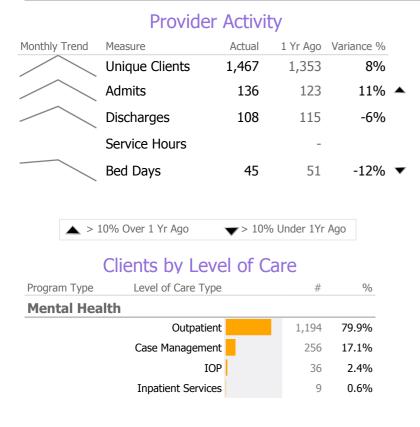
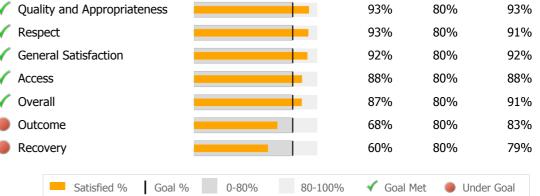
#### **Charlotte Hungerford Hospital**

Torrington, CT

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)



#### **Consumer Satisfaction Survey** (Based on 284 FY15 Surveys) Question Domain Satisfied % Goal % Satisfied % vs Goal% State Avg Participation in Treatment 93% 80% 92%



### **Client Demographics**

Age

18-25

26-34

35-44

45-54

55-64

65+

**Ethnicity** 

Non-Hispanic Hispanic-Other

Unknown

Hisp-Puerto Rican

Hispanic-Cuban Hispanic-Mexican

	# %	State Avg	Gender		#	%	State Avg
9	8 7%	b 13%	Female		850	58%	<b>▲</b> 42%
21	9 15%	b 22%	Male		617	42%	▼ 58%
23	6 16%	b 19%					
40	1 27%	b 24%					
34	9 24%	b 17%	Race		#	%	State Avg
16	3 11%	5%	White/Caucasian		1,351	92%	<b>▲</b> 66%
			Other	I	62	4%	13%
#	÷ %	State Avg	Black/African American		36	2%	▼ 16%
1,387	95%	▲ 75%	Unknown		8	1%	3%
47	3%	6%	Am. Indian/Native Alaskan		3	0%	0%
25	5 2%	12%	Asian		3	0%	1%
8		5%	Multiple Races		3	0%	1%
(	5 170		Hawaiian/Other Pacific Islander		1	0%	0%
		0%		,			
		1%					

Charlotte Hungerford Hospital Mental Health - Outpatient - Standard Outpatient

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	70	86	-19%	▼
Admits	-	19	-100%	▼
Discharges	2	10	-80%	▼
Service Hours	-	-		

## Data Submission Quality

Data Entry			Actual	State Avg
√ Valid NOMS D	ata		100%	95%
•				
On-Time Period	ic		Actual	State Avg
6 Month Upda	ites		0%	67%
Cooccurring			Actual	State Avg
MH Screen Co	mplete		N/A	78%
SA Screen Co	mplete	ľ	N/A	76%
		•		
Diagnosis			Actual	State Avg

Diagnosis	Actual	State Avg	
🞻 Valid Axis I Diagnosis	100%	96%	
Valid Axis V GAF Score	86%	91%	

## Data Submitted to DMHAS by Month

JUI	Aug	Sep	% Months Submitted
			0%
			33%
			0%
1	Deee	de Culer	
			1 or more Records Subr

#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		0	0%	50%	38%	-50%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		6	9%	30%	19%	-21%	
Social Support	I	23	33%	60%	65%	-27%	
Stable Living Situation	· · · ·	24	34%	95%	83%	-61%	
Improved/Maintained Axis V GAF Score		2	3%	75%	48%	-72%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Clients Receiving Services		0	0%	90%	71%	N/A	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		0	0%	75%	63%	-75%	

	> 10% 0	/er	▼ < 10	% Under	
Actual	Goal	-	Goal Met	Belo	w Goal

\* State Avg based on 93 Active Standard Outpatient Programs

#### Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

#### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	9	9	0%
Admits	10	10	0%
Discharges	10	9	11% 🔺
Bed Days	45	51	-12% 🔻

#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		10	100%	95%	56%	5%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
No Re-admit within 30 Days of Discharge		10	100%	85%	87%	15%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	1		20%	90%	48%	-70%	

#### **Bed Utilization**

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization R	late		2	4 days	0.2	24%	90%	105%	-66%	•
	< 90%	90-110%		>110%						

# Data Submitted to DMHAS by Month

	Jui	Aug	Sep	70 MONUNS SUDINILLEU
Admissions				100%
Discharges				100%
	1 or mo	ore Recor	ds Subr	nitted to DMHAS

	> 10% O	ver 🔻 < 10 <sup>6</sup>	% Under	
Actual	Goal	🖌 Goal Met	Below	Goal

\* State Avg based on 29 Active Acute Psychiatric Programs

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	36	52	-31% 🔻
Admits	7	31	-77% 🔻
Discharges	4	30	-87% 🔻
Service Hours	-	-	
Social Rehab/PHP/IOP Days	0	0	

## Data Submission Quality

Actual 98%	State Avg
0.00/-	
90%	100%
Actual	State Avg
0%	5%
Actual	State Avg
1000/	1000/
100%	100%
	0% Actual

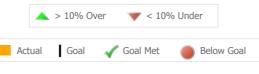
Diagnosis	Actual	State Avg
🞻 Valid Axis I Diagnosis	100%	99%
🗸 Valid Axis V GAF Score	100%	92%

## Data Submitted to DMHAS by Month

		Jui	Aug	Sep	70 Monuis Submitted
Admission	5				67%
Discharges	5				67%
Services					0%
		1 or mo	re Recor	ds Subr	nitted to DMHAS

#### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		1	25%	50%	81%	-25%	-
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		0	0%	90%	71%	-90%	-
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		29	81%	60%	70%	21%	
	Stable Living Situation		33	92%	95%	79%	-3%	
	Employed		5	14%	30%	19%	-16%	-
	Improved/Maintained Axis V GAF Score		3	33%	75%	75%	-42%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		0	0%	90%	25%	N/A	-



\* State Avg based on 5 Active Standard IOP Programs

### **Program Activity**

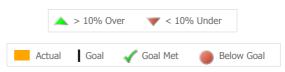
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	256	262	-2%
Admits	-	-	
Discharges	62	2	3000% 🔺
Service Hours	-	-	

#### Service Engagement

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
at least 1 Service within 180 days		0	0%	50%	76%	-50% 🔻

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				33%
Services				0%



\* State Avg based on 38 Active Outreach & Engagement Programs

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,176	1,055	11%	
Admits	119	63	89%	
Discharges	30	64	-53%	▼
Service Hours	-	-		

## Data Submission Quality

	Data Entry		Actual	State Avg
$\checkmark$	Valid NOMS Data		98%	95%
	On-Time Periodic		Actual	State Avg
	6 Month Updates		0%	67%
	Cooccurring		Actual	State Avg
$\checkmark$	MH Screen Complete		100%	78%
$\checkmark$	SA Screen Complete		100%	76%
		•		
	Diagnosis		Actual	State Avg
$\checkmark$	Valid Axis I Diagnosis		100%	96%

#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		6	20%	50%	38%	-30%	-
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		141	12%	30%	19%	-18%	-
Social Support		365	31%	60%	65%	-29%	-
Stable Living Situation	· ·	442	38%	95%	83%	-57%	-
Improved/Maintained Axis V GAF Score	L I.	25	3%	75%	48%	-72%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	71%	N/A	-
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		0	0%	75%	63%	-75%	-

## Data Submitted to DMHAS by Month

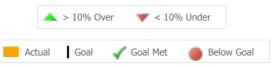
91%

91%

	Jui	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				0%

Valid Axis V GAF Score

1 or more Records Submitted to DMHAS



\* State Avg based on 93 Active Standard Outpatient Programs