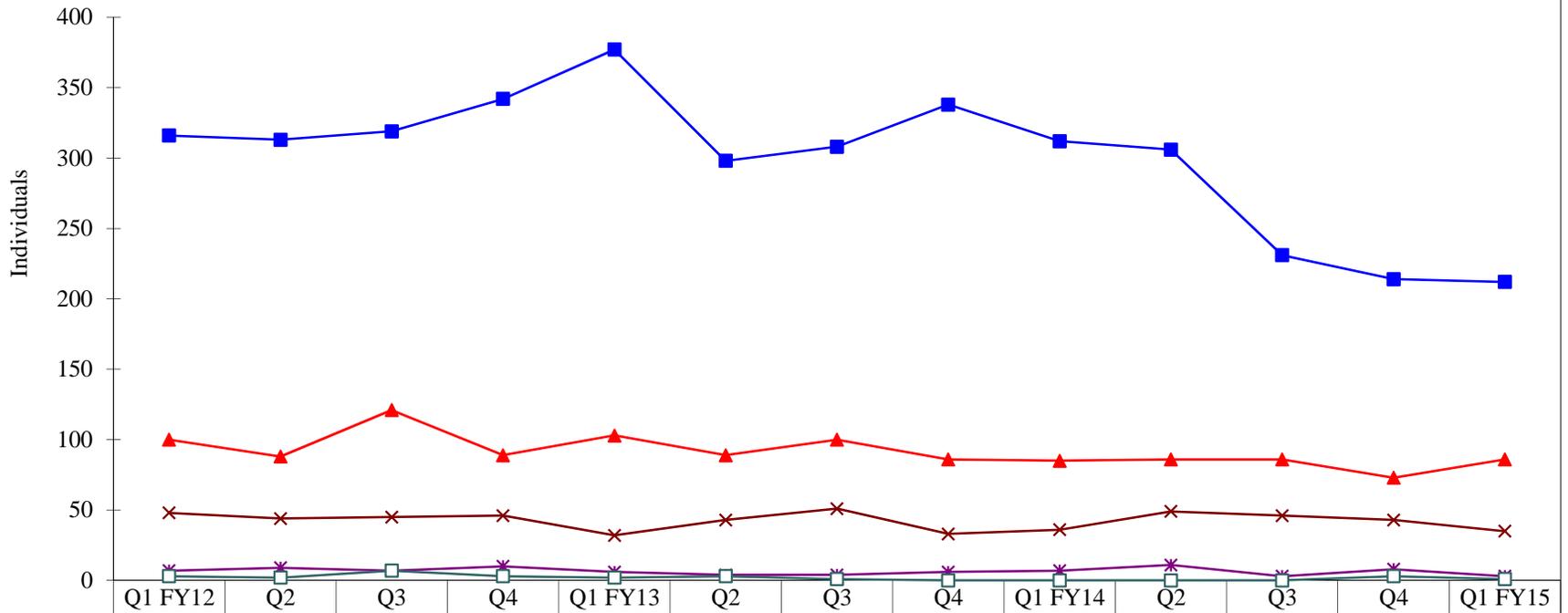
**AM - 1 Average Length of Stay at Discharge
Rusk State Hospital**

Average Length of Stay for All Residents



**AM - 1 Average Length of Stay at Discharge
San Antonio State Hospital**

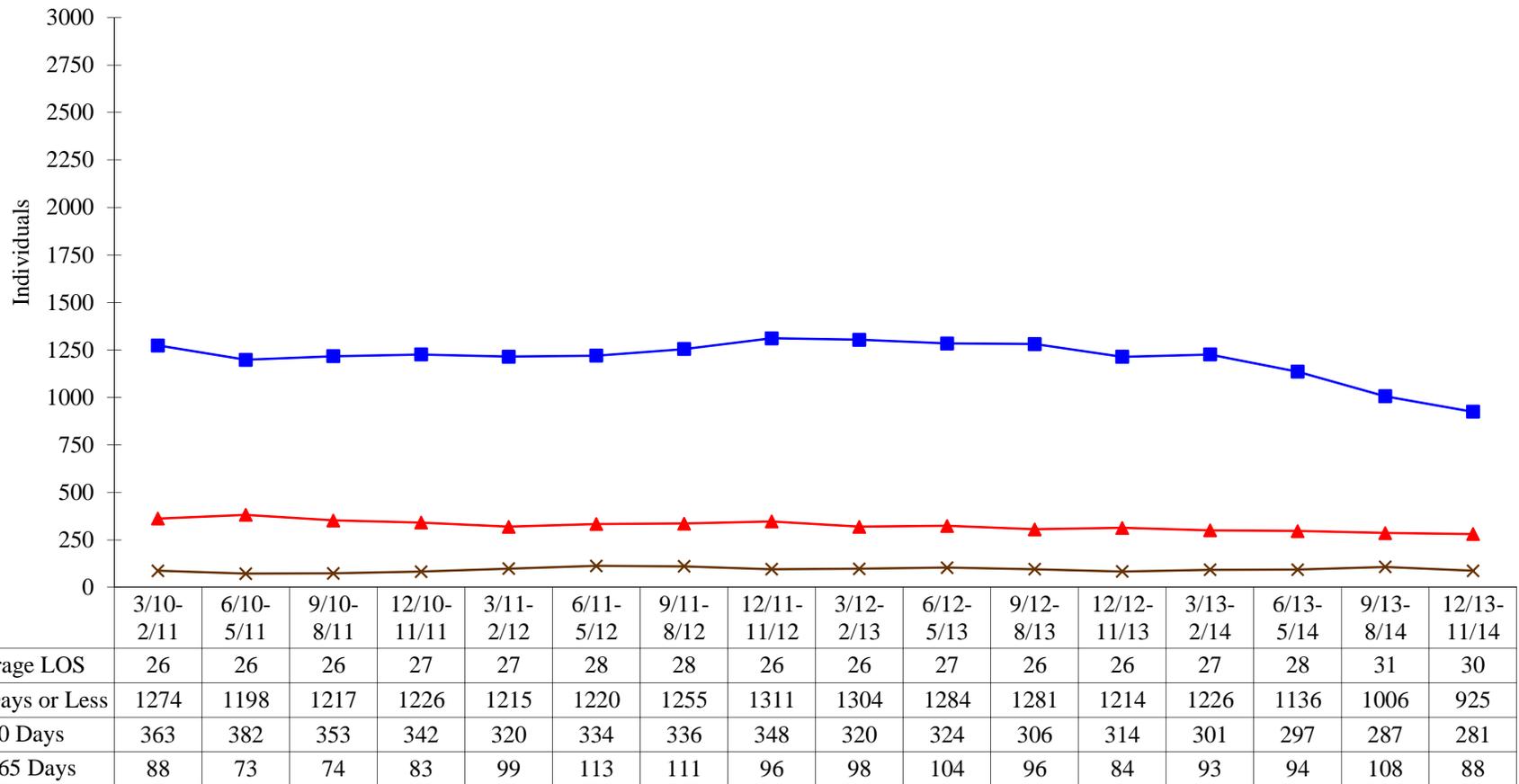
Length of Stay at Discharge by Category



| | Q1 FY12 | Q2 | Q3 | Q4 | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|-----|-----|-----|---------|-----|-----|-----|---------|-----|-----|-----|---------|
| Average LOS | 61 | 58 | 88 | 67 | 64 | 54 | 54 | 42 | 49 | 50 | 47 | 84 | 51 |
| ■ 30 Days or Less | 316 | 313 | 319 | 342 | 377 | 298 | 308 | 338 | 312 | 306 | 231 | 214 | 212 |
| ▲ 31 - 90 Days | 100 | 88 | 121 | 89 | 103 | 89 | 100 | 86 | 85 | 86 | 86 | 73 | 86 |
| × 91 - 365 Days | 48 | 44 | 45 | 46 | 32 | 43 | 51 | 33 | 36 | 49 | 46 | 43 | 35 |
| * 1 - 5 Years | 7 | 9 | 7 | 10 | 6 | 4 | 4 | 6 | 7 | 11 | 3 | 8 | 3 |
| □ Over 5 Years | 3 | 2 | 7 | 3 | 2 | 3 | 1 | 0 | 0 | 0 | 0 | 3 | 1 |

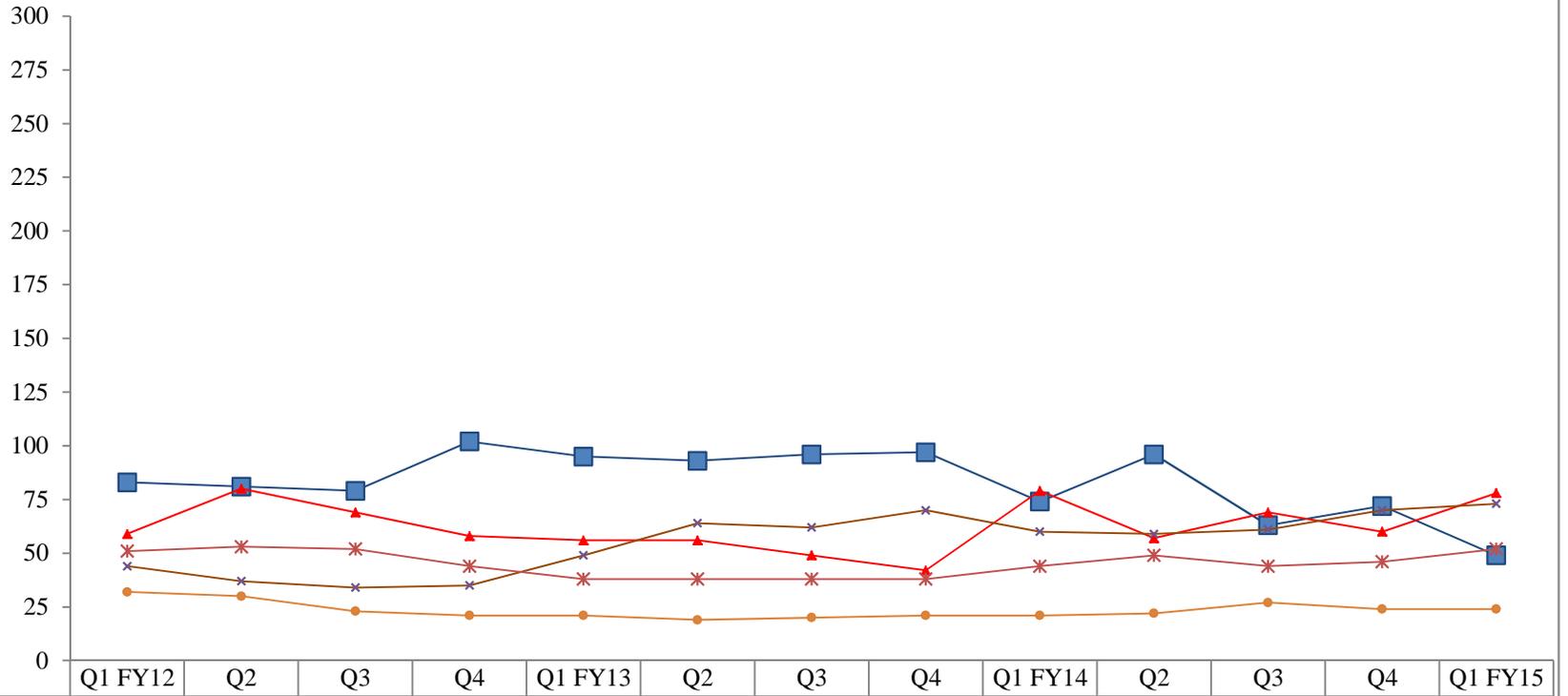
**AM - 1 Average Length of Stay at Discharge
San Antonio State Hospital**

Average Length of Stay for Admitted and Discharged During Prior 12 Months



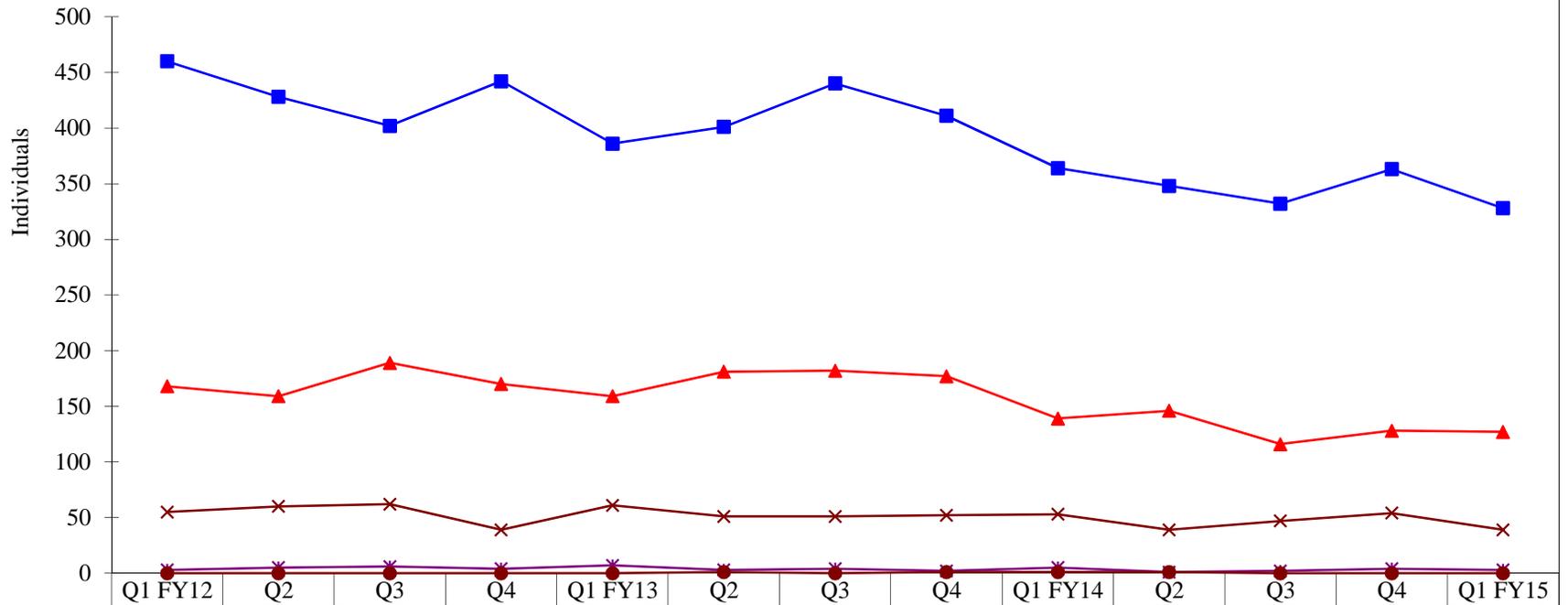
**AM - 1 Average Length of Stay at Discharge
San Antonio State Hospital**

Average Length of Stay for All Residents



**AM - 1 Average Length of Stay at Discharge
Terrell State Hospital**

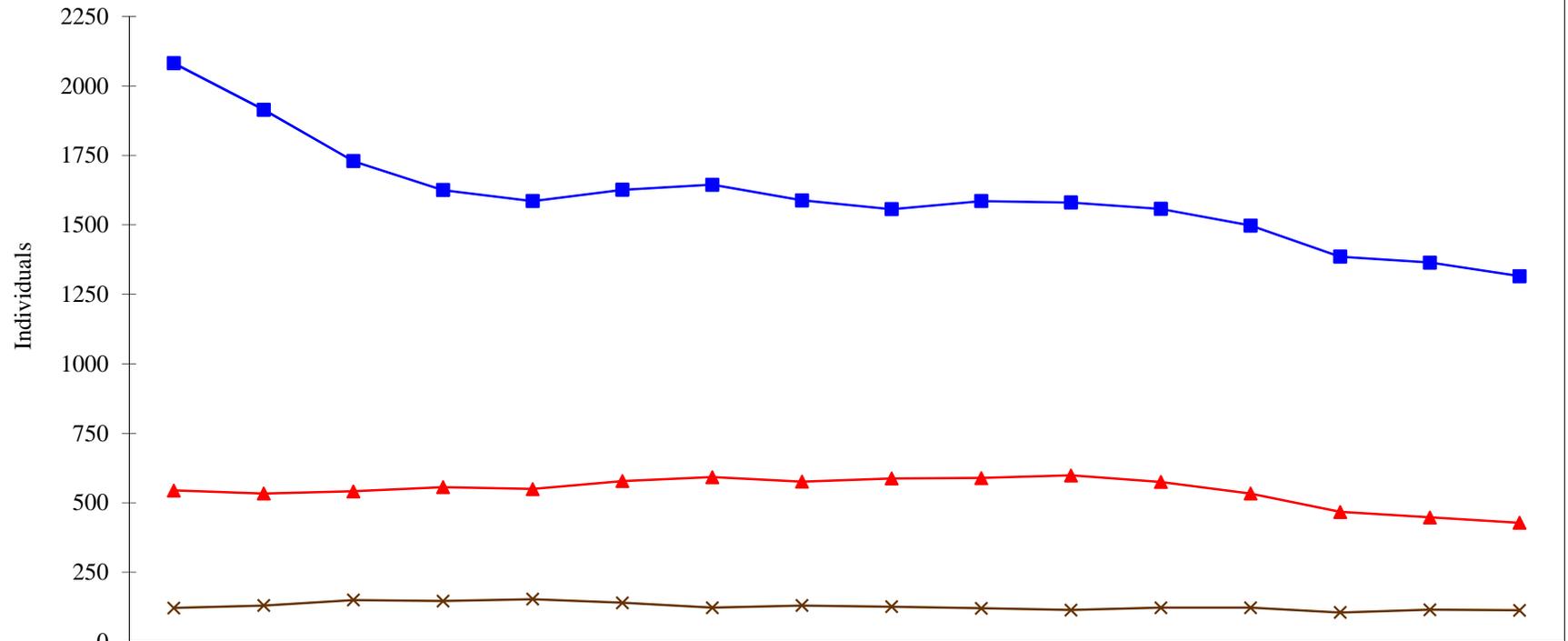
Average Length of Stay at Discharge by Category



| | Q1 FY12 | Q2 | Q3 | Q4 | Q1 FY13 | Q2 | Q3 | Q4 | Q1 FY14 | Q2 | Q3 | Q4 | Q1 FY15 |
|-------------------|---------|-----|-----|-----|---------|-----|-----|-----|---------|-----|-----|-----|---------|
| Average LOS | 37 | 42 | 44 | 37 | 49 | 42 | 38 | 46 | 50 | 42 | 38 | 41 | 38 |
| ■ 30 Days or Less | 460 | 428 | 402 | 442 | 386 | 401 | 440 | 411 | 364 | 348 | 332 | 363 | 328 |
| ▲ 31 - 90 Days | 168 | 159 | 189 | 170 | 159 | 181 | 182 | 177 | 139 | 146 | 116 | 128 | 127 |
| × 91 - 365 Days | 55 | 60 | 62 | 39 | 61 | 51 | 51 | 52 | 53 | 39 | 47 | 54 | 39 |
| * 1 - 5 Years | 3 | 5 | 6 | 4 | 7 | 3 | 4 | 2 | 5 | 1 | 2 | 4 | 3 |
| ● Over 5 Years | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 1 | 1 | 0 | 0 | 0 |

**AM - 1 Average Length of Stay at Discharge
Terrell State Hospital**

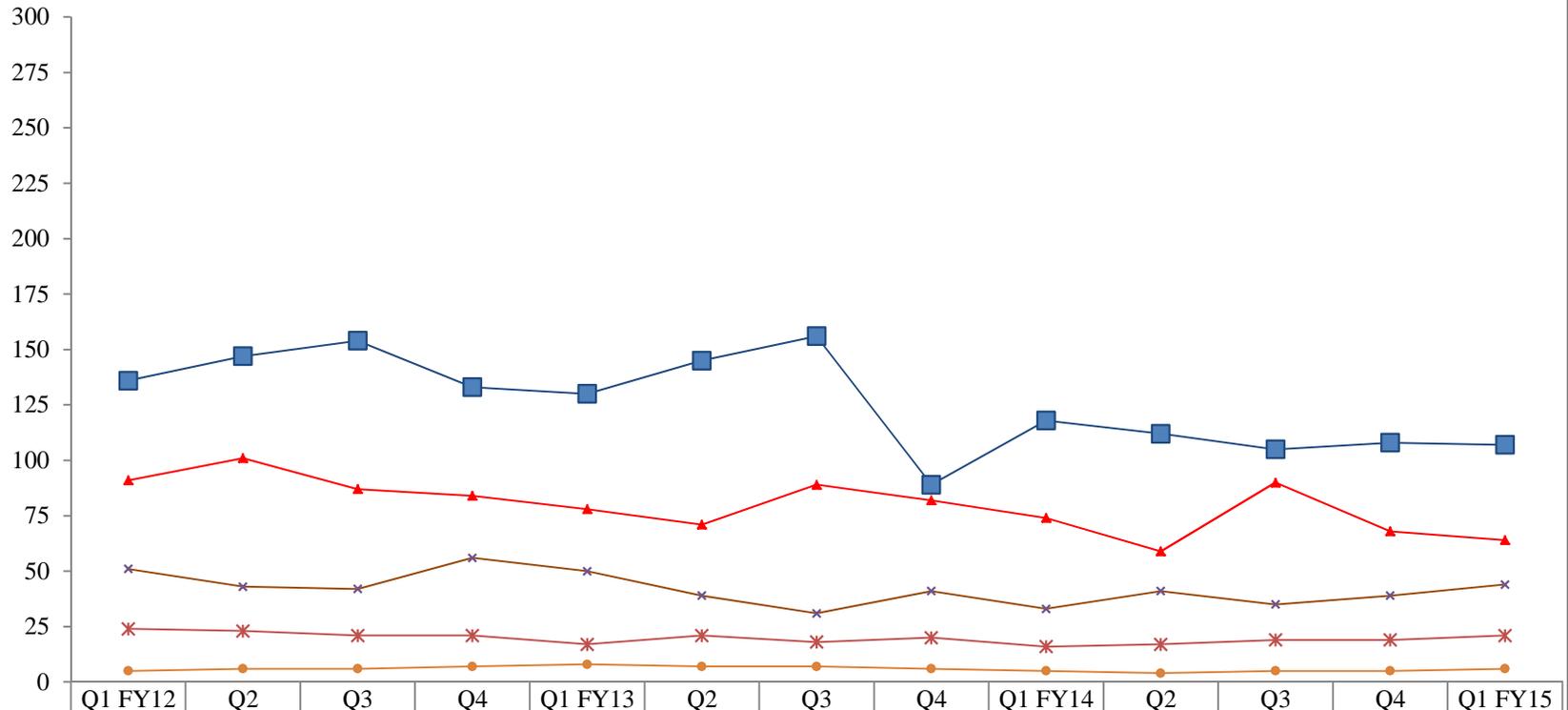
Average Length of Stay for Admitted and Discharged During Prior 12 Months



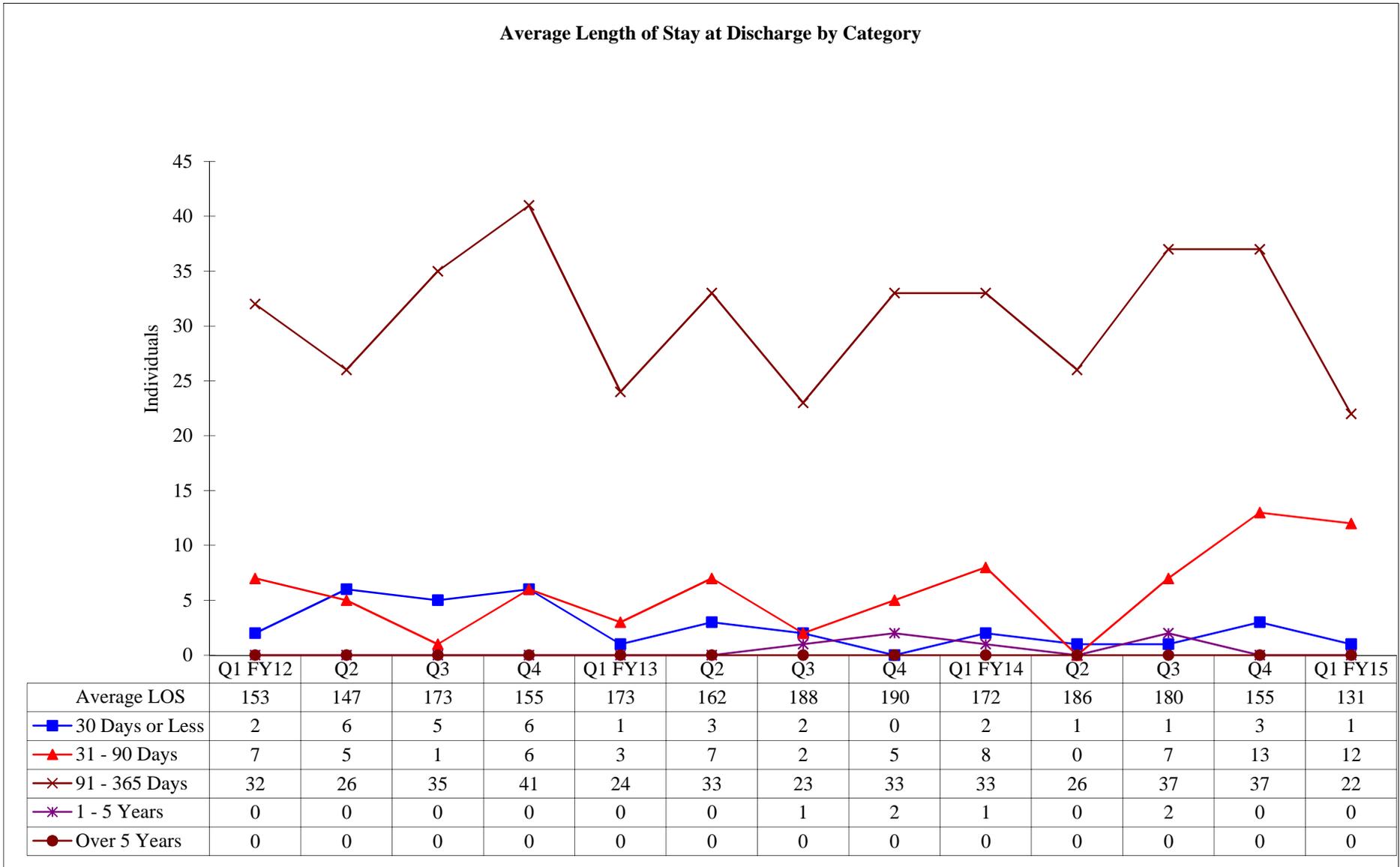
| | 3/10-2/11 | 6/10-5/11 | 9/10-8/11 | 12/10-11/11 | 3/11-2/12 | 6/11-5/12 | 9/11-8/12 | 12/11-11/12 | 3/12-2/13 | 6/12-5/13 | 9/12-8/13 | 12/12-11/13 | 3/13-2/14 | 6/13-5/14 | 9/13-8/14 | 12/13-11/14 |
|-------------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-------------|
| Average LOS | 26 | 28 | 30 | 31 | 31 | 31 | 30 | 32 | 31 | 31 | 30 | 30 | 30 | 30 | 30 | 30 |
| ■ 30 Days or Less | 2082 | 1915 | 1730 | 1626 | 1586 | 1627 | 1645 | 1589 | 1557 | 1586 | 1581 | 1558 | 1498 | 1386 | 1365 | 1316 |
| ▲ 31-90 Days | 545 | 534 | 542 | 557 | 550 | 579 | 593 | 577 | 588 | 590 | 599 | 576 | 534 | 468 | 448 | 429 |
| × 91-365 Days | 122 | 131 | 151 | 147 | 154 | 141 | 123 | 131 | 127 | 121 | 115 | 123 | 123 | 106 | 116 | 114 |

**AM - 1 Average Length of Stay at Discharge
Terrell State Hospital**

Average Length of Stay for All Residents

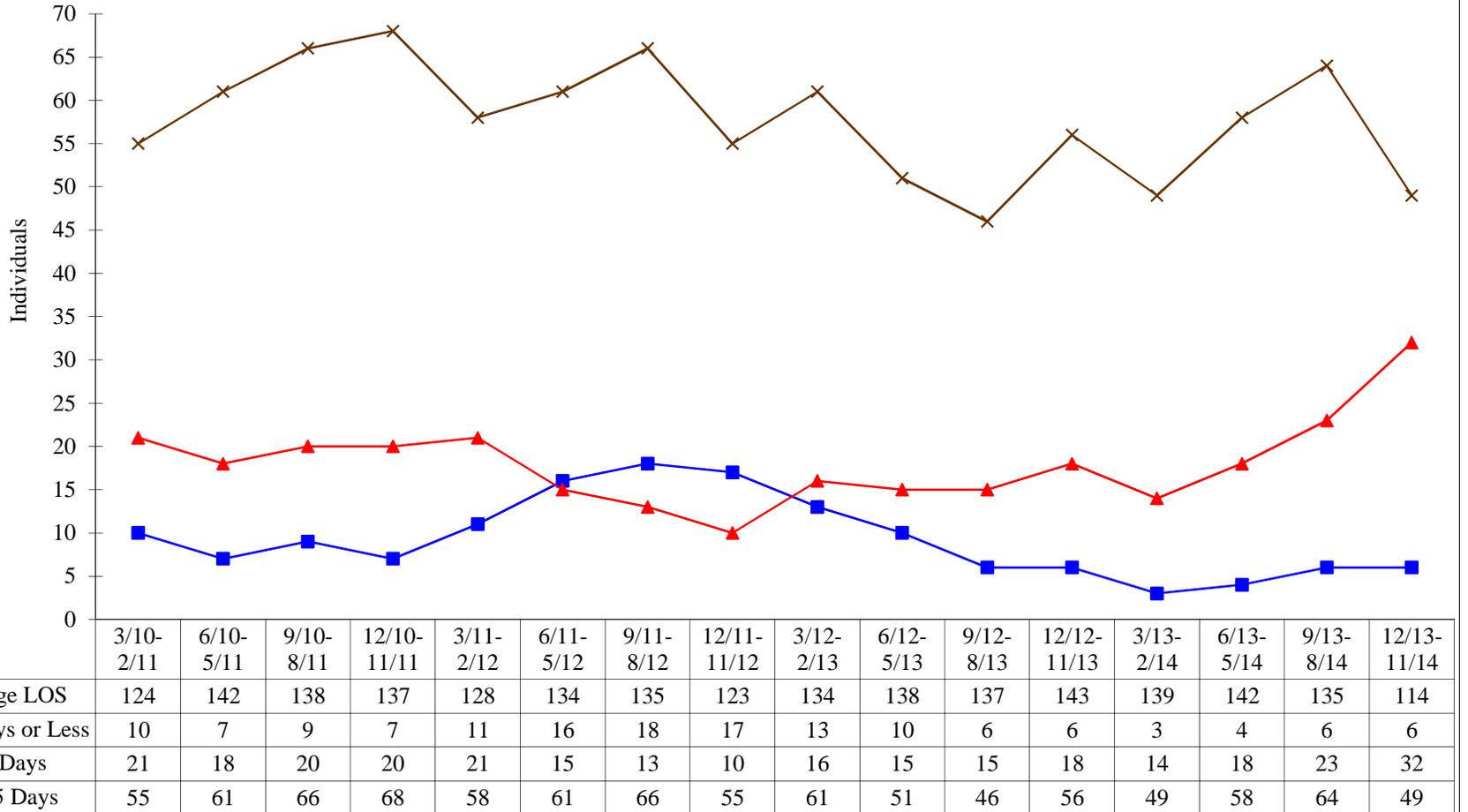


**AM - 1 Average Length of Stay at Discharge
Waco Center for Youth**



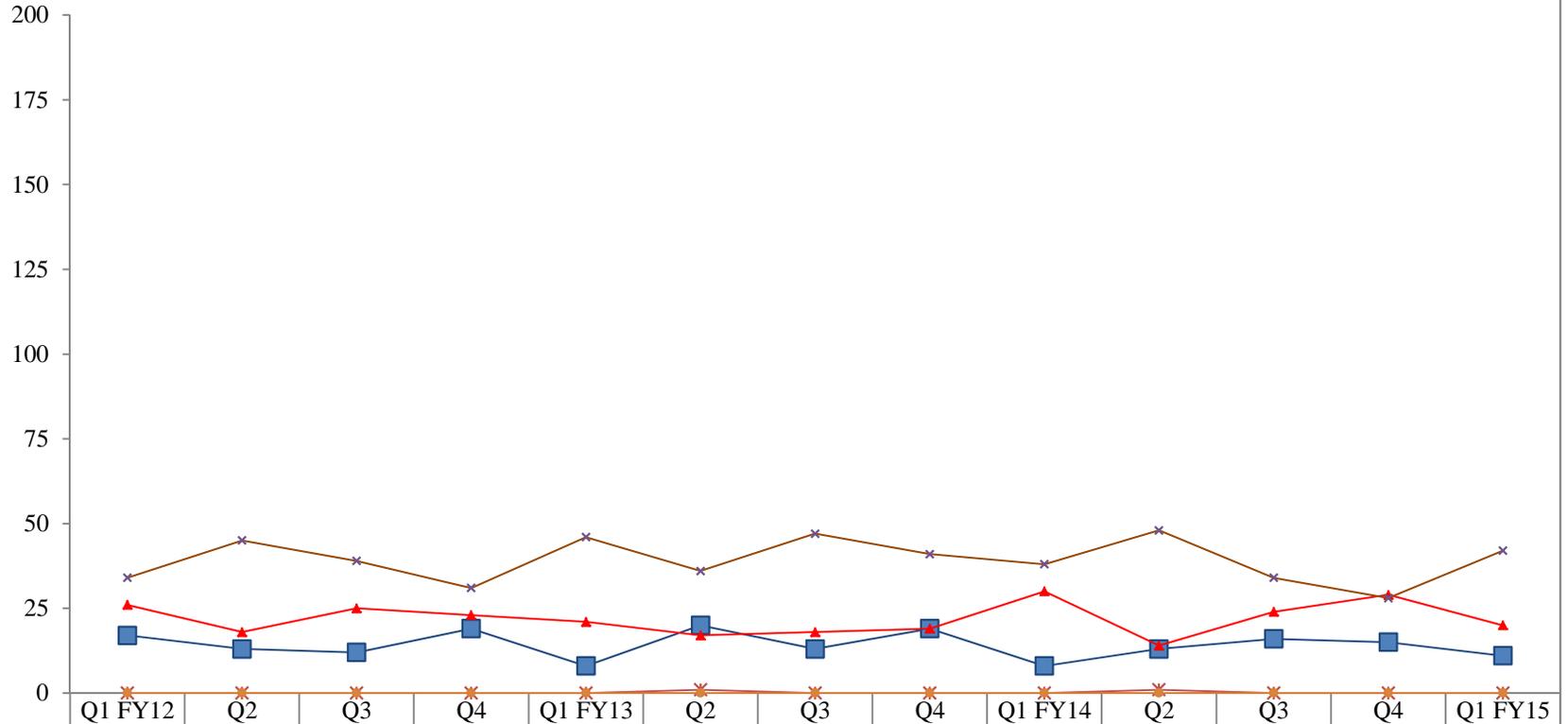
**AM - 1 Average Length of Stay at Discharge
Waco Center for Youth**

Average Length of Stay for Admitted and Discharged During Prior 12 Months



**AM - 1 Average Length of Stay at Discharge
Waco Center for Youth**

Average Length of Stay for All Residents



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Access Measure

AM-2

Measure: Percent of Admissions Discharged in 15 Days Weekly, by Week of Admission.

Timeframe: Weekly

Measure: Calculate Percent of Forensic/Non Forensic Discharges Returned to the Community; 7 days or less; 8 to 30 days; 31 to 90 days; and greater than 90 days.

Timeframe: Quarterly

Definition

Percent of forensic/non forensic discharges returned to the community will be calculated on a quarterly basis for: 7 days or less; 8 to 30 days; 31 to 90 days; and greater than 90 days. CARE Report SR4206 discharge data does not include patients transferred (discharged to another state hospital) to other state hospitals or DMA's (against medical advice).

Data Source

ODS AD Hoc Report (MyAvatar)

CARE Report SR4206 (Returned to Community Within Days/Percentages by Forensic Discharges and Non-Forensic Discharges)

Data Display and Chart Description

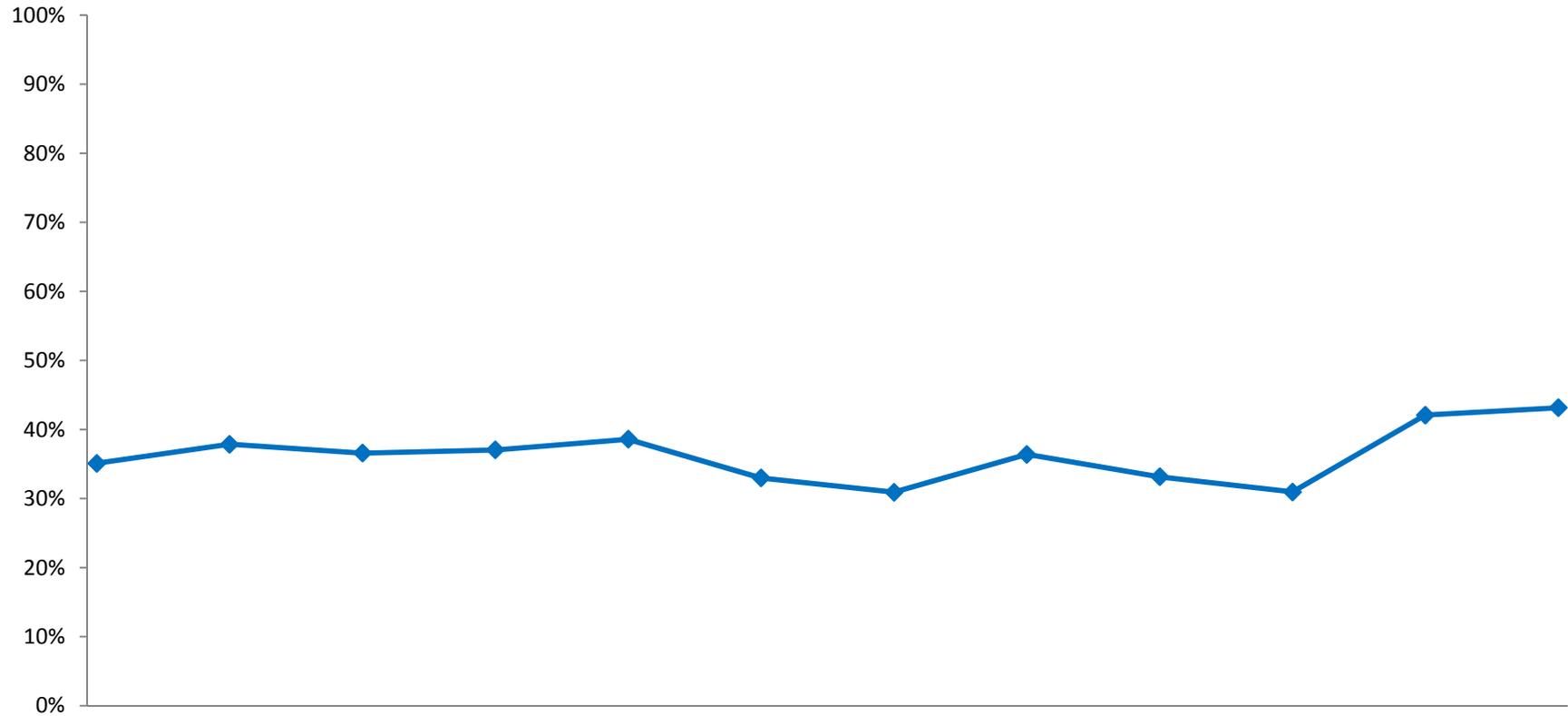
Chart with quarterly data points of percent of forensic/non forensic discharges returned to the community for individual state hospitals and system-wide. Table shows total discharges for the quarter for individual state hospitals and system-wide. Chart with weekly data points showing percent of admissions discharged in 15 days by week of admission for individual state hospitals and system-wide.

Purpose

Measure percent of admissions discharged in 15 days.

**AM-2 Percent of Admissions Discharged in 15 Days
All State MH Hospitals**

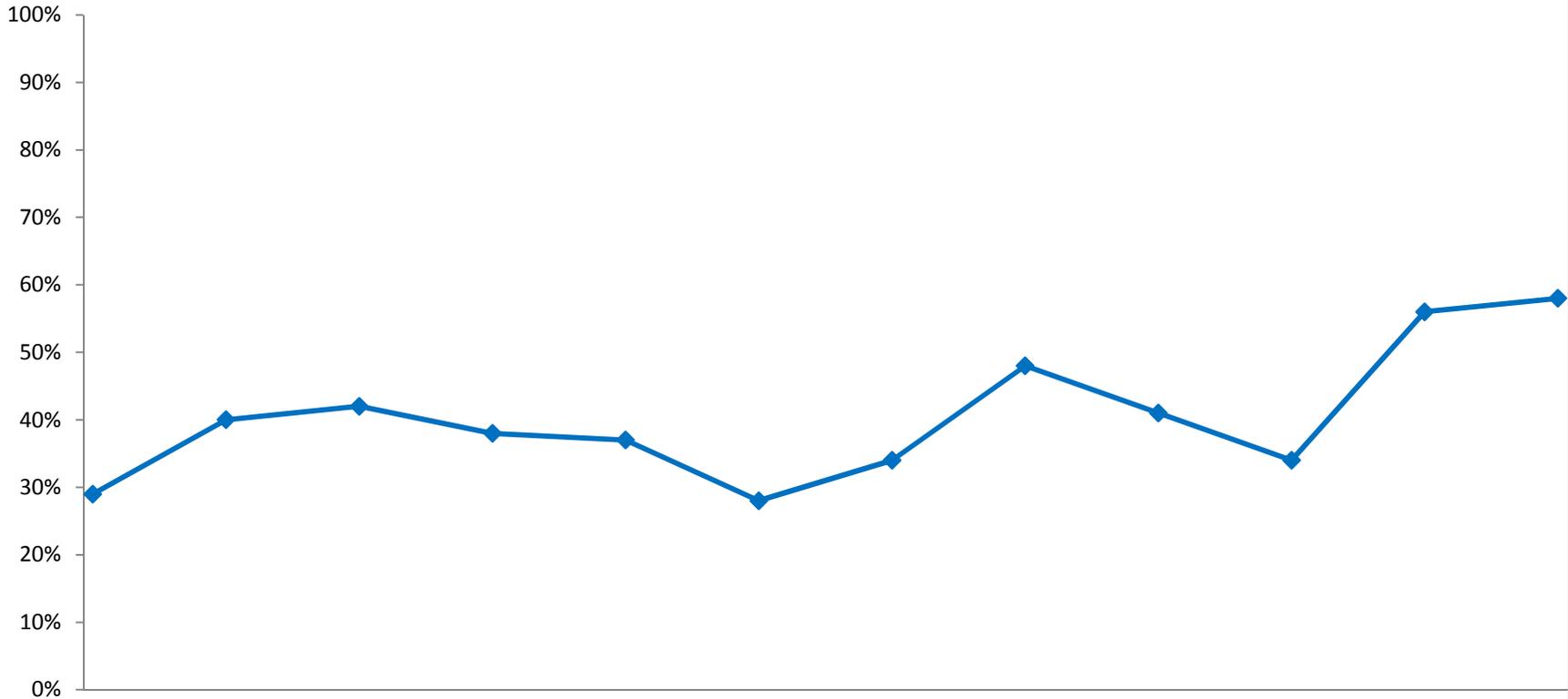
Percent of Admissions Discharged in 15 Days by Week of Admission



| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 35% | 38% | 37% | 37% | 39% | 33% | 31% | 36% | 33% | 31% | 42% | 43% |
| new admits | 66 | 78 | 75 | 73 | 83 | 66 | 60 | 71 | 62 | 61 | 72 | 60 |
| all admits | 188 | 206 | 205 | 197 | 215 | 200 | 194 | 195 | 187 | 197 | 171 | 139 |

AM-2 Percent of Admissions Discharged in 15 Days
Austin State Hospital

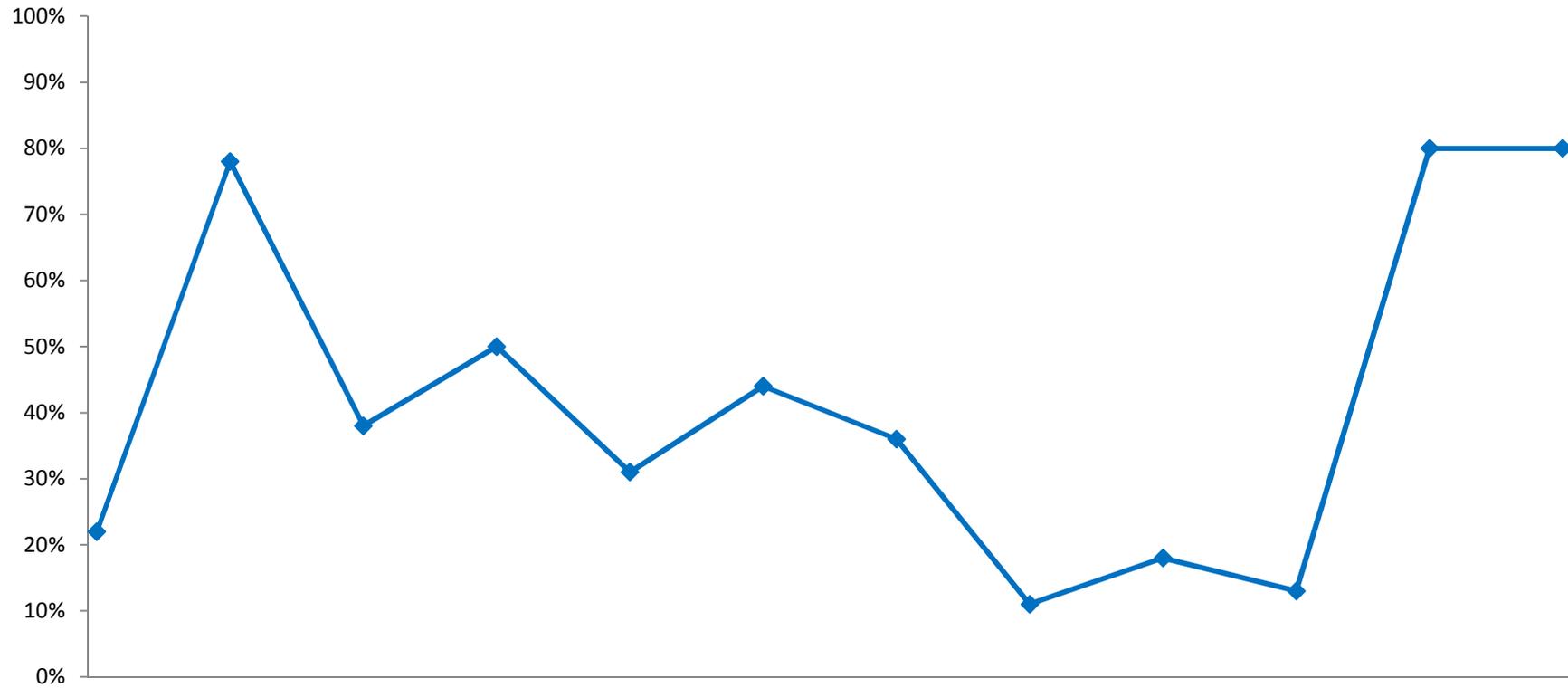
Percent of Admissions Discharged in 15 Days by Week of Admission



| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 29% | 40% | 42% | 38% | 37% | 28% | 34% | 48% | 41% | 34% | 56% | 58% |
| new admits | 12 | 14 | 16 | 12 | 13 | 10 | 13 | 14 | 11 | 12 | 22 | 21 |
| all admits | 41 | 35 | 38 | 32 | 35 | 36 | 38 | 29 | 27 | 35 | 39 | 36 |

**AM-2 Percent of Admissions Discharged in 15 Days
Big Spring State Hospital**

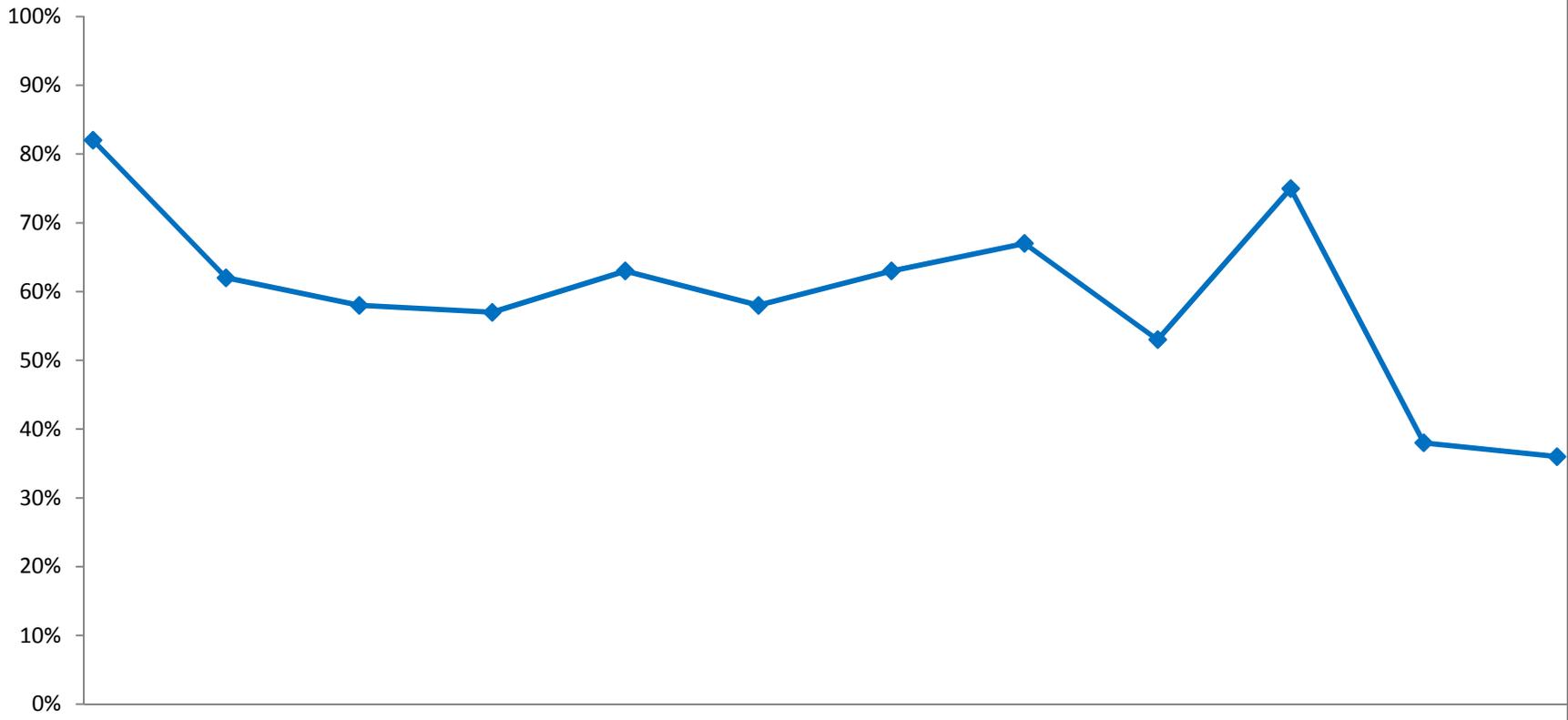
Percent of Admissions Discharged in 15 Days by Week of Admission



| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 22% | 78% | 38% | 50% | 31% | 44% | 36% | 11% | 18% | 13% | 80% | 80% |
| new admits | 2 | 7 | 3 | 8 | 5 | 7 | 4 | 2 | 2 | 2 | 4 | 4 |
| all admits | 9 | 9 | 8 | 16 | 16 | 16 | 11 | 18 | 11 | 16 | 5 | 5 |

AM-2 Percent of Admissions Discharged in 15 Days
El Paso Psychiatric Center

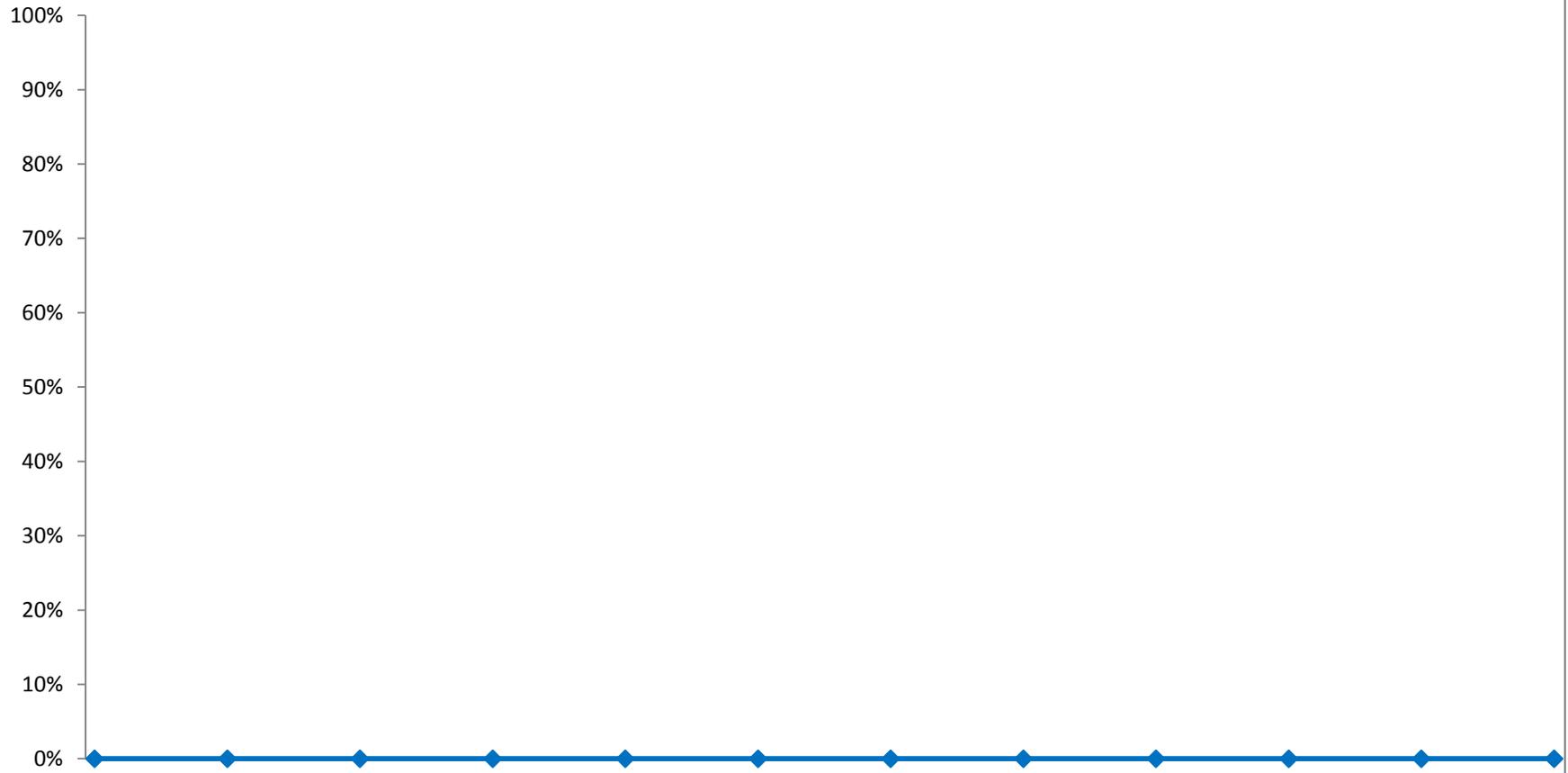
Percent of Admissions Discharged in 15 Days by Week of Admission



| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 82% | 62% | 58% | 57% | 63% | 58% | 63% | 67% | 53% | 75% | 38% | 36% |
| new admits | 9 | 13 | 11 | 12 | 10 | 11 | 10 | 10 | 8 | 15 | 6 | 5 |
| all admits | 11 | 21 | 19 | 21 | 16 | 19 | 16 | 15 | 15 | 20 | 16 | 14 |

**AM-2 Percent of Admissions Discharged in 15 Days
Kerrville State Hospital**

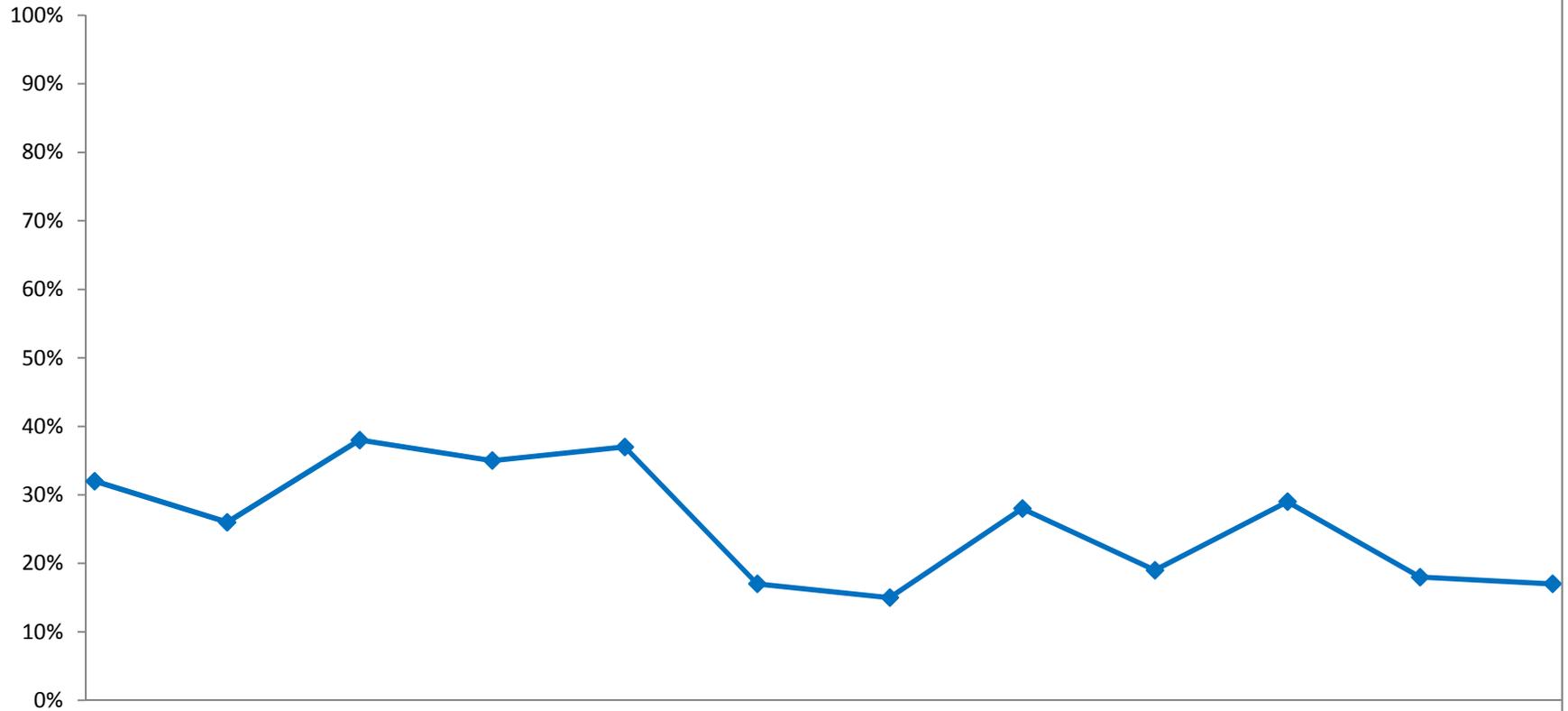
Percent of Admissions Discharged in 15 Days by Week of Admission



| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| new admits | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| all admits | 0 | 1 | 7 | 1 | 0 | 0 | 0 | 2 | 0 | 1 | 0 | 0 |

**AM-2 Percent of Admissions Discharged in 15 Days
North Texas State Hospital**

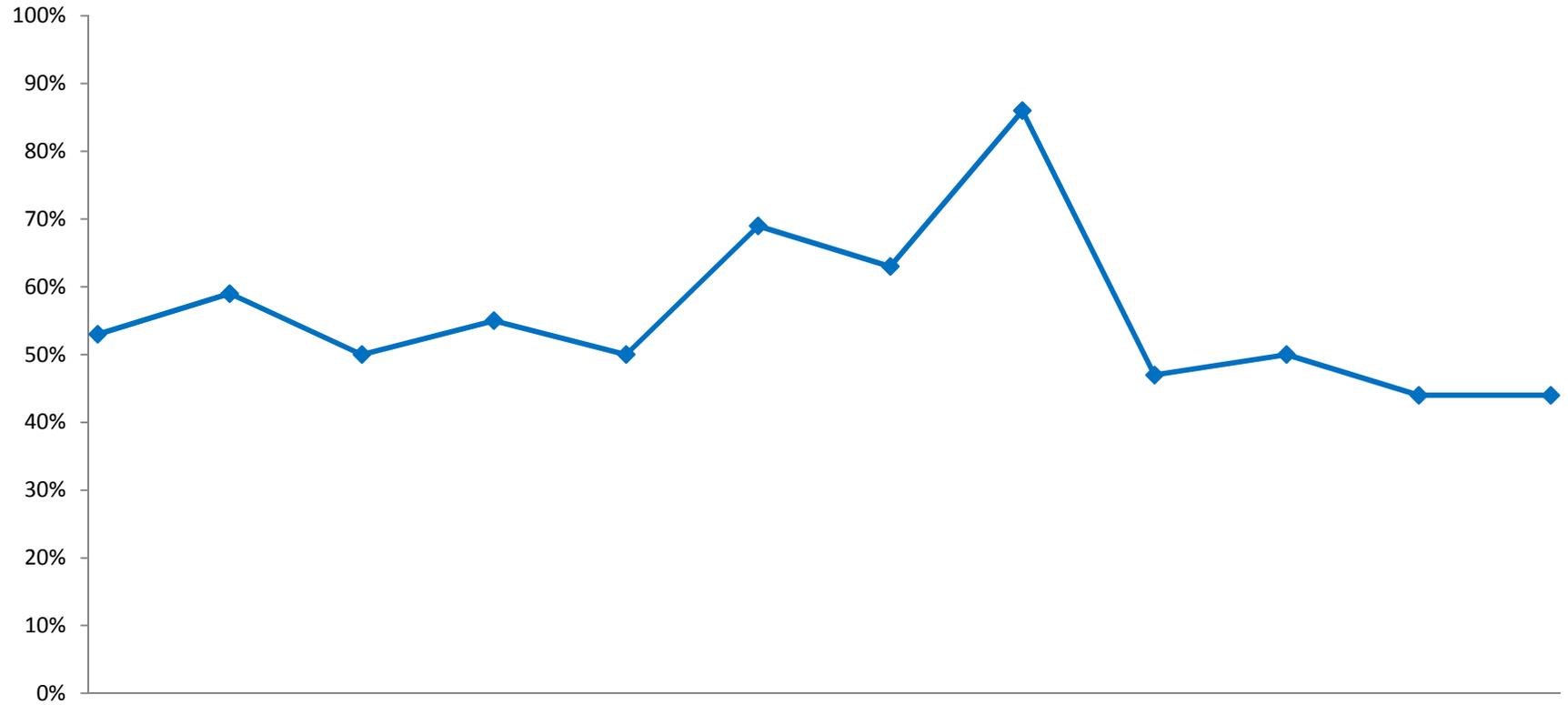
Percent of Admissions Discharged in 15 Days by Week of Admission



| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 32% | 26% | 38% | 35% | 37% | 17% | 15% | 28% | 19% | 29% | 18% | 17% |
| new admits | 12 | 10 | 8 | 13 | 17 | 6 | 5 | 11 | 7 | 12 | 6 | 4 |
| all admits | 37 | 38 | 21 | 37 | 46 | 35 | 33 | 40 | 37 | 42 | 33 | 24 |

**AM-2 Percent of Admissions Discharged in 15 Days
Rio Grande State Center**

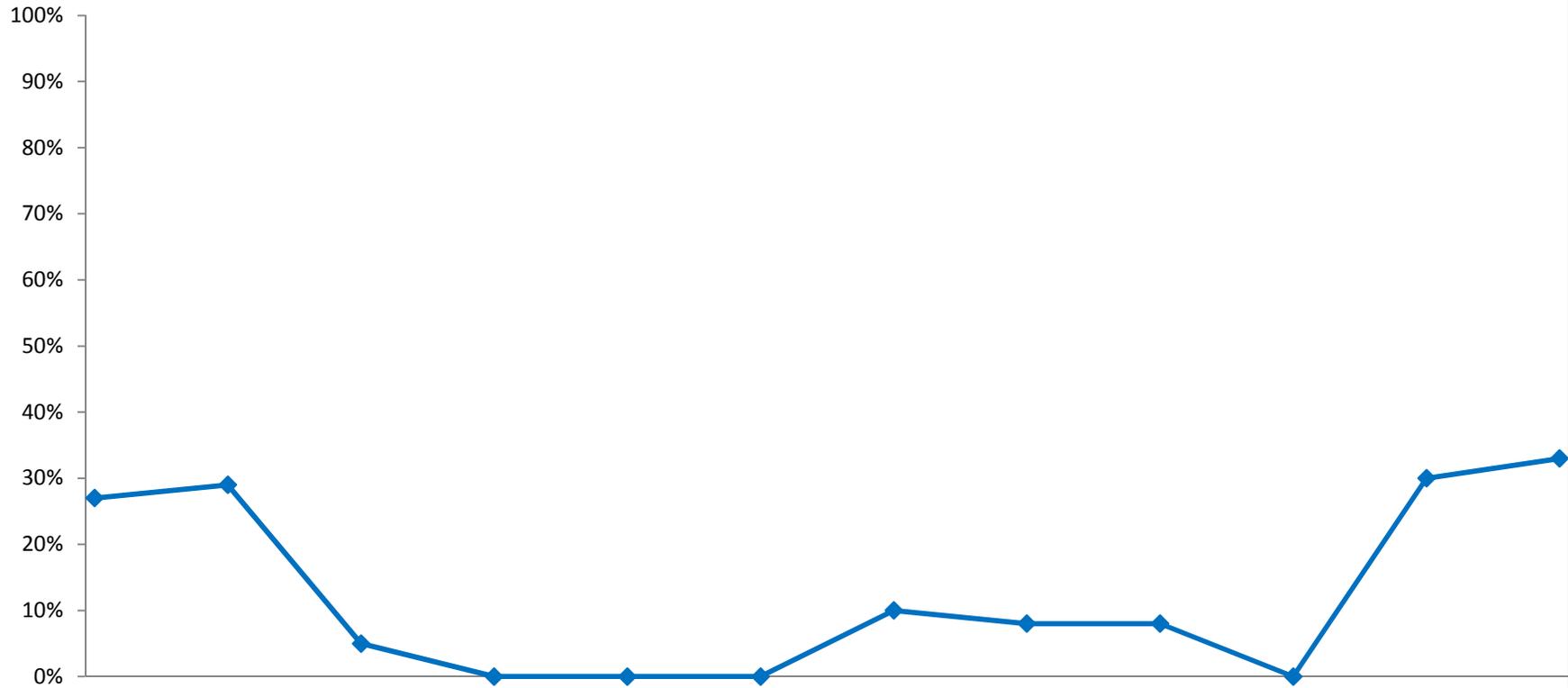
Percent of Admissions Discharged in 15 Days by Week of Admission



| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 53% | 59% | 50% | 55% | 50% | 69% | 63% | 86% | 47% | 50% | 44% | 44% |
| new admits | 9 | 10 | 6 | 6 | 7 | 9 | 10 | 12 | 7 | 6 | 4 | 4 |
| all admits | 17 | 17 | 12 | 11 | 14 | 13 | 16 | 14 | 15 | 12 | 9 | 9 |

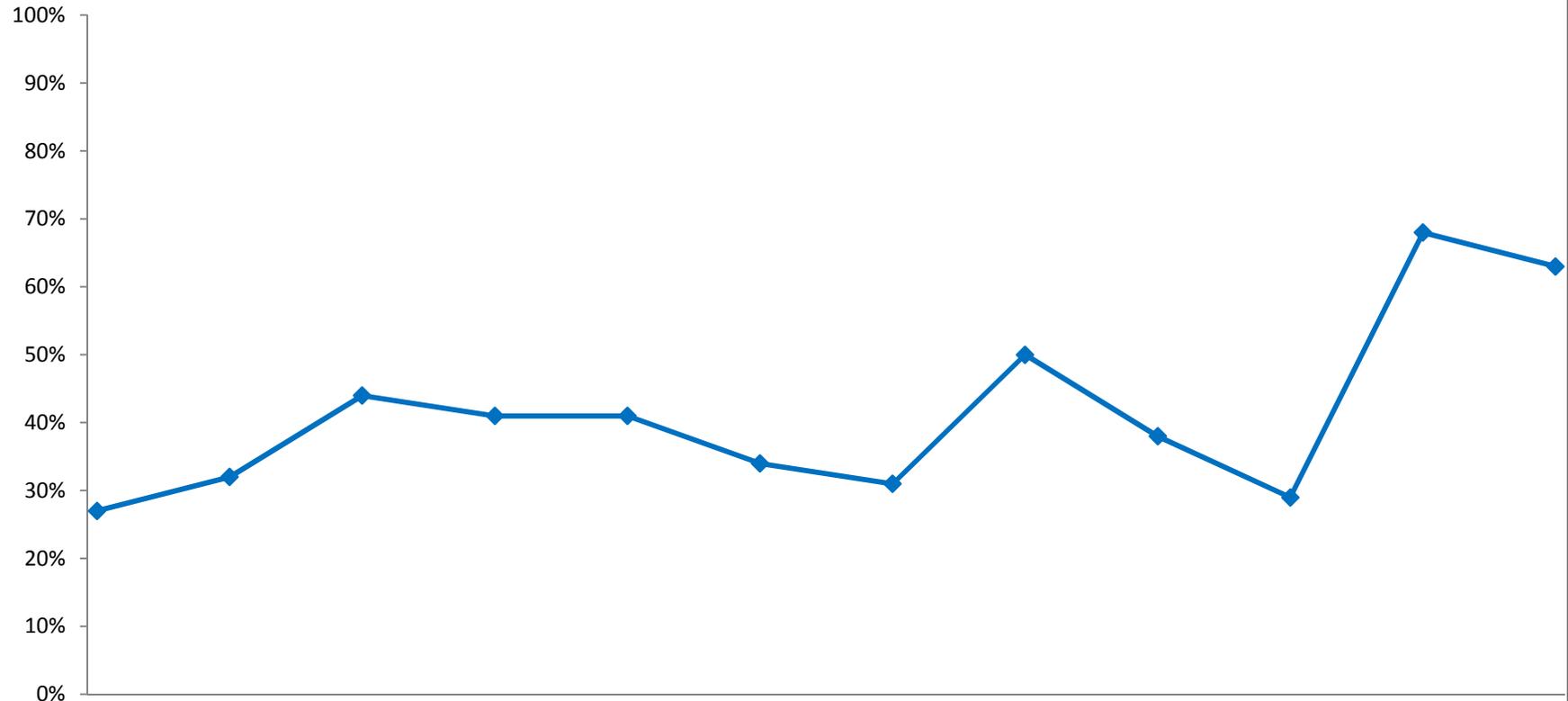
**AM-2 Percent of Admissions Discharged in 15 Days
Rusk State Hospital**

Percent of Admissions Discharged in 15 Days by Week of Admission



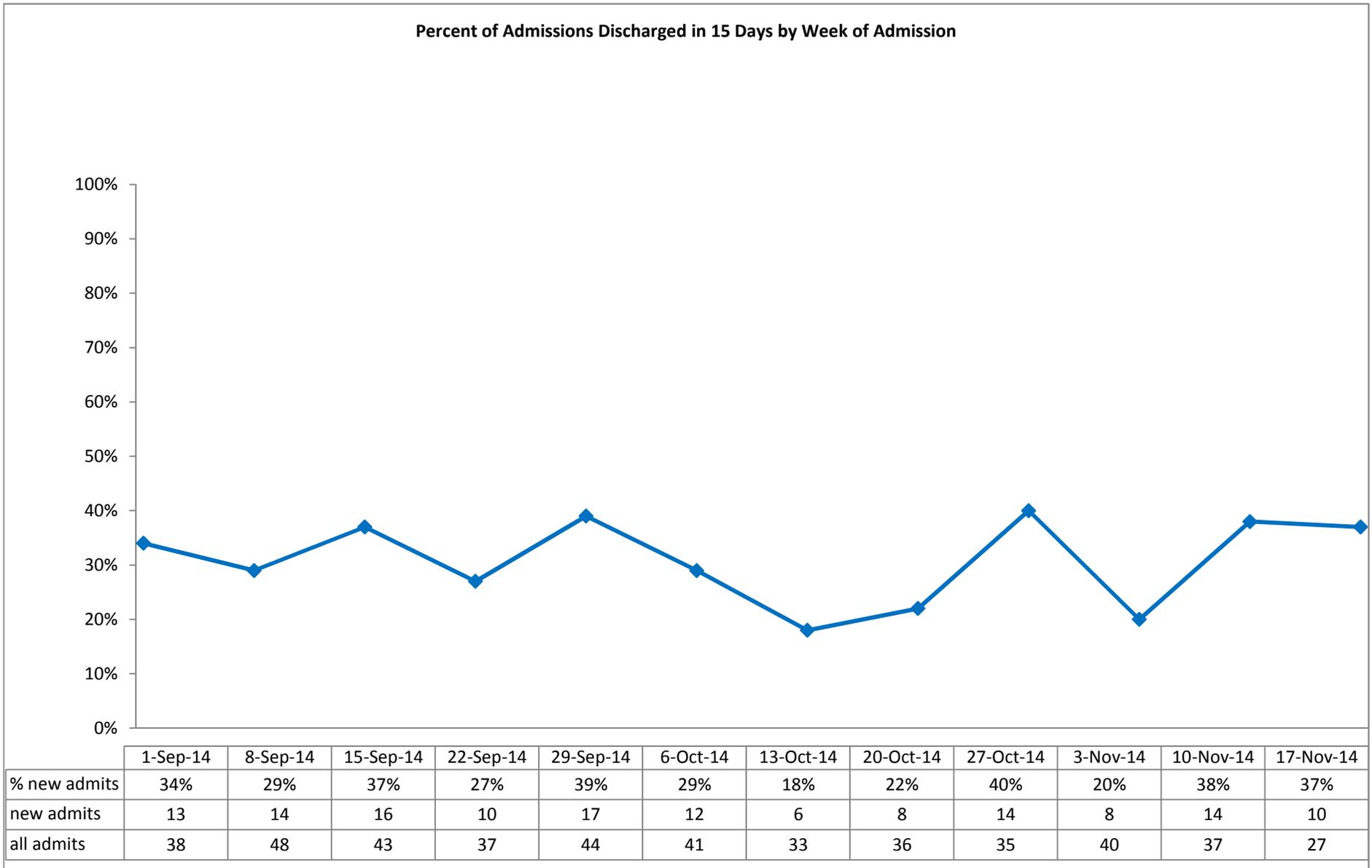
AM-2 Percent of Admissions Discharged in 15 Days
San Antonio State Hospital

Percent of Admissions Discharged in 15 Days by Week of Admission



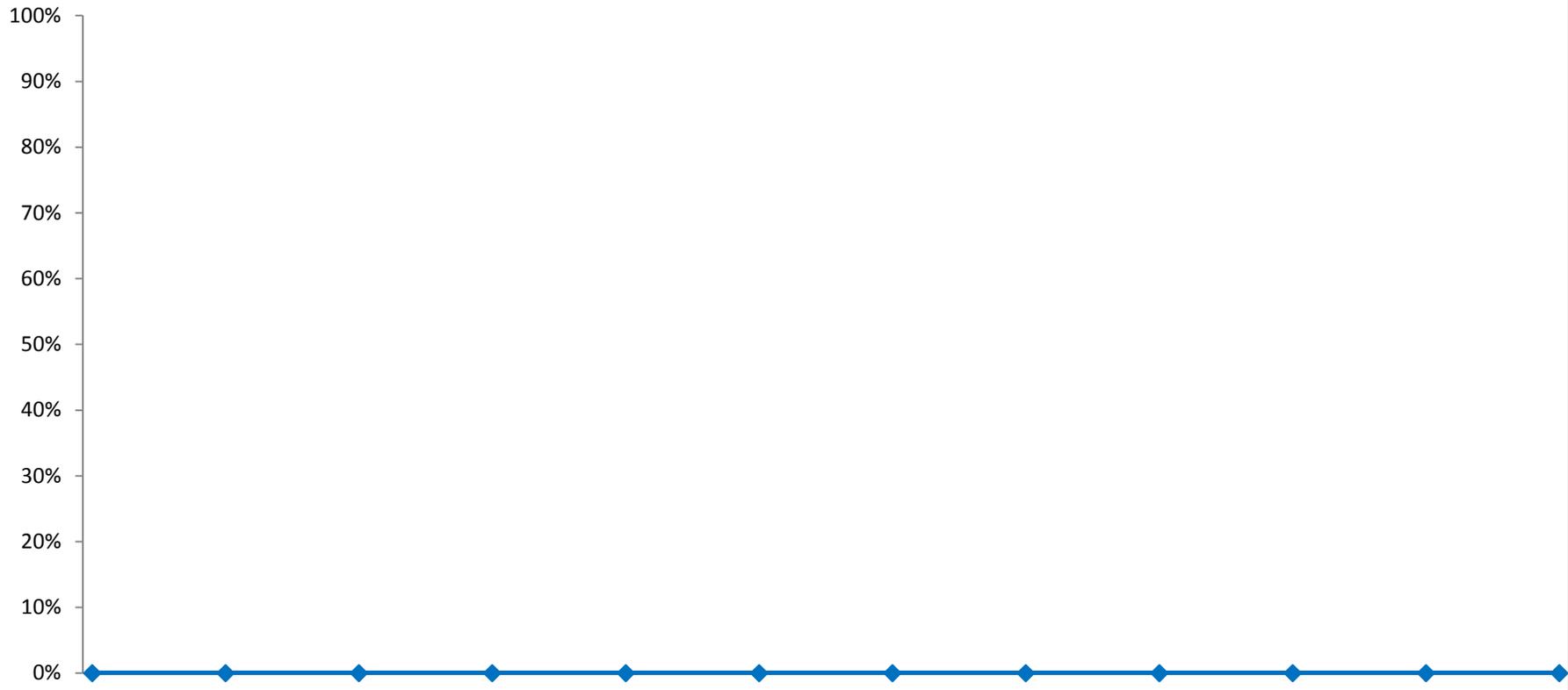
| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 27% | 32% | 44% | 41% | 41% | 34% | 31% | 50% | 38% | 29% | 68% | 63% |
| new admits | 6 | 8 | 14 | 12 | 14 | 11 | 11 | 13 | 12 | 6 | 13 | 10 |
| all admits | 22 | 25 | 32 | 29 | 34 | 32 | 35 | 26 | 32 | 21 | 19 | 16 |

**AM-2 Percent of Admissions Discharged in 15 Days
Terrell State Hospital**



**AM-2 Percent of Admissions Discharged in 15 Days
Waco Center for Youth**

Percent of Admissions Discharged in 15 Days by Week of Admission



| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| new admits | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| all admits | 2 | 5 | 3 | 2 | 3 | 4 | 2 | 2 | 2 | 3 | 3 | 2 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Access Measure

AM-3

Measure: Unique-to-hospital-system patients admitted for the week, by week.

Timeframe: Weekly

Definition

The number of admissions per week.

Data Source

ODS AD Hoc Report

Date Display and Chart Description

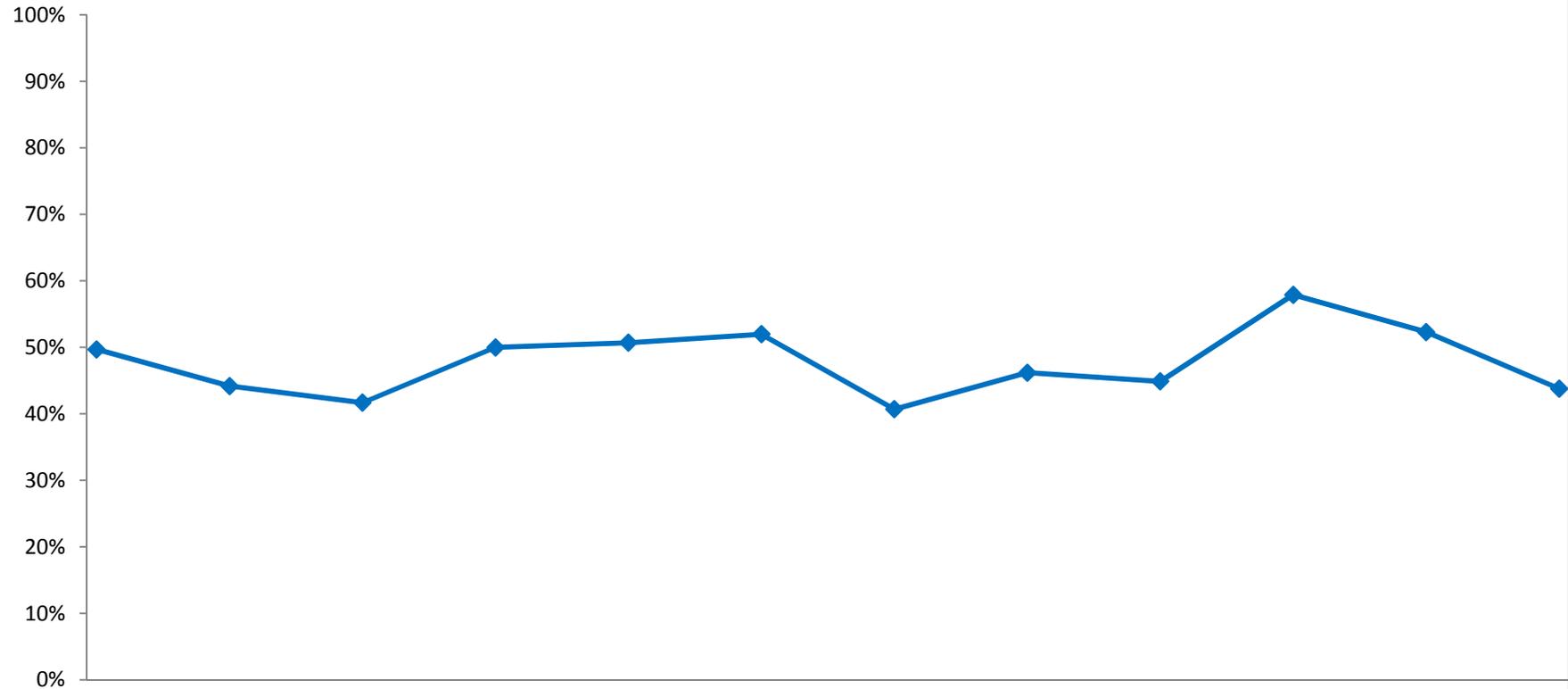
Chart with weekly data points of percent new to system admissions by week of admission for individual state hospitals and system-wide.

Purpose

Measure number of weekly admissions.

**AM - 3 Unique to Hospital System Patients Admission for the Week
All State MH Hospitals**

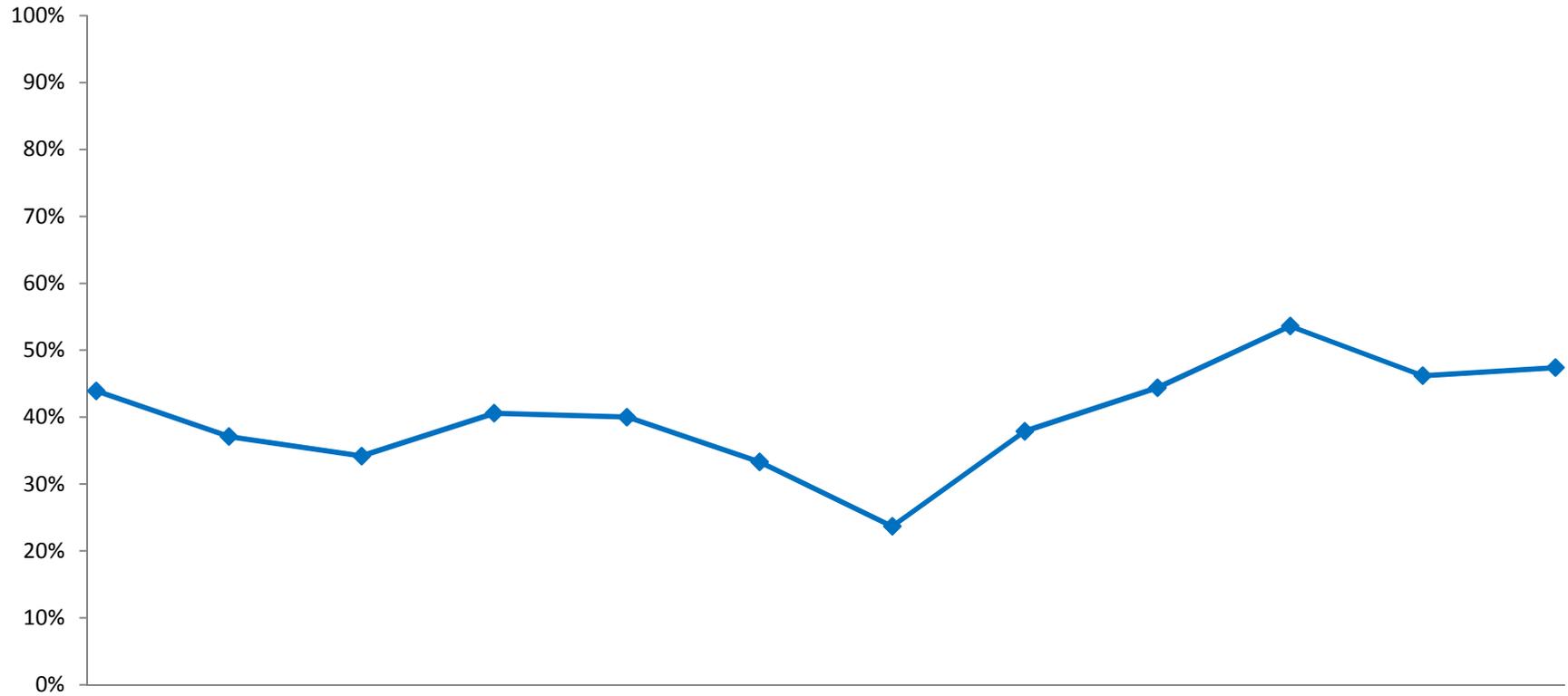
% New to System Admissions by Week of Admission



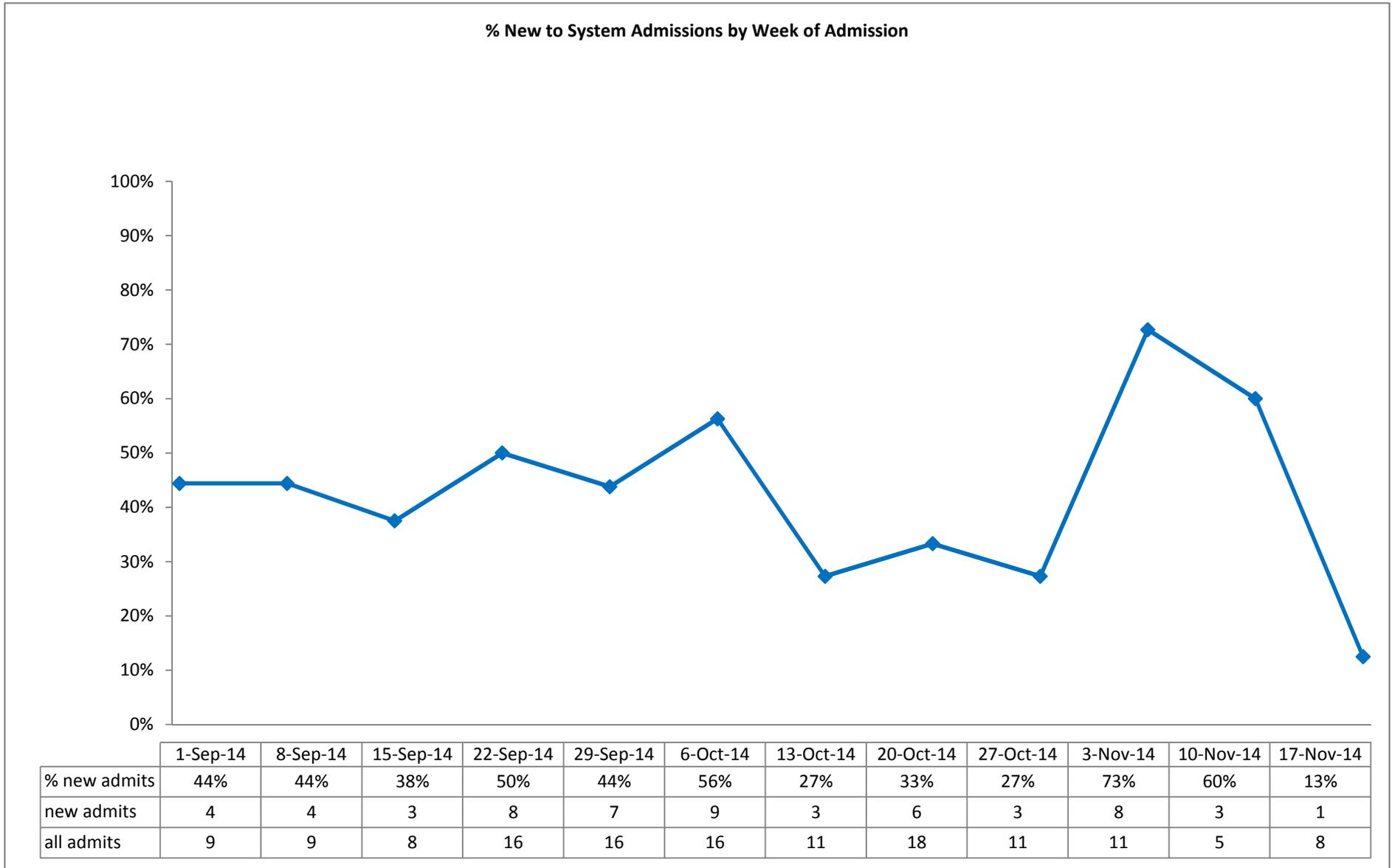
| | 1-Sep-14 | 8-Sep-14 | 15-Sep-14 | 22-Sep-14 | 29-Sep-14 | 6-Oct-14 | 13-Oct-14 | 20-Oct-14 | 27-Oct-14 | 3-Nov-14 | 10-Nov-14 | 17-Nov-14 |
|--------------|----------|----------|-----------|-----------|-----------|----------|-----------|-----------|-----------|----------|-----------|-----------|
| % new admits | 50% | 44% | 42% | 50% | 51% | 52% | 41% | 46% | 45% | 58% | 52% | 44% |
| new admits | 93 | 91 | 85 | 99 | 109 | 104 | 79 | 90 | 84 | 88 | 90 | 84 |
| all admits | 187 | 206 | 204 | 198 | 215 | 200 | 194 | 195 | 187 | 152 | 172 | 192 |

**AM - 3 Unique to Hospital System Patients Admission for the Week
Austin State Hospital**

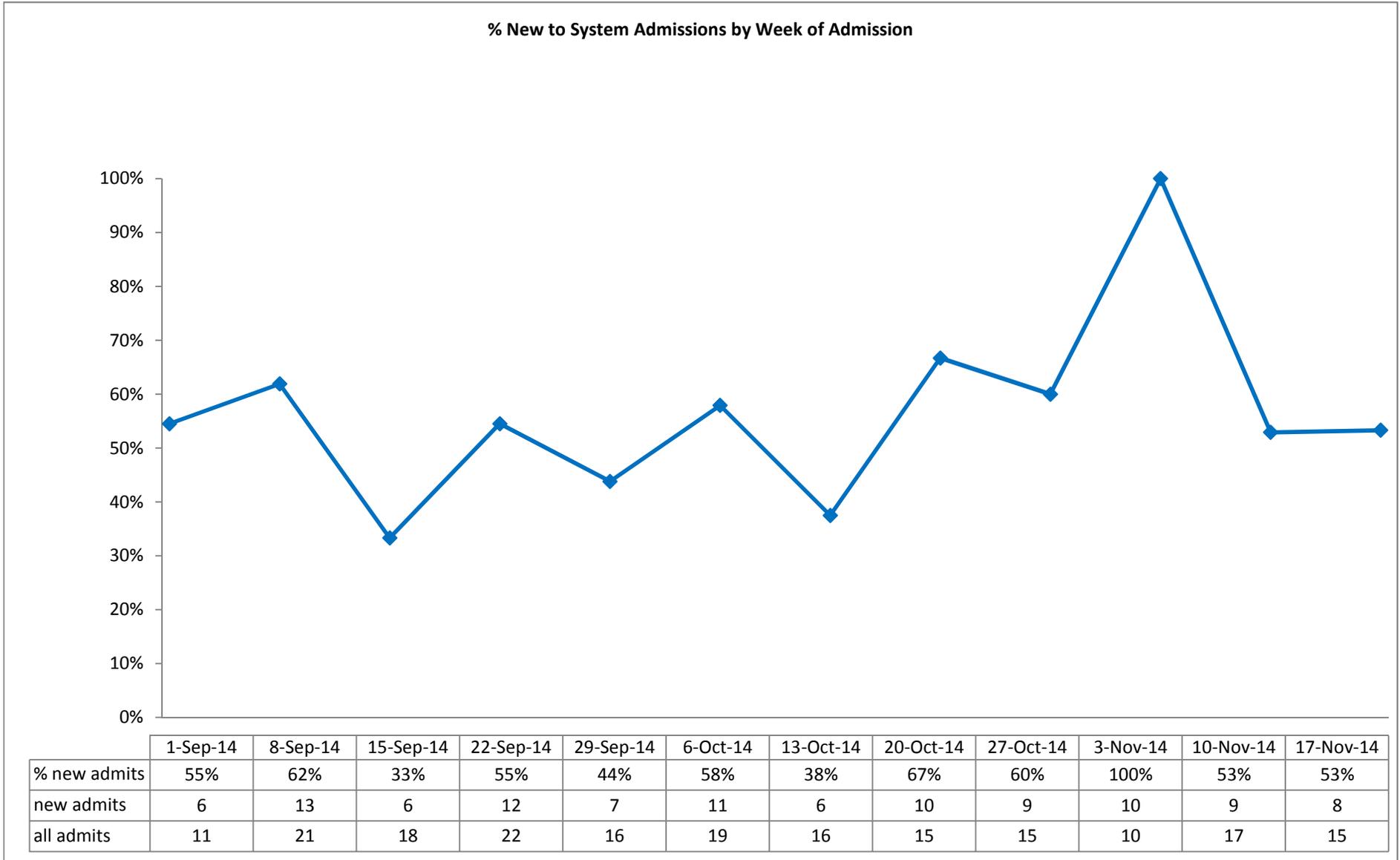
% New to System Admissions by Week of Admission



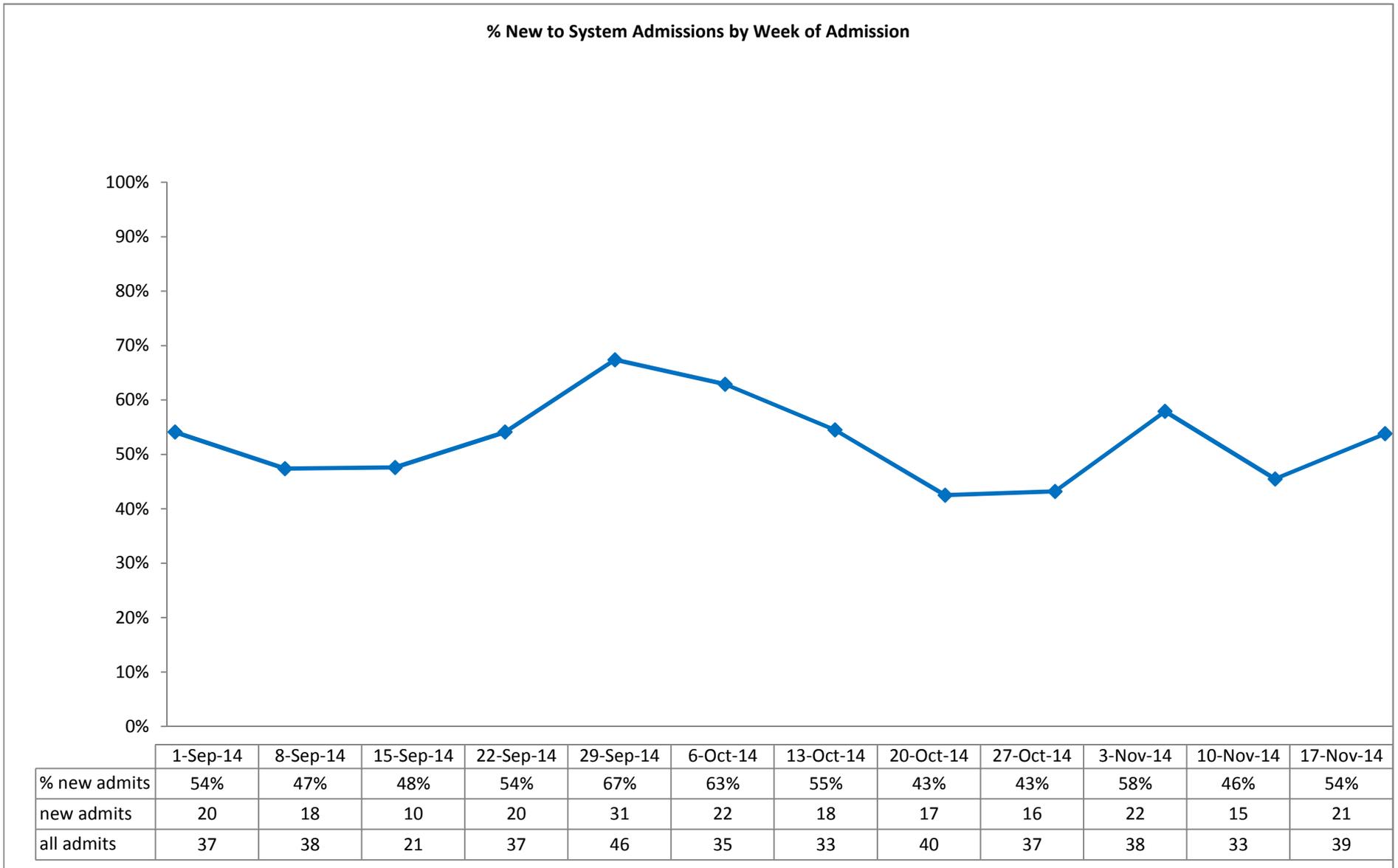
**AM - 3 Unique to Hospital System Patients Admission for the Week
Big Spring State Hospital**



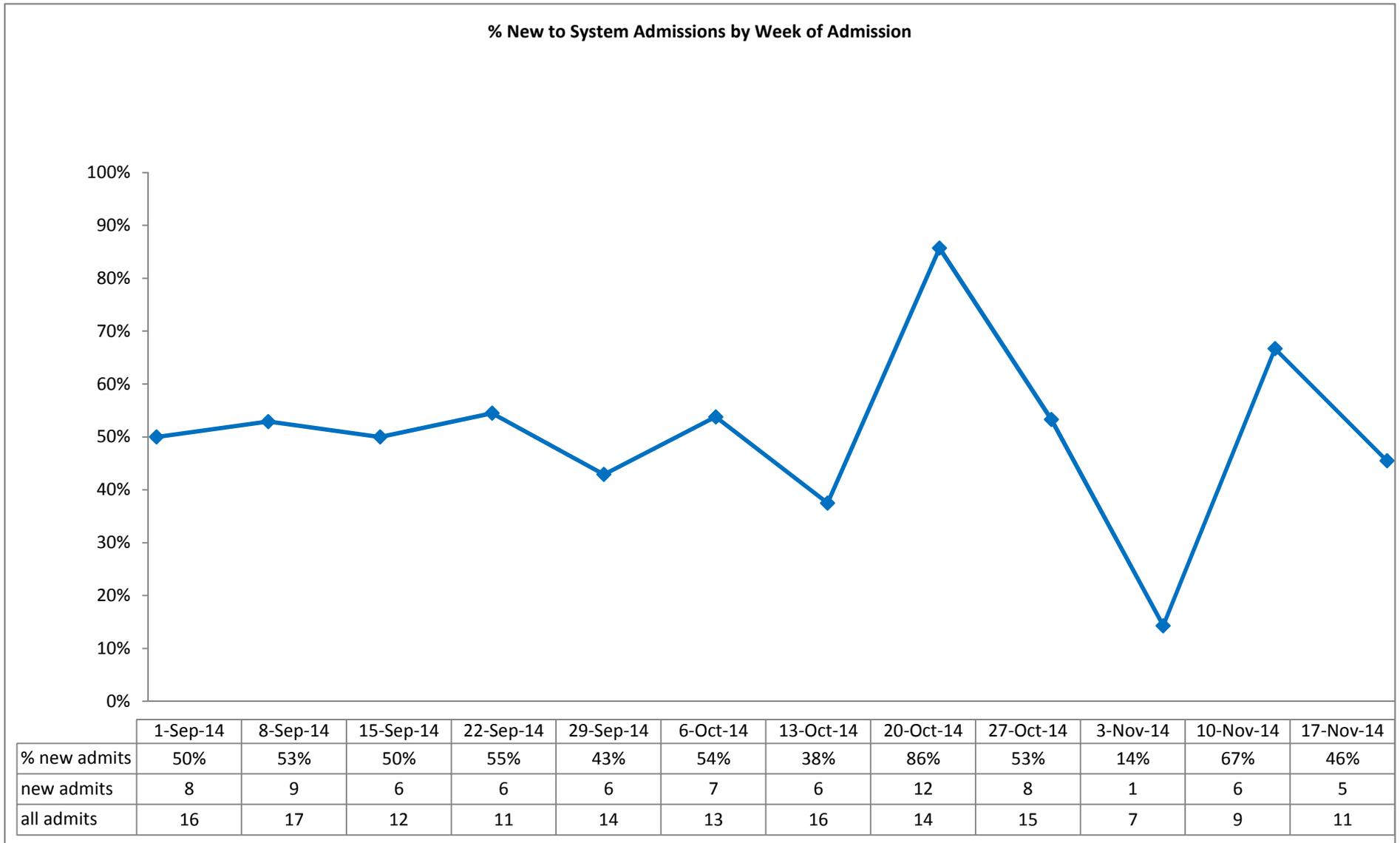
**AM - 3 Unique to Hospital System Patients Admission for the Week
El Paso Psychiatric Center**



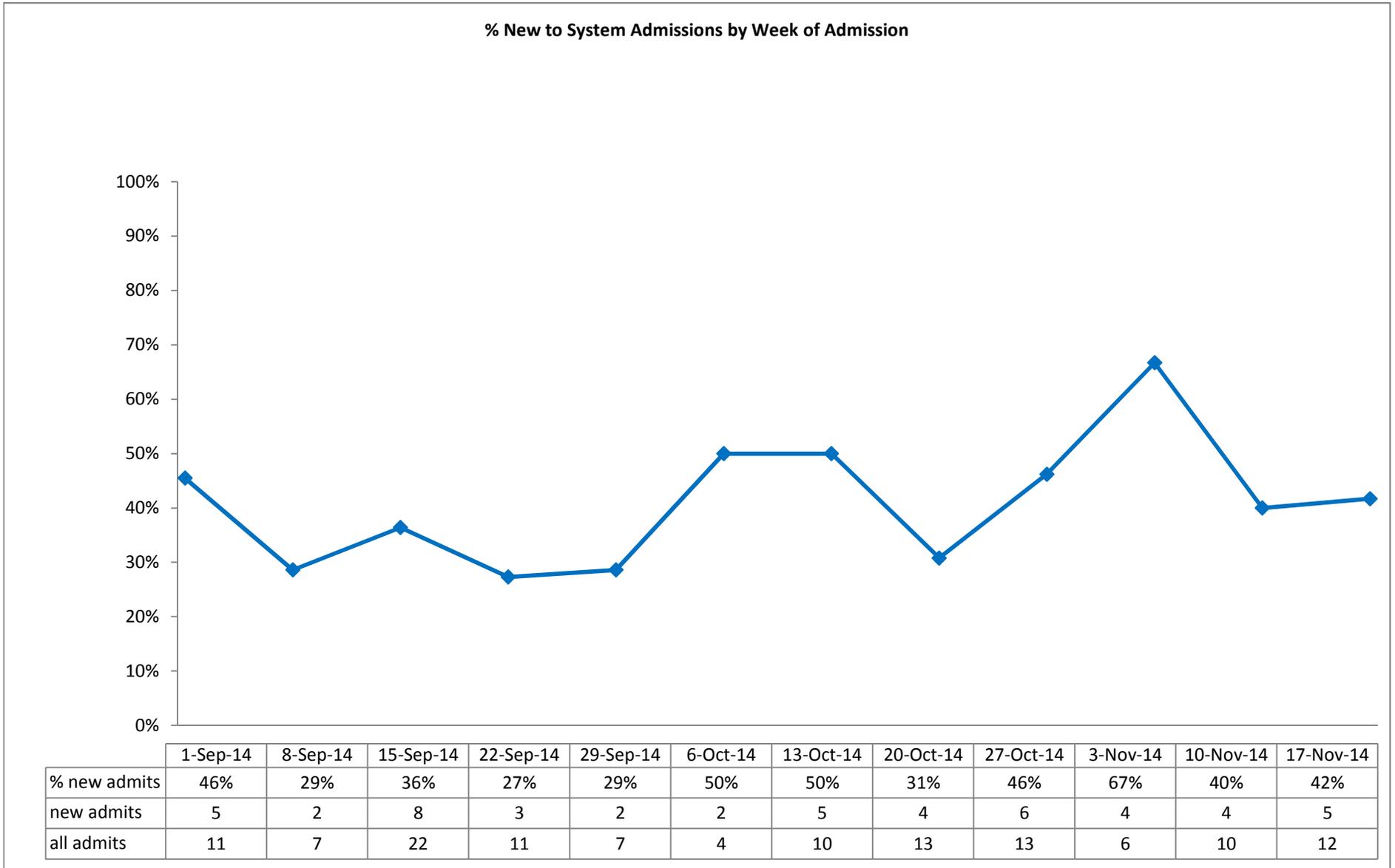
**AM - 3 Unique to Hospital System Patients Admission for the Week
North Texas State Hospital**



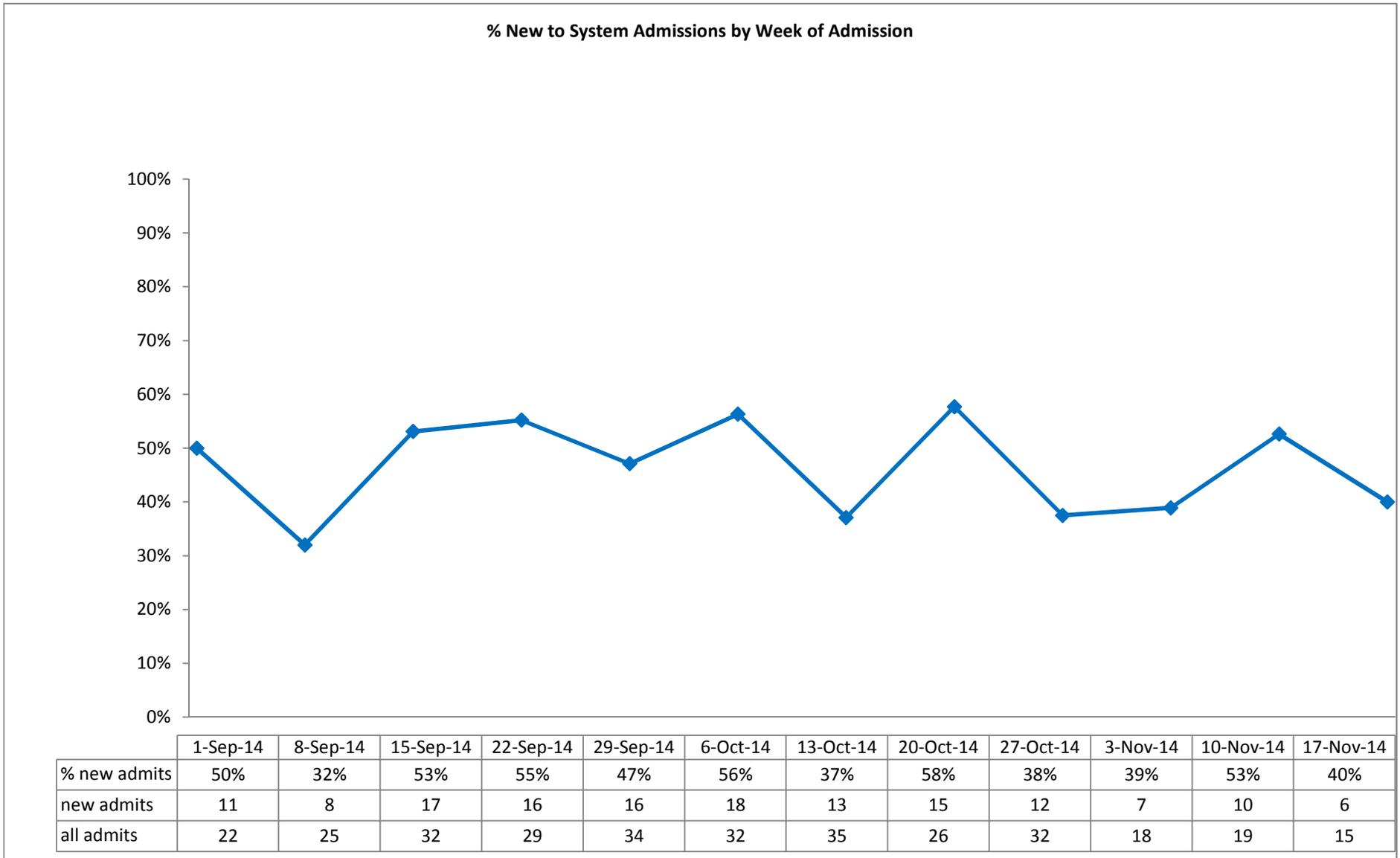
**AM - 3 Unique to Hospital System Patients Admission for the Week
Rio Grande State Center**



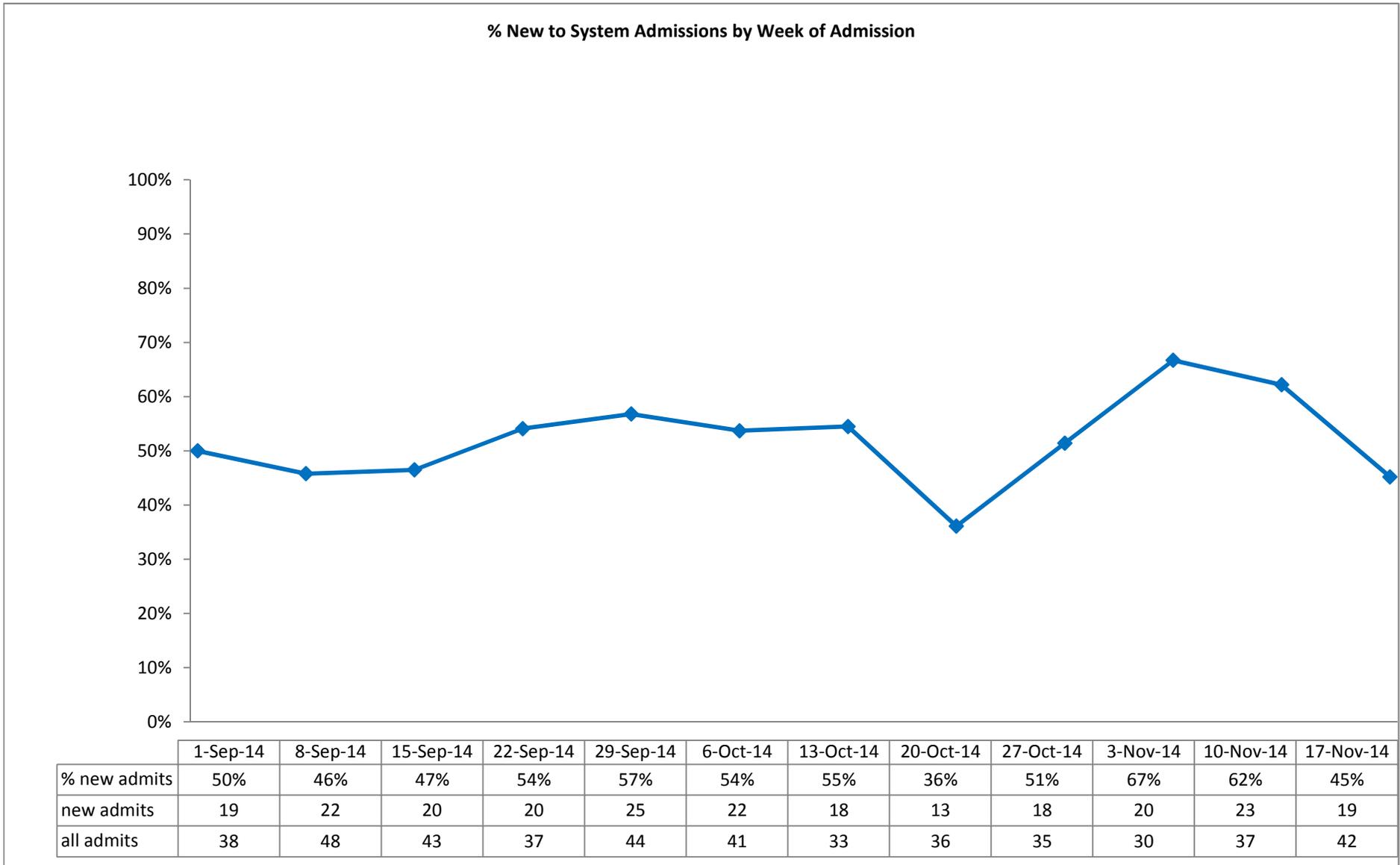
**AM - 3 Unique to Hospital System Patients Admission for the Week
Rusk State Hospital**



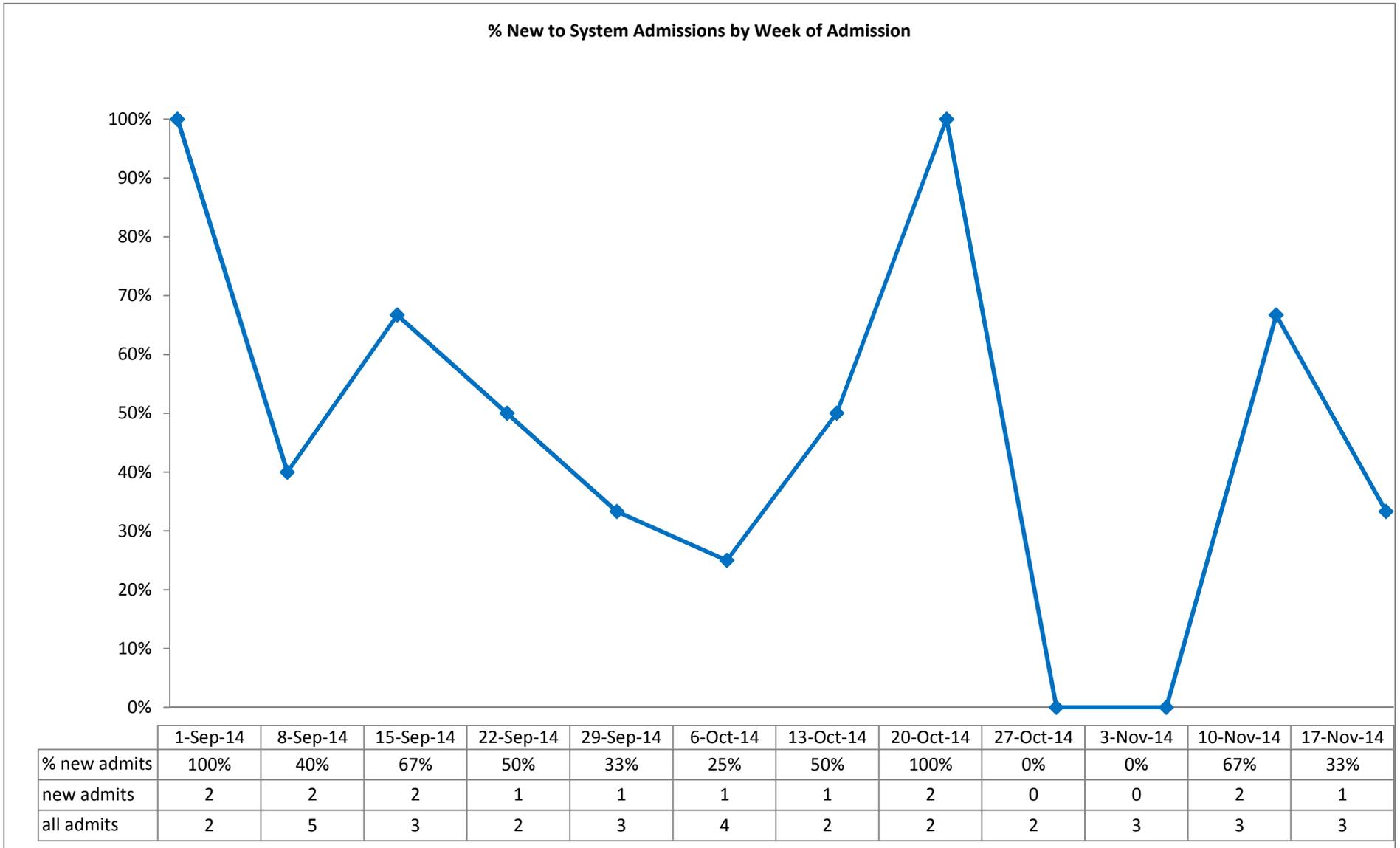
**AM - 3 Unique to Hospital System Patients Admission for the Week
San Antonio State Hospital**



**AM - 3 Unique to Hospital System Patients Admission for the Week
Terrell State Hospital**



**AM - 3 Unique to Hospital System Patients Admission for the Week
Waco Center for Youth**



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Access Measure

AM-4

Measure: Average Daily Census Used/Capacity, by Month

Measure: General Revenue and Third Party Average Daily Census

Timeframe: Monthly

Definition

Operate an average daily census that is 95% of the allocated beds for the hospital inpatient services. Average daily census is computed by dividing the total number of bed days used during the month by the number of calendar days in the month. DSHS Hospital Section will project total ADC, GR ADC and 3rd Party ADC. Extract report will divide episodes into 3rd Party episodes and GR episodes and calculate monthly ADC, monthly GR ADC and monthly 3rd Party ADC. Care Report HC022864 uses same extract as the hospital allocation methodology reports (NTSH Vernon Campus is not included in the extract). 3rd Party Average Census includes exempt bed days with exemption codes 05, 09, 10, 11, 12, 13, 15.

Data Source

CARE Report HC022000 (Average Daily Census by Component)

CARE Report HC022895 (Hospital Census Report)

Date Display and Chart Description

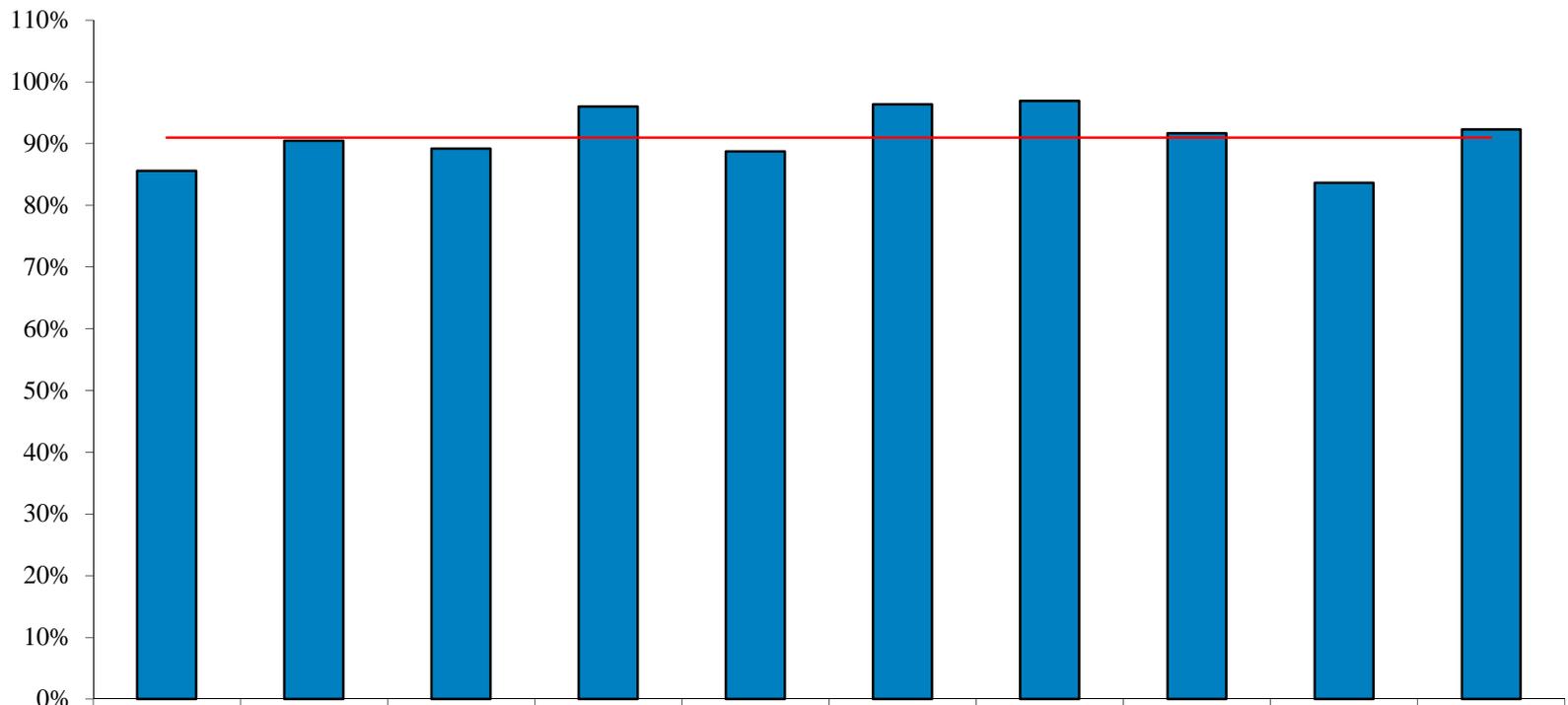
Chart with monthly data points of average daily census and funded census for individual state hospitals and system-wide. Chart with monthly data points of actual General Revenue and 3rd Party average daily census and funded census for individual state hospitals and system-wide.

Purpose

Measure the average daily census used.

AM - 4 Average Daily Census
All State MH Hospitals - As of November 30, 2014

**Average Daily Census As Percent of Adjusted Funded Census
 FY 2015**



| | ASH | BSSH | EPPC | KSH | NTSH | RGSC | RSH | SASH | TSH | WCFY |
|---------------------|-----|------|------|-----|------|------|-----|------|-----|------|
| % Occupancy | 86% | 91% | 89% | 96% | 89% | 96% | 97% | 92% | 84% | 92% |
| ADC | 256 | 181 | 66 | 194 | 568 | 53 | 315 | 277 | 241 | 72 |
| Funded Census | 299 | 200 | 74 | 202 | 640 | 55 | 325 | 302 | 288 | 78 |
| All State Hospitals | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% | 91% |

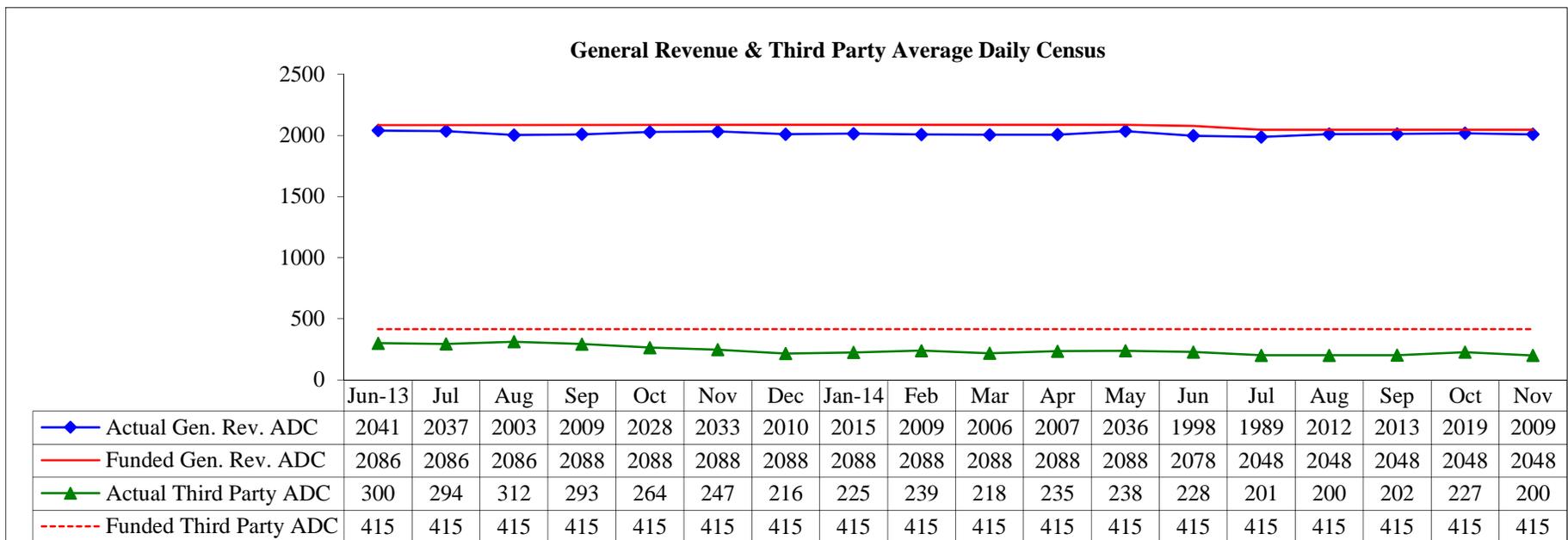
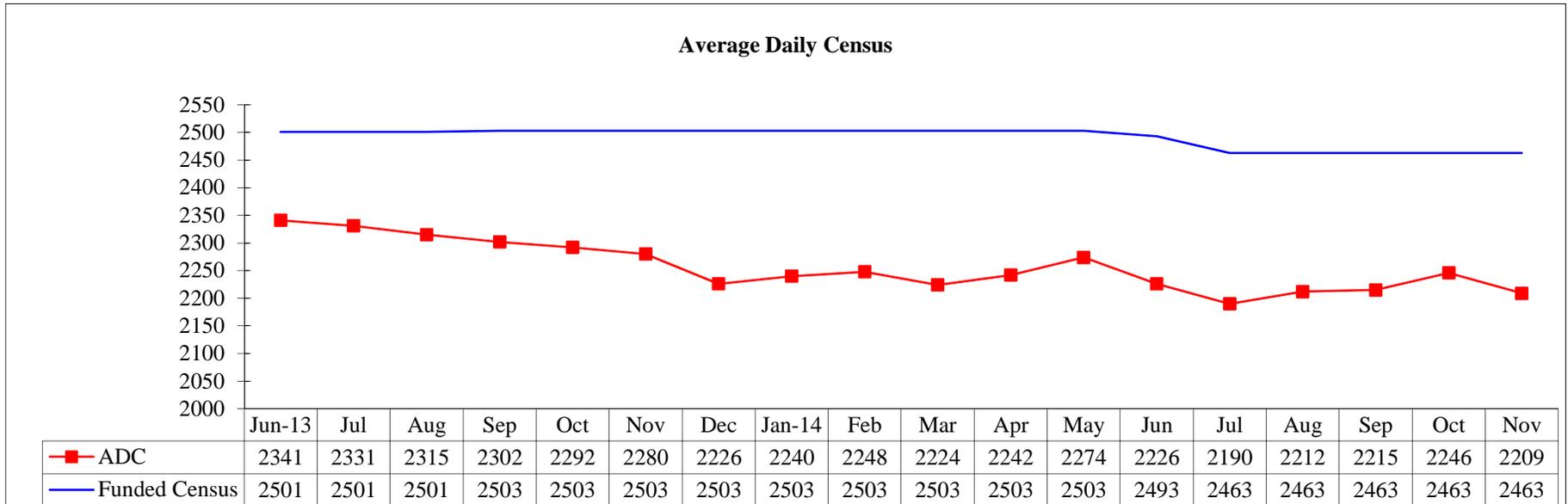
6/1/2014 10 beds removed from RSH funded census

7/1/2014 30 beds (UTHC-Tyler) removed from RSH funded census

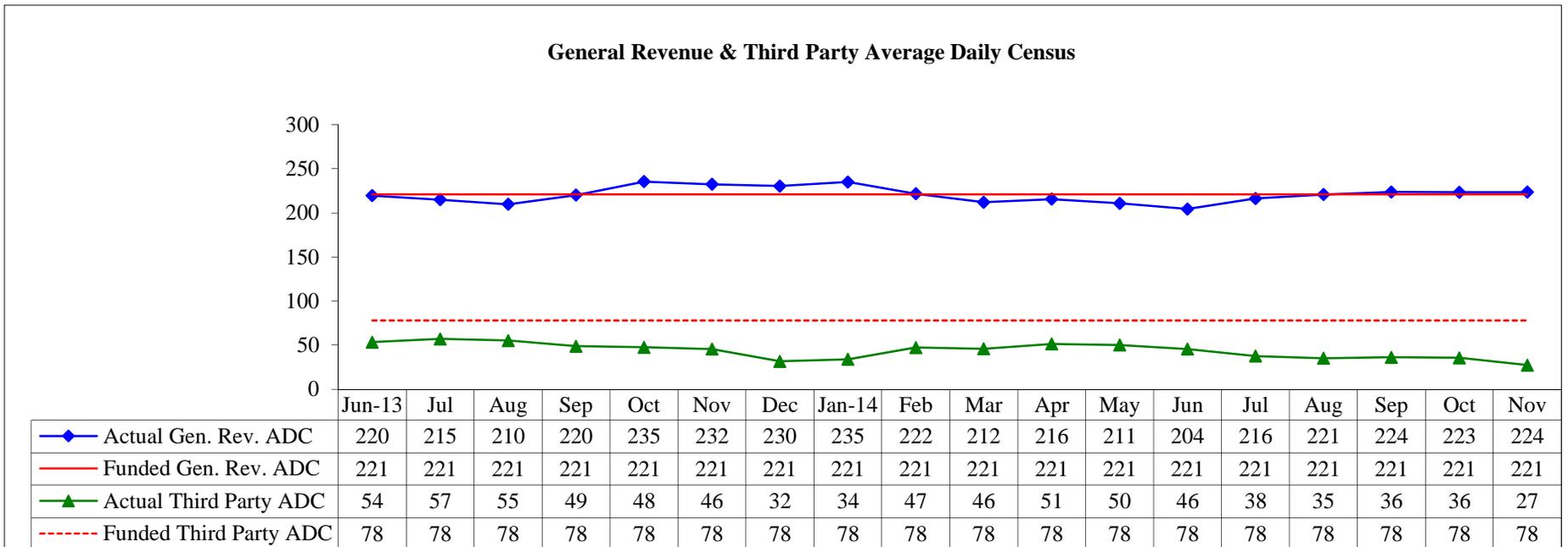
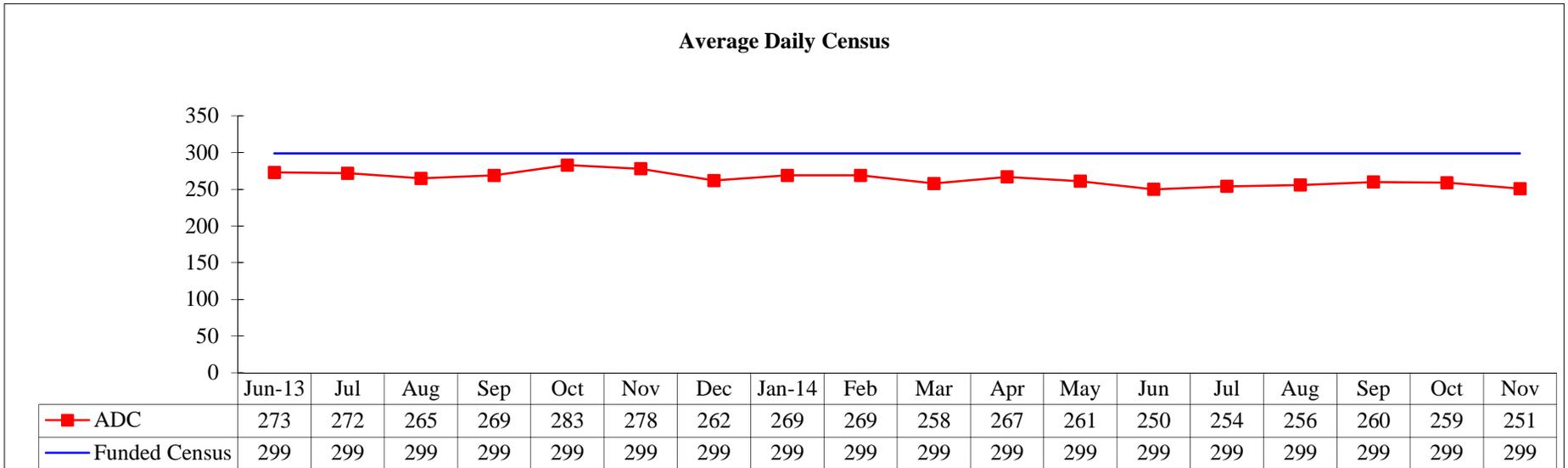
Chart: Office of Decision Support

Source: Care Reports HC022000 and HC022895

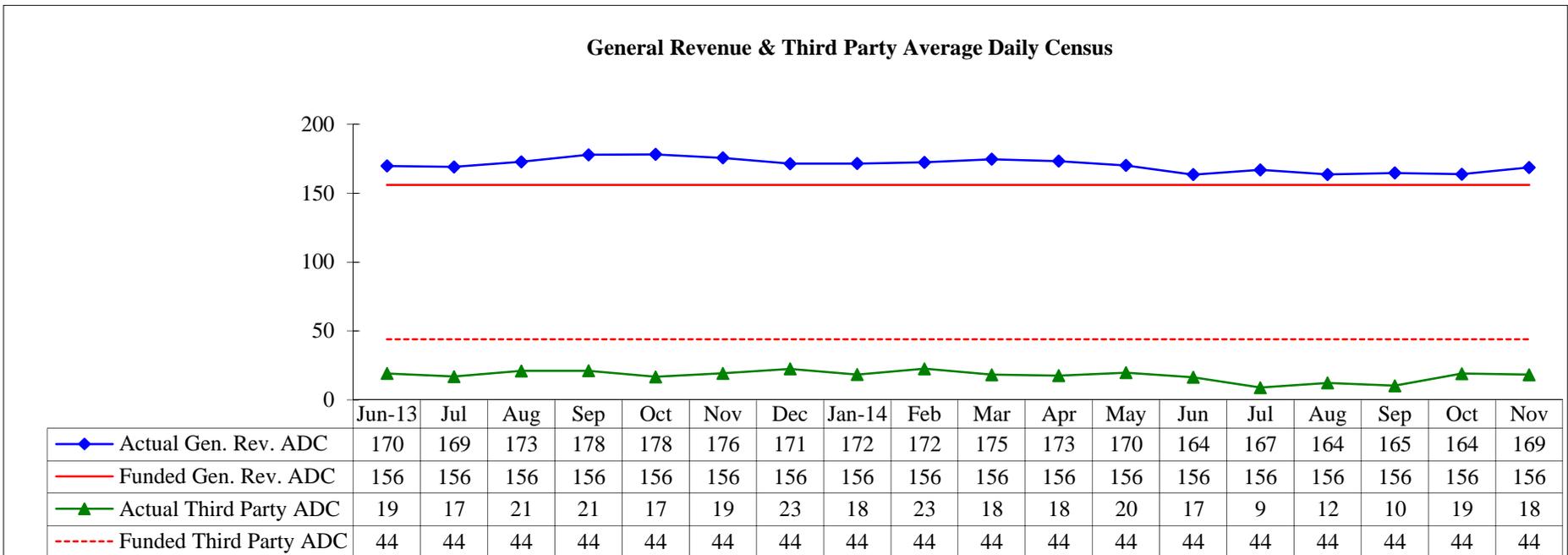
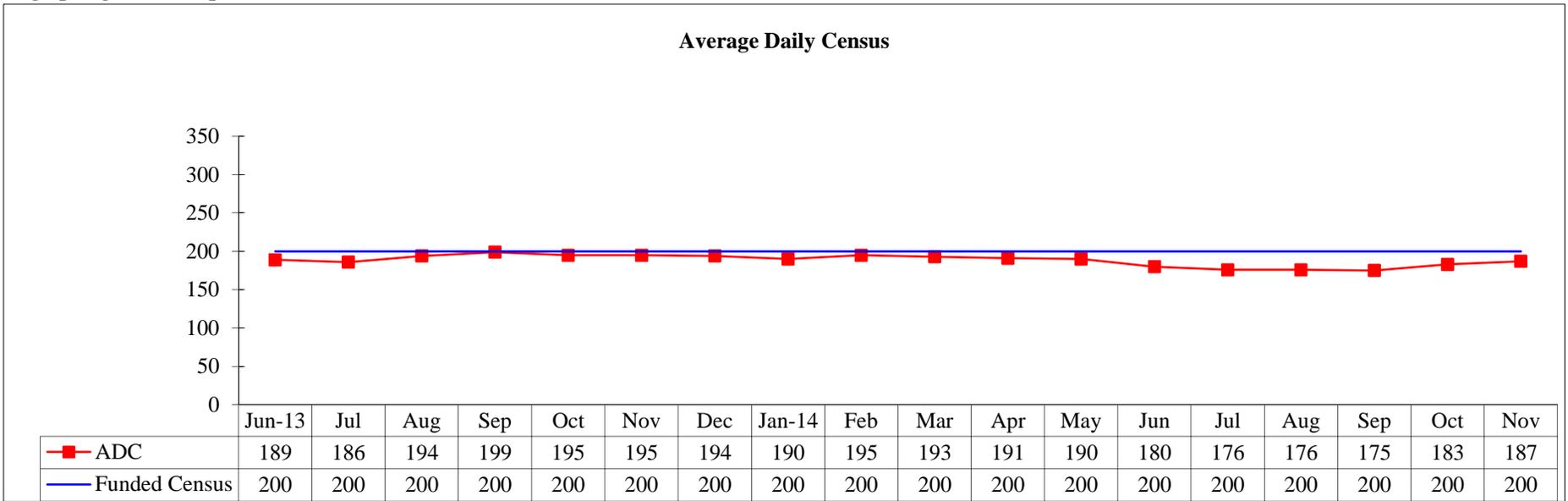
**AM - 4 Average Daily Census
All State MH Hospitals**



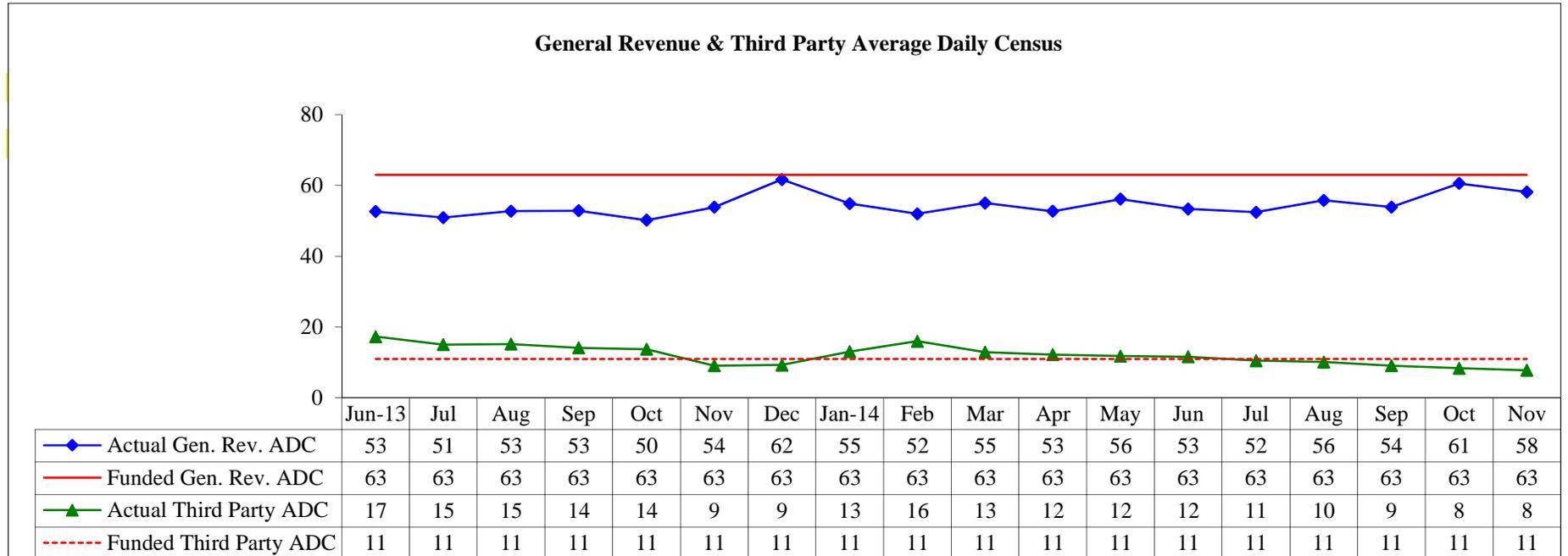
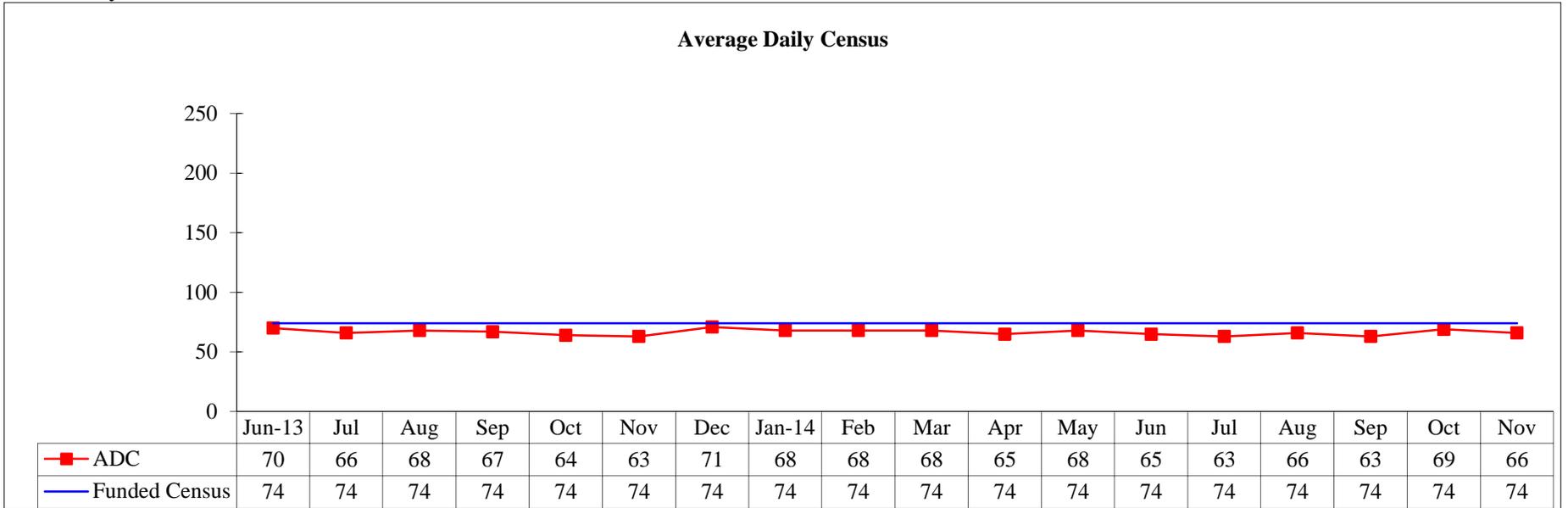
**AM - 4 Average Daily Census
Austin State Hospital**



**AM - 4 Average Daily Census
Big Spring State Hospital**

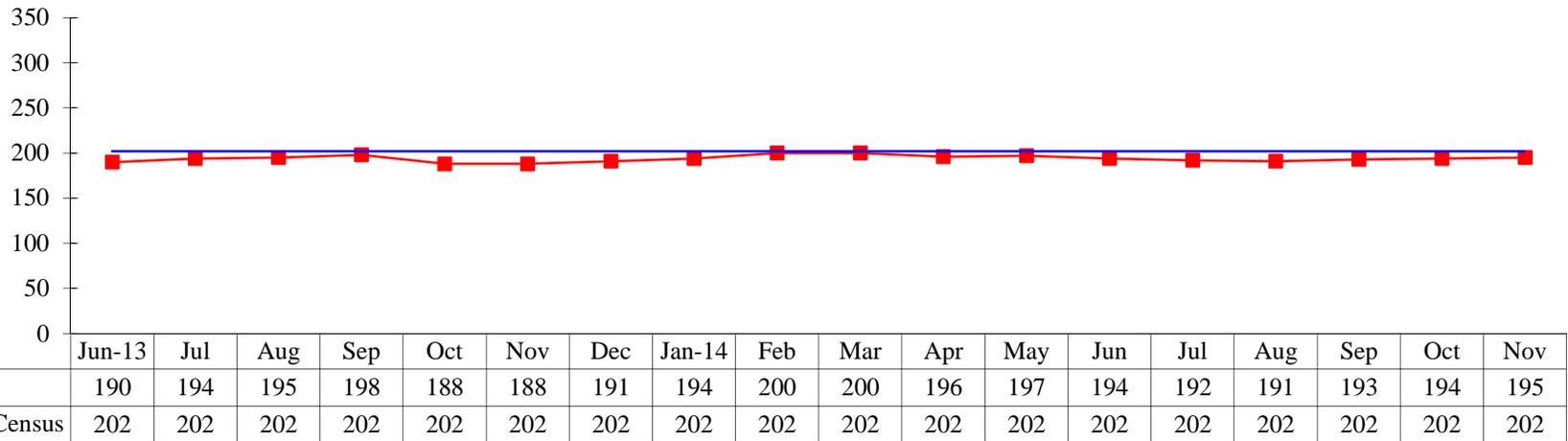


**AM - 4 Average Daily Census
El Paso Psychiatric Center**

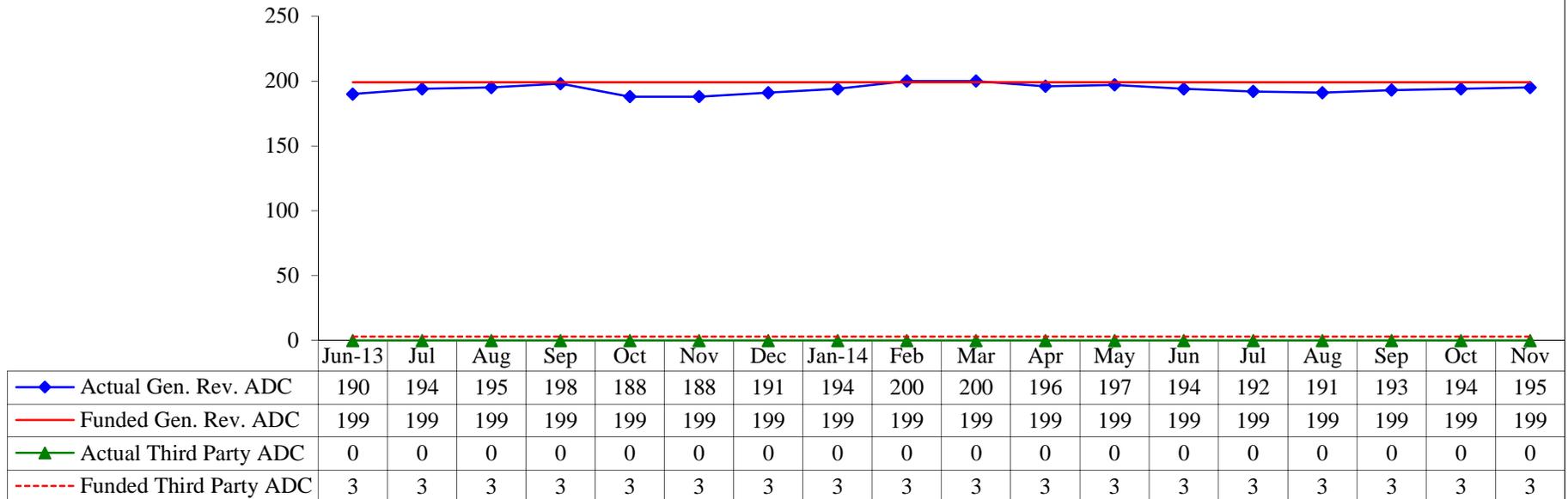


**AM - 4 Average Daily Census
Kerrville State Hospital**

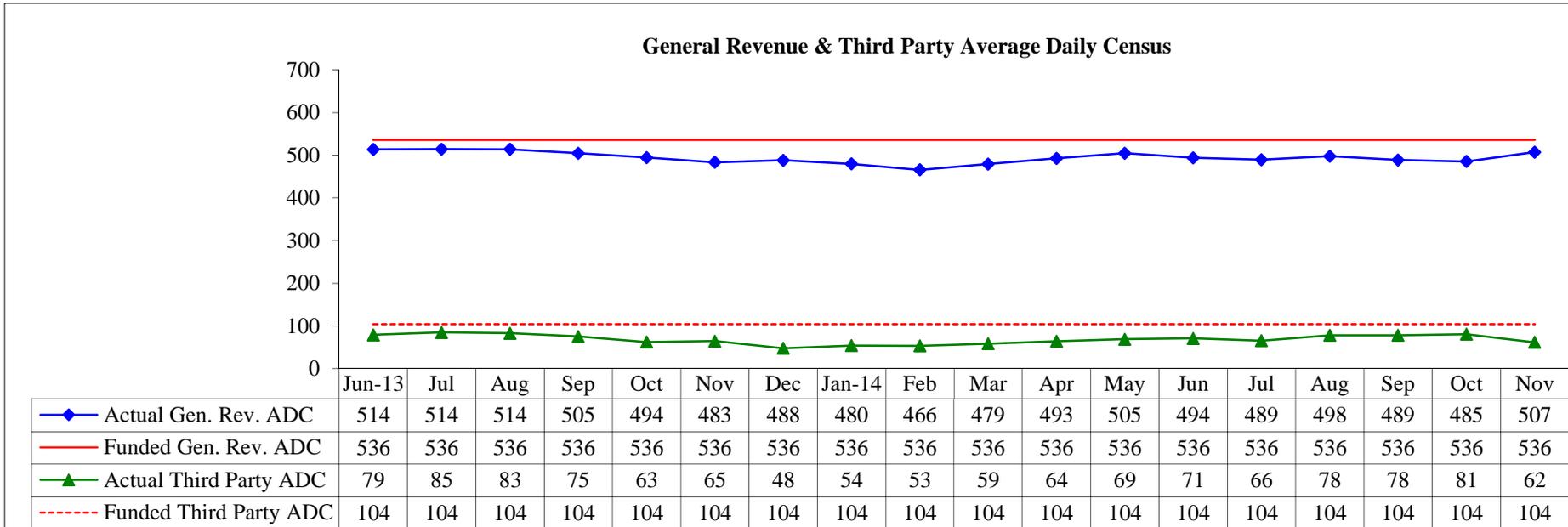
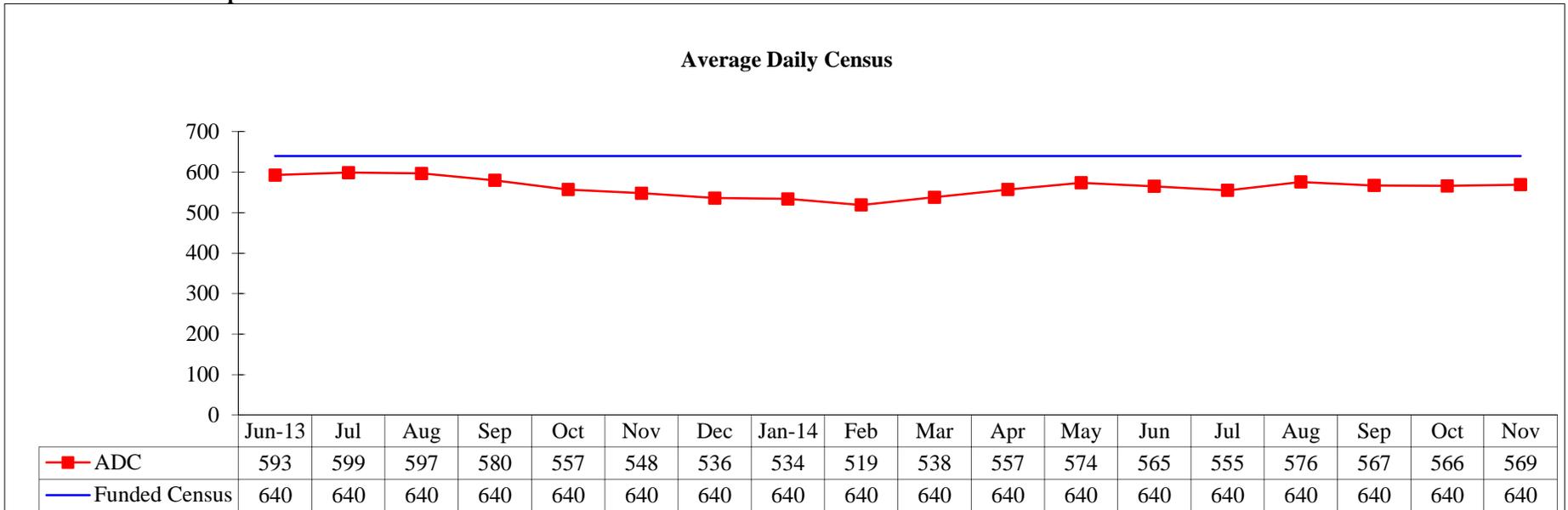
Average Daily Census



General Revenue & Third Party Average Daily Census

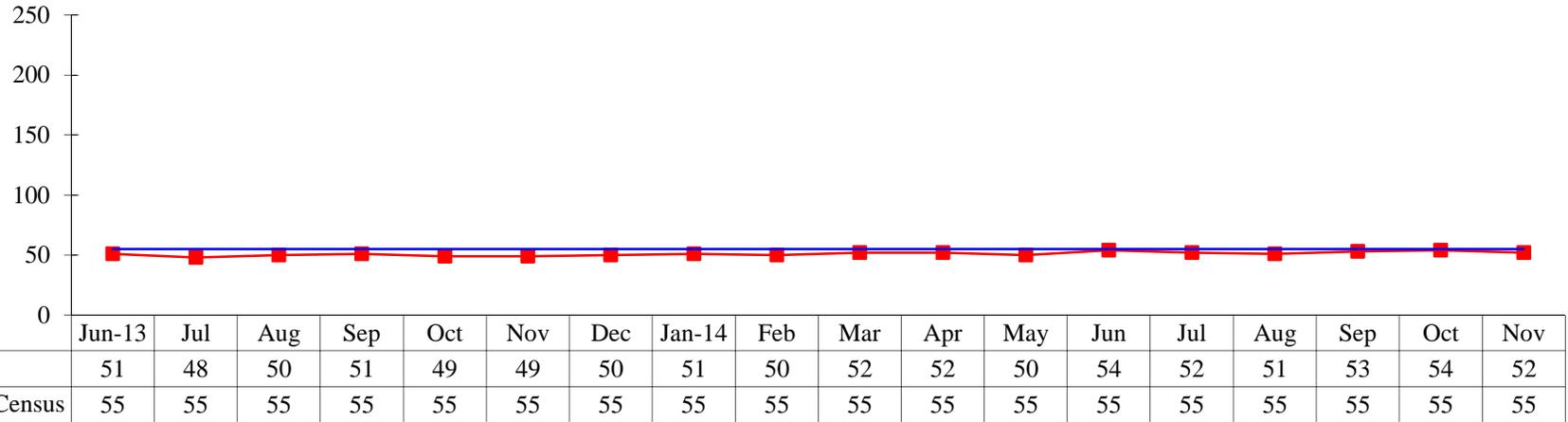


**AM - 4 Average Daily Census
North Texas State Hospital**

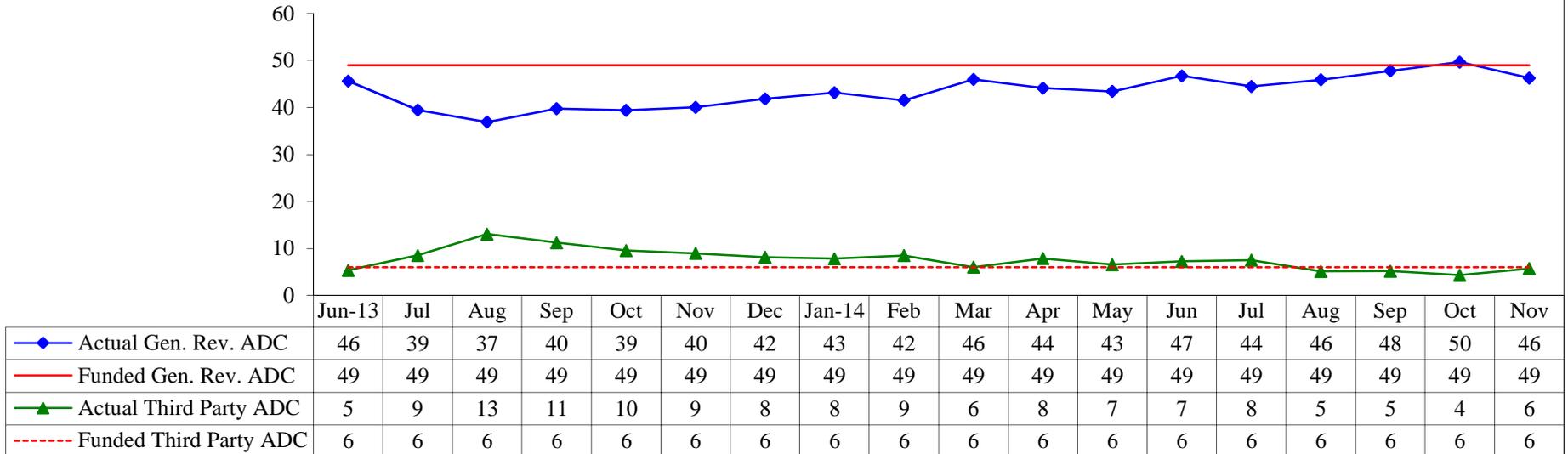


**AM - 4 Average Daily Census
Rio Grande State Center–MH**

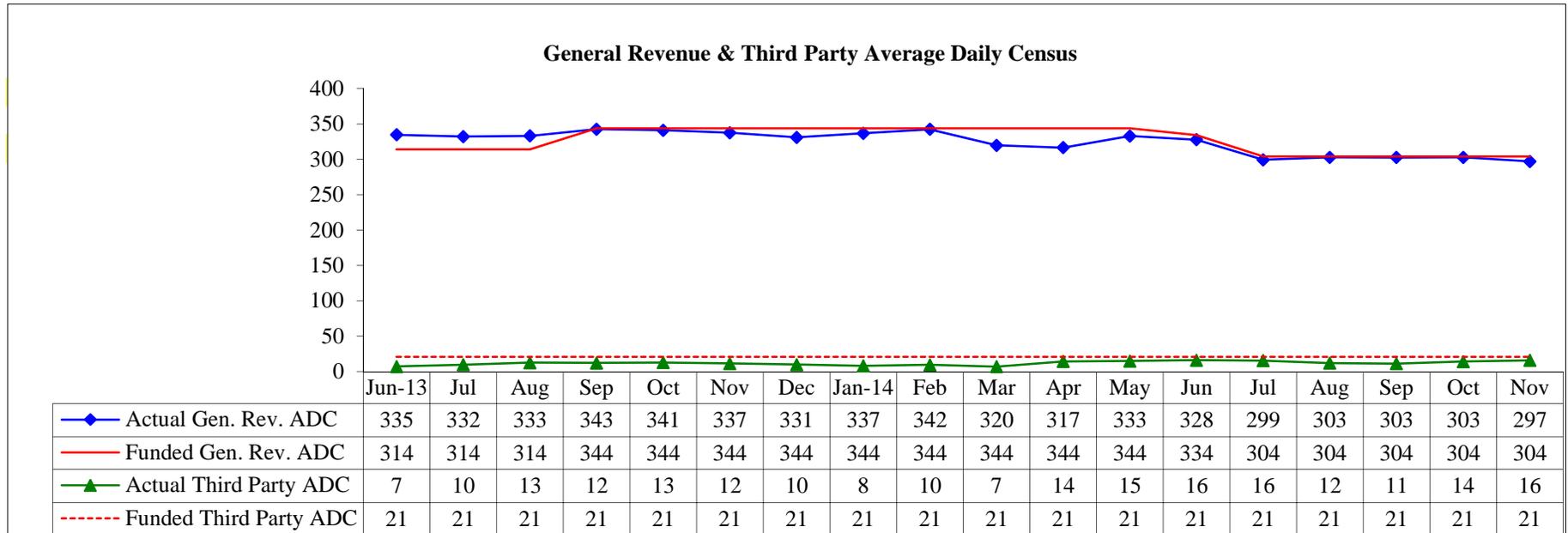
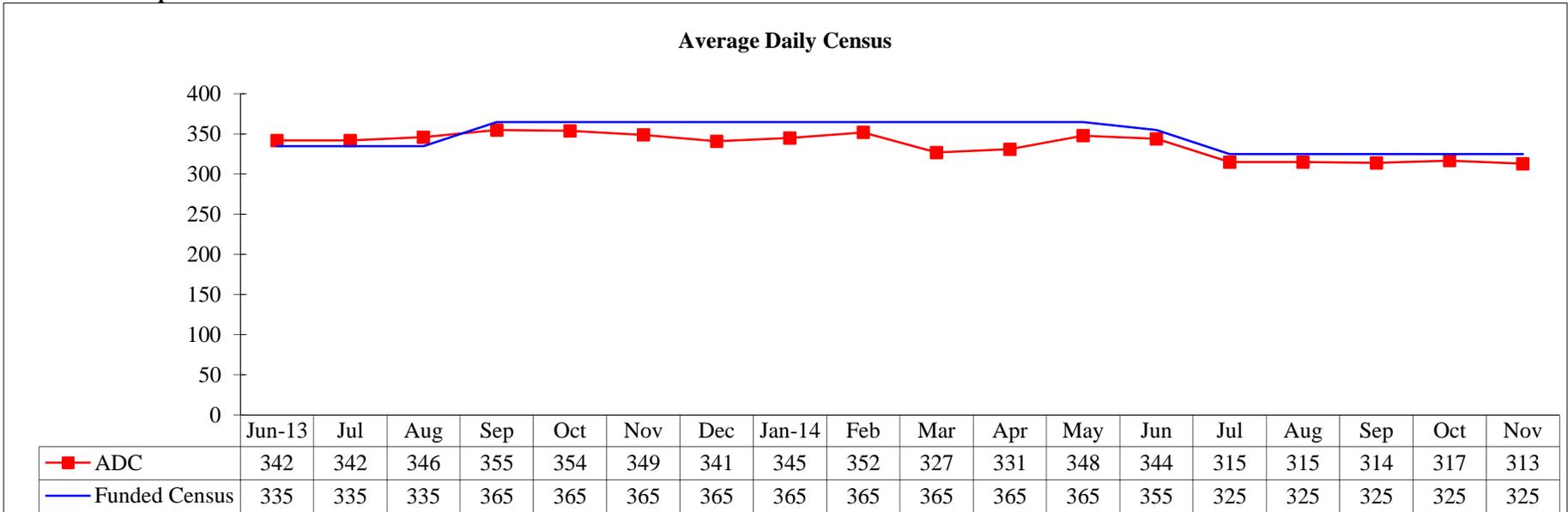
Average Daily Census



General Revenue & Third Party Average Daily Census



**AM - 4 Average Daily Census
Rusk State Hospital**



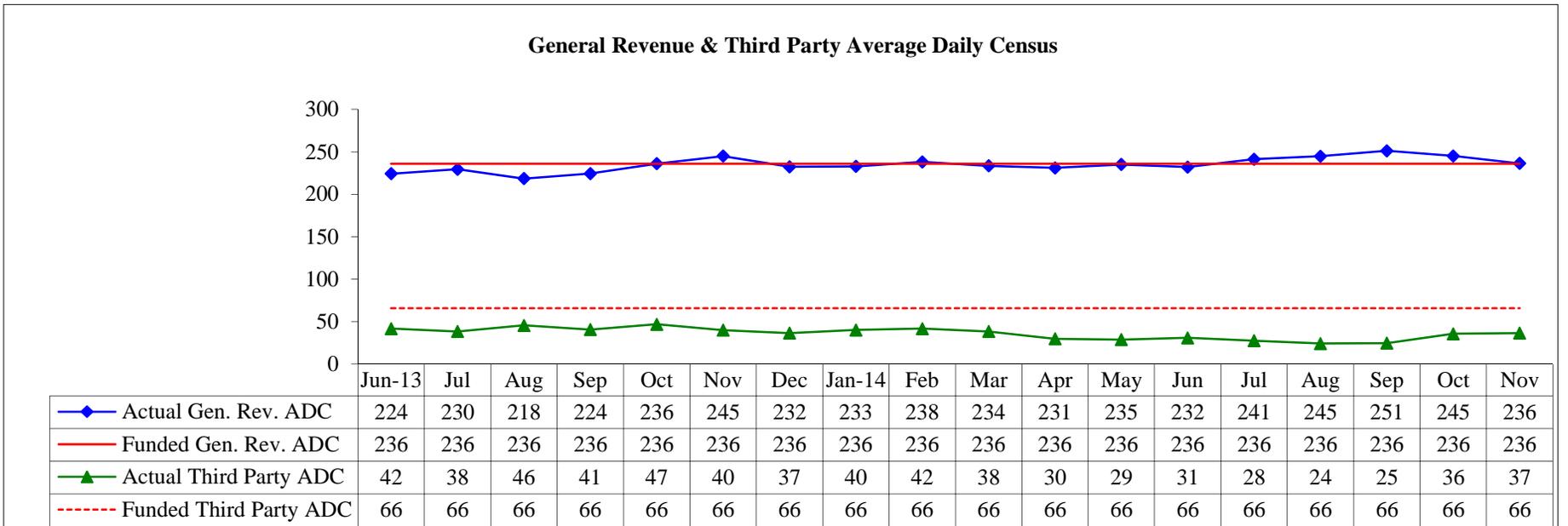
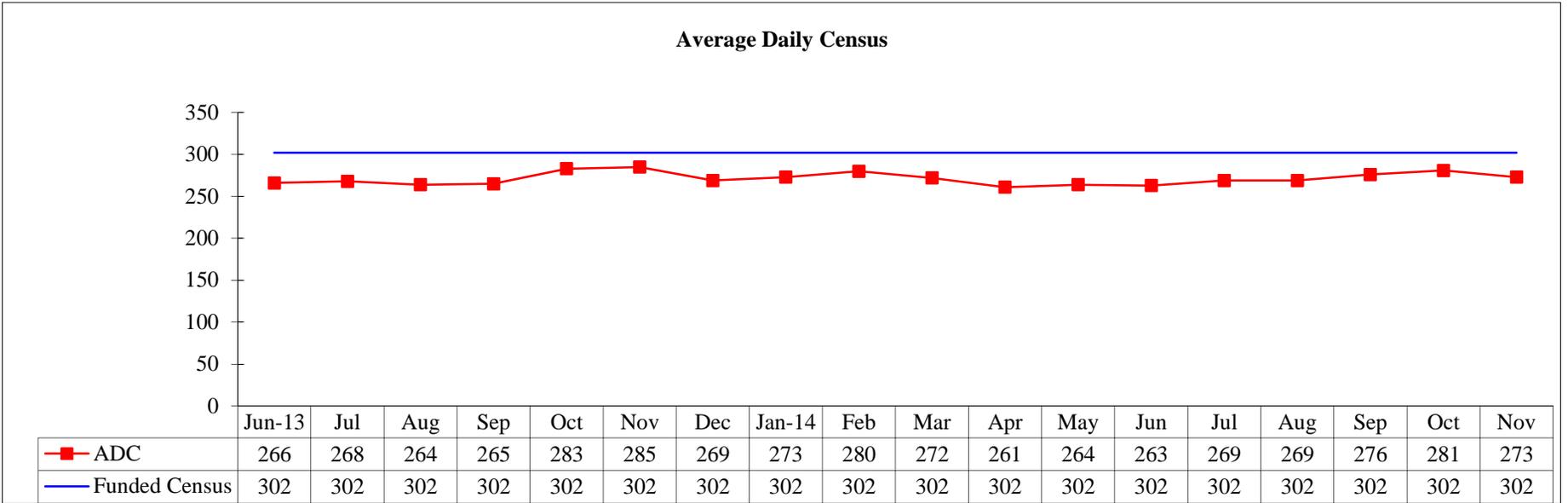
6/1/2014 10 beds removed from RSH funded census

7/1/2014 30 beds (UTHC-Tyler) removed from RSH funded census

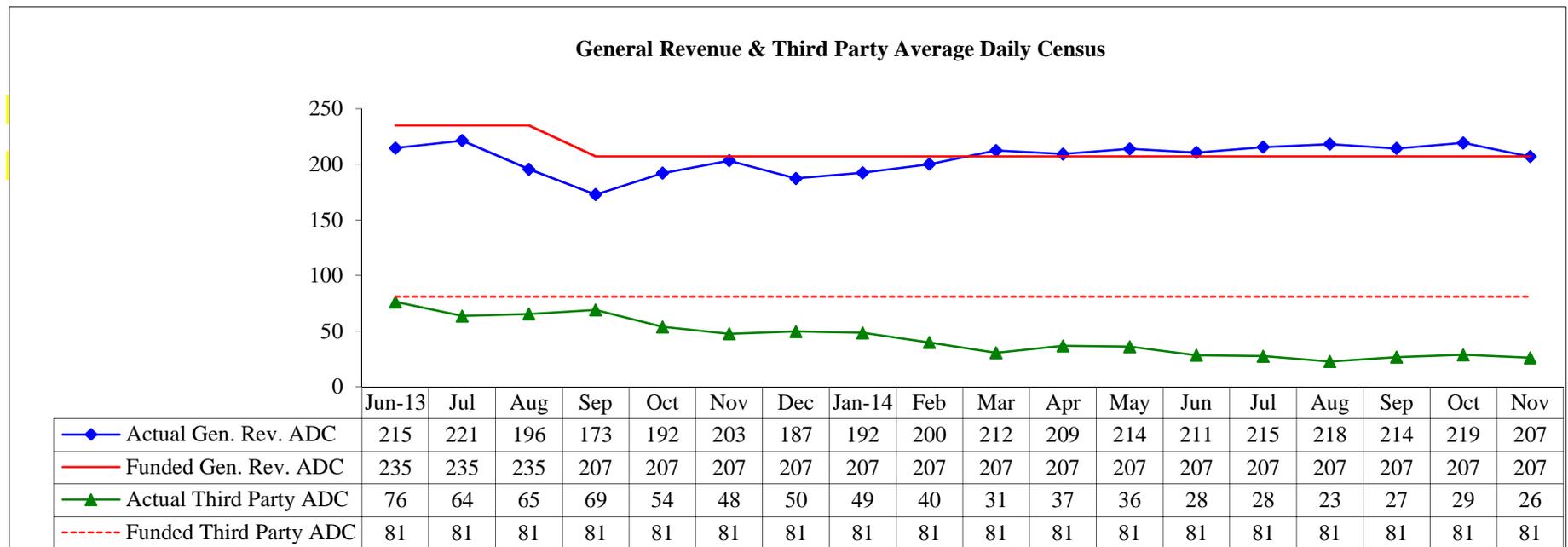
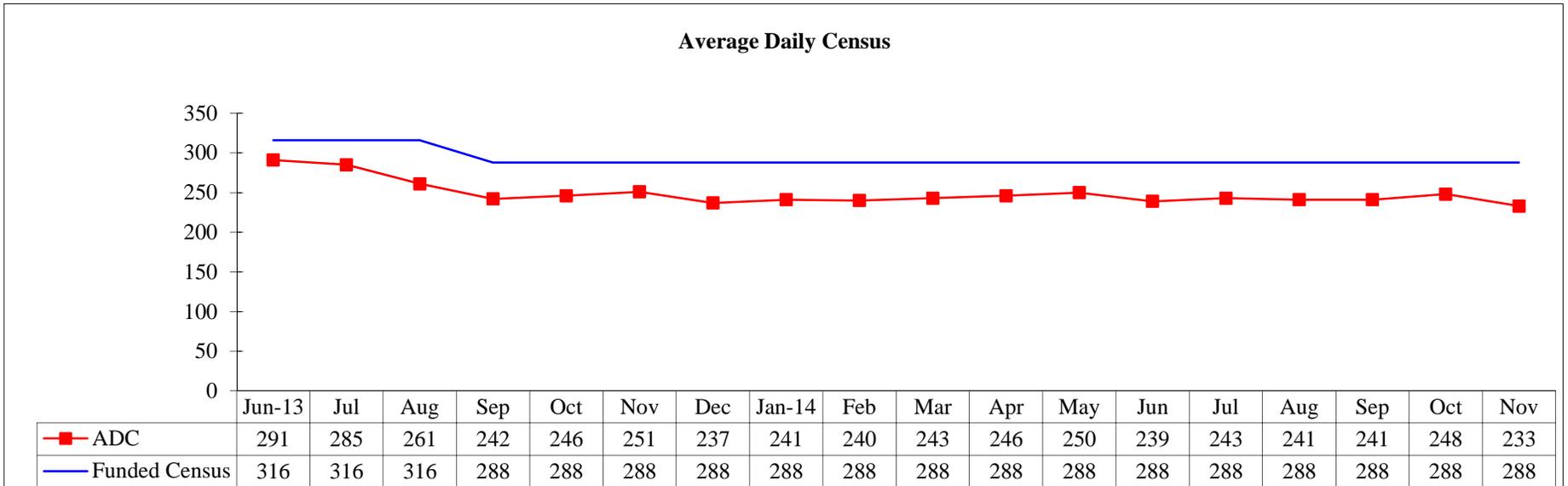
Chart: Office of Decision Support

Source: Care Reports HC022000 and HC022895

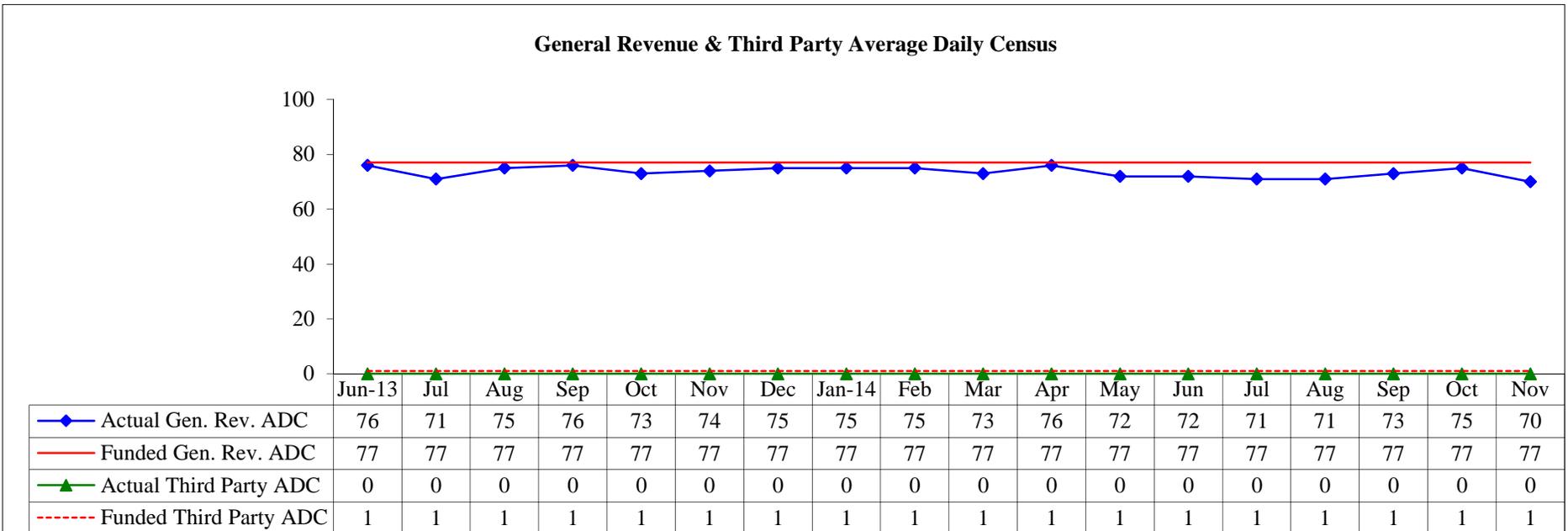
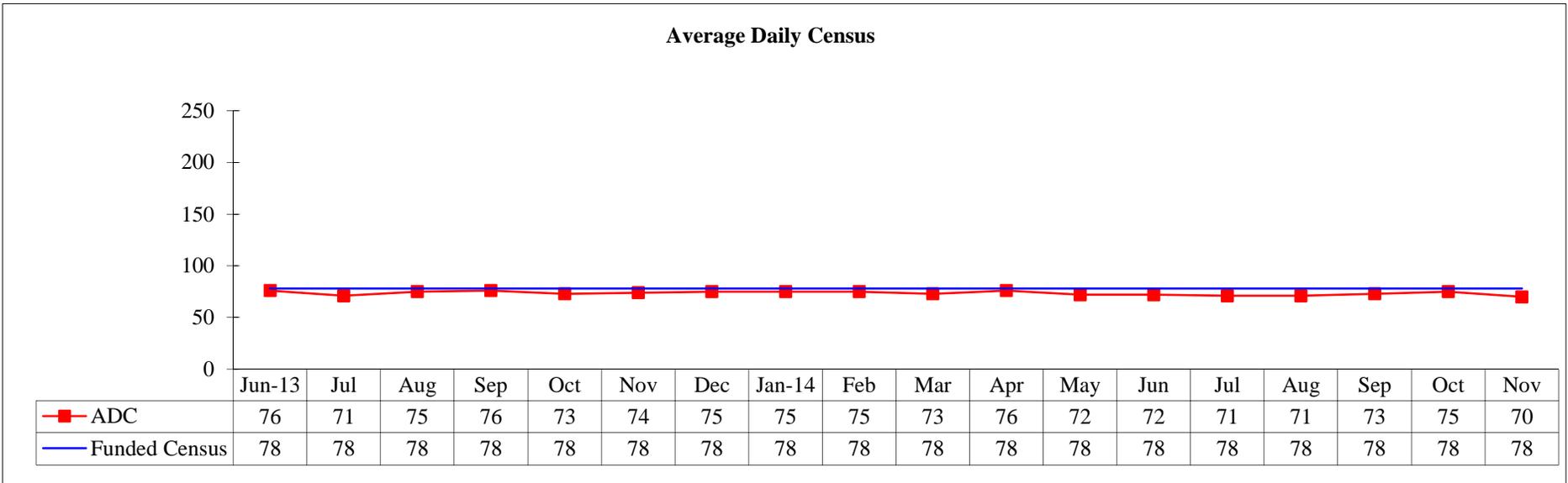
**AM - 4 Average Daily Census
San Antonio State Hospital**



**AM - 4 Average Daily Census
Terrell State Hospital**



**AM - 4 Average Daily Census
Waco Center For Youth**



**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Access Measure

AMO-5

Measure: Patients Hospitalized Over 365 Days

Timeframe: Quarterly

Definition

Report quarterly patients having been in the State Psychiatric Hospital over 365 days, identified by four categories: 1) need continued hospitalization (Civil/Forensic); 2) accepted for placement; 3) barrier to placement, and 4) criminal court involvement. The hospital and the local mental health authority will update a new continuity of care plan for any patient who is on the list in Category 3. This plan should be developed within 30 days after being identified.

Data Source

ODS Ad Hoc Report

Date Display and Chart Description

Chart with number of patients having been in the State Psychiatric Hospital over 365 days.

Purpose

Monitor the patients hospitalized over 365 days.

**AMO - 5 Patients Having Been in the State Psychiatric Hospital Over 365 Days
All State Hospitals - FY2015**

| | FY13 | | | | FY14 | | | | FY15 | | | |
|----------------------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|----------|----------|----------|
| | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 |
| Austin State Hospital | 40 | 37 | 37 | 29 | 32 | 37 | 42 | 40 | 41 | | | |
| Big Spring State Hospital | 100 | 105 | 112 | 117 | 117 | 113 | 107 | 105 | 107 | | | |
| El Paso Psychiatric Center | 7 | 9 | 8 | 8 | 9 | 9 | 11 | 12 | 14 | | | |
| Kerrville State Hospital | 153 | 156 | 162 | 162 | 151 | 163 | 171 | 168 | 168 | | | |
| North Texas State Hospital | 94 | 101 | 117 | 124 | 116 | 112 | 117 | 114 | 116 | | | |
| Rio Grande State Center | 2 | 3 | 1 | 1 | 1 | 2 | 2 | 1 | 0 | | | |
| Rusk State Hospital | 153 | 139 | 138 | 151 | 173 | 176 | 177 | 145 | 140 | | | |
| San Antonio State Hospital | 71 | 75 | 74 | 78 | 83 | 77 | 78 | 74 | 78 | | | |
| Terrell State Hospital | 28 | 30 | 27 | 28 | 24 | 23 | 28 | 27 | 30 | | | |
| Waco Center for Youth | 0 | 1 | 1 | 3 | 0 | 3 | 0 | 0 | 1 | | | |
| All State Hospitals | 648 | 656 | 677 | 701 | 706 | 715 | 733 | 686 | 695 | 0 | 0 | 0 |

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Access Measure

AMO-6

Measure: Calculate and Report Number and Type of All Admissions and Discharges, and the Percentage of Patients New to the System

Timeframe: Monthly

Definition

The hospital number of admissions and discharges to the same state hospital per mandated FYTD as calculated by CARE using data daily entered by each hospital. The new to the system rate is calculated by CARE using new to the system to any state hospital.

Data Source

CARE Report HC022020 (Admission)

CARE Report SR6877.HOS659 (Readmission Report)

Date Display and Chart Description

Chart with monthly data points of total admissions (voluntary, involuntary [OPC, emergency, temporary, extended, forensic, for MR services], discharges and percent new to the system for individual state hospitals and system-wide. Chart with monthly data points of total year to date admissions and discharges for individual state hospitals and system-wide.

Purpose

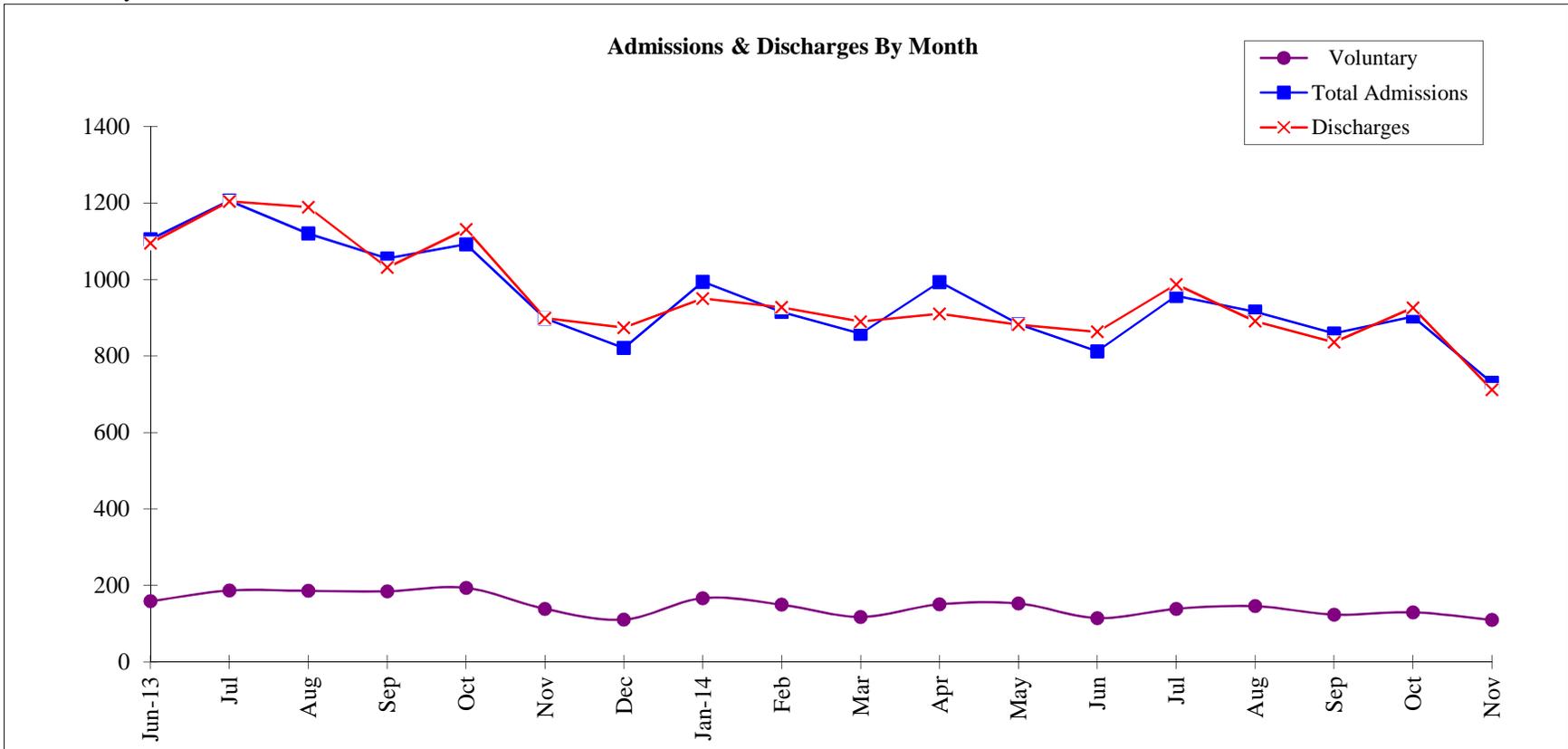
Monitor admissions, discharges and new to the system.

AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

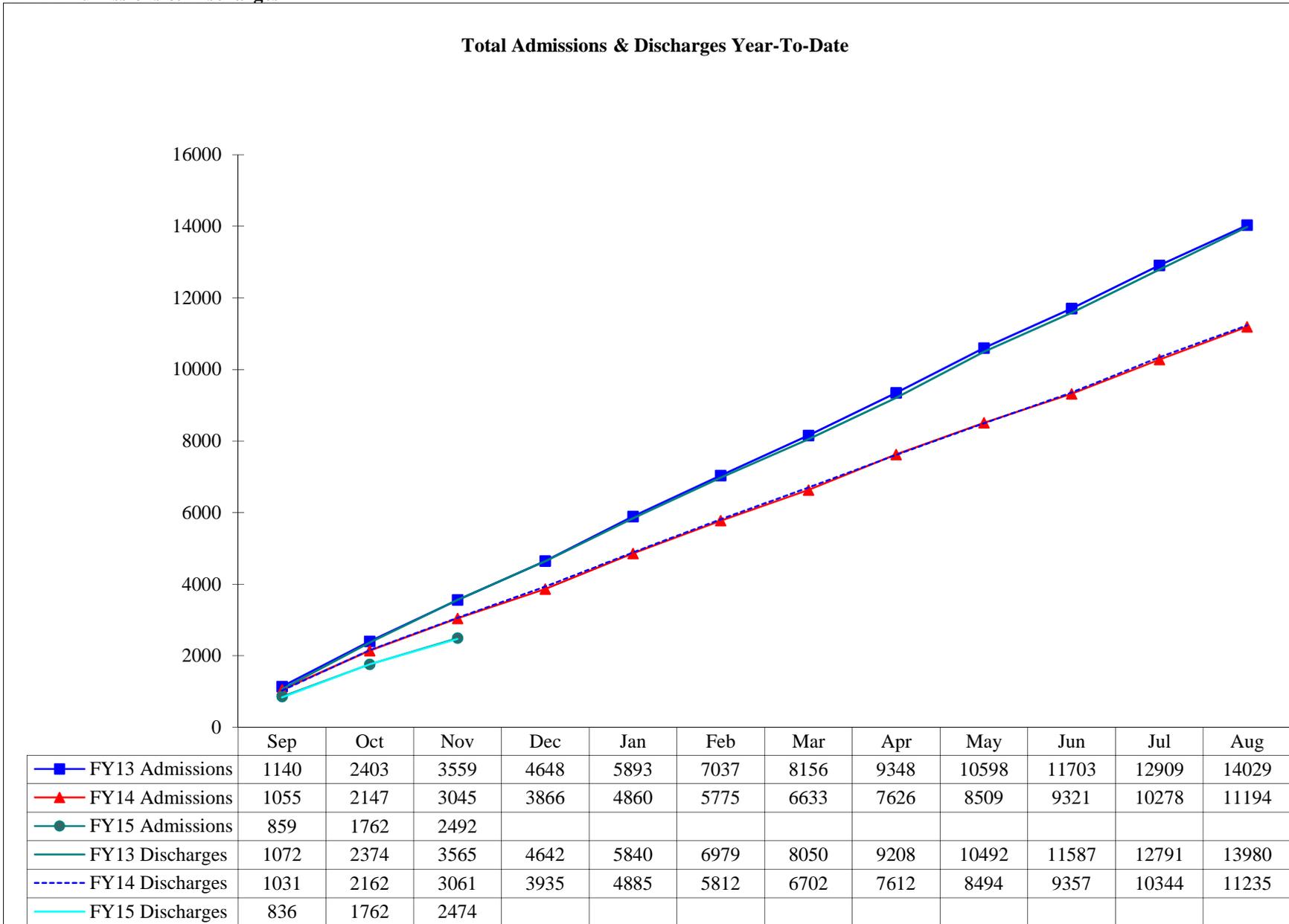
All State MH Hospitals

Admissions by Month

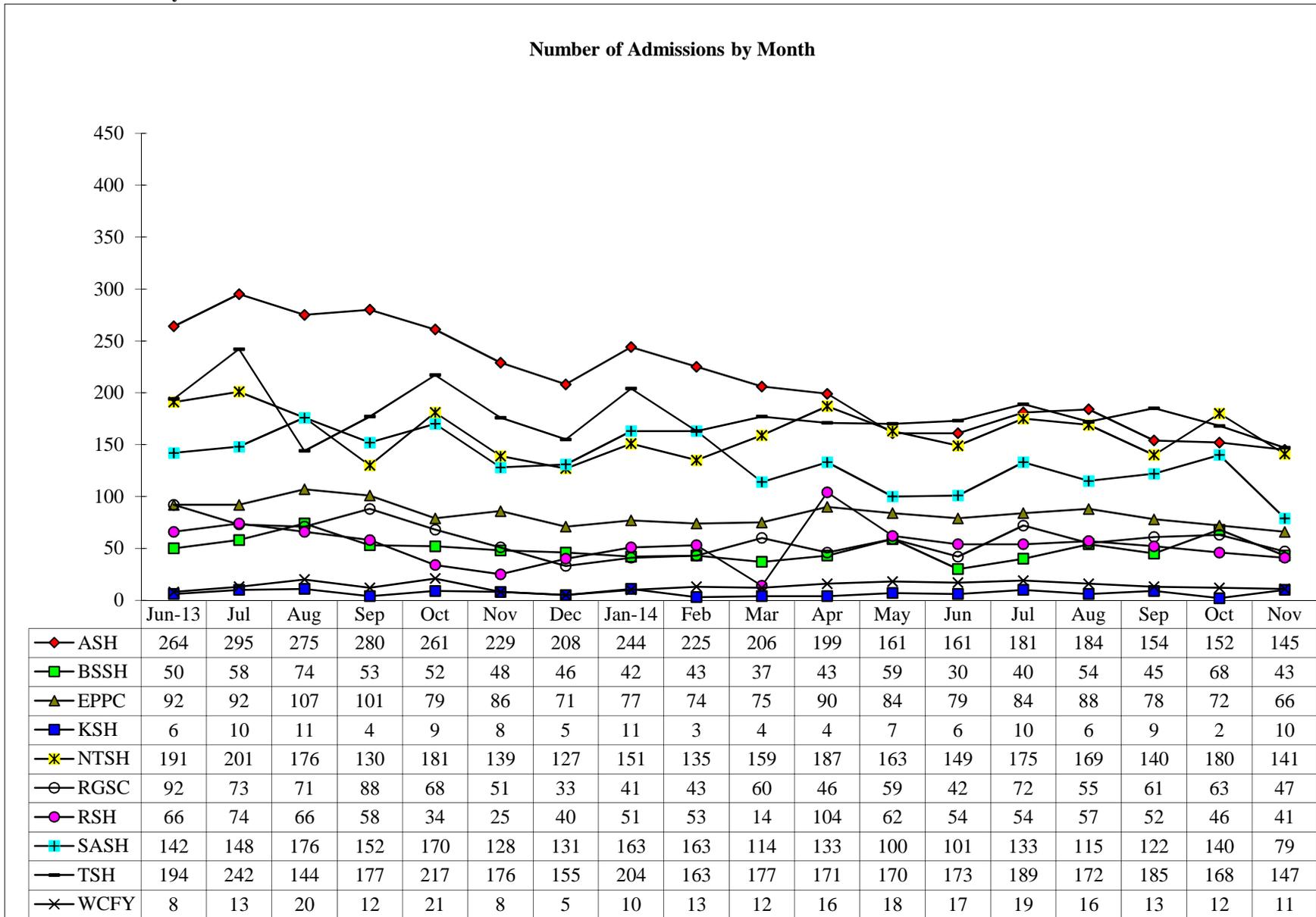
| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|-----------------------------|--------|------|------|------|------|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 1105 | 1206 | 1120 | 1055 | 1092 | 898 | 821 | 994 | 915 | 858 | 993 | 883 | 812 | 957 | 916 | 859 | 903 | 730 |
| Voluntary | 159 | 187 | 186 | 185 | 194 | 139 | 111 | 167 | 150 | 118 | 151 | 153 | 115 | 139 | 146 | 124 | 130 | 110 |
| Involuntary | 946 | 1019 | 934 | 870 | 898 | 759 | 710 | 827 | 765 | 740 | 842 | 730 | 697 | 818 | 770 | 735 | 773 | 620 |
| OPC | 244 | 274 | 207 | 212 | 222 | 195 | 171 | 219 | 228 | 208 | 217 | 209 | 203 | 225 | 205 | 229 | 219 | 184 |
| Emergency | 446 | 470 | 456 | 407 | 384 | 340 | 338 | 367 | 319 | 274 | 306 | 269 | 275 | 320 | 328 | 274 | 287 | 244 |
| Temporary | 74 | 95 | 84 | 82 | 102 | 79 | 69 | 69 | 68 | 64 | 92 | 65 | 66 | 82 | 68 | 60 | 70 | 53 |
| Extended | 4 | 3 | 0 | 1 | 2 | 1 | 3 | 1 | 1 | 8 | 1 | 2 | 3 | 1 | 4 | 1 | 3 | 2 |
| Forensic | 160 | 158 | 161 | 158 | 177 | 134 | 122 | 156 | 132 | 169 | 206 | 165 | 142 | 175 | 151 | 158 | 176 | 126 |
| Order for MR S ^a | 18 | 19 | 26 | 10 | 11 | 10 | 7 | 15 | 17 | 17 | 20 | 20 | 8 | 15 | 14 | 13 | 18 | 11 |
| Discharges | 1095 | 1204 | 1189 | 1031 | 1131 | 899 | 874 | 950 | 927 | 890 | 910 | 882 | 863 | 987 | 891 | 836 | 926 | 712 |
| % New to System | 46% | 47% | 47% | 47% | 46% | 48% | 50% | 51% | 44% | 49% | 47% | 50% | 49% | 47% | 48% | 45% | 49% | 45% |



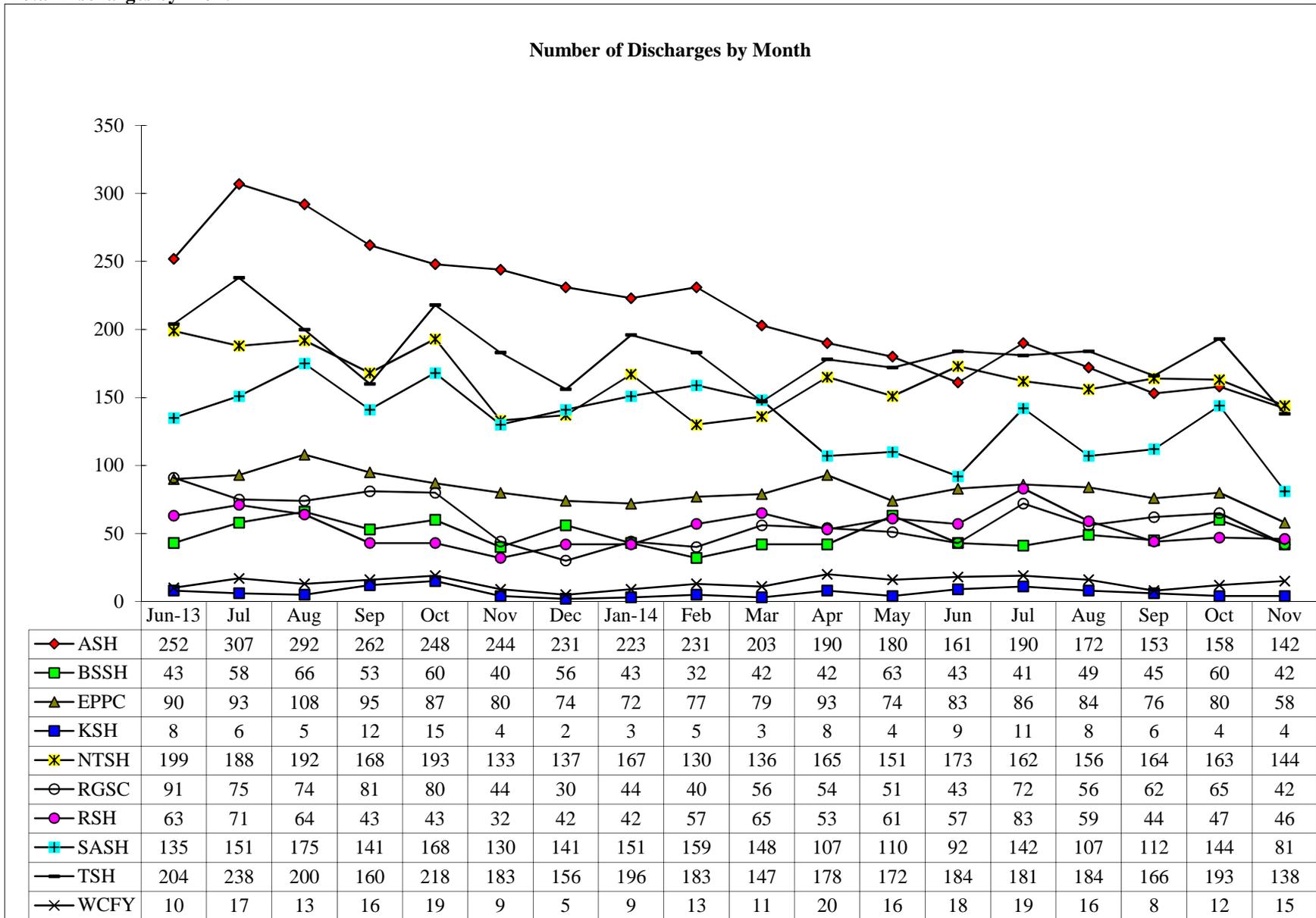
AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
All State MH Hospitals
FYTD Admissions & Discharges



AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
All State MH Hospitals
Total Admissions by Month



**AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
All State MH Hospitals
Total Discharges by Month**

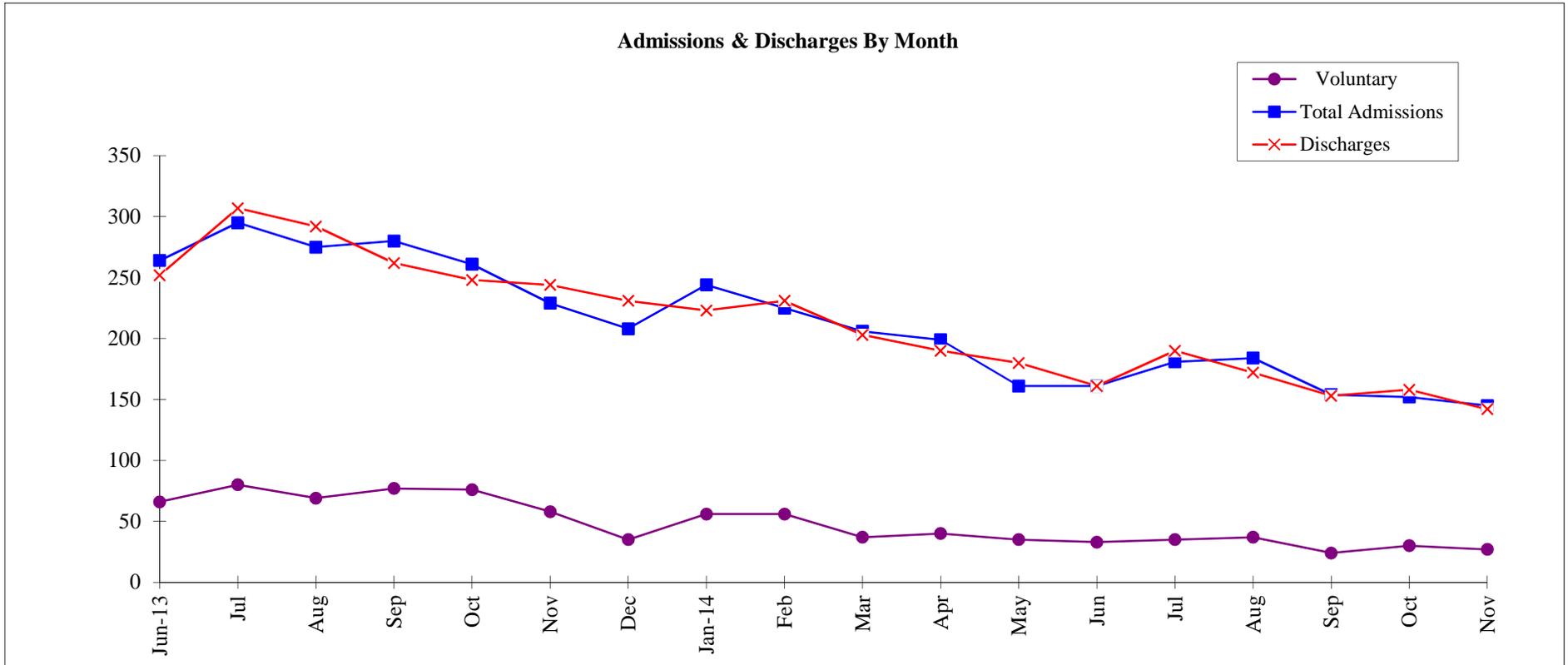


AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

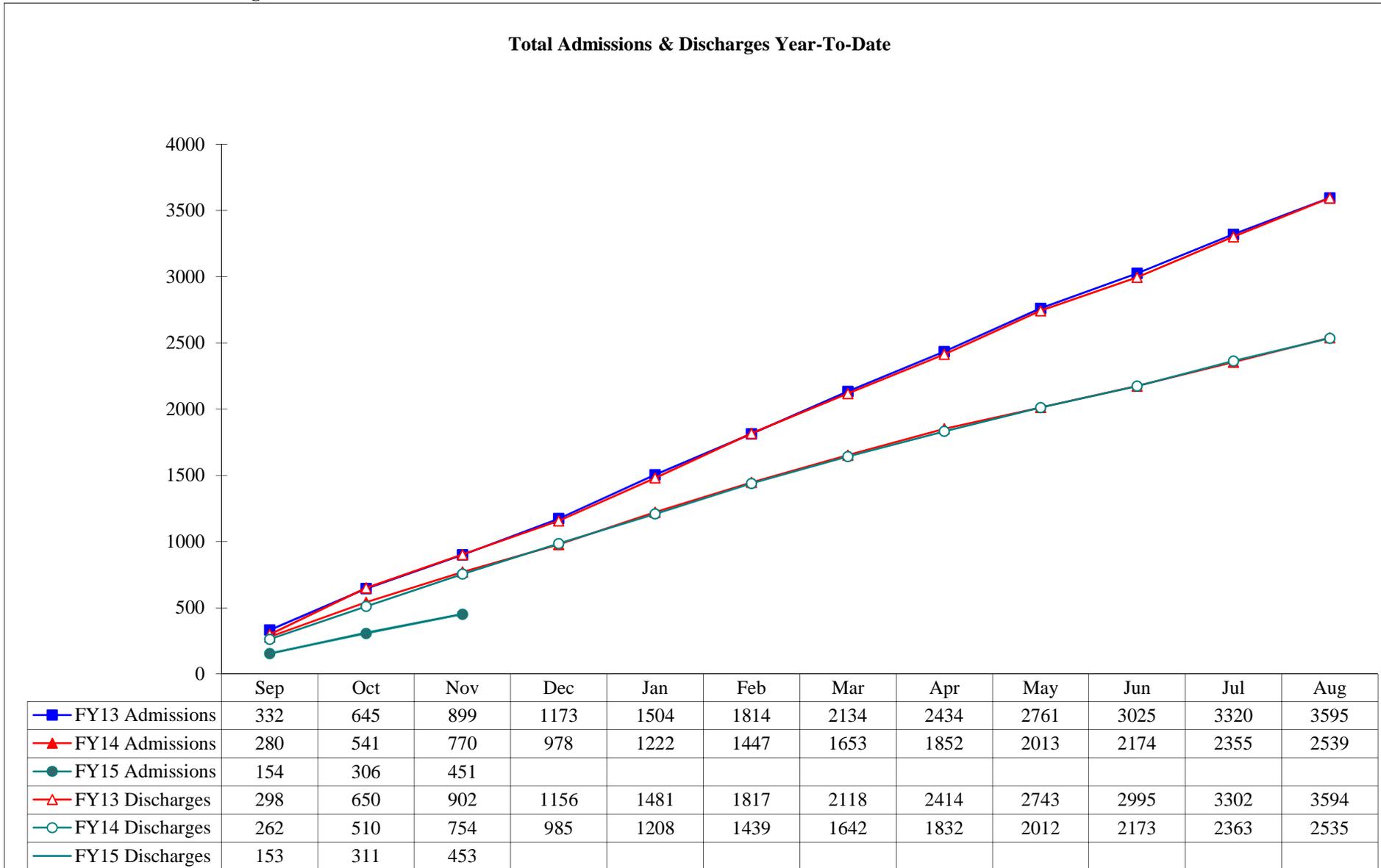
Austin State Hospital

Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 264 | 295 | 275 | 280 | 261 | 229 | 208 | 244 | 225 | 206 | 199 | 161 | 161 | 181 | 184 | 154 | 152 | 145 |
| Voluntary | 66 | 80 | 69 | 77 | 76 | 58 | 35 | 56 | 56 | 37 | 40 | 35 | 33 | 35 | 37 | 24 | 30 | 27 |
| Involuntary | 198 | 215 | 206 | 203 | 185 | 171 | 173 | 188 | 169 | 169 | 159 | 126 | 128 | 146 | 147 | 130 | 122 | 118 |
| OPC | 10 | 10 | 22 | 8 | 11 | 17 | 5 | 11 | 16 | 25 | 32 | 28 | 20 | 28 | 15 | 29 | 21 | 14 |
| Emergency | 141 | 166 | 145 | 146 | 139 | 127 | 138 | 149 | 119 | 101 | 77 | 54 | 71 | 79 | 100 | 55 | 52 | 72 |
| Temporary | 12 | 8 | 12 | 7 | 9 | 6 | 8 | 7 | 9 | 11 | 10 | 10 | 12 | 11 | 4 | 8 | 9 | 3 |
| Extended | 2 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 |
| Forensic | 32 | 30 | 27 | 42 | 25 | 21 | 22 | 21 | 24 | 31 | 39 | 34 | 24 | 28 | 27 | 38 | 40 | 29 |
| Order for MR Svc | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Discharges | 252 | 307 | 292 | 262 | 248 | 244 | 231 | 223 | 231 | 203 | 190 | 180 | 161 | 190 | 172 | 153 | 158 | 142 |
| % New to System | 46% | 44% | 46% | 49% | 44% | 50% | 59% | 53% | 47% | 45% | 39% | 43% | 43% | 41% | 46% | 39% | 38% | 48% |



AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
Austin State Hospital
FYTD Admissions & Discharges

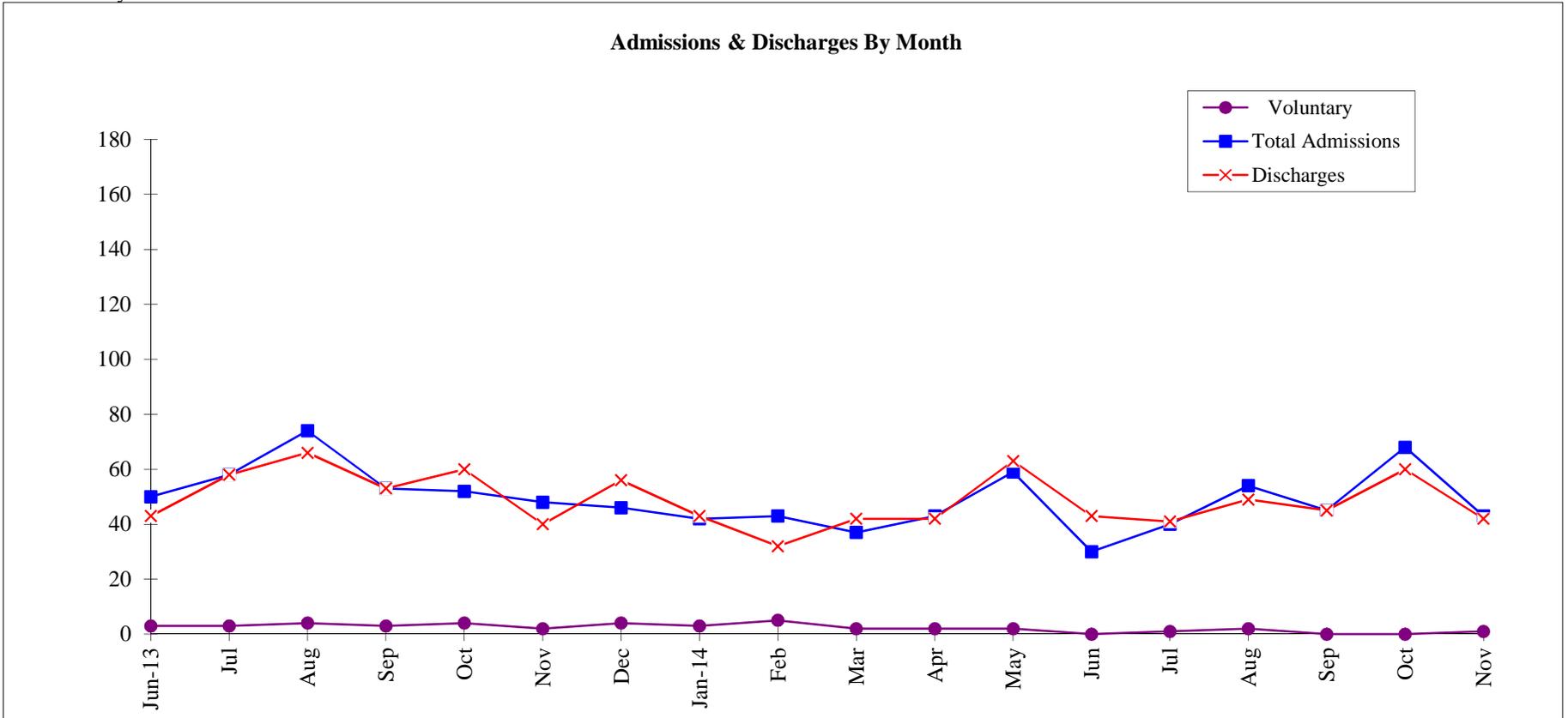


AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

Big Spring State Hospital

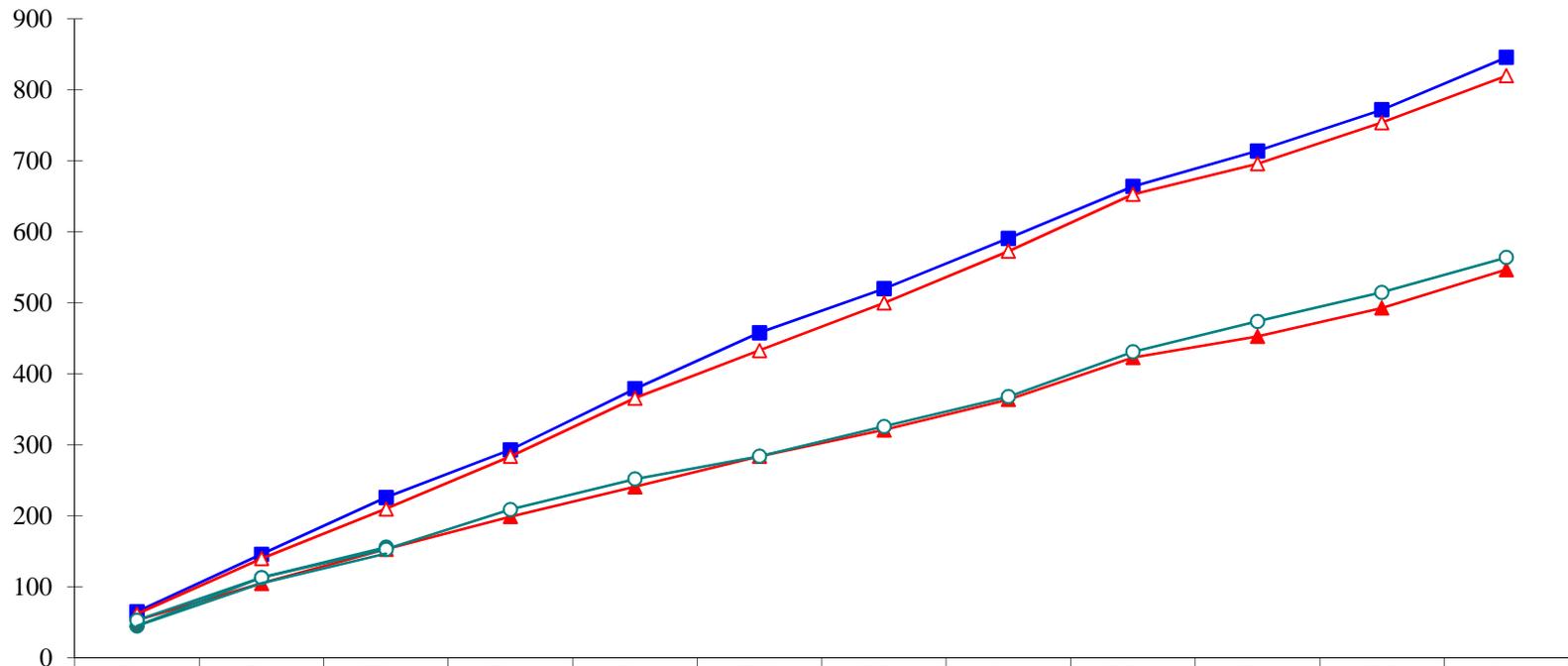
Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 50 | 58 | 74 | 53 | 52 | 48 | 46 | 42 | 43 | 37 | 43 | 59 | 30 | 40 | 54 | 45 | 68 | 43 |
| Voluntary | 3 | 3 | 4 | 3 | 4 | 2 | 4 | 3 | 5 | 2 | 2 | 2 | 0 | 1 | 2 | 0 | 0 | 1 |
| Involuntary | 47 | 55 | 70 | 50 | 48 | 46 | 42 | 39 | 38 | 35 | 41 | 57 | 30 | 39 | 52 | 45 | 68 | 42 |
| OPC | 11 | 3 | 7 | 4 | 6 | 7 | 7 | 3 | 3 | 4 | 5 | 4 | 3 | 3 | 4 | 5 | 9 | 7 |
| Emergency | 29 | 41 | 52 | 38 | 28 | 28 | 27 | 25 | 27 | 16 | 28 | 45 | 21 | 25 | 39 | 34 | 45 | 23 |
| Temporary | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 3 | 1 | 0 | 0 | 2 | 1 | 0 | 2 | 0 |
| Extended | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 3 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 |
| Forensic | 5 | 7 | 8 | 5 | 9 | 8 | 7 | 9 | 7 | 9 | 6 | 7 | 6 | 8 | 6 | 6 | 11 | 12 |
| Order for MR | 1 | 1 | 2 | 2 | 3 | 1 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 1 | 1 | 0 | 1 | 0 |
| Discharges | 43 | 58 | 66 | 53 | 60 | 40 | 56 | 43 | 32 | 42 | 42 | 63 | 43 | 41 | 49 | 45 | 60 | 42 |
| % New to System | 44% | 40% | 46% | 45% | 33% | 42% | 37% | 45% | 35% | 30% | 49% | 51% | 33% | 35% | 48% | 42% | 41% | 37% |



**AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
Big Spring State Hospital
FYTD Admissions & Discharges**

Total Admissions & Discharges Year-To-Date



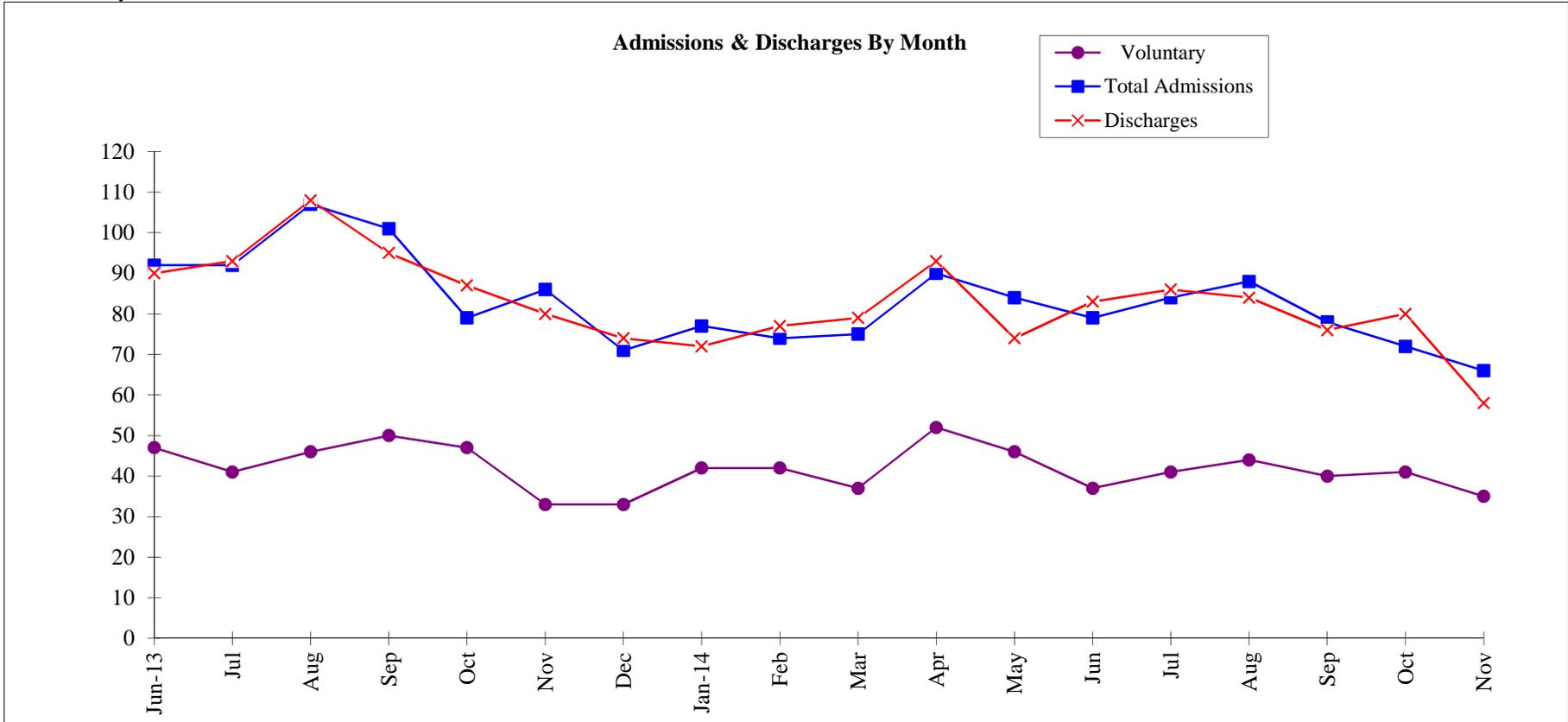
| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| —■— FY13 Admissions | 65 | 146 | 226 | 293 | 379 | 458 | 520 | 591 | 664 | 714 | 772 | 846 |
| —▲— FY14 Admissions | 53 | 105 | 153 | 199 | 241 | 284 | 321 | 364 | 423 | 453 | 493 | 547 |
| —●— FY15 Admissions | 45 | 113 | 156 | | | | | | | | | |
| —▲— FY13 Discharges | 62 | 140 | 210 | 284 | 366 | 433 | 500 | 573 | 653 | 696 | 754 | 820 |
| —○— FY14 Discharges | 53 | 113 | 153 | 209 | 252 | 284 | 326 | 368 | 431 | 474 | 515 | 564 |
| —○— FY15 Discharges | 45 | 105 | 147 | | | | | | | | | |

AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

El Paso Psychiatric Center

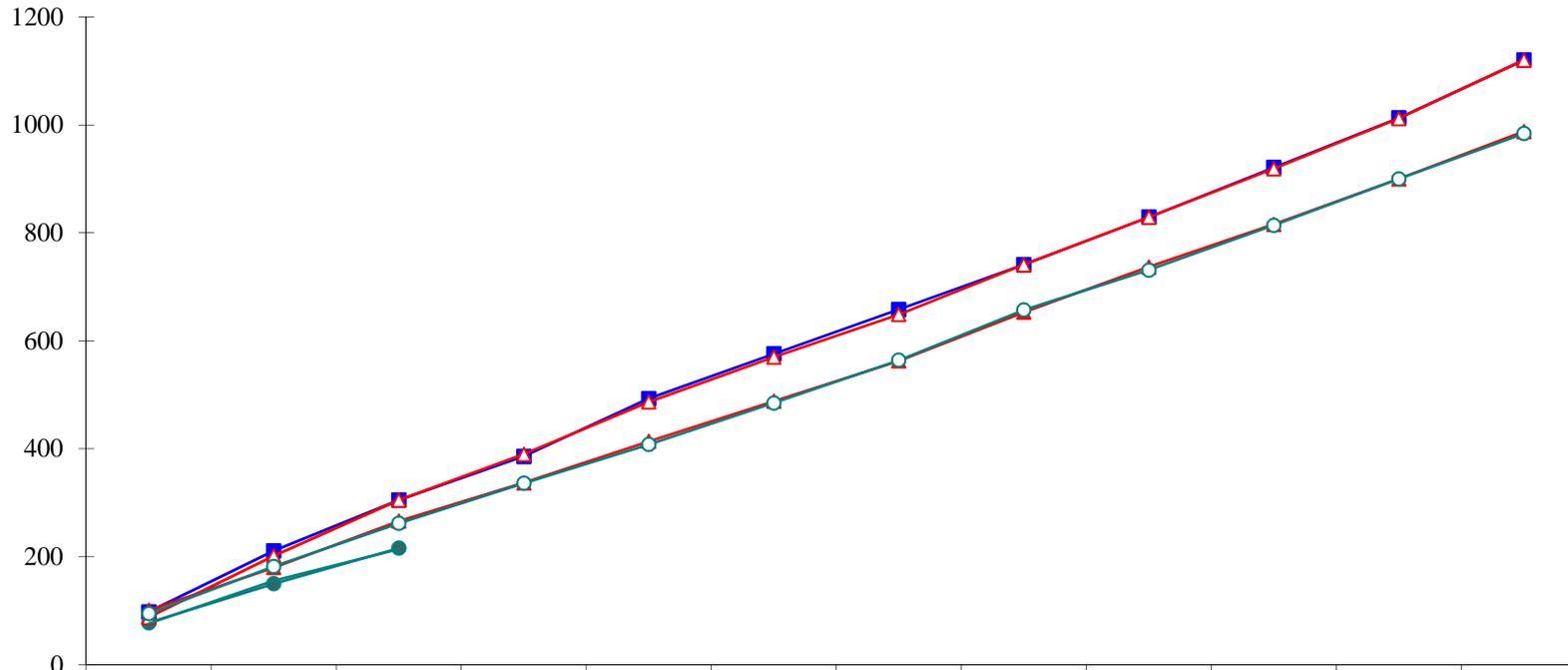
Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 92 | 92 | 107 | 101 | 79 | 86 | 71 | 77 | 74 | 75 | 90 | 84 | 79 | 84 | 88 | 78 | 72 | 66 |
| Voluntary | 47 | 41 | 46 | 50 | 47 | 33 | 33 | 42 | 42 | 37 | 52 | 46 | 37 | 41 | 44 | 40 | 41 | 35 |
| Involuntary | 45 | 51 | 61 | 51 | 32 | 53 | 38 | 35 | 32 | 38 | 38 | 38 | 42 | 43 | 44 | 38 | 31 | 31 |
| OPC | 24 | 21 | 31 | 29 | 10 | 12 | 13 | 13 | 23 | 22 | 16 | 29 | 26 | 13 | 21 | 22 | 18 | 18 |
| Emergency | 13 | 24 | 23 | 15 | 17 | 29 | 22 | 19 | 9 | 11 | 19 | 7 | 14 | 25 | 19 | 14 | 9 | 11 |
| Temporary | 0 | 3 | 4 | 2 | 2 | 4 | 1 | 2 | 0 | 5 | 3 | 1 | 2 | 3 | 2 | 2 | 0 | 0 |
| Extended | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Forensic | 8 | 3 | 3 | 5 | 3 | 8 | 2 | 0 | 0 | 0 | 0 | 1 | 0 | 2 | 2 | 0 | 4 | 1 |
| Order for MR | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Discharges | 90 | 93 | 108 | 95 | 87 | 80 | 74 | 72 | 77 | 79 | 93 | 74 | 83 | 86 | 84 | 76 | 80 | 58 |
| % New to System | 42% | 53% | 47% | 51% | 54% | 59% | 62% | 53% | 43% | 52% | 56% | 57% | 54% | 48% | 48% | 49% | 58% | 44% |



**AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
El Paso Psychiatric Center
FYTD Admissions & Discharges**

Total Admissions & Discharges Year-To-Date



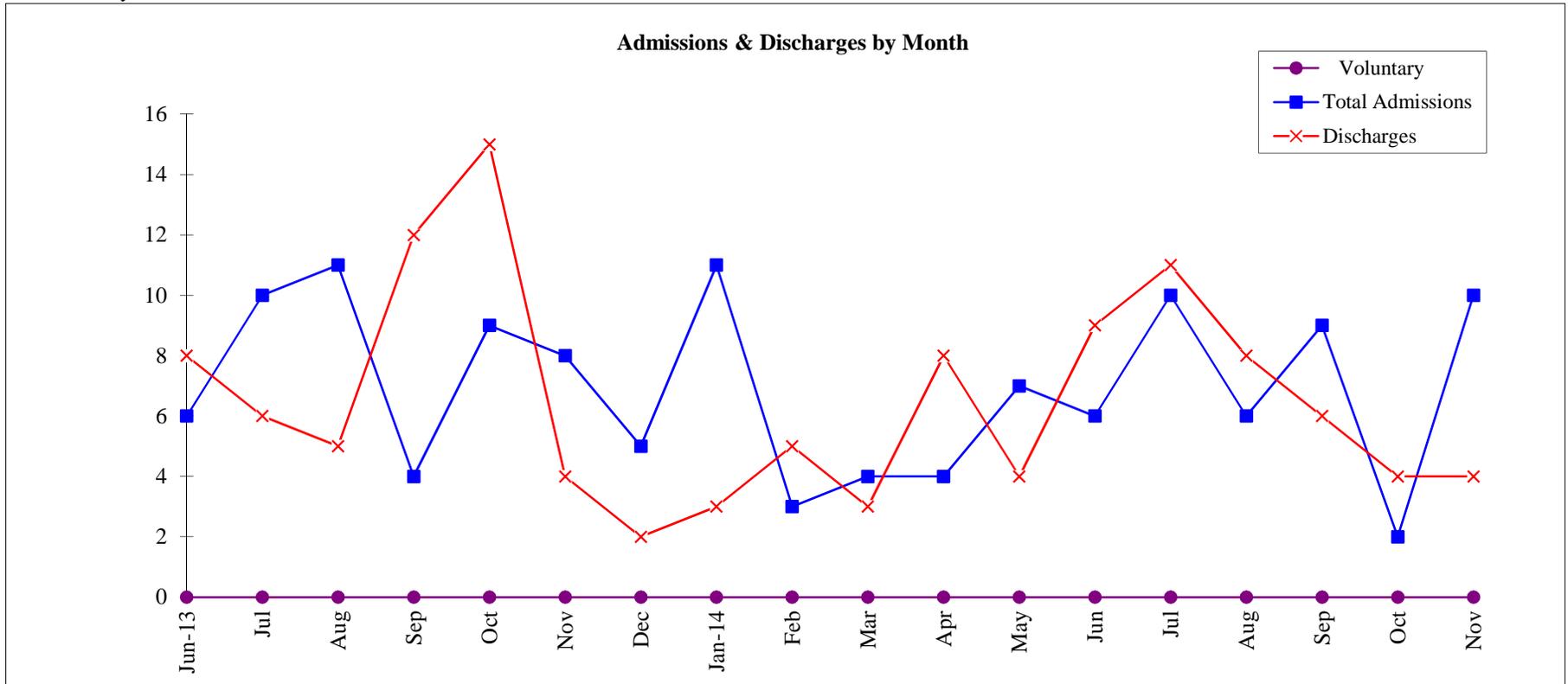
| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|------|------|
| ■ FY13 Admissions | 98 | 211 | 305 | 386 | 493 | 576 | 658 | 741 | 829 | 921 | 1013 | 1120 |
| ▲ FY14 Admissions | 101 | 180 | 266 | 337 | 414 | 488 | 563 | 653 | 737 | 816 | 900 | 988 |
| ● FY15 Admissions | 78 | 150 | 216 | | | | | | | | | |
| ▾ FY13 Discharges | 88 | 202 | 305 | 390 | 487 | 570 | 649 | 741 | 829 | 919 | 1012 | 1120 |
| ○ FY14 Discharges | 95 | 182 | 262 | 336 | 408 | 485 | 564 | 657 | 731 | 814 | 900 | 984 |
| — FY15 Discharges | 76 | 156 | 214 | | | | | | | | | |

AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

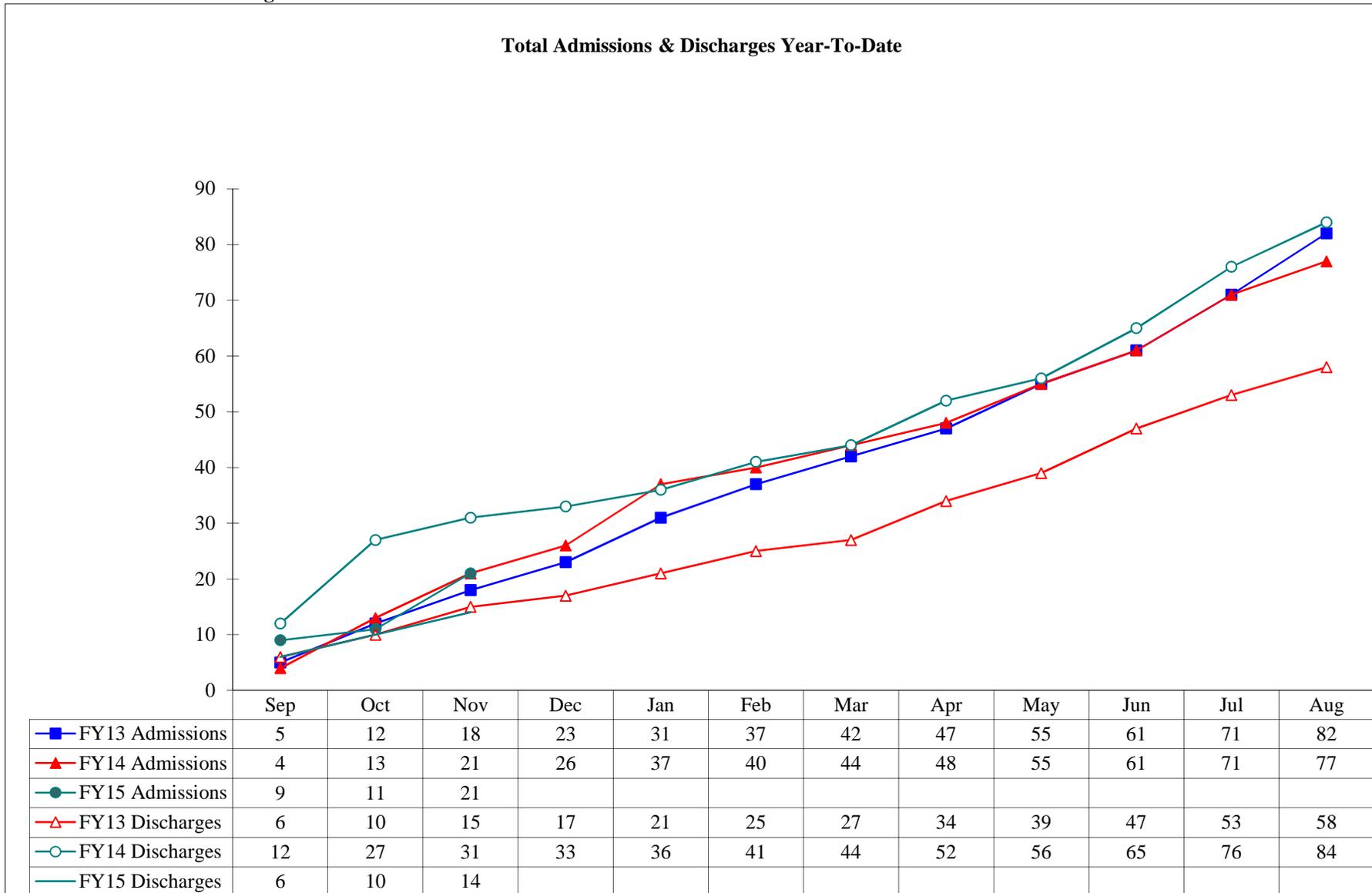
Kerrville State Hospital

Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 6 | 10 | 11 | 4 | 9 | 8 | 5 | 11 | 3 | 4 | 4 | 7 | 6 | 10 | 6 | 9 | 2 | 10 |
| Voluntary | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Involuntary | 6 | 10 | 11 | 4 | 9 | 8 | 5 | 11 | 3 | 4 | 4 | 7 | 6 | 10 | 6 | 9 | 2 | 10 |
| OPC | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Emergency | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Temporary | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Extended | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Forensic | 6 | 10 | 11 | 4 | 9 | 8 | 5 | 11 | 3 | 4 | 4 | 7 | 6 | 10 | 6 | 9 | 2 | 9 |
| Order for MR | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Discharges | 8 | 6 | 5 | 12 | 15 | 4 | 2 | 3 | 5 | 3 | 8 | 4 | 9 | 11 | 8 | 6 | 4 | 4 |
| % New to System | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |



**AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
Kerrville State Hospital
FYTD Admissions & Discharges**

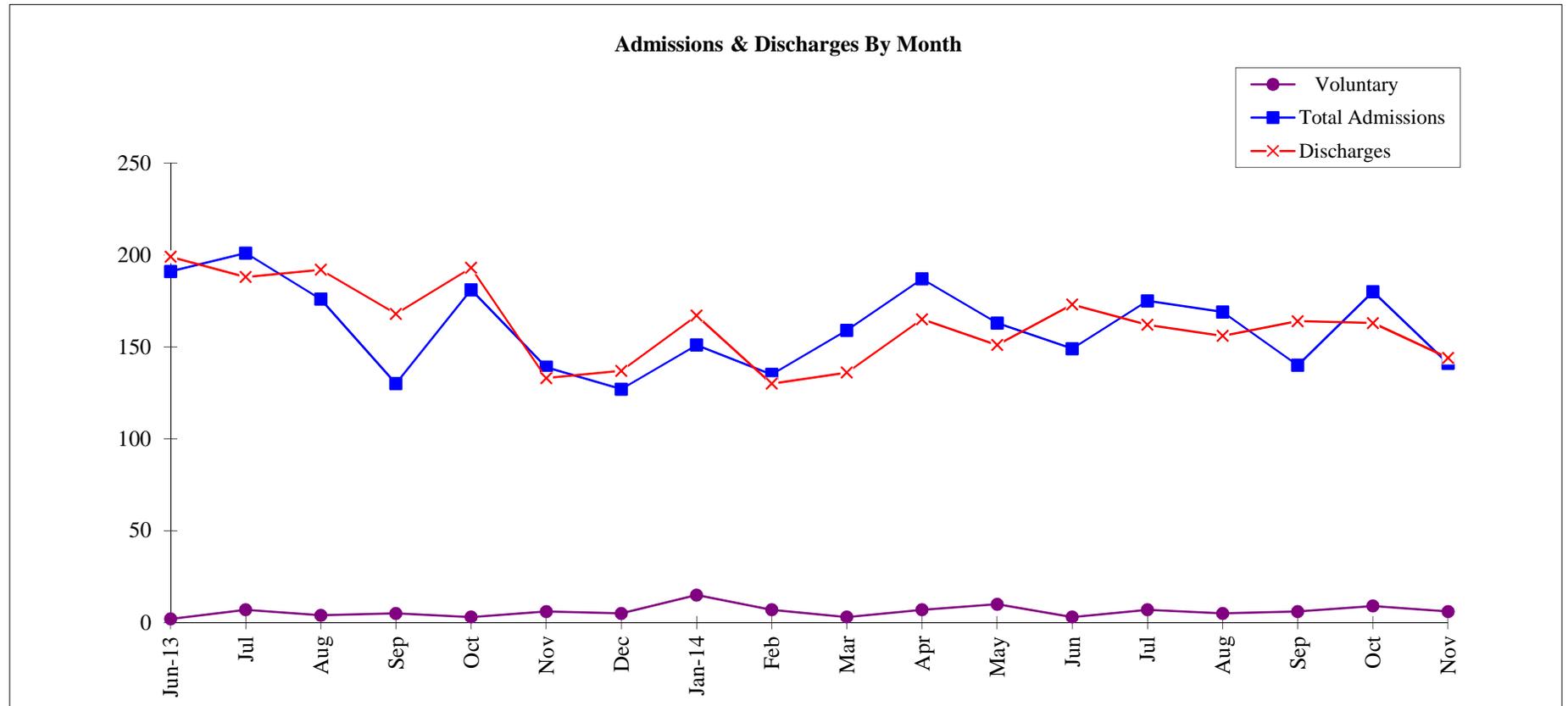


AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

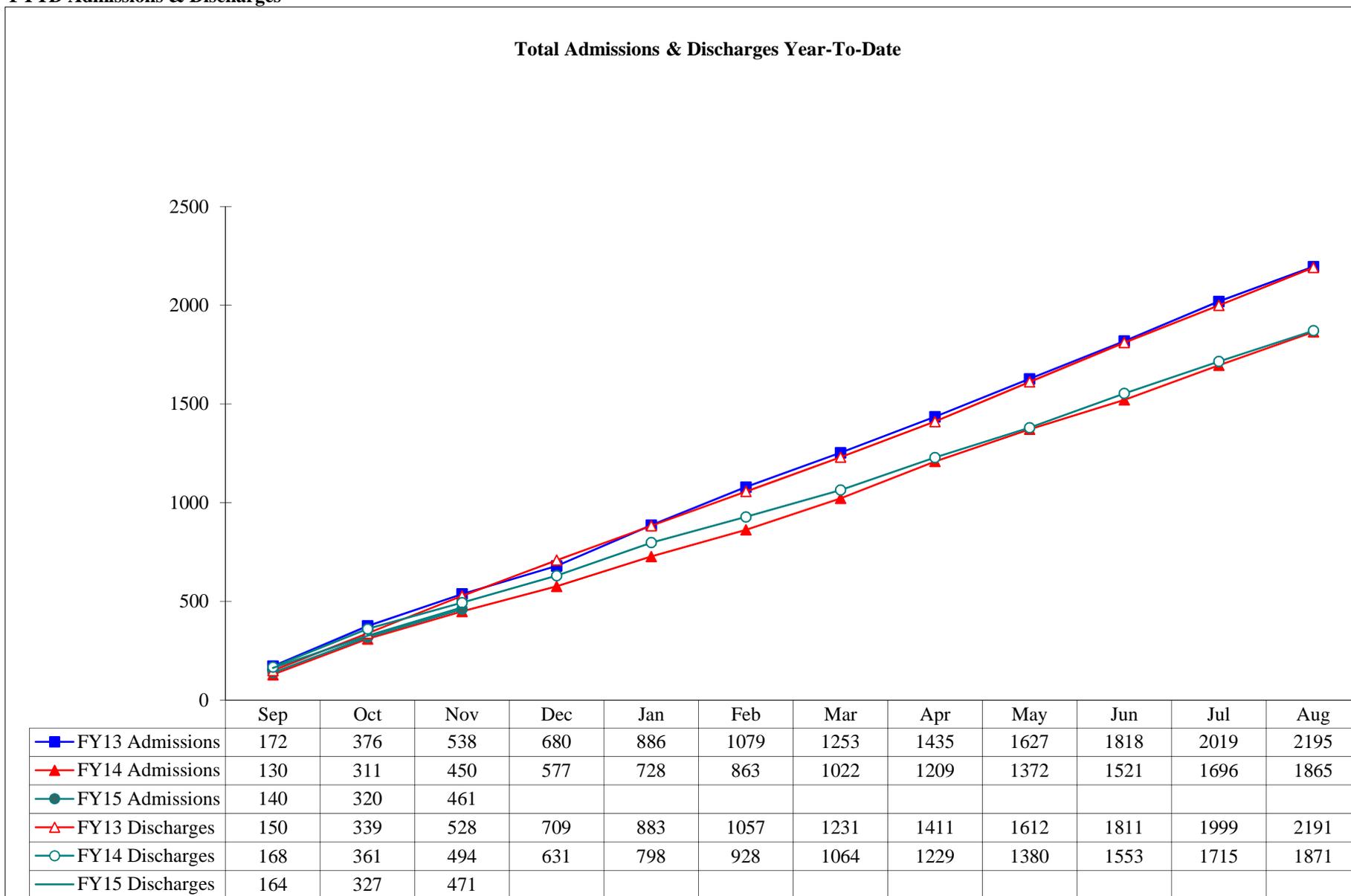
North Texas State Hospital

Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 191 | 201 | 176 | 130 | 181 | 139 | 127 | 151 | 135 | 159 | 187 | 163 | 149 | 175 | 169 | 140 | 180 | 141 |
| Voluntary | 2 | 7 | 4 | 5 | 3 | 6 | 5 | 15 | 7 | 3 | 7 | 10 | 3 | 7 | 5 | 6 | 9 | 6 |
| Involuntary | 189 | 194 | 172 | 125 | 178 | 133 | 122 | 136 | 128 | 156 | 180 | 153 | 146 | 168 | 164 | 134 | 171 | 135 |
| OPC | 32 | 29 | 21 | 21 | 20 | 6 | 7 | 20 | 18 | 22 | 19 | 23 | 20 | 22 | 27 | 20 | 27 | 22 |
| Emergency | 59 | 56 | 44 | 38 | 49 | 43 | 38 | 43 | 38 | 37 | 45 | 40 | 48 | 39 | 45 | 47 | 48 | 40 |
| Temporary | 25 | 37 | 25 | 28 | 33 | 35 | 35 | 24 | 24 | 20 | 30 | 18 | 25 | 28 | 33 | 17 | 17 | 26 |
| Extended | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 2 | 0 | 2 | 0 |
| Forensic | 59 | 58 | 65 | 33 | 73 | 43 | 35 | 38 | 35 | 61 | 69 | 58 | 45 | 66 | 46 | 39 | 63 | 37 |
| Order for MR | 13 | 13 | 17 | 5 | 3 | 6 | 7 | 11 | 13 | 14 | 17 | 14 | 8 | 13 | 11 | 11 | 14 | 10 |
| Discharges | 199 | 188 | 192 | 168 | 193 | 133 | 137 | 167 | 130 | 136 | 165 | 151 | 173 | 162 | 156 | 164 | 163 | 144 |
| % New to System | 48% | 51% | 53% | 49% | 49% | 47% | 57% | 59% | 51% | 52% | 52% | 44% | 54% | 53% | 51% | 51% | 56% | 50% |



**AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
North Texas State Hospital
FYTD Admissions & Discharges**

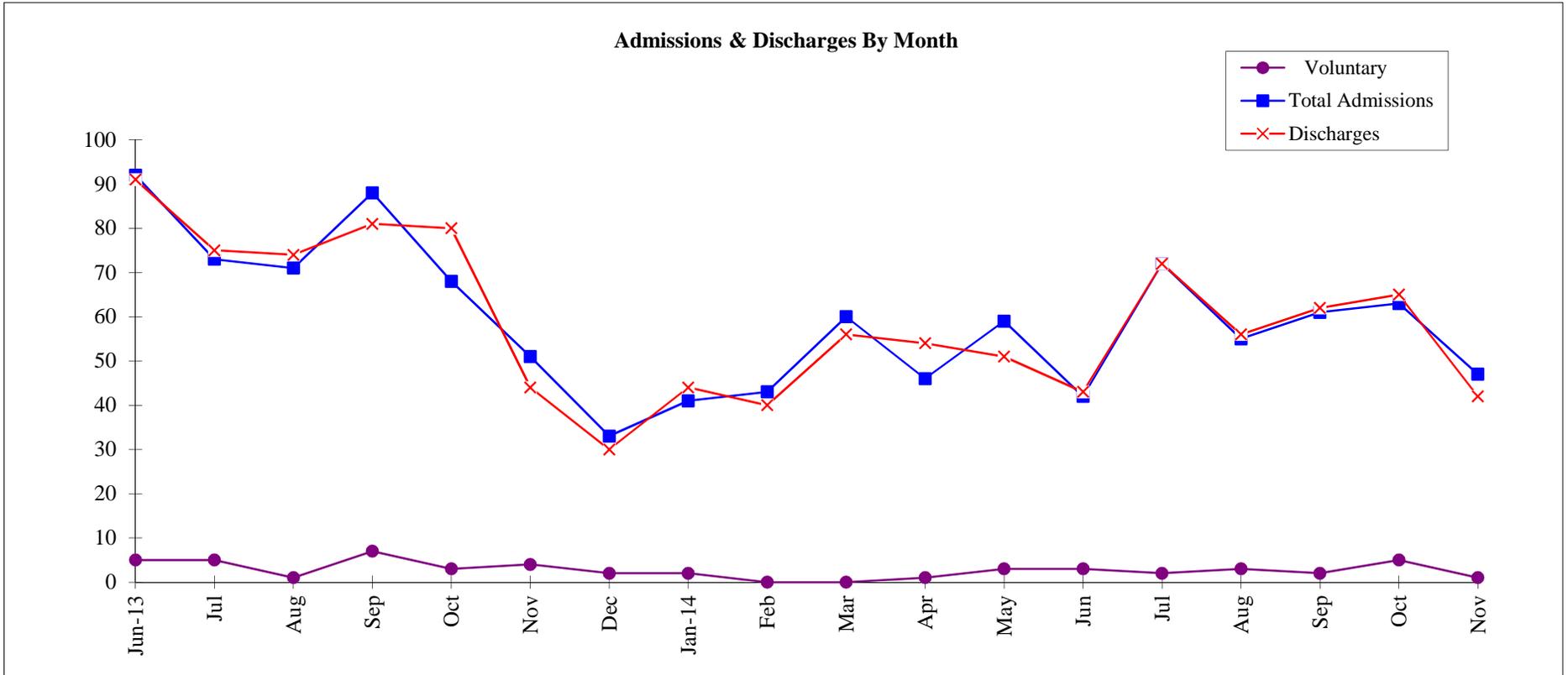


AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

Rio Grande State Center

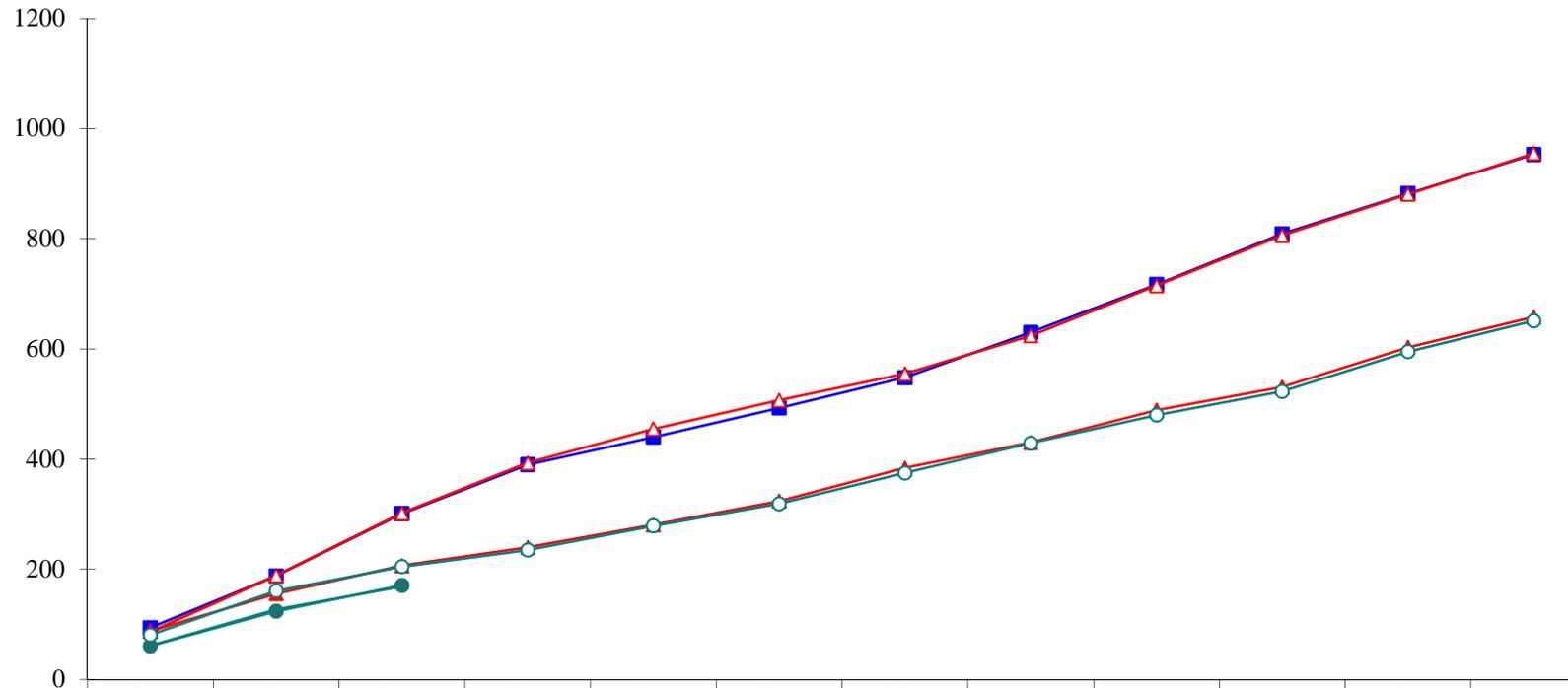
Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 92 | 73 | 71 | 88 | 68 | 51 | 33 | 41 | 43 | 60 | 46 | 59 | 42 | 72 | 55 | 61 | 63 | 47 |
| Voluntary | 5 | 5 | 1 | 7 | 3 | 4 | 2 | 2 | 0 | 0 | 1 | 3 | 3 | 2 | 3 | 2 | 5 | 1 |
| Involuntary | 87 | 68 | 70 | 81 | 65 | 47 | 31 | 39 | 43 | 60 | 45 | 56 | 39 | 70 | 52 | 59 | 58 | 46 |
| OPC | 2 | 0 | 0 | 3 | 2 | 2 | 1 | 0 | 3 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Emergency | 79 | 60 | 65 | 72 | 54 | 35 | 23 | 28 | 30 | 46 | 44 | 42 | 39 | 62 | 46 | 53 | 57 | 39 |
| Temporary | 1 | 2 | 1 | 3 | 0 | 0 | 0 | 2 | 1 | 2 | 1 | 0 | 0 | 1 | 1 | 0 | 1 | 1 |
| Extended | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Forensic | 5 | 6 | 4 | 3 | 9 | 10 | 7 | 9 | 9 | 11 | 0 | 14 | 0 | 6 | 5 | 6 | 0 | 6 |
| Order for MR | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| Discharges | 91 | 75 | 74 | 81 | 80 | 44 | 30 | 44 | 40 | 56 | 54 | 51 | 43 | 72 | 56 | 62 | 65 | 42 |
| % New to System | 49% | 47% | 46% | 49% | 39% | 27% | 26% | 27% | 33% | 46% | 32% | 41% | 52% | 44% | 49% | 50% | 57% | 42% |



AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
Rio Grande State Center
FYTD Admissions & Discharges

Total Admissions & Discharges Year-To-Date



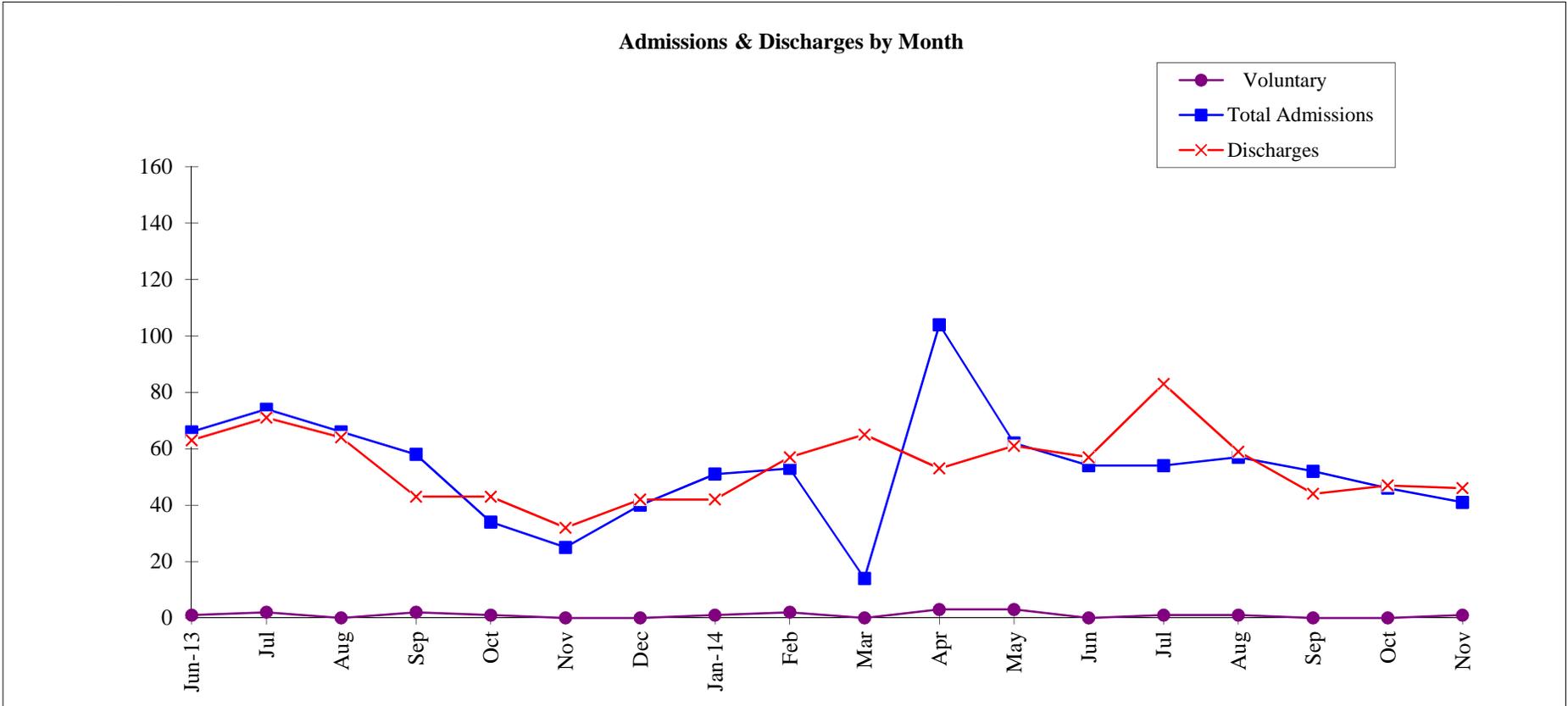
| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|---------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| —■— FY13 Admissions | 94 | 188 | 301 | 390 | 440 | 493 | 548 | 630 | 717 | 809 | 882 | 953 |
| —▲— FY14 Admissions | 88 | 156 | 207 | 240 | 281 | 324 | 384 | 430 | 489 | 531 | 603 | 658 |
| —●— FY15 Admissions | 61 | 124 | 171 | | | | | | | | | |
| —▲— FY13 Discharges | 87 | 189 | 302 | 393 | 455 | 507 | 555 | 624 | 715 | 806 | 881 | 955 |
| —○— FY14 Discharges | 81 | 161 | 205 | 235 | 279 | 319 | 375 | 429 | 480 | 523 | 595 | 651 |
| —■— FY15 Discharges | 62 | 127 | 169 | | | | | | | | | |

AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

Rusk State Hospital

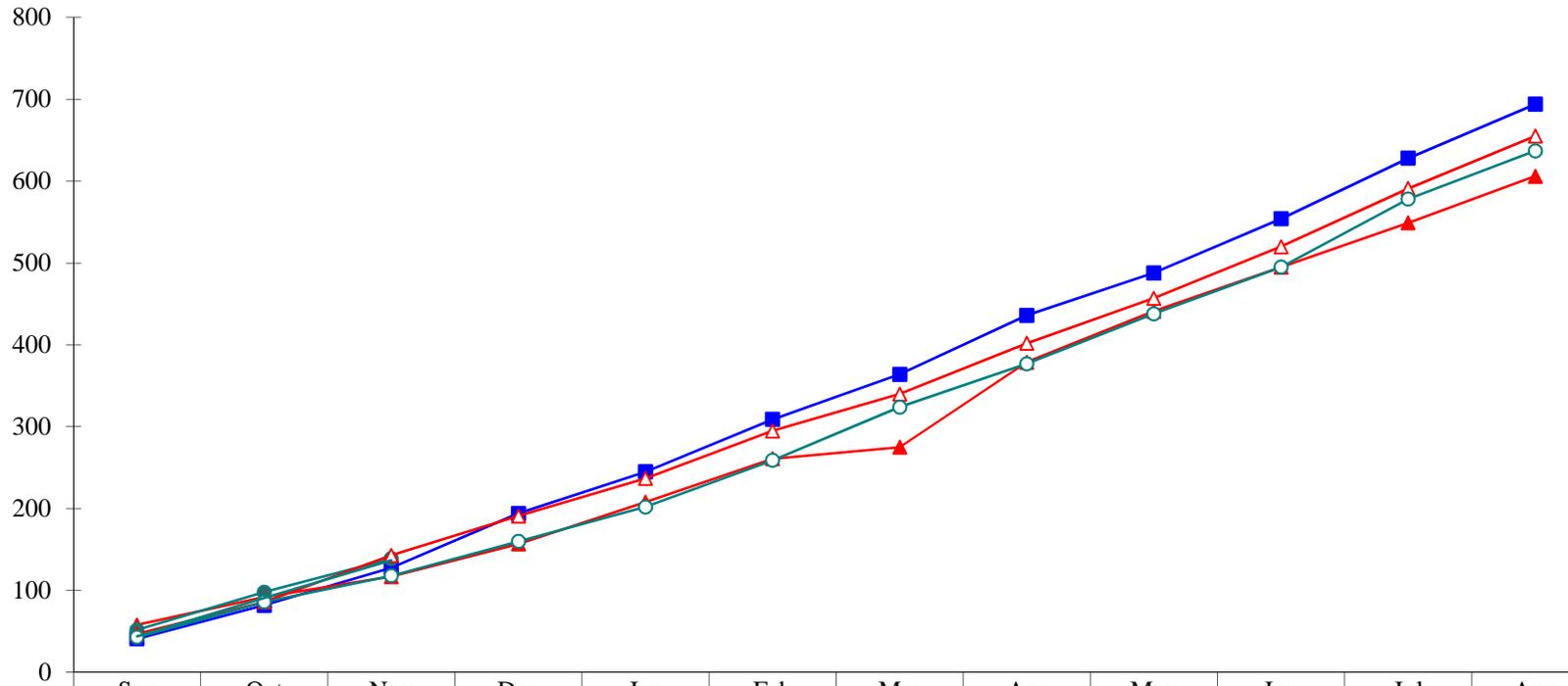
Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 66 | 74 | 66 | 58 | 34 | 25 | 40 | 51 | 53 | 14 | 104 | 62 | 54 | 54 | 57 | 52 | 46 | 41 |
| Voluntary | 1 | 2 | 0 | 2 | 1 | 0 | 0 | 1 | 2 | 0 | 3 | 3 | 0 | 1 | 1 | 0 | 0 | 1 |
| Involuntary | 65 | 72 | 66 | 56 | 33 | 25 | 40 | 50 | 51 | 14 | 101 | 59 | 54 | 53 | 56 | 52 | 46 | 40 |
| OPC | 9 | 15 | 13 | 3 | 1 | 0 | 4 | 5 | 10 | 2 | 17 | 9 | 5 | 10 | 13 | 12 | 6 | 5 |
| Emergency | 38 | 30 | 24 | 16 | 9 | 5 | 10 | 12 | 13 | 5 | 30 | 19 | 13 | 11 | 18 | 10 | 10 | 13 |
| Temporary | 5 | 6 | 4 | 2 | 3 | 4 | 3 | 0 | 6 | 1 | 6 | 7 | 8 | 6 | 3 | 7 | 6 | 4 |
| Extended | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 |
| Forensic | 13 | 21 | 25 | 35 | 20 | 16 | 21 | 33 | 22 | 6 | 48 | 23 | 27 | 26 | 22 | 23 | 24 | 18 |
| Order for MR | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Discharges | 63 | 71 | 64 | 43 | 43 | 32 | 42 | 42 | 57 | 65 | 53 | 61 | 57 | 83 | 59 | 44 | 47 | 46 |
| % New to System | 41% | 43% | 39% | 43% | 29% | 36% | 38% | 39% | 36% | 50% | 45% | 50% | 35% | 50% | 35% | 37% | 43% | 44% |



AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
Rusk State Hospital
FYTD Admissions & Discharges

Total Admissions & Discharges Year-To-Date



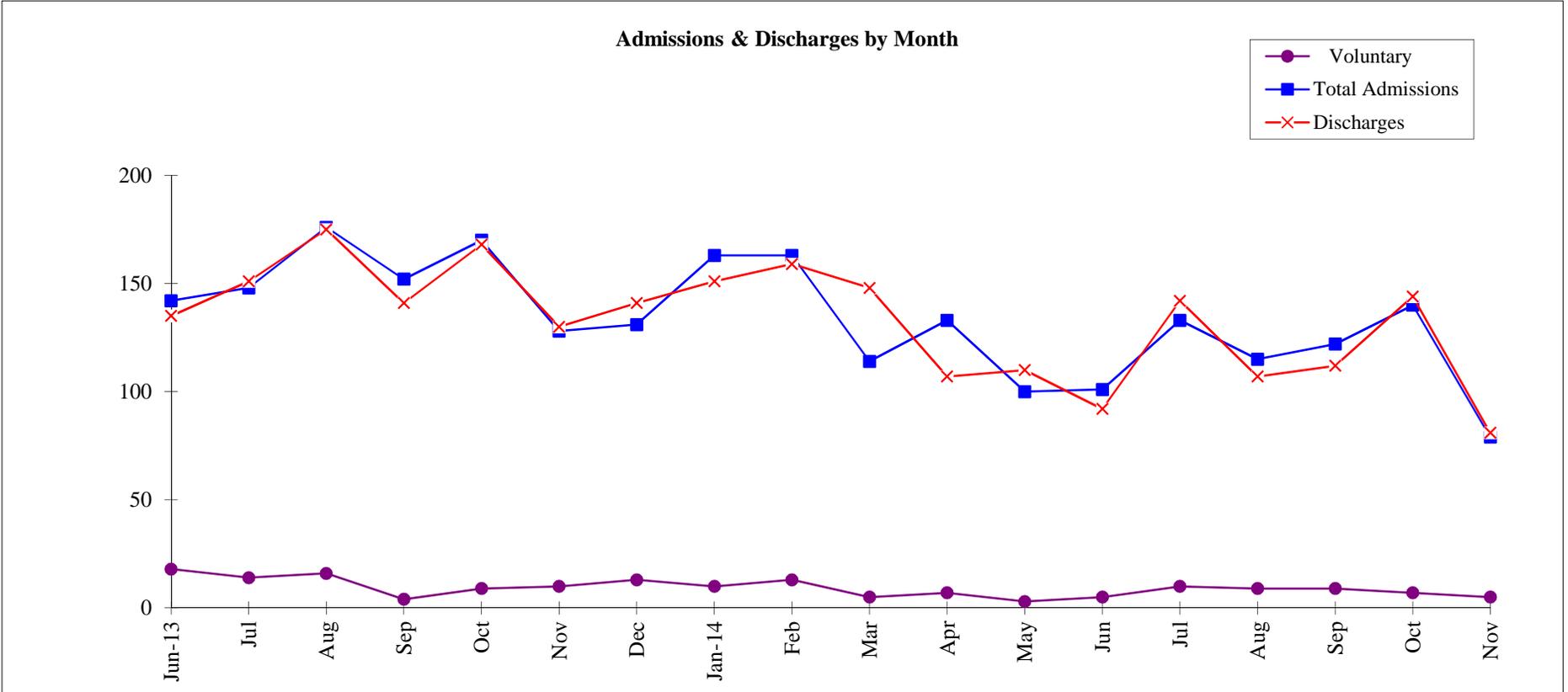
| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| ■ FY13 Admissions | 41 | 82 | 128 | 194 | 245 | 309 | 364 | 436 | 488 | 554 | 628 | 694 |
| ▲ FY14 Admissions | 58 | 92 | 117 | 157 | 208 | 261 | 275 | 379 | 441 | 495 | 549 | 606 |
| ● FY15 Admissions | 52 | 98 | 139 | | | | | | | | | |
| △ FY13 Discharges | 47 | 86 | 143 | 191 | 237 | 295 | 340 | 402 | 457 | 520 | 591 | 655 |
| ○ FY14 Discharges | 43 | 86 | 118 | 160 | 202 | 259 | 324 | 377 | 438 | 495 | 578 | 637 |
| — FY15 Discharges | 44 | 91 | 137 | | | | | | | | | |

AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

San Antonio State Hospital

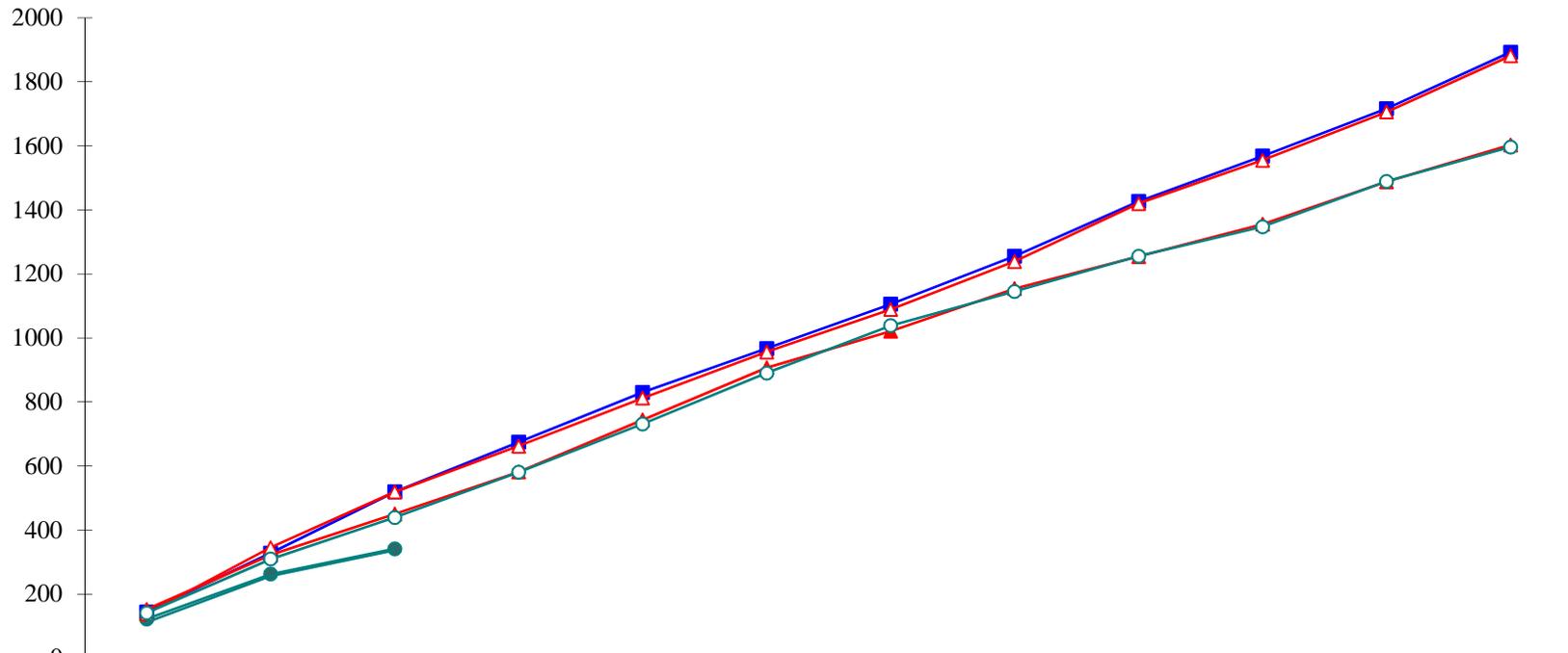
Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 142 | 148 | 176 | 152 | 170 | 128 | 131 | 163 | 163 | 114 | 133 | 100 | 101 | 133 | 115 | 122 | 140 | 79 |
| Voluntary | 18 | 14 | 16 | 4 | 9 | 10 | 13 | 10 | 13 | 5 | 7 | 3 | 5 | 10 | 9 | 9 | 7 | 5 |
| Involuntary | 124 | 134 | 160 | 148 | 161 | 118 | 118 | 153 | 150 | 109 | 126 | 97 | 96 | 123 | 106 | 113 | 133 | 74 |
| OPC | 17 | 17 | 20 | 19 | 31 | 27 | 22 | 39 | 36 | 20 | 19 | 12 | 16 | 21 | 23 | 25 | 24 | 15 |
| Emergency | 72 | 74 | 91 | 75 | 74 | 62 | 71 | 71 | 73 | 52 | 56 | 44 | 52 | 67 | 49 | 51 | 60 | 38 |
| Temporary | 21 | 28 | 32 | 23 | 36 | 17 | 12 | 27 | 24 | 17 | 32 | 24 | 14 | 24 | 19 | 21 | 29 | 14 |
| Extended | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Forensic | 11 | 10 | 10 | 28 | 15 | 9 | 13 | 13 | 13 | 16 | 17 | 12 | 14 | 11 | 13 | 15 | 17 | 6 |
| Order for MR | 3 | 5 | 7 | 3 | 5 | 3 | 0 | 3 | 4 | 3 | 2 | 5 | 0 | 0 | 2 | 1 | 3 | 1 |
| Discharges | 135 | 151 | 175 | 141 | 168 | 130 | 141 | 151 | 159 | 148 | 107 | 110 | 92 | 142 | 107 | 112 | 144 | 81 |
| % New to System | 53% | 49% | 49% | 42% | 54% | 44% | 53% | 55% | 40% | 51% | 47% | 58% | 47% | 51% | 42% | 47% | 47% | 39% |



**AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
San Antonio State Hospital
FYTD Admissions & Discharges**

Total Admissions & Discharges Year-To-Date



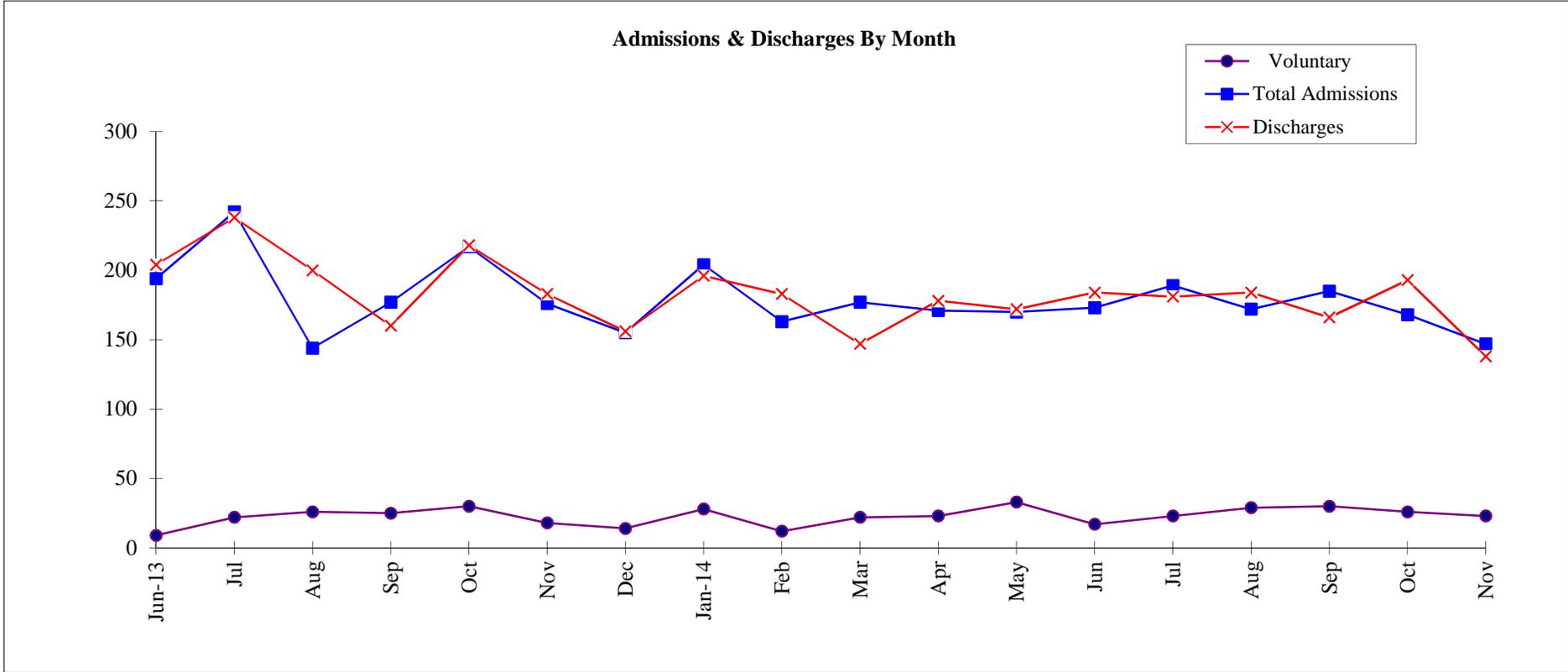
| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-------------------|-----|-----|-----|-----|-----|-----|------|------|------|------|------|------|
| ■ FY13 Admissions | 144 | 328 | 519 | 674 | 830 | 967 | 1105 | 1255 | 1426 | 1568 | 1716 | 1892 |
| ▲ FY14 Admissions | 152 | 322 | 450 | 581 | 744 | 907 | 1021 | 1154 | 1254 | 1355 | 1488 | 1603 |
| ● FY15 Admissions | 122 | 262 | 341 | | | | | | | | | |
| △ FY13 Discharges | 138 | 345 | 519 | 662 | 812 | 956 | 1089 | 1239 | 1420 | 1555 | 1706 | 1881 |
| ○ FY14 Discharges | 141 | 309 | 439 | 580 | 731 | 890 | 1038 | 1145 | 1255 | 1347 | 1489 | 1596 |
| — FY15 Discharges | 112 | 256 | 337 | | | | | | | | | |

AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

Terrell State Hospital

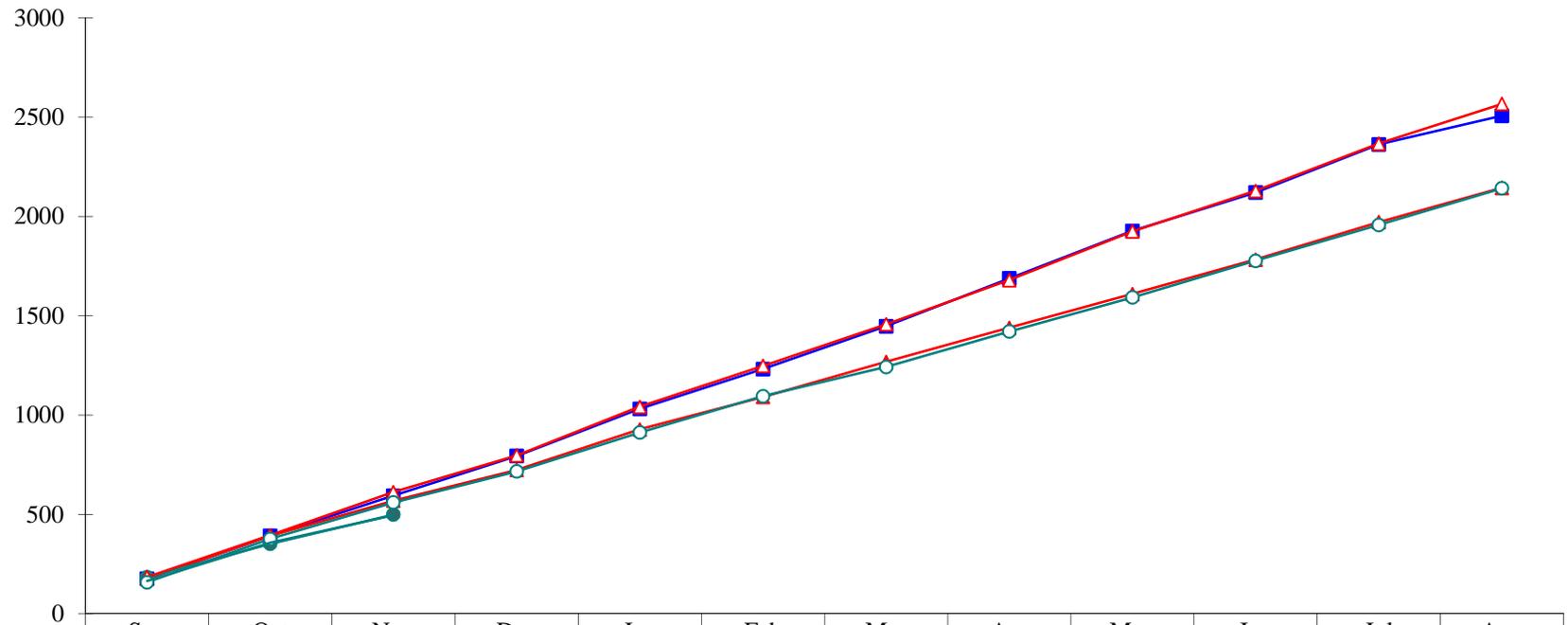
Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 194 | 242 | 144 | 177 | 217 | 176 | 155 | 204 | 163 | 177 | 171 | 170 | 173 | 189 | 172 | 185 | 168 | 147 |
| Voluntary | 9 | 22 | 26 | 25 | 30 | 18 | 14 | 28 | 12 | 22 | 23 | 33 | 17 | 23 | 29 | 30 | 26 | 23 |
| Involuntary | 185 | 220 | 118 | 152 | 187 | 158 | 141 | 176 | 151 | 155 | 148 | 137 | 156 | 166 | 143 | 155 | 142 | 124 |
| OPC | 139 | 179 | 93 | 125 | 141 | 124 | 112 | 128 | 119 | 112 | 109 | 104 | 113 | 128 | 102 | 116 | 114 | 103 |
| Emergency | 15 | 19 | 12 | 7 | 14 | 11 | 9 | 20 | 10 | 6 | 7 | 18 | 17 | 12 | 12 | 10 | 6 | 8 |
| Temporary | 9 | 9 | 5 | 16 | 18 | 11 | 9 | 6 | 3 | 5 | 9 | 5 | 5 | 7 | 5 | 5 | 6 | 4 |
| Extended | 1 | 0 | 0 | 1 | 0 | 1 | 1 | 0 | 0 | 1 | 0 | 1 | 1 | 1 | 0 | 1 | 1 | 1 |
| Forensic | 21 | 13 | 8 | 3 | 14 | 11 | 10 | 22 | 19 | 31 | 23 | 9 | 20 | 18 | 24 | 22 | 15 | 8 |
| Order for MR | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 |
| Discharges | 204 | 238 | 200 | 160 | 218 | 183 | 156 | 196 | 183 | 147 | 178 | 172 | 184 | 181 | 184 | 166 | 193 | 138 |
| % New to System | 44% | 51% | 47% | 46% | 47% | 54% | 38% | 50% | 47% | 54% | 49% | 54% | 54% | 52% | 56% | 48% | 51% | 50% |



**AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
Terrell State Hospital
FYTD Admissions & Discharges**

Total Admissions & Discharges Year-To-Date



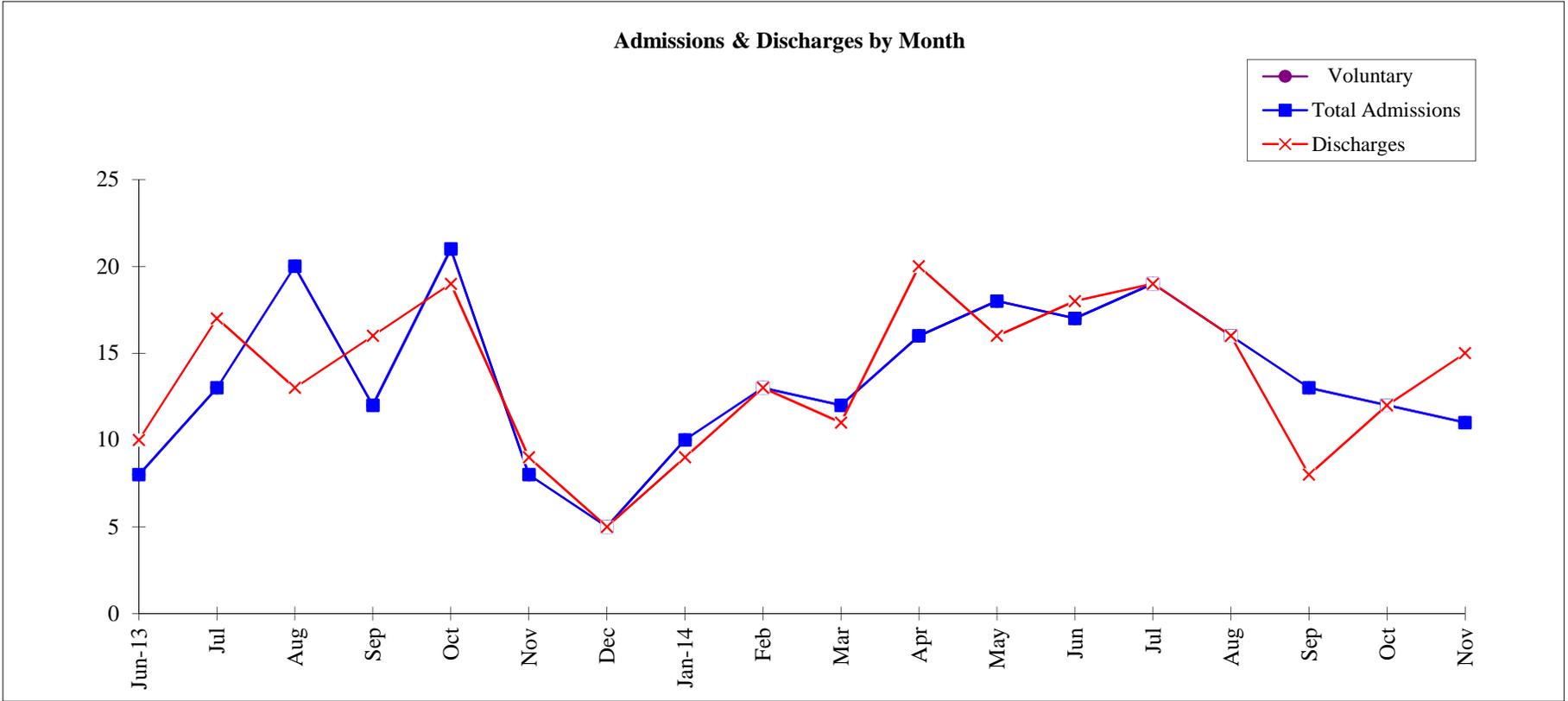
| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-------------------|-----|-----|-----|-----|------|------|------|------|------|------|------|------|
| ■ FY13 Admissions | 177 | 393 | 595 | 795 | 1032 | 1232 | 1448 | 1688 | 1927 | 2121 | 2363 | 2507 |
| ▲ FY14 Admissions | 177 | 394 | 570 | 725 | 929 | 1092 | 1269 | 1440 | 1610 | 1783 | 1972 | 2144 |
| ● FY15 Admissions | 185 | 353 | 500 | | | | | | | | | |
| △ FY13 Discharges | 186 | 396 | 613 | 798 | 1043 | 1248 | 1458 | 1680 | 1925 | 2129 | 2367 | 2567 |
| ○ FY14 Discharges | 160 | 378 | 561 | 717 | 913 | 1096 | 1243 | 1421 | 1593 | 1777 | 1958 | 2142 |
| — FY15 Discharges | 166 | 359 | 497 | | | | | | | | | |

AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System

Waco Center for Youth

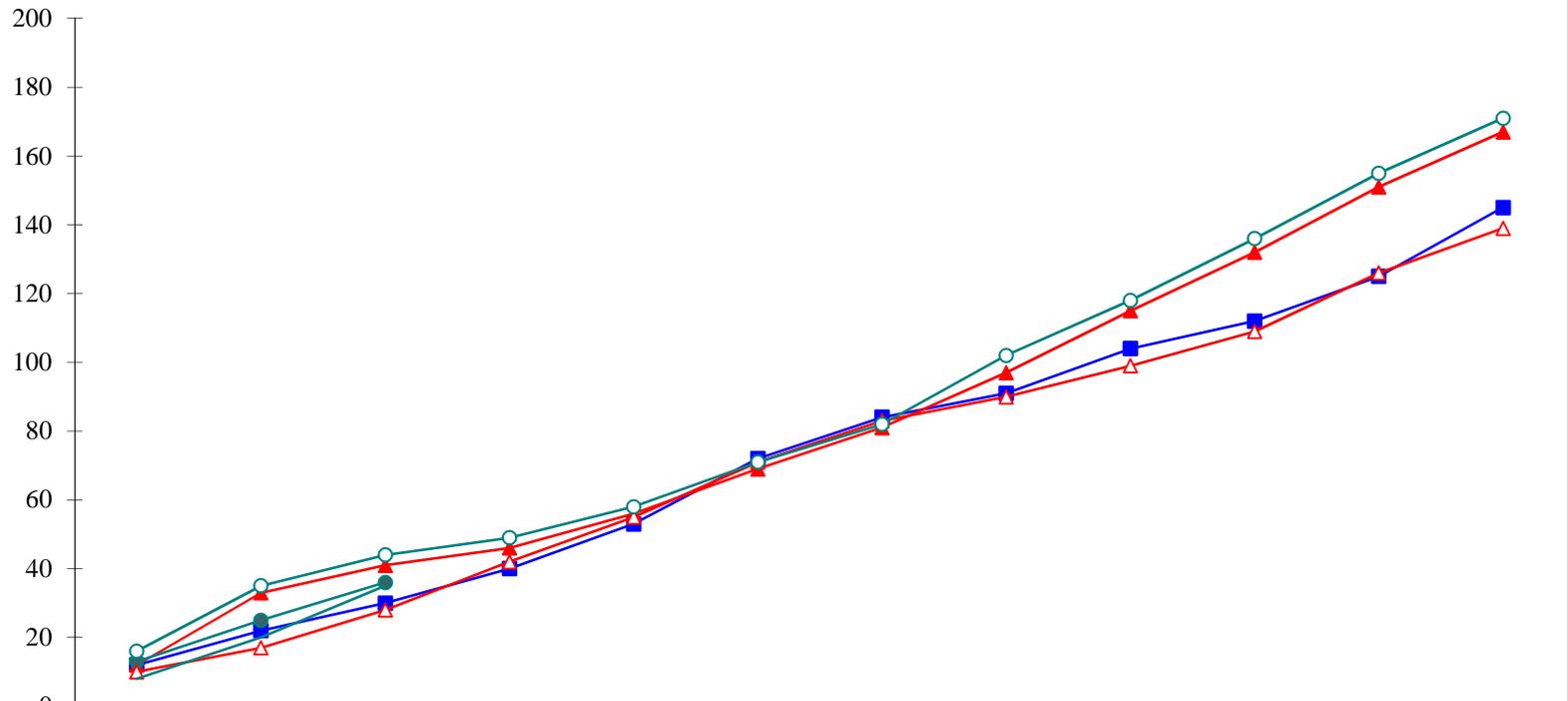
Admissions by Month

| | Jun-13 | Jul | Aug | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov |
|------------------|--------|-----|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Admissions | 8 | 13 | 20 | 12 | 21 | 8 | 5 | 10 | 13 | 12 | 16 | 18 | 17 | 19 | 16 | 13 | 12 | 11 |
| Voluntary | 8 | 13 | 20 | 12 | 21 | 8 | 5 | 10 | 13 | 12 | 16 | 18 | 17 | 19 | 16 | 13 | 12 | 11 |
| Involuntary | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| OPC | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Emergency | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Temporary | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Extended | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Forensic | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Order for MR | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Discharges | 10 | 17 | 13 | 16 | 19 | 9 | 5 | 9 | 13 | 11 | 20 | 16 | 18 | 19 | 16 | 8 | 12 | 15 |
| % New to System | 50% | 31% | 65% | 67% | 62% | 75% | 40% | 50% | 54% | 58% | 60% | 78% | 75% | 37% | 69% | 54% | 50% | 36% |



**AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
Waco Center for Youth
FYTD Admissions & Discharges**

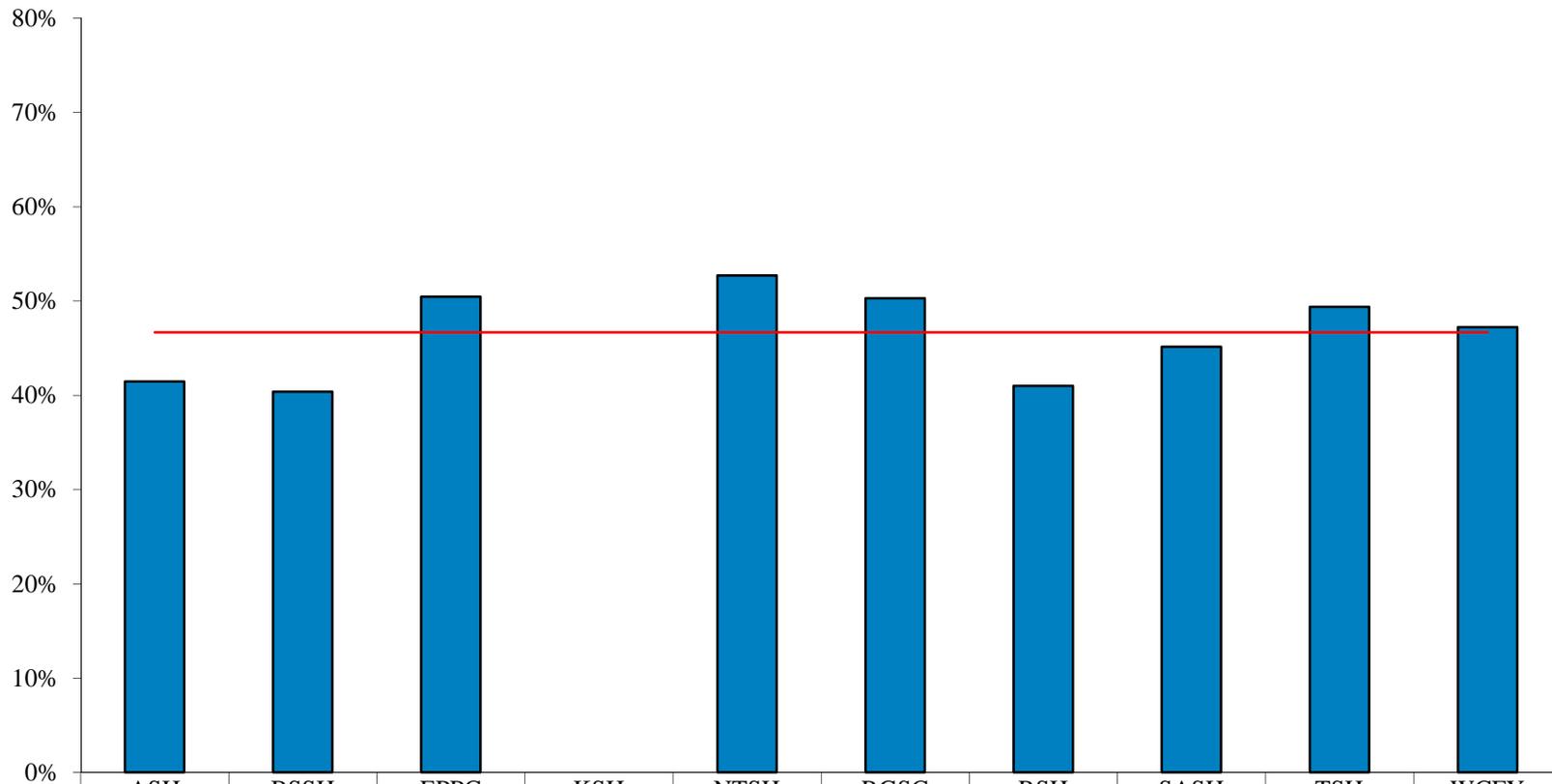
Total Admissions & Discharges Year-To-Date



| | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|-------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| ■ FY13 Admissions | 12 | 22 | 30 | 40 | 53 | 72 | 84 | 91 | 104 | 112 | 125 | 145 |
| ▲ FY14 Admissions | 12 | 33 | 41 | 46 | 56 | 69 | 81 | 97 | 115 | 132 | 151 | 167 |
| ● FY15 Admissions | 13 | 25 | 36 | | | | | | | | | |
| ▾ FY13 Discharges | 10 | 17 | 28 | 42 | 55 | 71 | 83 | 90 | 99 | 109 | 126 | 139 |
| ○ FY14 Discharges | 16 | 35 | 44 | 49 | 58 | 71 | 82 | 102 | 118 | 136 | 155 | 171 |
| — FY15 Discharges | 8 | 20 | 35 | | | | | | | | | |

**AMO - 6 Number/Type of Admissions, Number of Discharges and % New to the System
All State MH Hospitals**

**Percent of Clients New to the System
Q1 FY2015**



Legend:
█ % New to the System
— All State Hospitals

**FY15 Hospital Management Plan
Statewide Performance Indicators Report**

Agency Code: 537

Agency: Department of State Health Services

Access Measure

AMO-7

Measure: Report Number of Admissions; Average Length of Stay; Number of Outpatient Admissions; Number of Inpatient Admissions by Categories (tuberculosis, multi-drug resistant tuberculosis, and extensively drug related tuberculosis).

Timeframe: Quarterly

Definition

Data Source

TCID Data Form

Date Display and Chart Description

Table shows monthly numbers of admissions; average length of stay; number of patients admitted for inpatient care and treatment; number of outpatient admissions; number of inpatient admissions by categories.

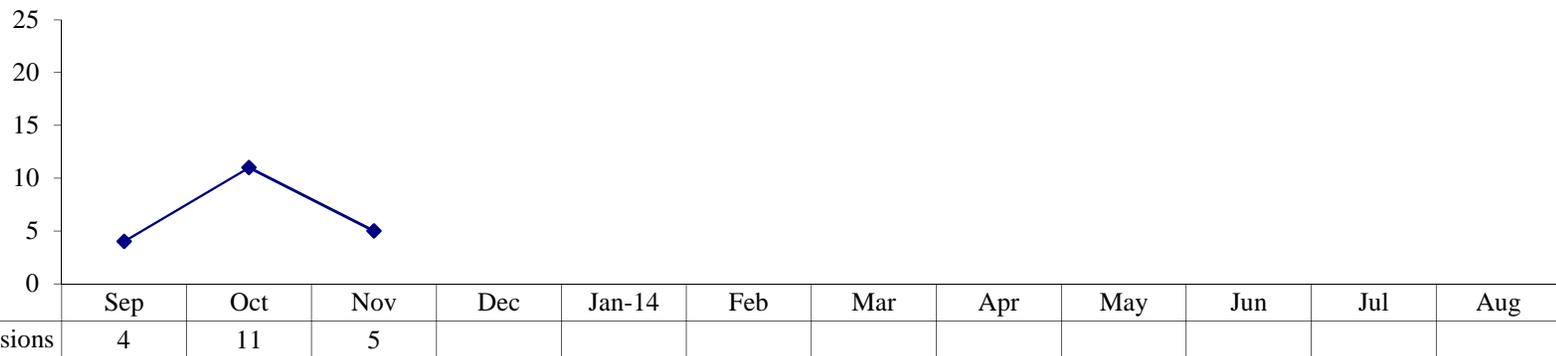
Purpose

Monitor TCID admissions and average length of stay.

AMO - 7 TCID Data
TCID - FY15

| | Sep | Oct | Nov | Dec | Jan-14 | Feb | Mar | Apr | May | Jun | Jul | Aug |
|--|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|-----|-----|
| Admissions | 4 | 11 | 5 | | | | | | | | | |
| Average Length of Stay | 189 | 257 | 142 | | | | | | | | | |
| Number of Patients Admitted for Inpatient Care & Treatment | 4 | 11 | 5 | | | | | | | | | |
| Tuberculosis | 4 | 11 | 4 | | | | | | | | | |
| Multi-drug resistant tuberculosis | 0 | 0 | 1 | | | | | | | | | |
| Extensively drug resistant tuberculosis | 0 | 0 | 0 | | | | | | | | | |
| Number of Outpatient Admissions (Encounters) | 1 | 1 | 0 | | | | | | | | | |

Admissions



Average Length of Stay

