Day Kimball Hospital

Putnam, CT

Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Provider Activity 12 Month Trend Measure Actual 1 Yr Ago Variance % 1% Unique Clients 436 430 -71% 🔻 Admits 72 248 35 -48% 🔻 Discharges 67 -49% 🔻 Service Hours 561 1,104 Bed Days 175% 🔺 11 4 ▲ > 10% Over 1 Yr Ago \checkmark > 10% Under 1Yr Ago Unique Clients by Level of Care Program Type Level of Care Type # %

Mental Health		
Outpatient	433	99.3%
Inpatient Services	3	0.7%

Consumer Satisfaction Survey (Based on 7 FY12 Surveys)



Client Demographics

Age	#	%	State Avg	Gender	#	%	Sta	te Avg
18-25	46	12%	17%	Female	269	62%		40%
26-34	72	20%	22%	Male 🗾 📔	167	38%	▼	60%
35-44 📕	64	17%	20%					
45-54	89	24%	24%					
55-64	47	13%	13%	Race	#	%	Sta	te Avg
65+	51	14%	4%	White/Caucasian	426	98%		64%
				Black/African American	6	1%	▼	17%
Ethnicity	#	%	State Avg	Other	2	0%	▼	15%
Non-Hispanic	418	96%	▲ 74%	Am. Indian/Native Alaskan	1	0%		1%
Unknown	16	4%	7%	Unknown	1	0%		2%
Hispanic-Other	2	0%	7%	Asian				1%
Hispanic-Cuban			0%	Multiple Races				1%
•			0%	Hawaiian/Other Pacific Islander				0%
Hispanic-Mexican								
Hisp-Puerto Rican			▼ 12%					
		lionto	Ctata Ava		> 100/ 1	Indor C	tata A	
	Unique C	lients	State Avg	ightarrow > 10% Over State Avg $ ightarrow$	> 10% L	muer S	lale A	vg

Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3	4	-25% 🔻	
Admits	3	5	-40% 🔻	
Discharges	3	5	-40% 🔻	
Bed Days	11	4	175% 🔺	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		3	100%	95%	69%	5%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
No Re-admit within 30 Days of Discharge		3	100%	85%	86%	15%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		1	33%	90%	42%	-57%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization	Rate		2	4 days	0.7	6%	90%	111%	-84%	•
	< 90%	90-110%		>110%						

Data Submitted to Sep Oct Nov Dec Jan



Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	433	426	2%
Admits	69	243	-72% 🔻
Discharges	32	62	-48% 🔻
Service Hours	561	1,104	-49% 🔻

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	26%	79%
On-Time Periodic	Actual	State Avg
6 Month Updates	5%	43%
Cooccurring	Actual	State Avg
MH Screen Complete	36%	60%
SA Screen Complete	25%	60%
Diagnosis	Actual	State Avg

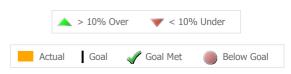
Diagnosis	Act	ual State Avg
🞻 Valid Axis I Diagnosis	100	99%
Valid Axis V GAF Score	99	90%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		31	97%	50%	54%	47%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		8	2%	30%	17%	-28%
Social Support		11	3%	60%	49%	-57%
Improved/Maintained Axis V GAF Score	– 1	62	14%	75%	39%	-61%
Stable Living Situation	· · · ·	41	9%	95%	74%	-86%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services	Actual % vs Goal %	Actual 103	Actual % 26%	Goal % 90%	State Avg 90%	Actual vs Goal -64%
Clients Receiving Services Service Engagement	Actual % vs Goal %				5	
-	Actual % vs Goal %				5	

Data Submitted to DMHAS by Month

	Ju	I Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													58%
Discharges													8%
Services													58%
	1 or	more Reco	ords Subi	nitted to	DMHAS								



* State Avg based on 91 Active Standard Outpatient Programs