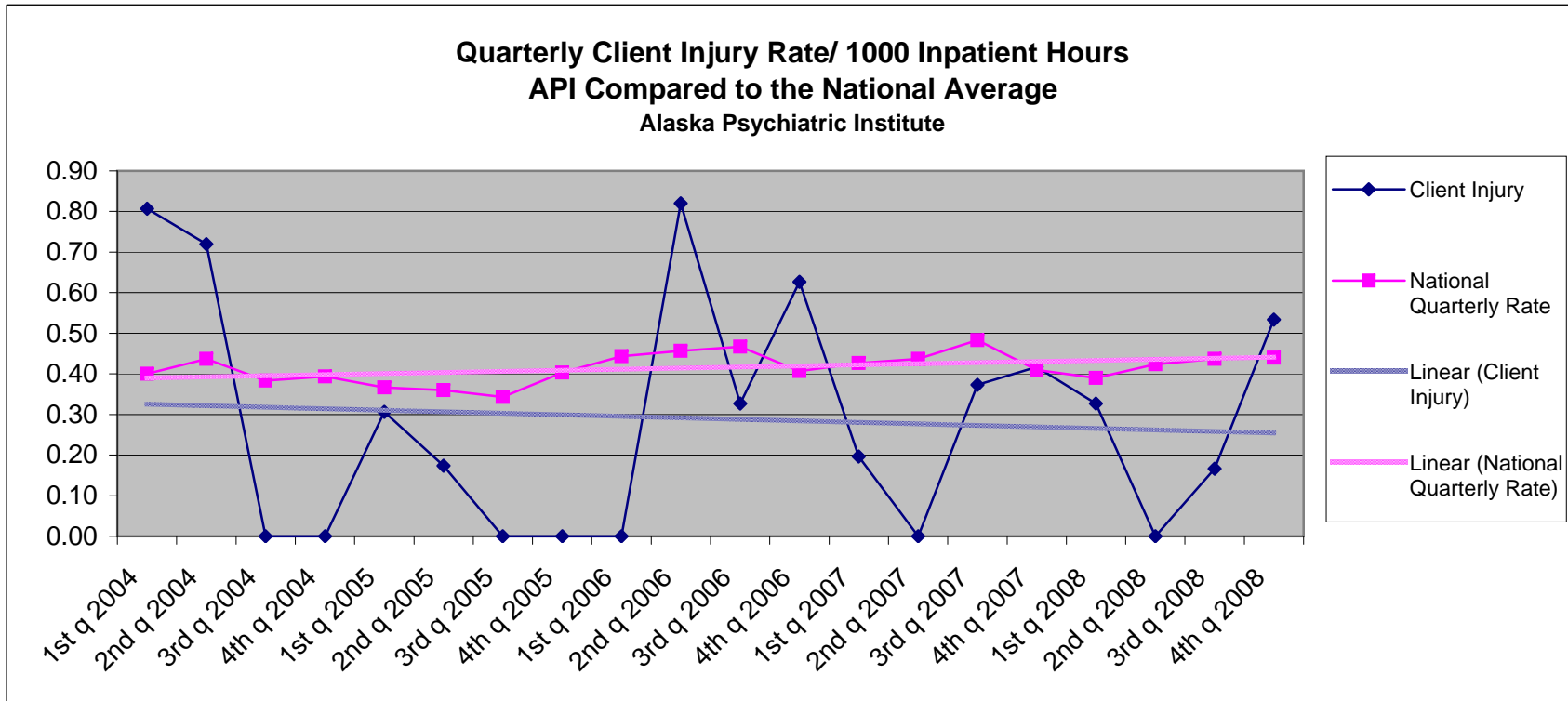
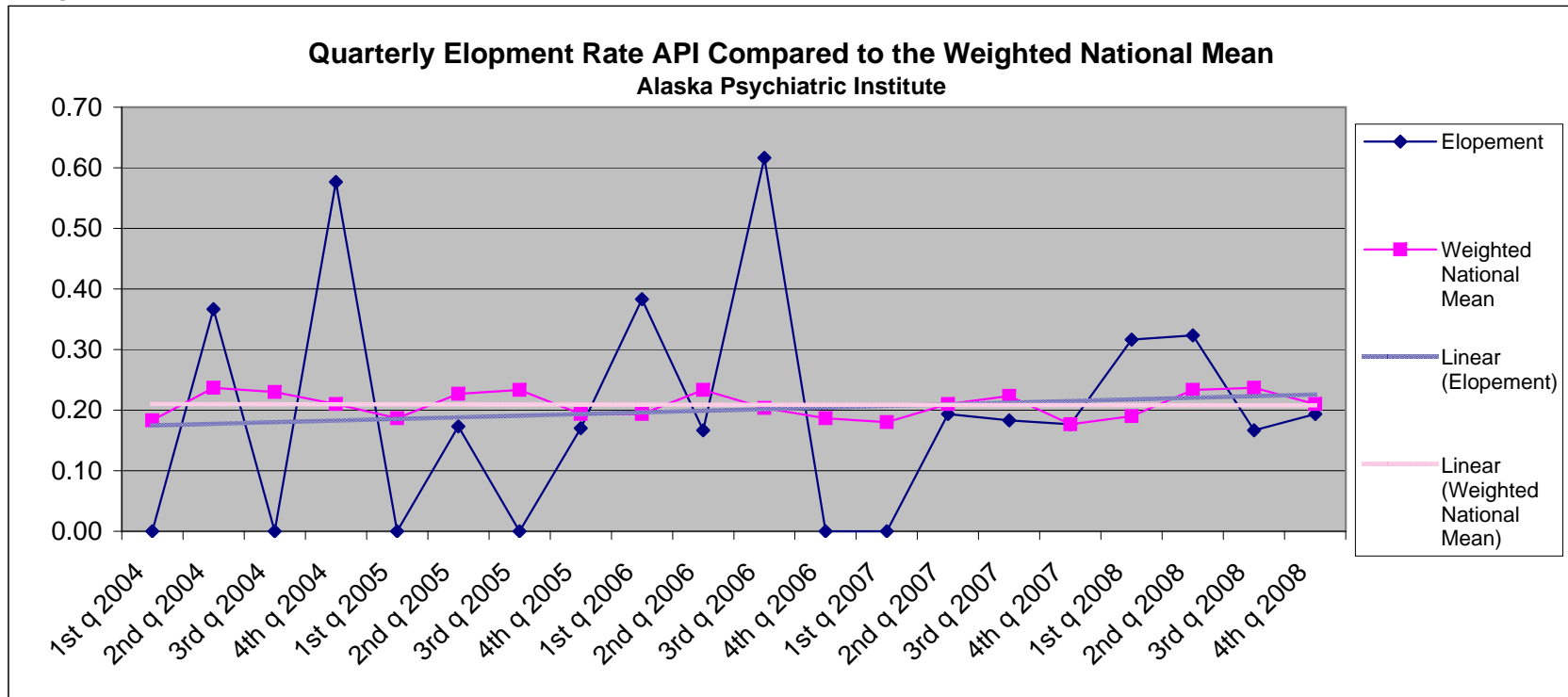


Client Injury Rate



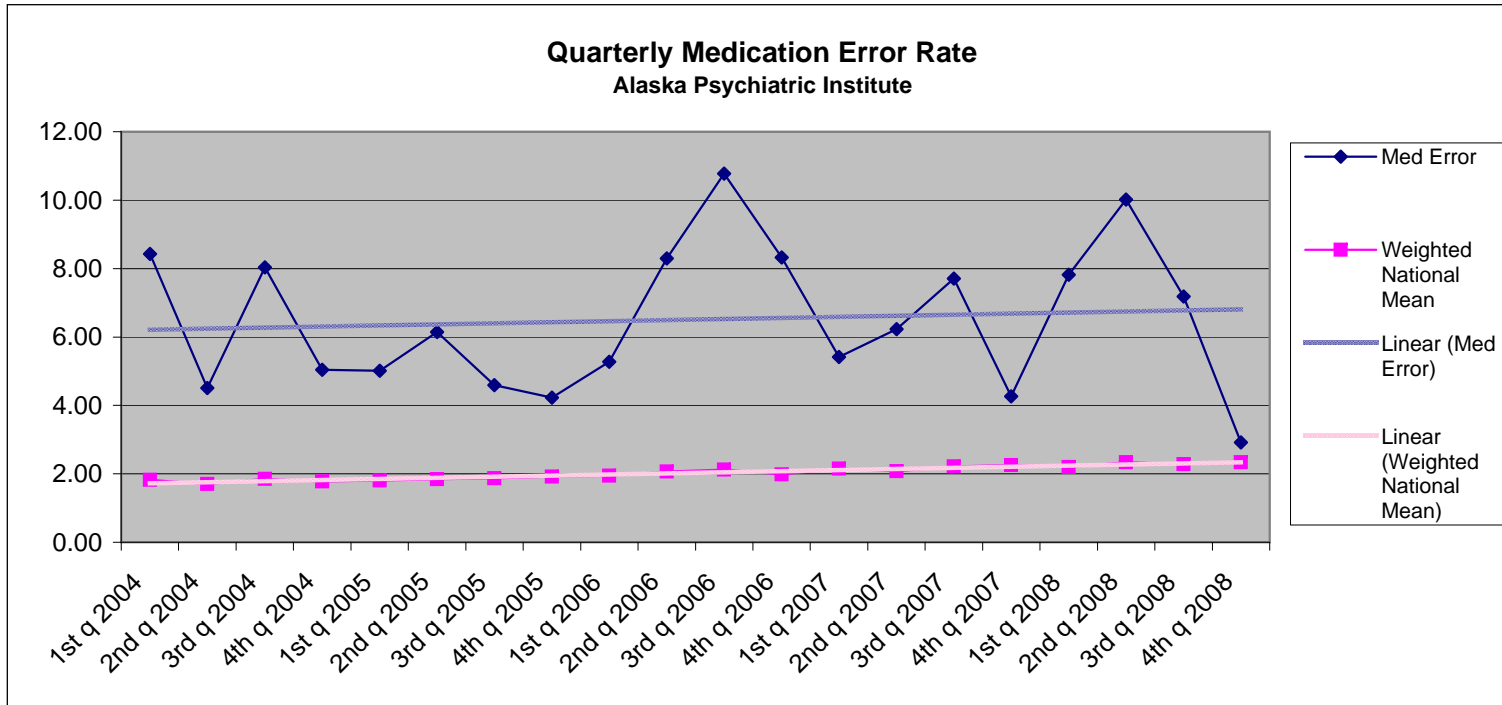
It is clear from the long-term trend in the quarterly Client Injury Rate that the rate of client injuries at API is decreasing. The trend in client injuries at API is also well below the National Quarterly Rate trend.

Elopement Rate



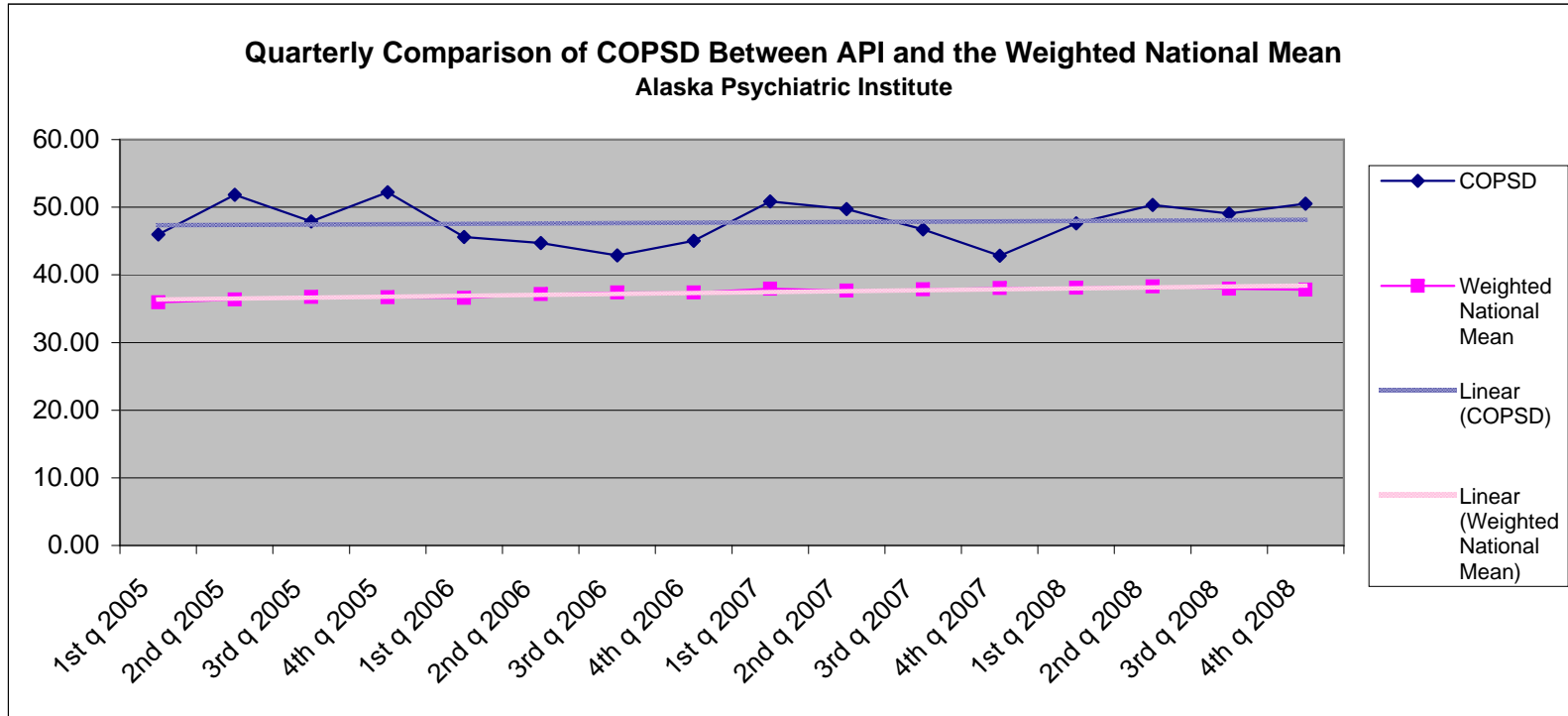
Over the last five years the trend in elopement at API has risen slightly. This is not surprising given the increasing emphasis that is being placed on recovery and patient centered treatment which necessitates allowing patients more independence. Of the 22 of elopements that occurred between January 1, 2005 and December 31, 2008 half occurred while the patient was on pass from the hospital.

Medication Error Rate



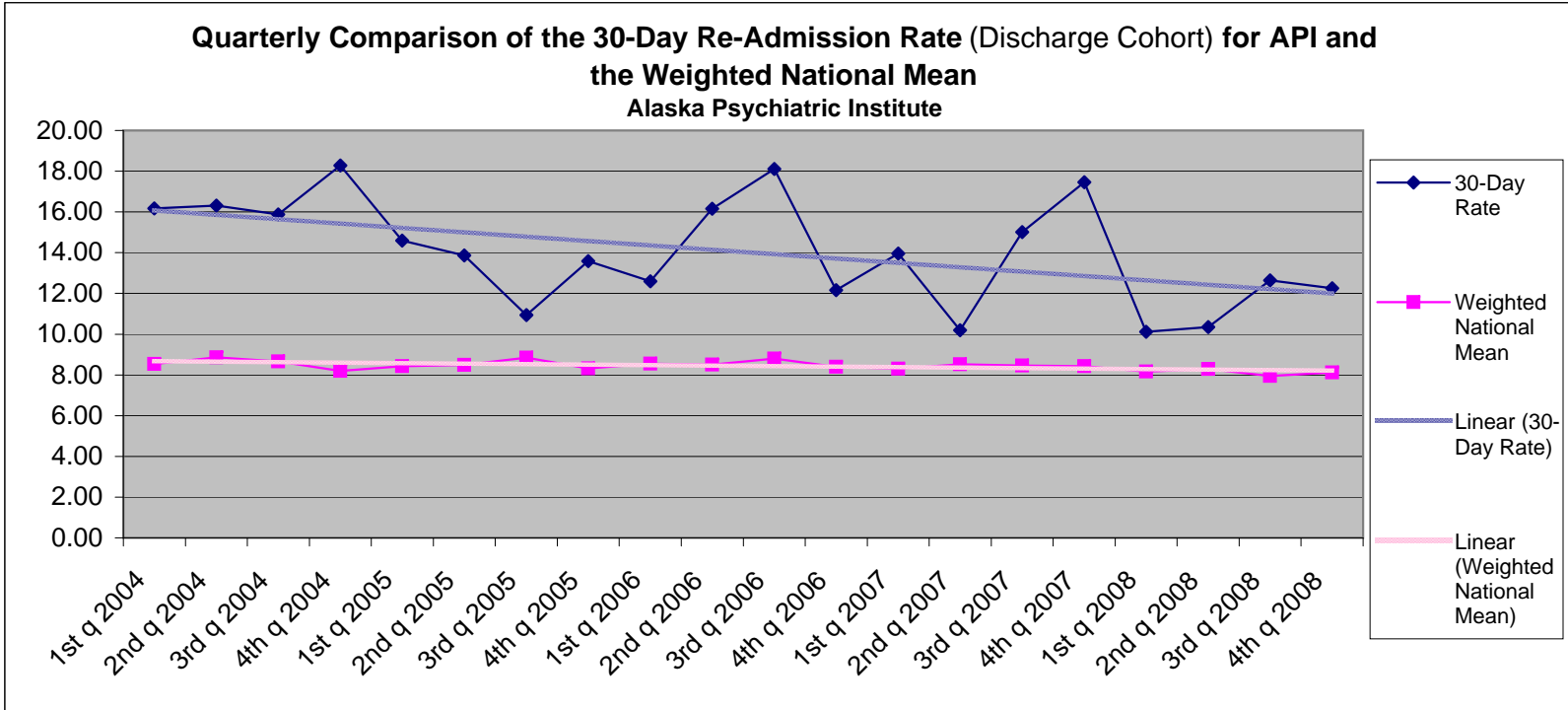
Comparing results against the national benchmark is problematic because of variance in medication error collecting methodology within each participating facility. API utilizes self reporting of medication errors and also audits all medication orders and administration for errors every 24 hours. Facilities that employ this type of 24-hour auditing uncover exponentially more errors. Some comparison facilities rely only on self reporting which may under report their medication error numbers. API reports every medication error nationally on a three point severity scale. 85.39% of the errors in the 12 month reporting period of January to December 2008 fell into the Severity: 1 'Minimal' category. Severity: 1 'Minimal' is the lowest reportable category. The definition for this category is: "A medication error in which the client experienced no or minimal adverse consequences and no treatment or intervention other than monitoring or observation was required". Though the majority of medication errors at API are of minimal severity, API maintains that every medication error is unacceptable and we continually seek to improve the medication management system in our institute to prevent medication errors.

COPSD



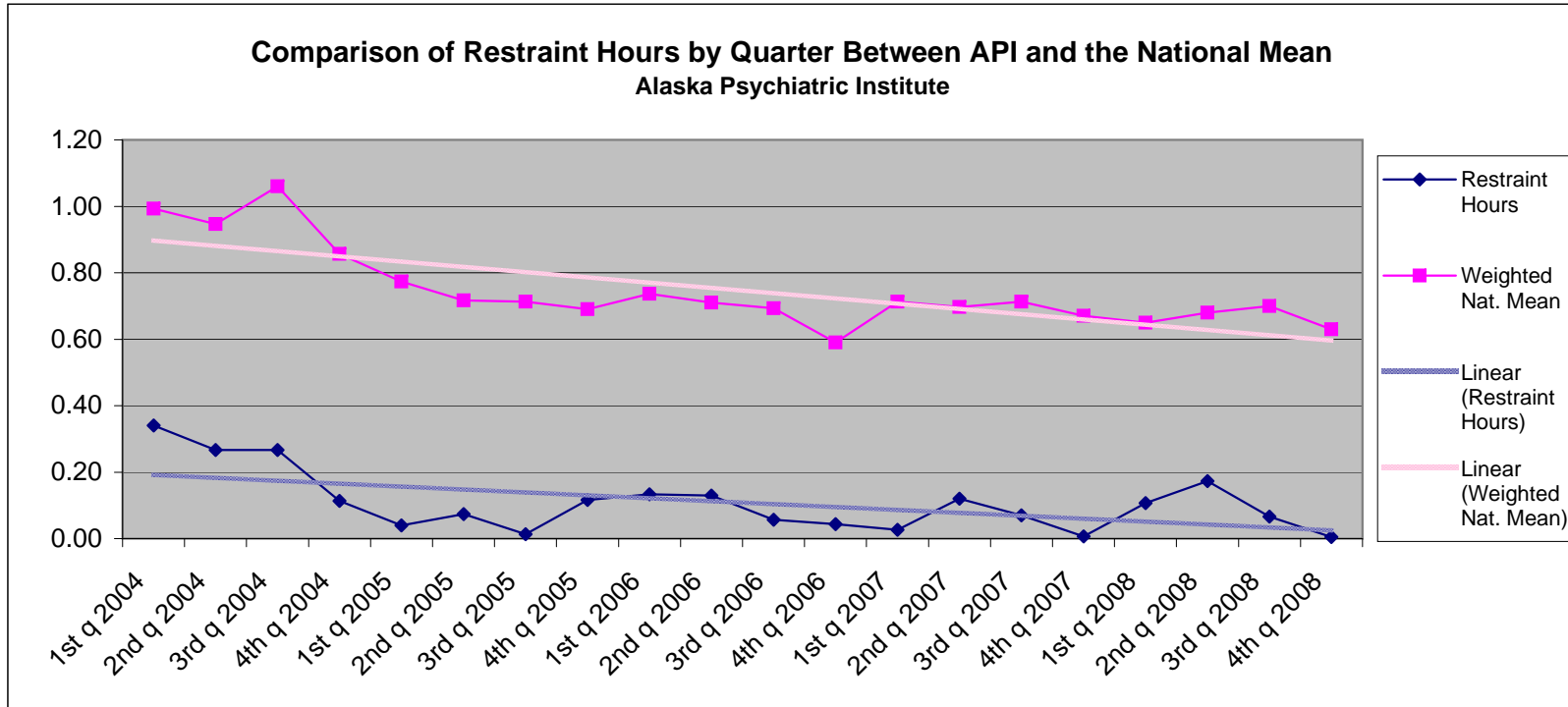
The rate of Co-Occurring Psychological and Substance Use Disorders (COPSD) at API is higher than the National mean because the COPSD rate is higher for the State of Alaska than it is the rest of the U.S. The trend is fairly flat over this three year period.

30- Day Re-Admission Rate (Discharge Cohort)



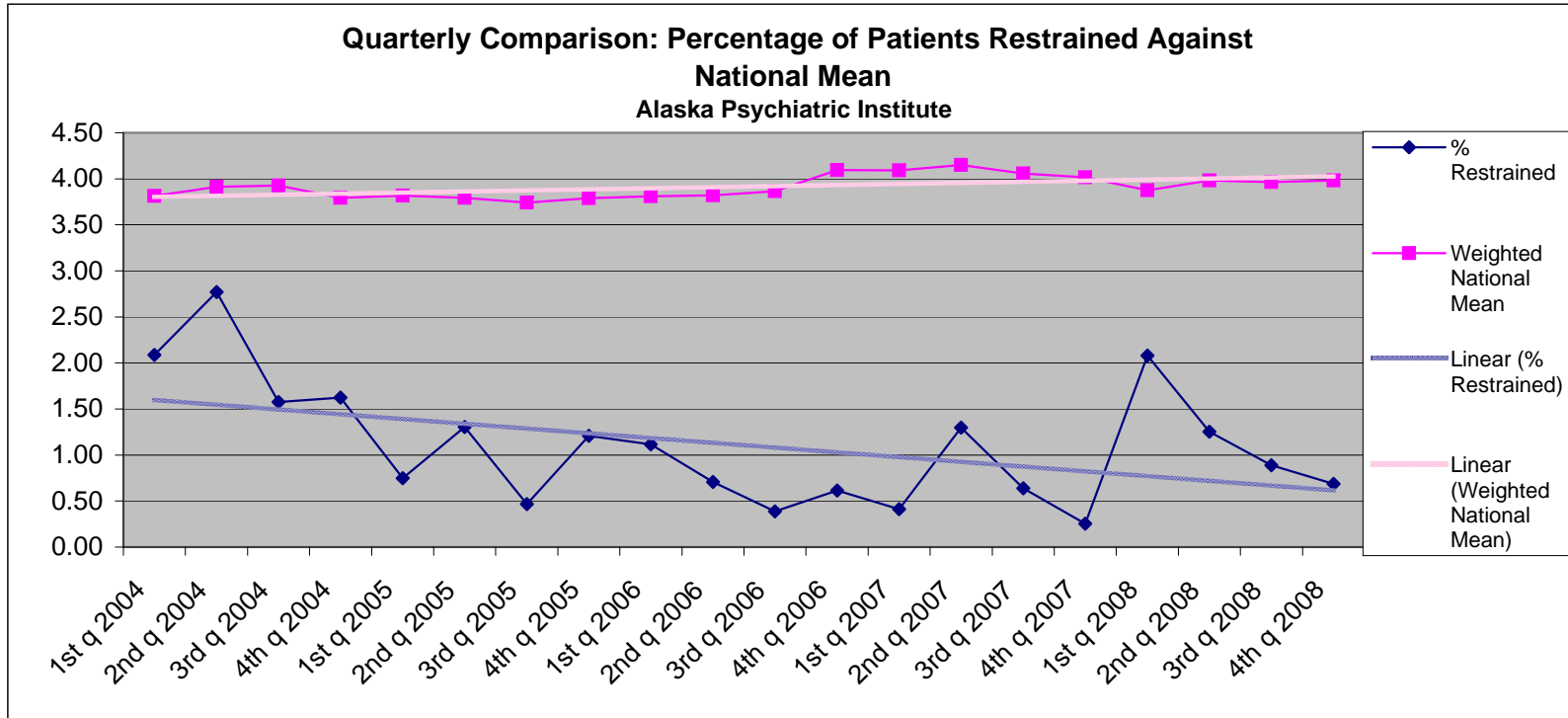
The 30-Day re-admission rate at API has been consistently above the National Mean for the last 5 years. The linear trend line shows that the overall number of admissions within 30 days is decreasing.

Restraint Hours



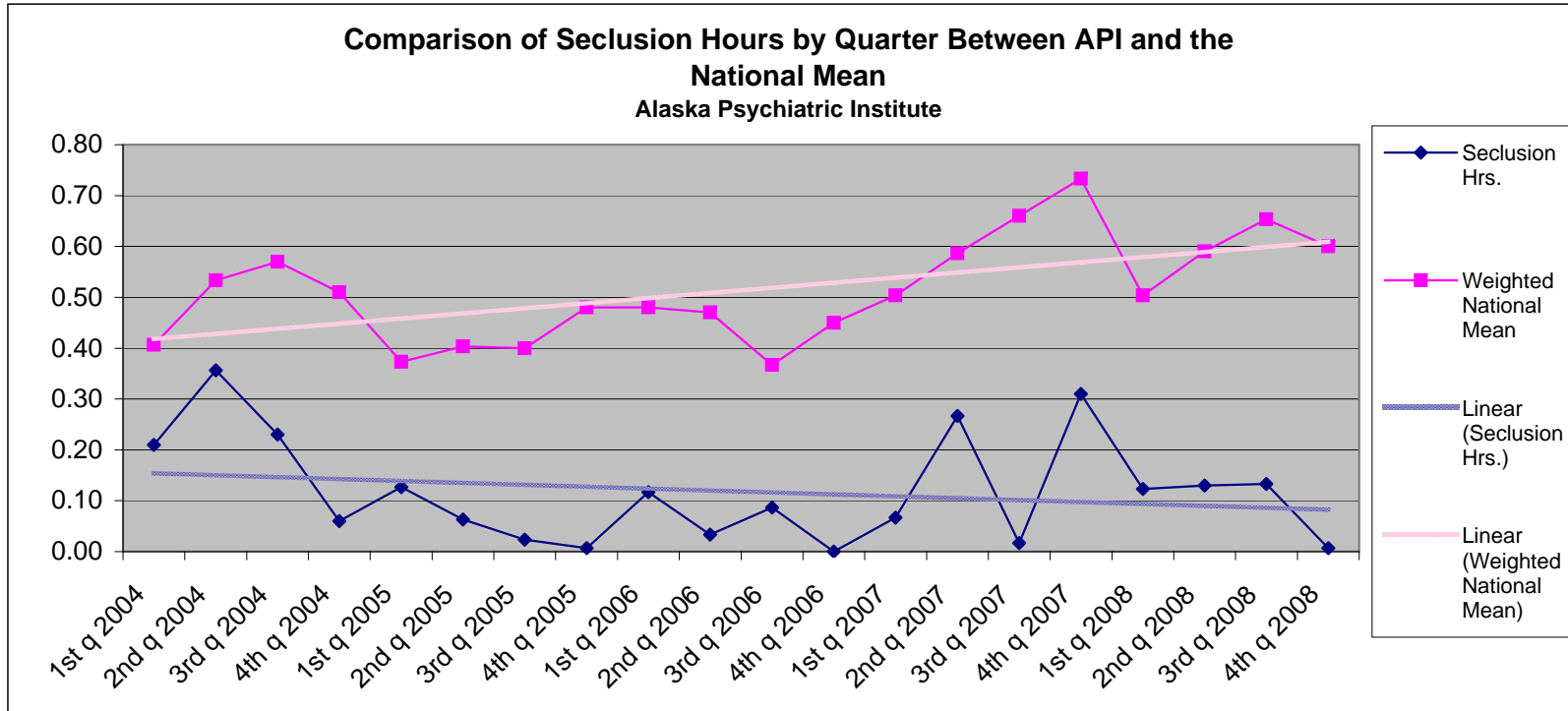
API is well below the national mean for restraint hours for every 1000 inpatient hours. API continues to monitor this important indicator as part of its commitment to providing the best possible care for our clients.

Percent Restrained



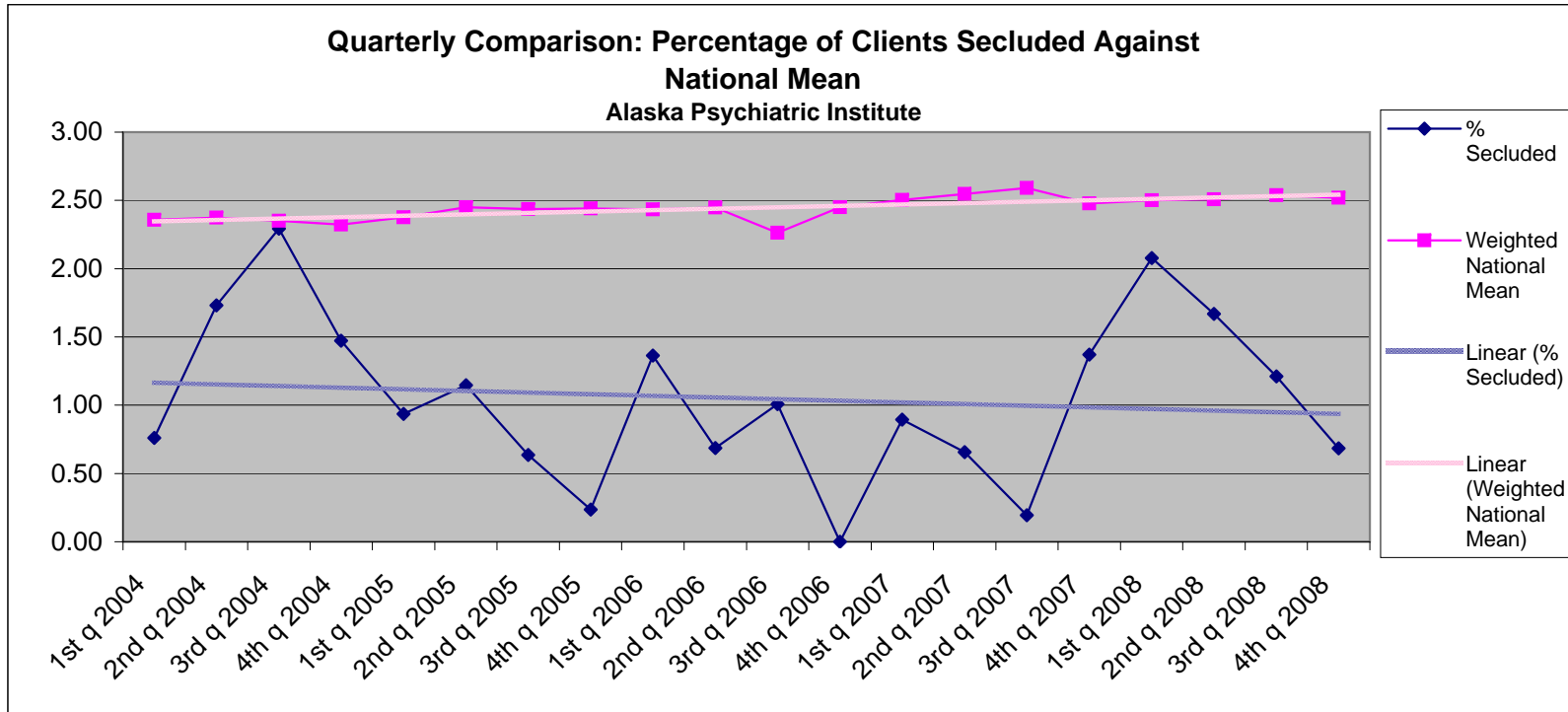
Since the first quarter of 2004 API has consistently been well below the national mean for the percentage of patients restrained. The line of best fit for this trend suggests that API will likely sustain the low percentage of patients restrained into the future.

Seclusion Hours



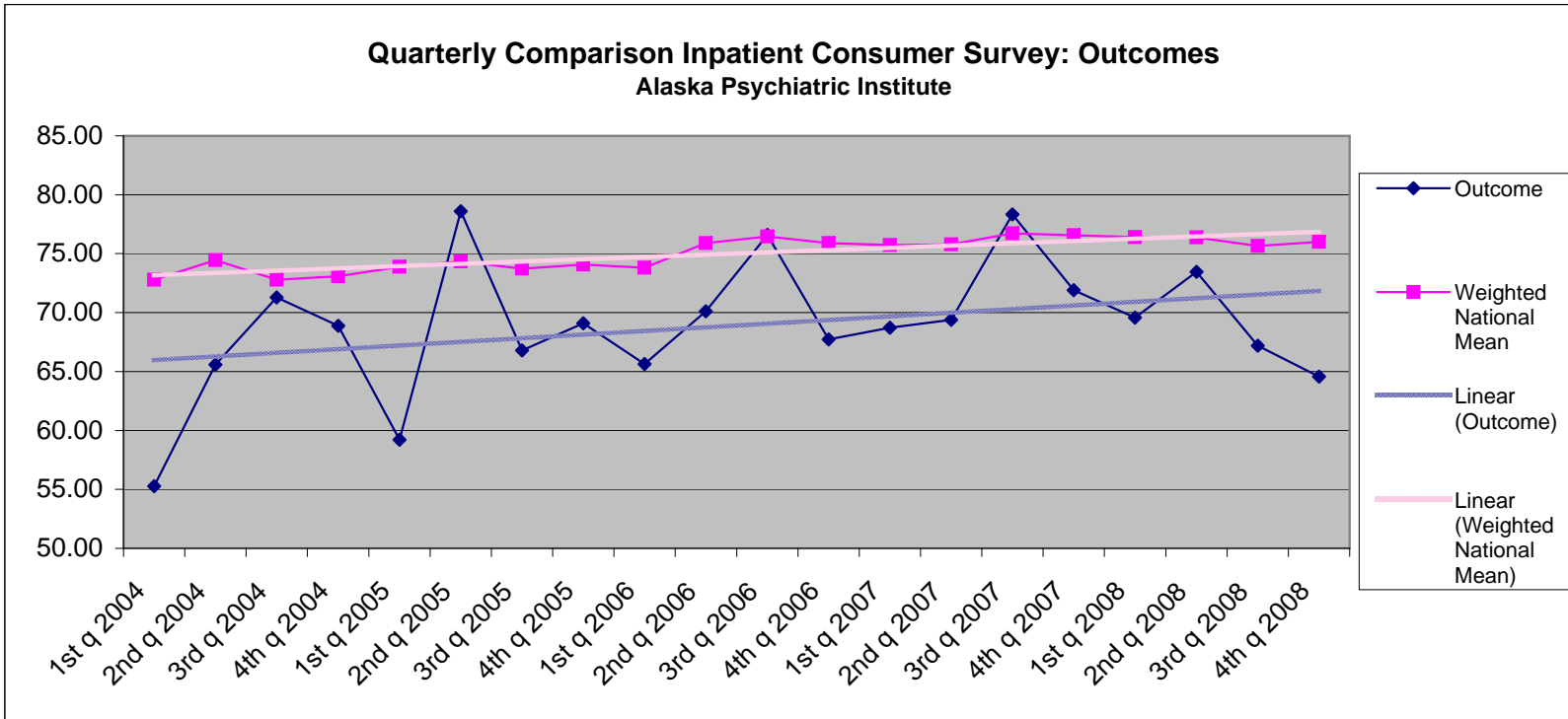
The trend in seclusion hours per 1000 inpatient hours at API is fairly consistent, and has remained well below the national mean for the past five years.

Percent Secluded



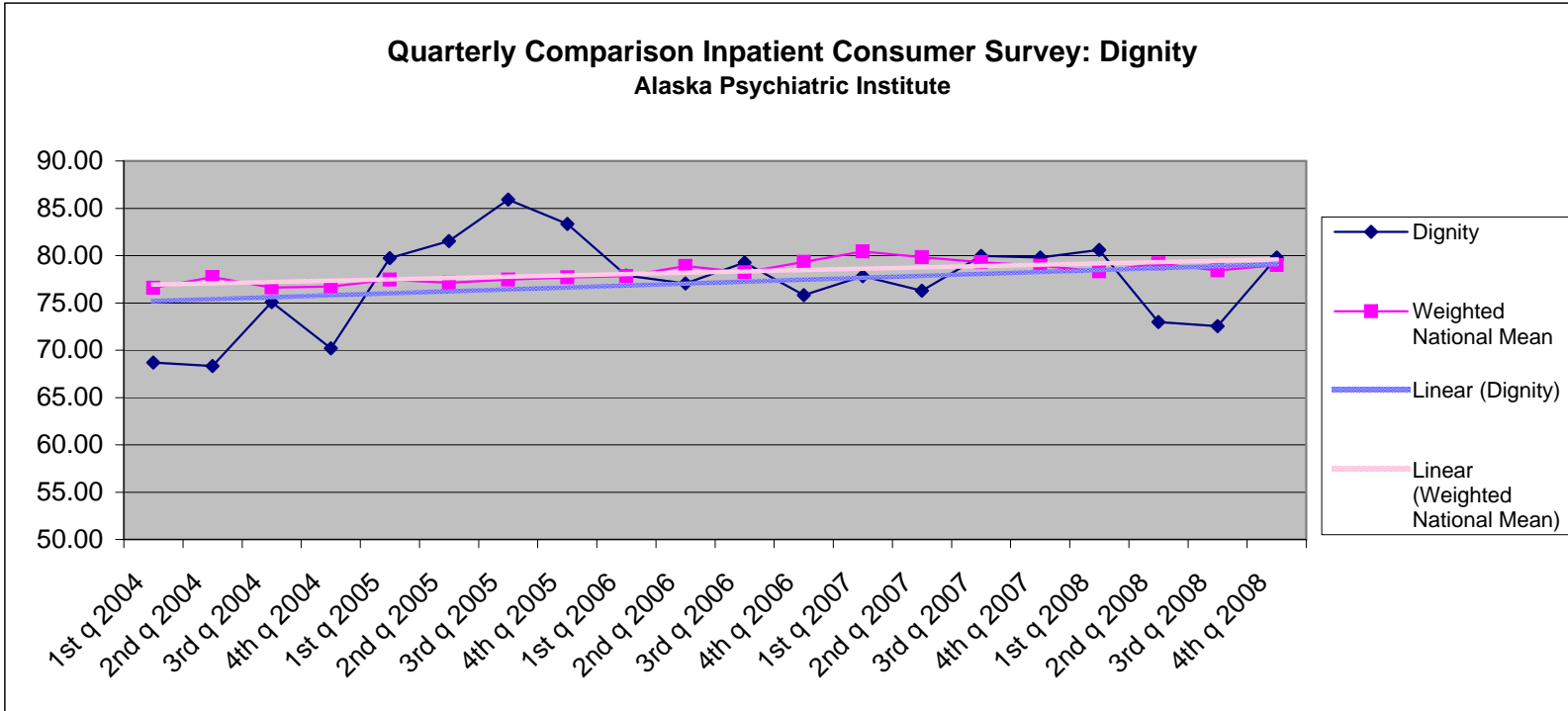
The percentage of clients secluded at API has been at or below the national mean for the last five years. The trend suggests that contributing factors remaining constant, API will continue to maintain a low percentage of clients secluded and continue to fall below the national mean.

Outcomes



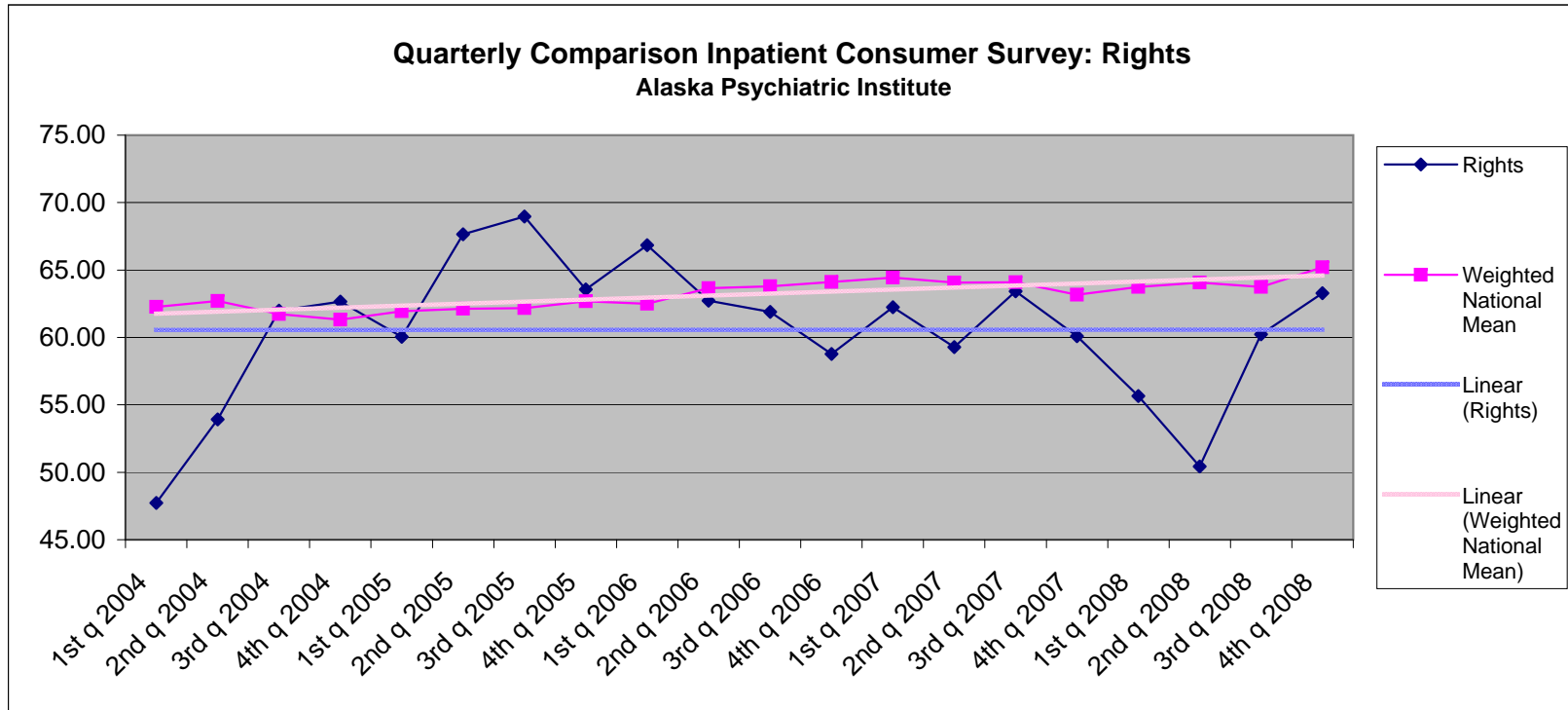
Although the majority of data points for API are below the national mean, the trend is significantly positive over the last four years.

Dignity



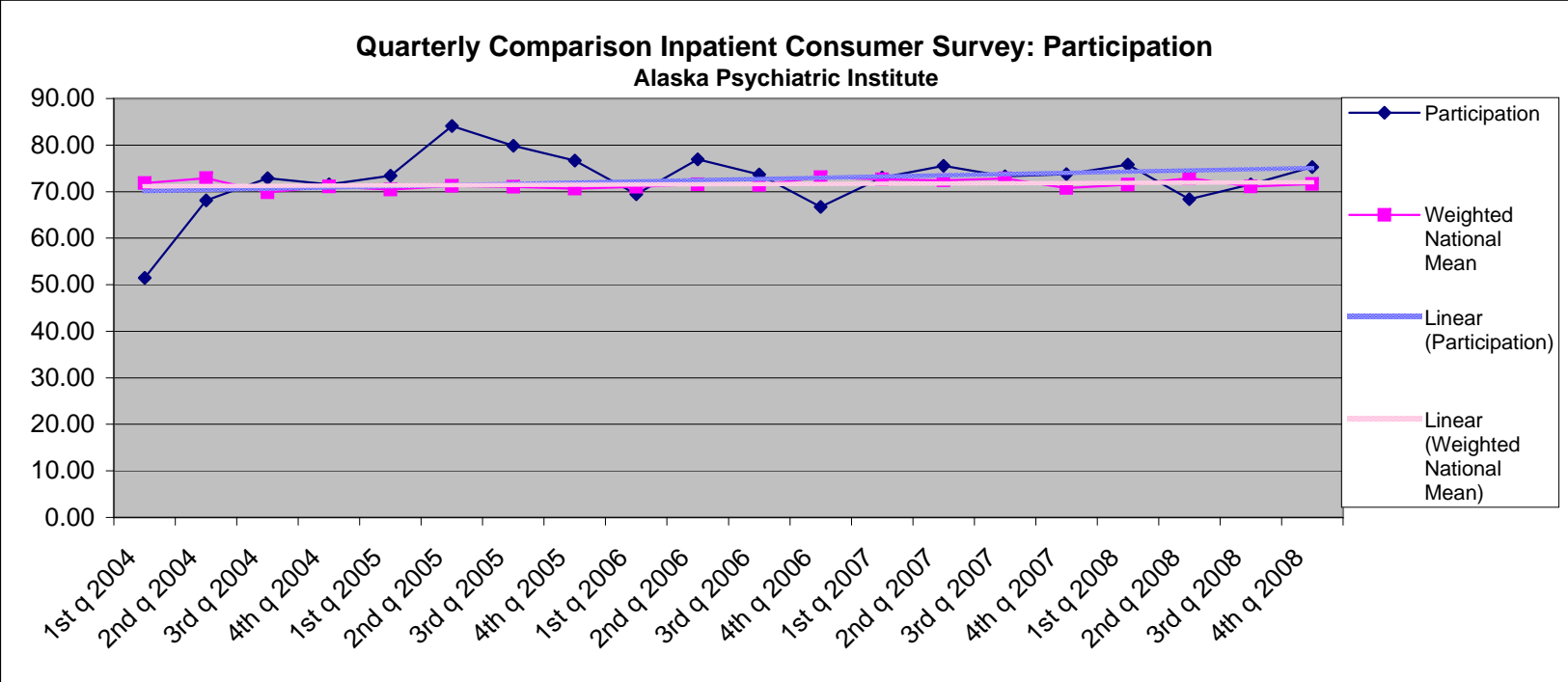
The trend line for the Inpatient Consumer Survey questions revolving around Dignity is very positive. There has been obvious improvement over the last four years.

Rights



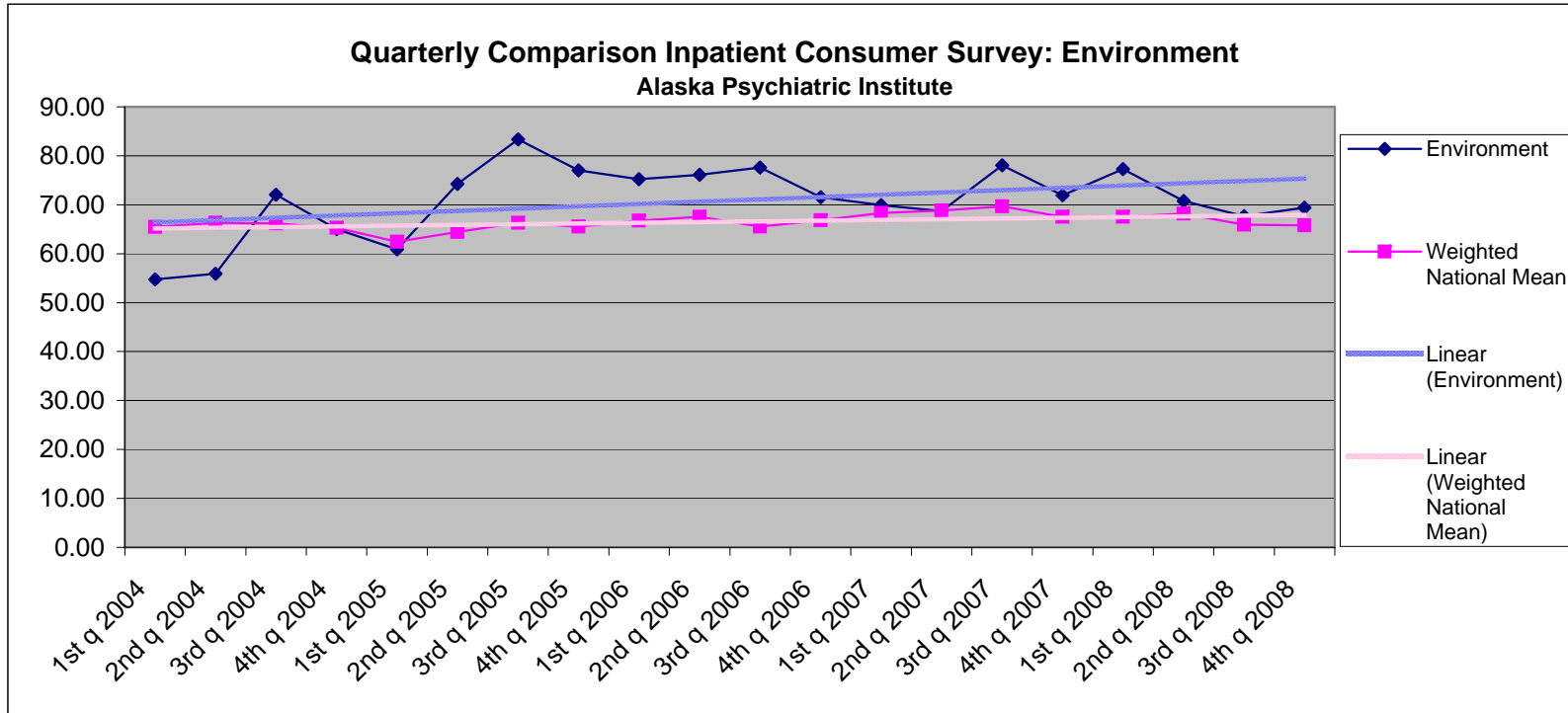
There is significant monthly and quarterly variability in the MHSIP 'Rights' scores. One contributing factor to this variation is the high percentage of missing or illegible responses in this category.

Participation



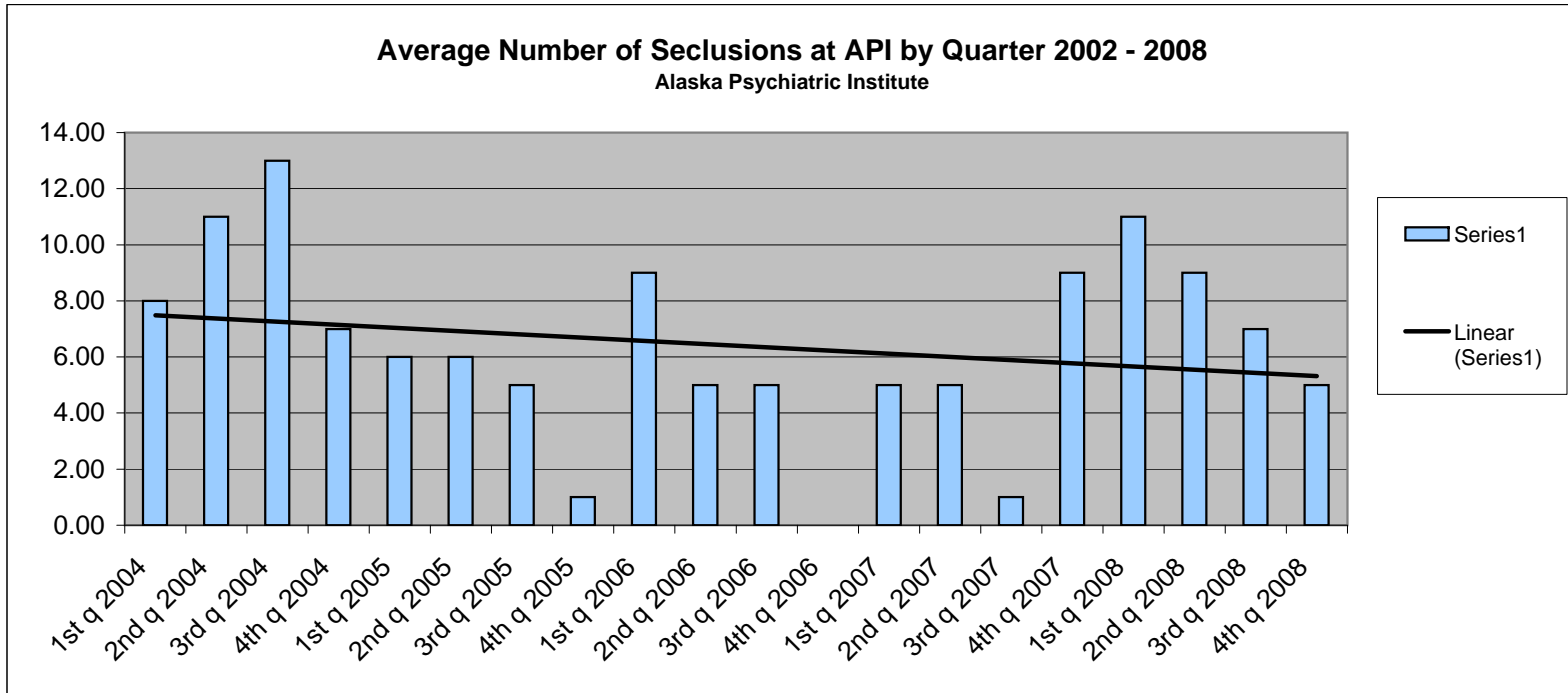
Participation is an area that API's scores are trending above the national average, and appear to be improving over time.

Environment



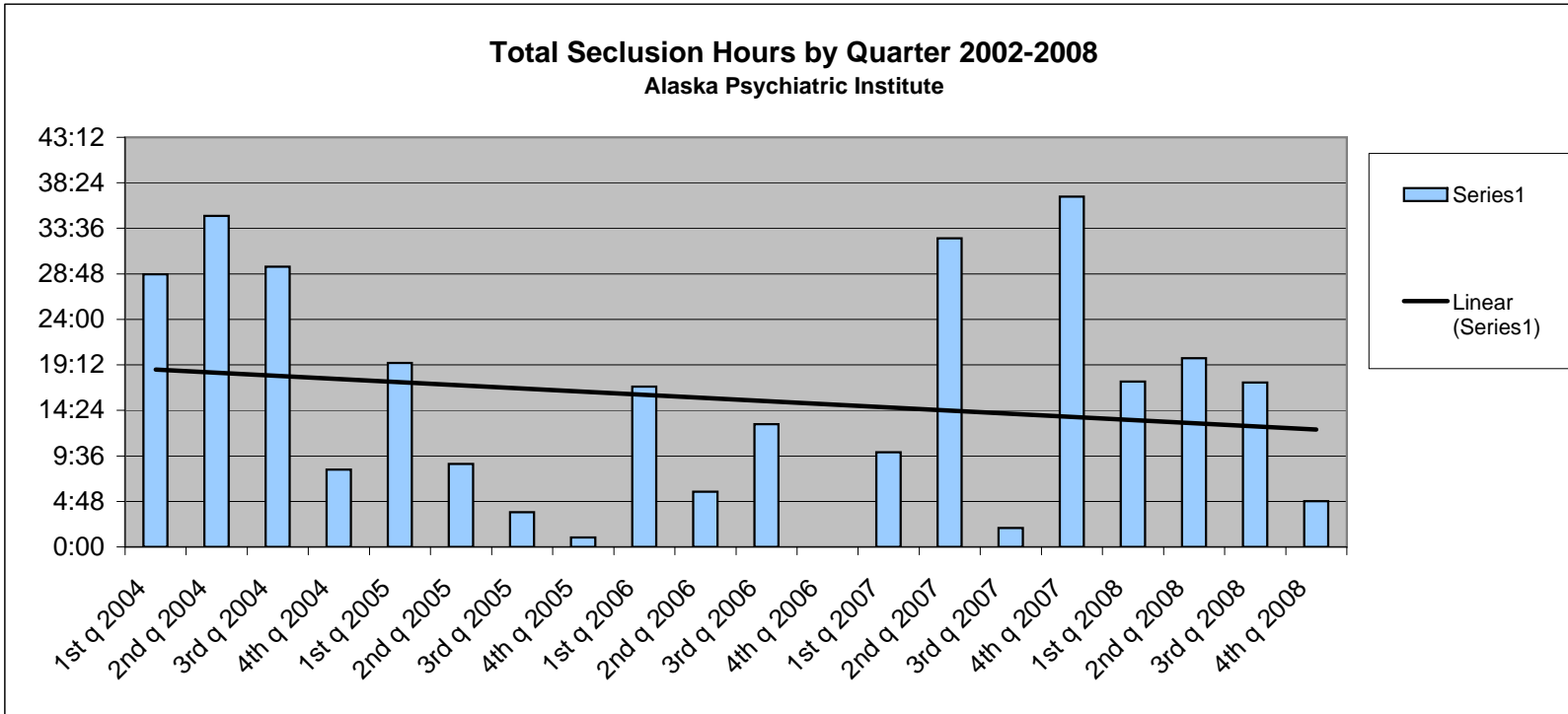
Of the five domains on the MHSIP, Environment is the one that API consistently scores the highest. The positive trend in this area is also worth noting.

Total Number of Seclusions



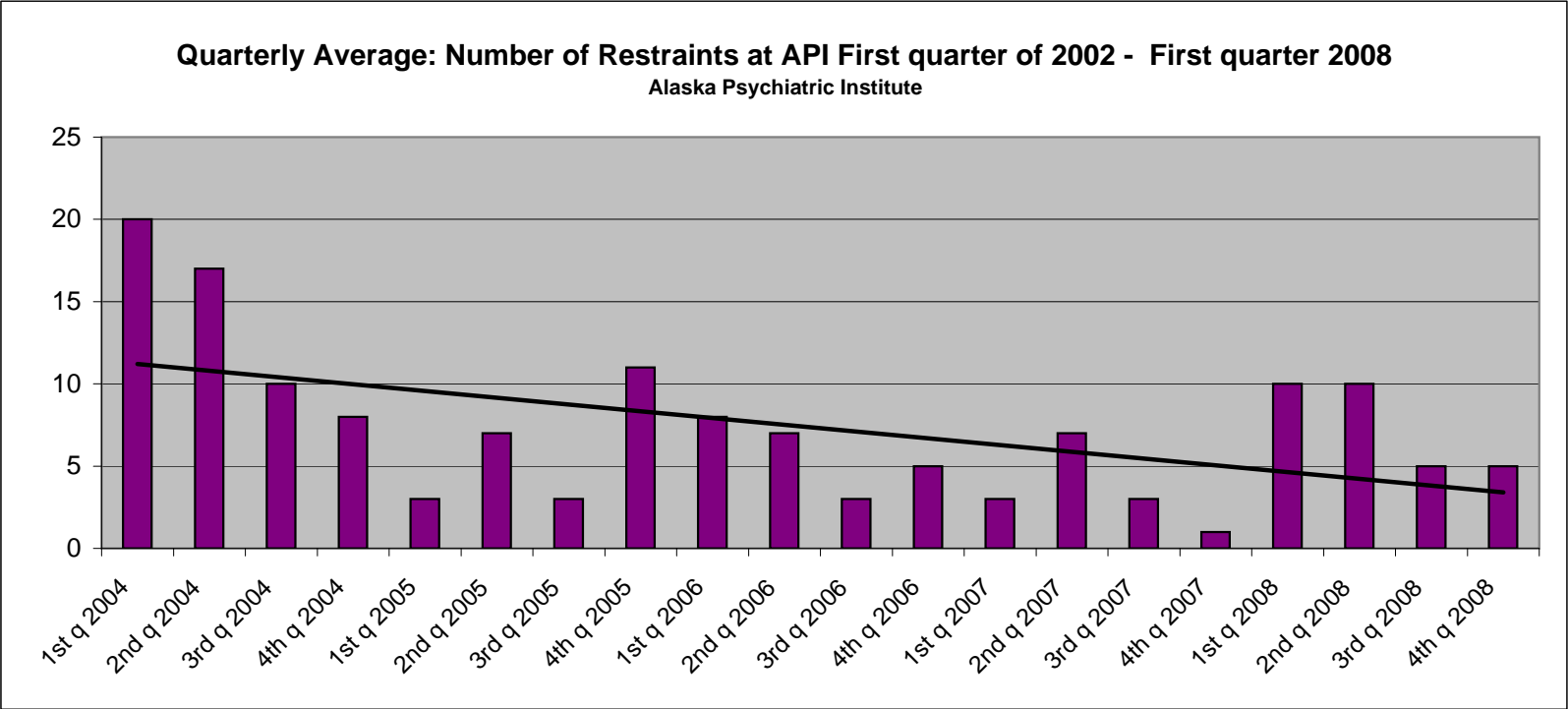
As opposed to the hours of seclusion as a rate or percent of patients secluded, this measure is raw numbers of seclusions averaged by quarter. As with the trend in the other seclusion measures, the total number of seclusions at API are decreasing.

Total Seclusion Hours



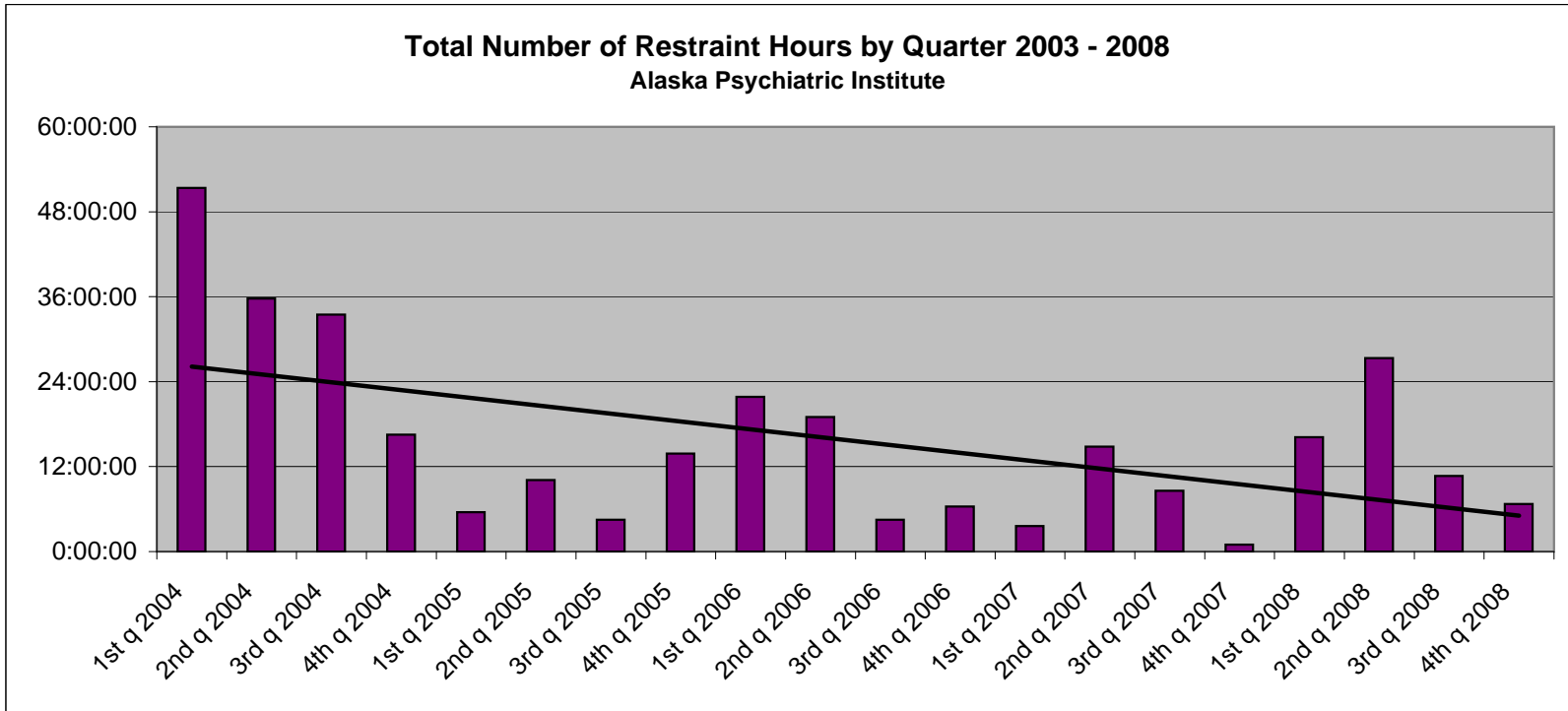
There is considerable quarterly and monthly variation in the total number of seclusion hours. The general trend over the last five years shows a moderate downward slope in the total hours of seclusion.

Total Number of Restraints



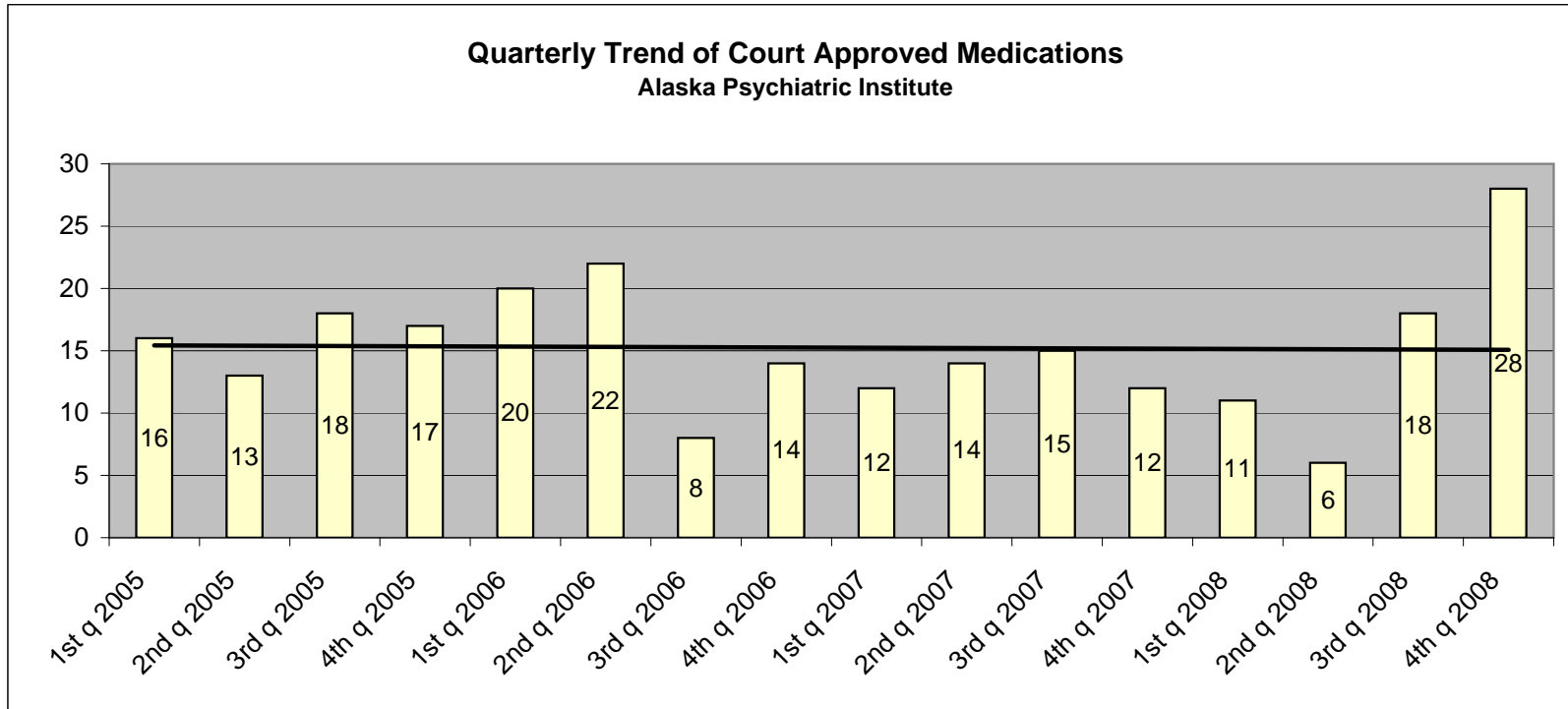
The total number of restraints per quarter show a declining trend over the past five years.

Total Restraint Hours



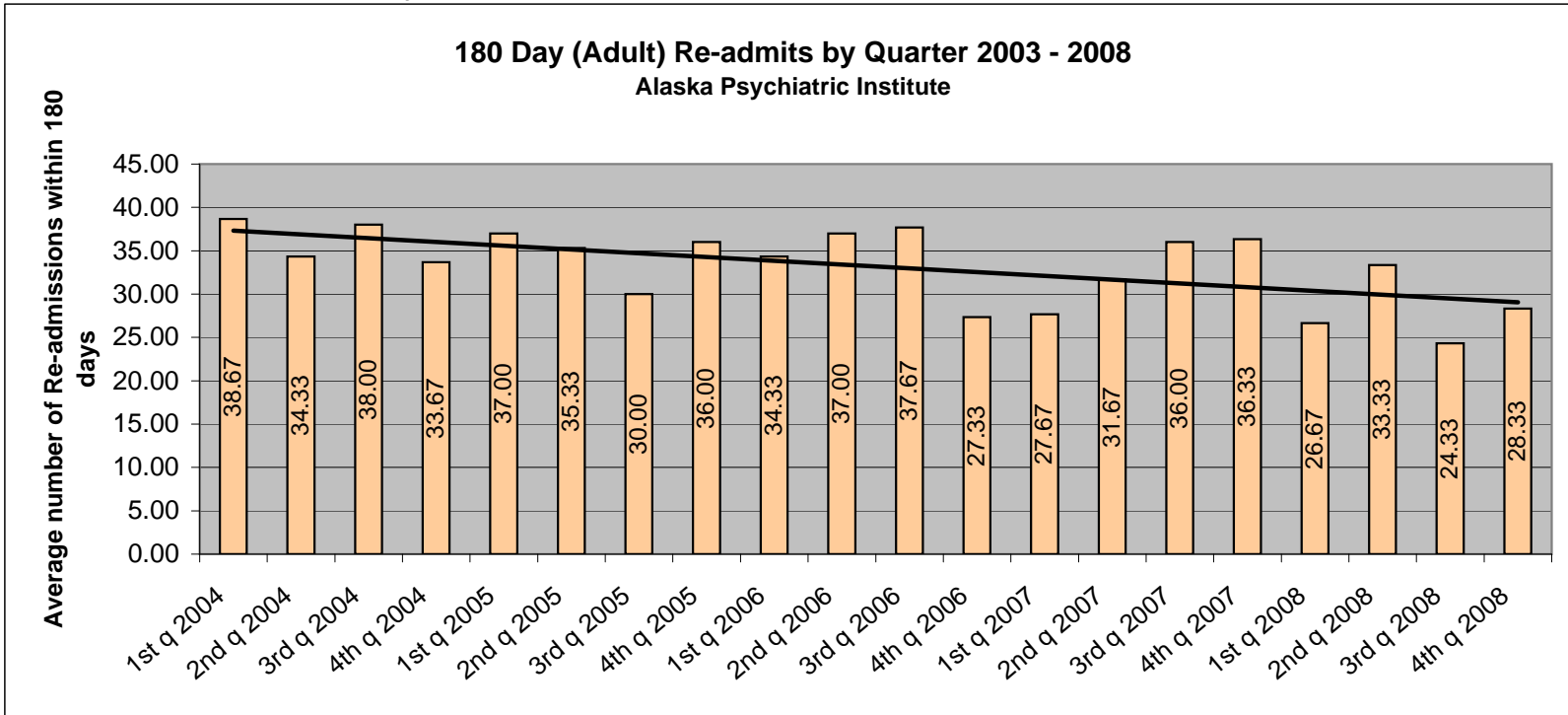
The total number of hours of restraint by quarter shows a very similar picture as the graph of the total number of restraints. The quarterly total number of restraint hours has been more consistent from the first quarter of 2006 through the second quarter of 2008.

Court Approved Medications



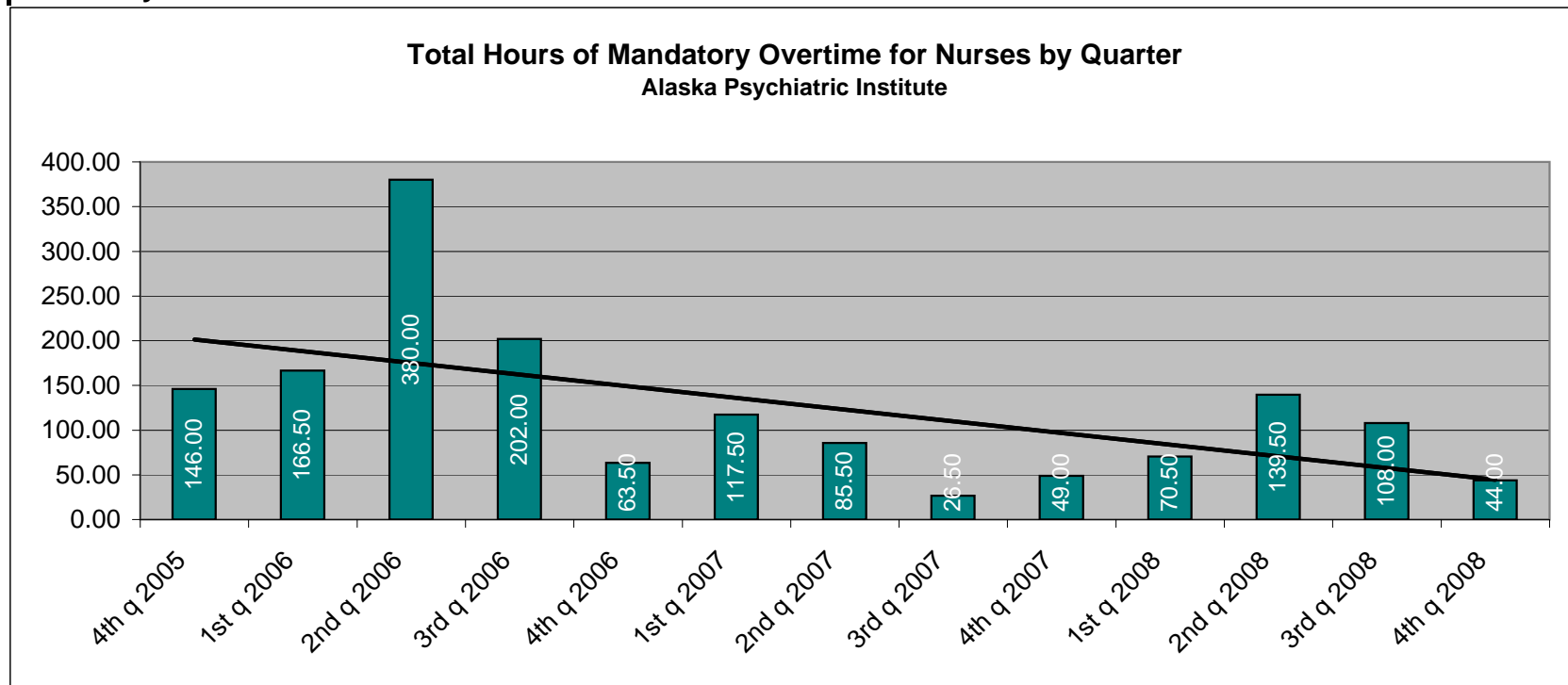
The trend line has remained relatively constant over the reporting period. Many factors effect the quarter by quarter variations in court ordered medication, including but not limited to: severity of acute illness, effects of census on individual patients, type of illness, etc.. A statistically significant increase is noted in the last reported quarter (4th q 2008). API reviews such events for causation and if possible how to mitigate the cause.

Readmissions Within 180 Days



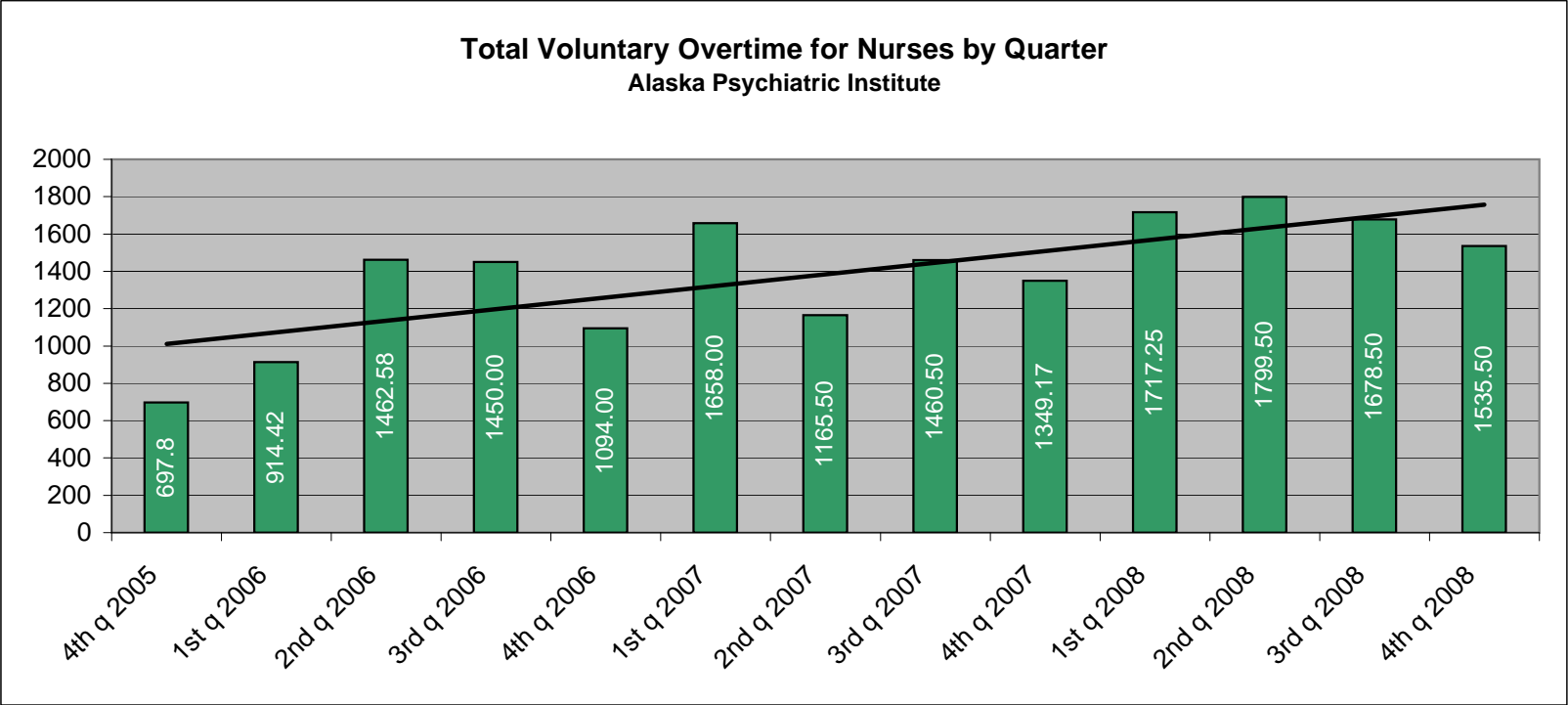
The quarterly average number of 180 Day Re-Admits over the past four years has a gradually declining trend line. This declining trend matches the declining rate of 30 day re-admits.

Mandatory Overtime



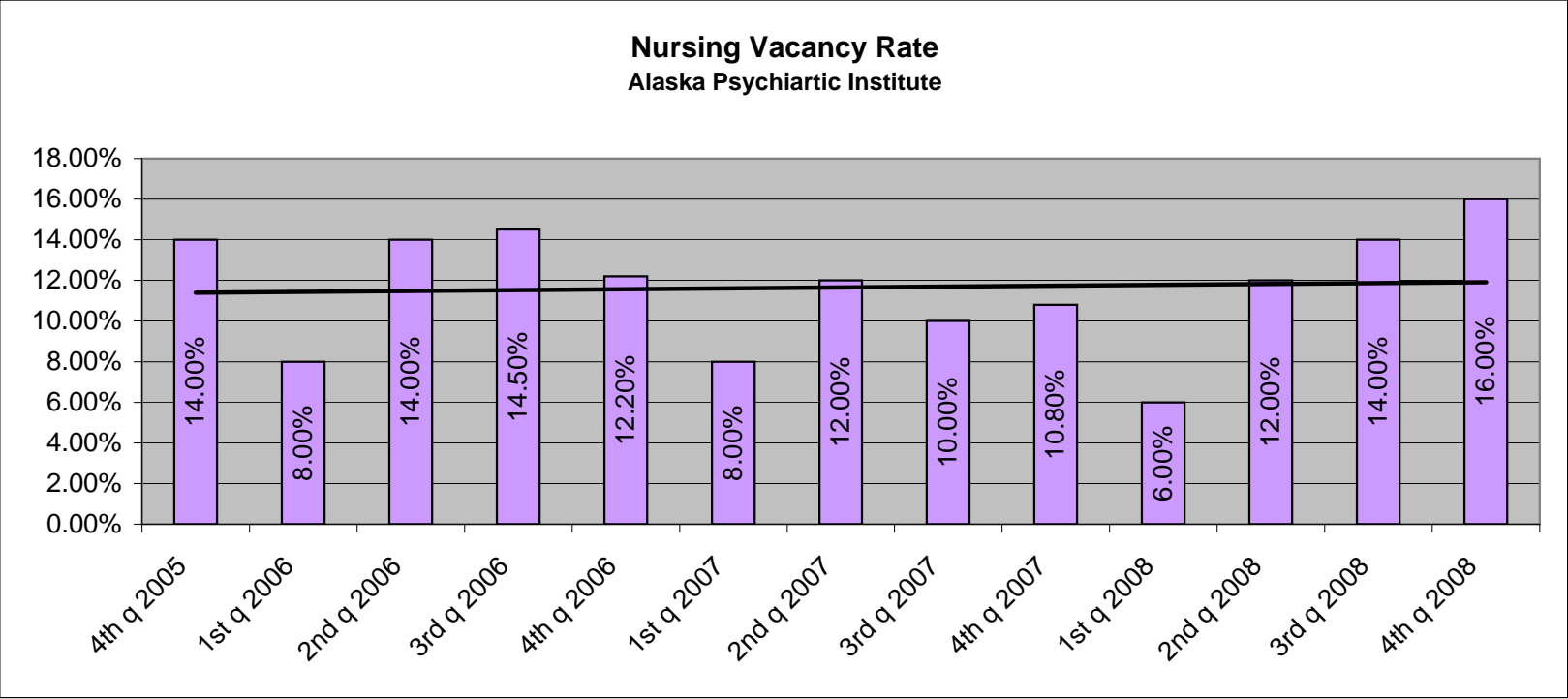
The total hours of mandatory overtime for nurses has decreased dramatically since the second quarter of 2006.

Voluntary Overtime



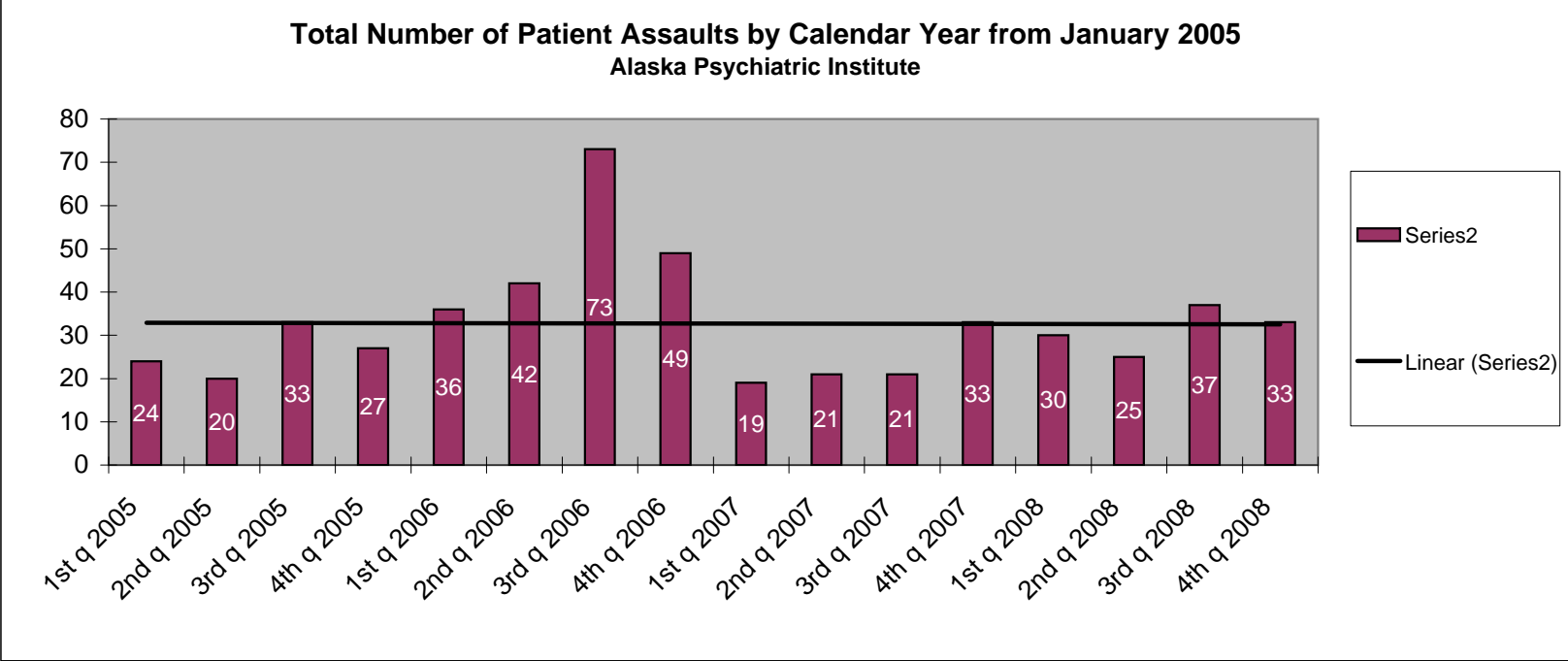
Although the change is not as dramatic as the decrease in mandatory overtime, there is a strong trend towards voluntary overtime over the past three years.

Nursing Vacancy Rate



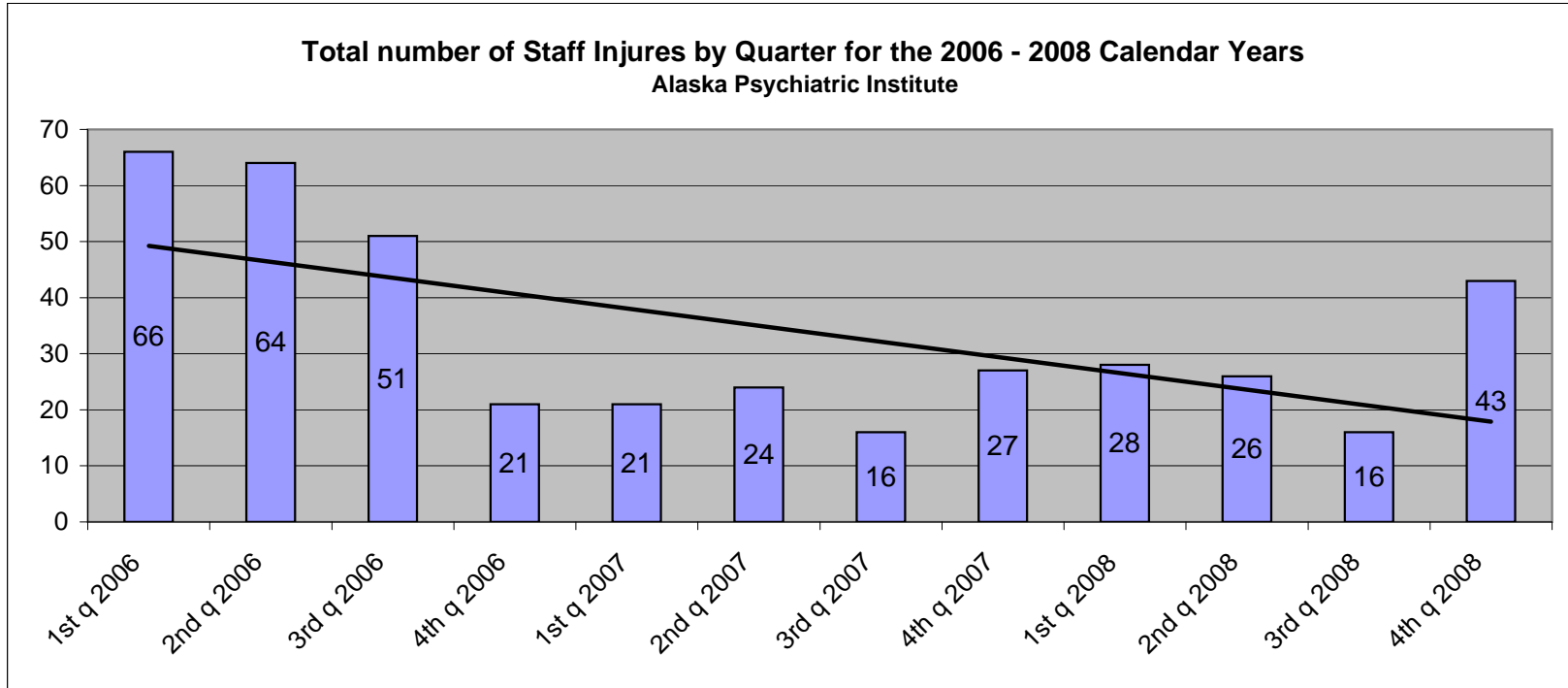
The nursing vacancy rate is cyclical by nature. The variation over the last three years does not appear to have a significant upward or downward trend.

Patient Assaults



The number of patient assaults by quarter is relatively steady. The spikes in the third and fourth quarters of 2006 are identified outliers resulting from a single patient.

Staff Injuries



Staff injuries have decreased remarkably since the third quarter of 2006. The incidence of staff injuries remained fairly consistent between the first quarter of 2007 through the third quarter of 2008. The spike in the final quarter (4th q 2008) reflects a change made in data collection. The hospital is now including injuries that did not require treatment and anticipate that this will reflect a sustained increase in reported numbers as we adjust to this change.