

SCDMH Monthly Dashboard

Summary

Individuals signing below affirm, under oath pursuant to SC Cde 2-2-70, the information contained in this document is accurate as of the date listed, and there is supporting documentation, if requested.

Accurate as of the following date:

Agency Director:

Source of Data:

DMH Inpatient Facilities: Patient Utilization	Fiscal Year-to-Date				
	Total Bed Count	Avg. Daily Census	Avg. Length of Stay	Admissions	Discharges
Bryan Psychiatric Hospital - Adult Services	130	119	717	27	55
Bryan Psychiatric Hospital - Forensic Services	213	156	622	82	75
Bryan Psychiatric Hospital - Hall Psychiatric Institute - Child and Adolescent Hospital	25	20	24	145	153
Morris Village Alcohol and Drug Addiction Treatment Facility	45	33	27	224	245
Patrick B. Harris Psychiatric Hospital	116	100	351	45	60

Note: The total bed count is the total number of functional beds at each listed facility. The number of "licensed" psychiatric beds a hospital has does not equal the number of "functional" beds: beds which are actually in use and available for prospective patients.

DMH Inpatient Facilities: Registered Nurse Staffing	Fiscal Year-to-Date			
	Staffing Ratio (Agency Policy) Patient/Registered Nurse (RN)	Actual Ratio Patient/Registered Nurse (RN)	Budgeted RN FTEs	Actual RN FTEs
Bryan Psychiatric Hospital - Adult Services	12 to 1	11 to 1	42.84	46.1
Bryan Psychiatric Hospital - Forensic Services	15 to 1	15 to 1	29 contracted	33 contracted
Bryan Psychiatric Hospital - Hall Psychiatric Institute - Child and Adolescent Hospital	6 to 1	6 to 1	19	11.7
Morris Village Alcohol and Drug Addiction Treatment Facility	12 to 1	9 to 1	21.5	22
Patrick B. Harris Psychiatric Hospital	12 to 1	11 to 1	62.2	47.8

Note: SCDMH facility nurse staffing standards are defined in SCDMH DIS Nursing policy and meet Centers for Medicare & Medicaid Services, Joint Commission, and or Commission on Accreditation of Rehabilitation Facilities standards. Several factor influence this ratio: Patient acuity/complexity; Number of admissions, discharges and off campus appointments on lodge/unit; Skill level of staff and skill mix; Physical environment of the nursing unit/lodge.

DMH Inpatient Facility Quality Measures: Enter number of occurrences in the reporting period column.

Bryan Psychiatric Hospital - Adult Services						
Facility Administrator: Report Contact:						
Metric	Reporting Period	Reporting Period	Reporting Period	Reporting Period	Year-to-Date	Notes
	Q1 - 2020	Q2 - 2020	Q3 - 2020	Q4 - 2020		
Episodes of Restraint	33	26	9	37	105	A restraint is— (A) Any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body, or head freely. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Seclusion	41	39	59	31	170	Seclusion is the involuntary confinement of a patient alone in a room or area from which the patient is physically prevented from leaving. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Falls	41	50	67	44	202	
Falls with Injury	2	1	0	1	4	Per DIS Policy and Procedure Directive PC 22 fall is defined as a sudden, uncontrolled, unintentional downward displacement of the body to the ground or other object, excluding falls resulting from violent blows or other purposeful actions. Falls with Injury are defined as injury requiring treatment beyond first aid.
Discharges (Against Medical Advice)	0	0	0	0	0	Discharges Against Medical Advice are rare at SCDMH. For this reason, SCDMH does not keep this data in the aggregate. For purposes of this reporting, SCDMH will collect this data through the Director of Hospital admissions based on individual chart review at discharge.
Medication Errors	18	32	40	20	110	Does not include adverse reactions or medication events unrelated to errors. Medication errors are provided by Pharmacy Staff as defined in Policy MM 5. A medication error is any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the healthcare professional, patient, or consumer. Such events may be related to professional practice, health care products, procedures, and systems, including prescribing; order communication; product labeling, packaging, and nomenclature; compounding; dispensing; distribution; administration; education; monitoring; and use. Adapted from NCCMERP (National Coordinating Council for Medication Error Reporting and Prevention).
Elopements	0	0	1	0	1	Any patient's unauthorized absence from the physical campus of SCDMH, regardless of length of time absent.
Suicide Attempts	1	0	0	0	1	Self-directed, potential self-injurious behavior with intent to die as a result of the behavior. It may or may not result in injury or death. Based on the definition in the SCDMH DIS Suicide Care Pathway Protocol.
Episodes of Aggression/Violence	63	66	66	35	230	Any event of actual physical contact between any parties (patients, staff, visitors), whether or not it results in injury.
Patient Injury	1	1	0	0	2	Patient injury is defined as any injury requiring treatment beyond first aid.
Staff Injury	1	6	4	5	16	Staff injury is any employee self-report of injury as recorded on P-16 form.
Patient Deaths	0	0	2	1	3	All patient deaths regardless of cause.
(1) death or serious disability associated with restraints	0	0	0	0	0	
(2) death or significant injury resulting from a physical assault	0	0	0	0	0	Serious disability and significant injury are defined as a serious injury, which is any significant impairment of the physical condition of the resident as determined by qualified medical personnel. This includes, but is not limited to, burns, lacerations, bone fractures, substantial hematoma, and injuries to internal organs, whether self-inflicted or inflicted by someone else. Based on the definition per SC DHHS.
Readmissions within 30 Days	0	0	0	0	0	Readmission data for DIS (Bryan Adult and Forensics, Morris Village, and Hall) only includes patients who are readmitted to DIS facilities.
Sexual assault of any type involving any person while under the care of Bryan Psychiatric Hospital - Adult Services.	0	0	1	0	1	Criminal sexual assault (non-consensual) is defined as acts in which an individual is forced to engage in sexual activity by use of threats or other fear tactics, or in which the individual is physically unable to decline. Acts could include but are not limited to actual or attempted intercourse (vaginal or anal), oral sex, or direct touching of the genitals, thighs, buttocks or breasts of an individual (actual assaults versus allegations). Data from reports made pursuant to "Sexual Activity Between Patients" PC 13.
Abuse (sexual) allegation of a patient (actual or suspected) of any degree or nature.	1	0	0	2	3	Includes any allegation (by staff, patient, visitor) of sexual abuse of a patient (verbal or physical) by any other person (staff, patient or visitor). Data from M-300 – "Unusual Occurrence Reporting System" PI 2.
Sexual harassment of a patient or staff member reported to management.	0	5	0	0	5	Incidents reported by DMH Central Human Resources.

Bryan Psychiatric Hospital - Forensic

Bryan Psychiatric Hospital - Forensic						
Facility Administrator: Report Contact:						
Metric	Reporting Period	Reporting Period	Reporting Period	Reporting Period	Year-to-Date	Notes
	Q1 - 2020	Q2 - 2020	Q3 - 2020	Q4 - 2020		
Episodes of Restraint	13	9	5	17	44	A restraint is— (A) Any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body, or head freely. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Seclusion	26	22	30	15	93	Seclusion is the involuntary confinement of a patient alone in a room or area from which the patient is physically prevented from leaving. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Falls	35	19	21	27	102	
Falls with Injury	1	0	0	0	1	Per DIS Policy and Procedure Directive PC 22 fall is defined as a sudden, uncontrolled, unintentional downward displacement of the body to the ground or other object, excluding falls resulting from violent blows or other purposeful actions. Falls with Injury are defined as injury requiring treatment beyond first aid.
Discharges (Against Medical Advice)	0	0	0	0	0	Discharges Against Medical Advice are rare at SCDMH. For this reason, SCDMH does not keep this data in the aggregate. For purposes of this reporting, SCDMH will collect this data through the Director of Hospital admissions based on individual chart review at discharge.
Medication Errors	20	4	5	12	41	Does not include adverse reactions or medication events unrelated to errors. Medication errors are provided by Pharmacy Staff as defined in Policy MM 5. A medication error is any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the healthcare professional, patient, or consumer. Such events may be related to professional practice, health care products, procedures, and systems, including prescribing; order communication; product labeling, packaging, and nomenclature; compounding; dispensing; distribution; administration; education; monitoring; and use. Adapted from NCCMERP (National Coordinating Council for Medication Error Reporting and Prevention).
Elopements	0	0	0	0	0	Any patient's unauthorized absence from the physical campus of SCDMH, regardless of length of time absent.
Suicide Attempts	0	0	0	0	0	Self-directed, potential self-injurious behavior with intent to die as a result of the behavior. It may or may not result in injury or death. Based on the definition in the SCDMH DIS Suicide Care Pathway Protocol.
Episodes of Aggression/Violence	35	32	31	27	125	Any event of actual physical contact between any parties (patients, staff, visitors), whether or not it results in injury.
Patient Injury	1	0	0	0	1	Patient injury is defined as any injury requiring treatment beyond first aid.
Staff Injury	0	0	0	0	0	Staff injury is any employee self-report of injury as recorded on P-16 form.
Patient Deaths	0	1	2	0	3	All patient deaths regardless of cause.
(1) death or serious disability associated with restraints	0	0	0	0	0	
(2) death or significant injury resulting from a physical assault	0	0	0	0	0	Serious disability and significant injury are defined as a serious injury, which is any significant impairment of the physical condition of the resident as determined by qualified medical personnel. This includes, but is not limited to, burns, lacerations, bone fractures, substantial hematoma, and injuries to internal organs, whether self-inflicted or inflicted by someone else. Based on the definition per SC DHHS.
Readmissions within 30 Days	0	0	0	0	0	Readmission data for DIS (Bryan Adult and Forensics, Morris Village, and Hall) only includes patients who are readmitted to DIS facilities.
Sexual assault of any type involving any person while under the care of Bryan Psychiatric Hospital - Adult Services.	0	0	0	0	0	Criminal sexual assault (non-consensual) is defined as acts in which an individual is forced to engage in sexual activity by use of threats or other fear tactics, or in which the individual is physically unable to decline. Acts could include but are not limited to actual or attempted intercourse (vaginal or anal), oral sex, or direct touching of the genitals, thighs, buttocks or breasts of an individual (actual assaults versus allegations). Data from reports made pursuant to "Sexual Activity Between Patients" PC 13.
Abuse (sexual) allegation of a patient (actual or suspected) of any degree or nature.	6	1	1	0	8	Includes any allegation (by staff, patient, visitor) of sexual abuse of a patient (verbal or physical) by any other person (staff, patient or visitor). Data from M-300 – "Unusual Occurrence Reporting System" PI 2.
Sexual harassment of a patient or staff member reported to management.	0	2	0	0	2	Incidents reported by DMH Central Human Resources.

Bryan Psychiatric Hospital - Hall Psychiatric - Child and Adolescent

Bryan Psychiatric Hospital - Hall Psychiatric - Child and Adolescent						
Facility Administrator: Report Contact:						
Metric	Reporting Period	Reporting Period	Reporting Period	Reporting Period	Year-to-Date	Notes
	Q1 - 2020	Q2 - 2020	Q3 - 2020	Q4 - 2020		
Episodes of Restraint	87	16	14	6	123	A restraint is— (A) Any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body, or head freely. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Seclusion	128	19	12	7	166	Seclusion is the involuntary confinement of a patient alone in a room or area from which the patient is physically prevented from leaving. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Falls	9	6	16	5	36	
Falls with Injury	0	0	0	0	0	Per DIS Policy and Procedure Directive PC 22 fall is defined as a sudden, uncontrolled, unintentional downward displacement of the body to the ground or other object, excluding falls resulting from violent blows or other purposeful actions. Falls with Injury are defined as injury requiring treatment beyond first aid.
Discharges (Against Medical Advice)	2	0	0	0	2	Discharges Against Medical Advice are rare at SCDMH. For this reason, SCDMH does not keep this data in the aggregate. For purposes of this reporting, SCDMH will collect this data through the Director of Hospital admissions based on individual chart review at discharge.
Medication Errors	5	10	17	14	46	Does not include adverse reactions or medication events unrelated to errors. Medication errors are provided by Pharmacy Staff as defined in Policy MM 5. A medication error is any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the healthcare professional, patient, or consumer. Such events may be related to professional practice, health care products, procedures, and systems, including prescribing; order communication; product labeling, packaging, and nomenclature; compounding; dispensing; distribution; administration; education; monitoring; and use. Adapted from NCCMERP (National Coordinating Council for Medication Error Reporting and Prevention).
Elopements	0	0	0	0	0	Any patient's unauthorized absence from the physical campus of SCDMH, regardless of length of time absent.
Suicide Attempts	0	0	1	0	1	Self-directed, potential self-injurious behavior with intent to die as a result of the behavior. It may or may not result in injury or death. Based on the definition in the SCDMH DIS Suicide Care Pathway Protocol.
Episodes of Aggression/Violence	147	13	8	9	177	Any event of actual physical contact between any parties (patients, staff, visitors), whether or not it results in injury.
Patient Injury	2	0	0	0	2	Patient injury is defined as any injury requiring treatment beyond first aid.
Staff Injury	12	3	9	2	26	Staff injury is any employee self-report of injury as recorded on P-16 form.
Patient Deaths	0	0	0	0	0	All patient deaths regardless of cause.
(1) death or serious disability associated with restraints	0	0	0	0	0	
(2) death or significant injury resulting from a physical assault	0	0	0	0	0	Serious disability and significant injury are defined as a serious injury, which is any significant impairment of the physical condition of the resident as determined by qualified medical personnel. This includes, but is not limited to, burns, lacerations, bone fractures, substantial hematoma, and injuries to internal organs, whether self-inflicted or inflicted by someone else. Based on the definition per SC DHHS.
Readmissions within 30 Days	0	0	0	0	0	Readmission data for DIS (Bryan Adult and Forensics, Morris Village, and Hall) only includes patients who are readmitted to DIS facilities.
Sexual assault of any type involving any person while under the care of Bryan Psychiatric Hospital - Adult Services.	0	0	2	2	4	Criminal sexual assault (non-consensual) is defined as acts in which an individual is forced to engage in sexual activity by use of threats or other fear tactics, or in which the individual is physically unable to decline. Acts could include but are not limited to actual or attempted intercourse (vaginal or anal), oral sex, or direct touching of the genitals, thighs, buttocks or breasts of an individual (actual assaults versus allegations). Data from reports made pursuant to "Sexual Activity Between Patients" PC 13.
Abuse (sexual) allegation of a patient (actual or suspected) of any degree or nature.	0	0	0	1	1	Includes any allegation (by staff, patient, visitor) of sexual abuse of a patient (verbal or physical) by any other person (staff, patient or visitor). Data from M-300 – "Unusual Occurrence Reporting System" PI 2.
Sexual harassment of a patient or staff member reported to management.	0	0	1	1	2	Incidents reported by DMH Central Human Resources.

Morris Village Alcohol and Drug Addiction Treatment Facility

Morris Village Alcohol and Drug Addiction Treatment Facility						
Facility Administrator: Report Contact:						
Metric	Reporting Period	Reporting Period	Reporting Period	Reporting Period	Year-to-Date	Notes
	Q1 - 2020	Q2 - 2020	Q3 - 2020	Q4 - 2020		
Episodes of Restraint	0	0	1	0	1	A restraint is— (A) Any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body, or head freely. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Seclusion	0	0	0	2	2	Seclusion is the involuntary confinement of a patient alone in a room or area from which the patient is physically prevented from leaving. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Falls	5	8	4	2	19	
Falls with Injury (count included in Episodes of Falls)	0	0	0	0	0	Per DIS Policy and Procedure Directive PC 22 fall is defined as a sudden, uncontrolled, unintentional downward displacement of the body to the ground or other object, excluding falls resulting from violent blows or other purposeful actions. Falls with Injury are defined as injury requiring treatment beyond first aid.
Discharges (Against Medical Advice)	3	0	0	2	5	Discharges Against Medical Advice are rare at SCDMH. For this reason, SCDMH does not keep this data in the aggregate. For purposes of this reporting, SCDMH will collect this data through the Director of Hospital admissions based on individual chart review at discharge.
Medication Errors	8	15	10	8	41	Does not include adverse reactions or medication events unrelated to errors. Medication errors are provided by Pharmacy Staff as defined in Policy MM 5. A medication error is any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the healthcare professional, patient, or consumer. Such events may be related to professional practice, health care products, procedures, and systems, including prescribing; order communication; product labeling, packaging, and nomenclature; compounding; dispensing; distribution; administration; education; monitoring; and use. Adapted from NCCMERP (National Coordinating Council for Medication Error Reporting and Prevention).
Elopements	1	0	0	1	2	Any patient's unauthorized absence from the physical campus of SCDMH, regardless of length of time absent.
Suicide Attempts	0	0	0	0	0	Self-directed, potential self-injurious behavior with intent to die as a result of the behavior. It may or may not result in injury or death. Based on the definition in the SCDMH DIS Suicide Care Pathway Protocol.
Episodes of Aggression/Violence	3	0	2	0	5	Any event of actual physical contact between any parties (patients, staff, visitors), whether or not it results in injury.
Patient Injury	1	0	0	0	1	Patient injury is defined as any injury requiring treatment beyond first aid.
Staff Injury	2	0	0	3	5	Staff injury is any employee self-report of injury as recorded on P-16 form.
Patient Deaths	0	0	0	0	0	All patient deaths regardless of cause.
(1) death or serious disability associated with restraints (included in Patient Deaths total)	0	0	0	0	0	
(2) death or significant injury resulting from a physical assault (included in Patient Deaths total)	0	0	0	0	0	Serious disability and significant injury are defined as a serious injury, which is any significant impairment of the physical condition of the resident as determined by qualified medical personnel. This includes, but is not limited to, burns, lacerations, bone fractures, substantial hematoma, and injuries to internal organs, whether self-inflicted or inflicted by
Readmissions within 30 Days	0	0	0	2	2	Readmission data for DIS (Bryan Adult and Forensics, Morris Village, and Hall) only includes patients who are readmitted to DIS facilities.
Sexual assault of any type involving any person while under the care of Bryan Psychiatric Hospital - Adult Services.	0	0	0	0	0	Criminal sexual assault (non-consensual) is defined as acts in which an individual is forced to engage in sexual activity by use of threats or other fear tactics, or in which the individual is physically unable to decline. Acts could include but are not limited to actual or attempted intercourse (vaginal or anal), oral sex, or direct touching of the genitals, thighs, buttocks or breasts of an individual (actual assaults versus allegations). Data from reports made pursuant to "Sexual Activity Between Patients" PC 13.
Abuse (sexual) allegation of a patient (actual or suspected) of any degree or nature.	0	0	0	0	0	Includes any allegation (by staff, patient, visitor) of sexual abuse of a patient (verbal or physical) by any other person (staff, patient or visitor). Data from M-300 – "Unusual Occurrence Reporting System" PI 2.
Sexual harassment of a patient or staff member reported to management.	0	0	0	0	0	Incidents reported by DMH Central Human Resources.

Patrick B. Harris Psychiatric Hospital

Patrick B. Harris Psychiatric Hospital						
Facility Administrator: Report Contact:						
Metric	Reporting Period	Reporting Period	Reporting Period	Reporting Period	Year-to-Date	Notes
	Q1 - 2020	Q1 - 2020	Q3 - 2020	Q4 - 2020		
Episodes of Restraint	52	52	32	25	161	A restraint is— (A) Any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body, or head freely. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Seclusion	43	38	38	27	146	Seclusion is the involuntary confinement of a patient alone in a room or area from which the patient is physically prevented from leaving. Defined in DIS Policy and Procedure Directive PC 6, Seclusion and Restraint from Centers for Medicare and Medicaid Services Code of Federal Regulations - 42 CFR 482.13(e)(1).
Episodes of Falls	48	49	74	56	227	
Falls with Injury (count included in Episodes of Falls)	0	1	0	0	1	Per DIS Policy and Procedure Directive PC 22 fall is defined as a sudden, uncontrolled, unintentional downward displacement of the body to the ground or other object, excluding falls resulting from violent blows or other purposeful actions. Falls with Injury are defined as injury requiring treatment beyond first aid.
Discharges (Against Medical Advice)	0	0	0	0	0	Discharges Against Medical Advice are rare at SCDMH. For this reason, SCDMH does not keep this data in the aggregate. For purposes of this reporting, SCDMH will collect this data through the Director of Hospital admissions based on individual chart review at discharge.
Medication Errors	43	17	23	32	115	Does not include adverse reactions or medication events unrelated to errors. Medication errors are provided by Pharmacy Staff as defined in Policy MM 5. A medication error is any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the healthcare professional, patient, or consumer. Such events may be related to professional practice, health care products, procedures, and systems, including prescribing; order communication; product labeling, packaging, and nomenclature; compounding; dispensing; distribution; administration; education; monitoring; and use. Adapted from NCCMERP (National Coordinating Council for Medication Error Reporting and Prevention).
Elopements	0	0	0	0	0	Any patient's unauthorized absence from the physical campus of SCDMH, regardless of length of time absent.
Suicide Attempts	0	0	0	1	1	Self-directed, potential self-injurious behavior with intent to die as a result of the behavior. It may or may not result in injury or death. Based on the definition in the SCDMH DIS Suicide Care Pathway Protocol.
Episodes of Aggression/Violence	48	57	46	32	183	Any event of actual physical contact between any parties (patients, staff, visitors), whether or not it results in injury.
Patient Injury	0	1	0	0	1	Patient injury is defined as any injury requiring treatment beyond first aid.
Staff Injury	4	8	8	6	26	Staff injury is any employee self-report of injury as recorded on P-16 form.
Patient Deaths	1	0	0	1	2	All patient deaths regardless of cause.
(1) death or serious disability associated with restraints (included in Patient Deaths total)	0	0	0	0	0	
(2) death or significant injury resulting from a physical assault (included in Patient Deaths total)	0	0	0	0	0	Serious disability and significant injury are defined as a serious injury, which is any significant impairment of the physical condition of the resident as determined by qualified medical personnel. This includes, but is not limited to, burns, lacerations, bone fractures, substantial hematoma, and injuries to internal organs, whether self-inflicted or inflicted by someone else. Based on the definition per SC DHHS.
Readmissions within 30 Days	1	0		0	1	Readmission data for DIS (Bryan Adult and Forensics, Morris Village, and Hall) only includes patients who are readmitted to DIS facilities.
Sexual assault of any type involving any person while under the care of Bryan Psychiatric Hospital - Adult Services.	0	0	0	0	0	Criminal sexual assault (non-consensual) is defined as acts in which an individual is forced to engage in sexual activity by use of threats or other fear tactics, or in which the individual is physically unable to decline. Acts could include but are not limited to actual or attempted intercourse (vaginal or anal), oral sex, or direct touching of the genitals, thighs, buttocks or breasts of an individual (actual assaults versus allegations). Data from reports made pursuant to "Sexual Activity Between Patients" PC 13.
Abuse (sexual) allegation of a patient (actual or suspected) of any degree or nature.	0	0	0	0	0	Includes any allegation (by staff, patient, visitor) of sexual abuse of a patient (verbal or physical) by any other person (staff, patient or visitor). Data from M-300 – "Unusual Occurrence Reporting System" PI 2.
Sexual harassment of a patient or staff member reported to management.	1	0	0	0	1	Incidents reported by DMH Central Human Resources.