Natchaug Hospital
Mansfield Center, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2015 - December 2015   (Data as of Mar 22, 2016)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	83	73	14%	▲
	Admits	49	59	-17%	▼
	Discharges	60	58	3%	
	Service Hours		-		
	Bed Days	449	630	-29%	▼

▲ > 10% Over 1 Yr Ago   ▼ > 10% Under 1Yr Ago

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	IOP	72	86.7%
Mental Health			
	Inpatient Services	11	13.3%

Consumer Satisfaction Survey   (Based on 166 FY15 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔	Respect		92%	80%	91%
✔	Quality and Appropriateness		90%	80%	93%
✔	General Satisfaction		90%	80%	92%
✔	Participation in Treatment		88%	80%	92%
✔	Access		88%	80%	88%
✔	Overall		86%	80%	91%
🔴	Outcome		67%	80%	83%
🔴	Recovery		66%	80%	79%

Satisfied % | Goal %   ▨ 0-80%   ▨ 80-100%   ✔ Goal Met   🔴 Under Goal

Client Demographics

Age

Age	#	%	State Avg
18-25	15	18%	13%
26-34	23	28%	23%
35-44	12	14%	19%
45-54	21	25%	23%
55-64	10	12%	16%
65+	2	2%	5%

Gender

Gender	#	%		State Avg
Male	59	72%	▲	59%
Female	23	28%	▼	41%
Transgender				0%

Ethnicity

Ethnicity	#	%		State Avg
Non-Hispanic	80	96%	▲	75%
Hisp-Puerto Rican	2	2%		12%
Unknown	1	1%		6%
Hispanic-Cuban				0%
Hispanic-Mexican				1%
Hispanic-Other				6%

Race

Race	#	%		State Avg
White/Caucasian	76	92%	▲	65%
Black/African American	5	6%	▼	17%
Other	1	1%	▼	13%
Unknown	1	1%		3%
Am. Indian/Native Alaskan				0%
Asian				1%
Multiple Races				1%
Hawaiian/Other Pacific Islander				0%

Unique Clients | State Avg   ▲ > 10% Over State Avg   ▼ > 10% Under State Avg

189 Storrs Rd. AIP 849-110
Natchaug Hospital
Mental Health - Inpatient Services - Acute Psychiatric

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	21	-76%	▼
Admits	3	17	-82%	▼
Discharges	4	21	-81%	▼
Bed Days	241	630	-62%	▼
				▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		4	100%	95%	54%	5%	
✓	No Re-admit within 30 Days of Discharge		4	100%	85%	88%	15%	▲
🔴	Follow-up within 30 Days of Discharge		2	50%	90%	55%	-40%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		2	158 days	0.3	65%	90%	104%	-25%	▼

■ < 90%   ■ 90-110%   ■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■						17%
Discharges	■	■					33%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 29 Active Acute Psychiatric Programs

23 Hour Obs Flex Bed 704602

Natchaug Hospital

Addiction - Inpatient Services - Observation Bed

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	NaN
Valid TEDS Data		N/A	NaN

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	N/A

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	N/A
SA Screen Complete		N/A	N/A

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

☐ Actual | Goal   ✔ Goal Met   ⬤ Below Goal

* State Avg based on 0 Active Observation Bed Programs

Intermediate Care Contract
Natchaug Hospital
Mental Health - Inpatient Services - Acute Pyschiatric - Intermediate

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6		
Admits	5	-	
Discharges	6	-	
Bed Days	208	-	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	NaN

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	N/A

Cooccurring		Actual	State Avg
✓ MH Screen Complete		0%	0%
✓ SA Screen Complete		0%	0%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	100%
Valid Axis V GAF Score		83%	97%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							50%
Discharges							83%

☐ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		6	100%	95%	100%	5%	
🔴 No Re-admit within 30 Days of Discharge		5	83%	85%	97%	-2%	
🔴 Follow-up within 30 Days of Discharge		2	33%	90%	71%	-57%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Improved/Maintained Axis V GAF Score		5	83%	95%	97%	-12%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Avg Utilization Rate		3	48 days	0.4	38%	90%	54%	-52%	▼

☐ < 90%   ☐ 90-110%   ☐ >110%

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 1 Active Acute Pyschiatric - Intermediate Programs

RiverEast IOP   70473
Natchaug Hospital
Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	72	52	38%	▲
Admits	41	42	-2%	
Discharges	50	37	35%	▲
Service Hours	-	-		
Social Rehab/PHP/IOP Days	0	0		

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		35	70%	50%	59%	20%	▲
🔴 Follow-up within 30 Days of Discharge		1	3%	90%	48%	-87%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Not Arrested		60	83%	75%	93%	8%	
🔴 Abstinence/Reduced Drug Use		33	46%	55%	57%	-9%	
🔴 Stable Living Situation		58	81%	95%	90%	-14%	▼
🔴 Employed		25	35%	50%	32%	-15%	▼
🔴 Self Help		25	35%	60%	39%	-25%	▼
🔴 Improved/Maintained Axis V GAF Score		35	54%	75%	84%	-21%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		98%	97%
Valid TEDS Data		91%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	24%

Cooccurring		Actual	State Avg
MH Screen Complete		0%	96%
SA Screen Complete		0%	96%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	94%
Valid Axis V GAF Score		71%	93%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		0	0%	90%	72%	N/A	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							83%
Discharges							100%
Services							0%

1 or more Records Submitted to DMHAS
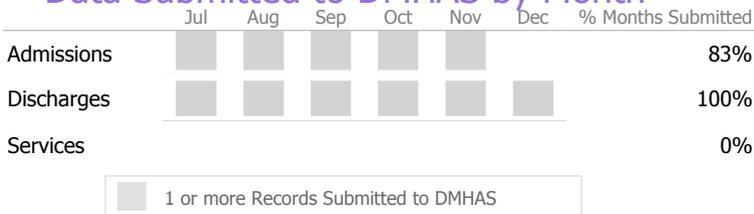
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 51 Active Standard IOP Programs