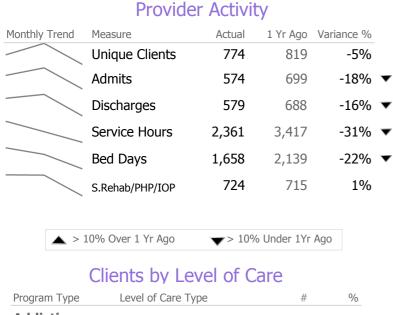
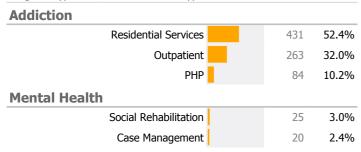
#### **Cornell Scott-Hill Health Corporation** New Haven, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

(Based on 625 FY15 Surveys)

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





#### **Consumer Satisfaction Survey** Goal % Question Domain Satisfied % vs Goal% Satisfied % State Avg Participation in Treatment 79% 80% 92% General Satisfaction 76% 80% 92% **Quality and Appropriateness** 76% 80% 93% 75% 80% 91% Overall 80% 91% Respect 75% Outcome 74% 80% 83% 79% Recovery 70% 80% 80% 88% Access 63% Satisfied % Goal % 0-80% 80-100% Goal Met Under Goal

#### **Client Demographics**

Age

18-25

26-34

35-44

45-54

55-64

65+

**Ethnicity** 

Non-Hispanic Hisp-Puerto Rican

Hispanic-Other

Hispanic-Cuban

Hispanic-Mexican

Unknown

#	%	State Avg	Gender		#	%	State Avg
90	12%	13%	Male		478	62%	58%
176	23%	22%	Female		295	38%	42%
165	21%	19%					
210	27%	24%					
121	16%	17%	Race		#	%	State Avg
11	1%	5%	White/Caucasian		451	58%	66%
			Black/African American	•	229	30%	<b>▲</b> 16%
#	%	State Avg	Other		76	10%	13%
668	86%	▲ 75%	Unknown		8	1%	3%
68	9%	12%	Am. Indian/Native Alaskan		5	1%	0%
30	4%	6%	Multiple Races		4	1%	1%
6	1%	5%	Asian		1	0%	1%
			Hawaiian/Other Pacific Islander				0%
1	0%	0%	,				
1	0%	1%					

Program Quality Dashboard

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

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	84	91	-8%
Admits	72	79	-9%
Discharges	78	76	3%
Service Hours	139	152	-9%
Social Rehab/PHP/IOP Days	724	715	1%

## Data Submission Quality

🞻 Valid Axis I Diagnosis	100%	100%
Diagnosis	Actual	State Avg
🞸 SA Screen Complete	100%	73%
MH Screen Complete	100%	73%
Cooccurring	Actual	State Avg
6 Month Updates	N/A	50%
On-Time Periodic	Actual	State Avg
🗸 Valid TEDS Data	100%	97%
Valid NOMS Data	96%	98%
Data Entry	Actual	State Avg

#### Data Submitted to DMHAS by Month

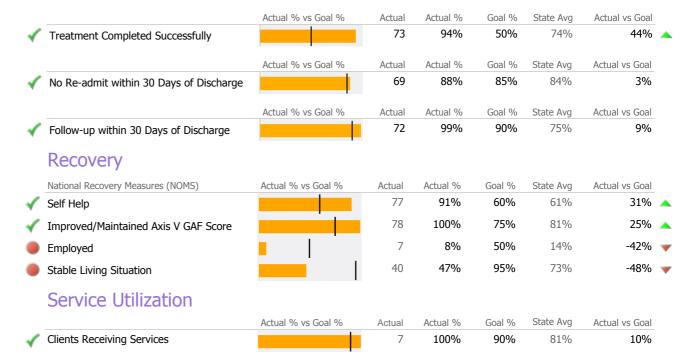
100%

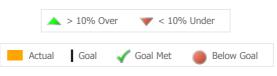
100%

100%
100%
100%

Valid Axis V GAF Score

#### **Discharge Outcomes**

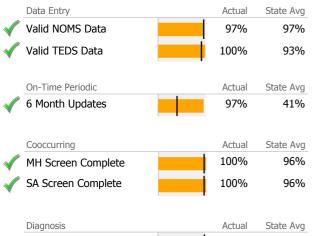




\* State Avg based on 14 Active Partial Hospitalization Services Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	263	227	16%	
Admits	60	65	-8%	
Discharges	55	56	-2%	
Service Hours	933	1,235	-24%	▼

# Data Submission Quality



Diagnosis	Actual	State Avg
🞻 Valid Axis I Diagnosis	100%	98%
Valid Axis V GAF Score	100%	96%

# Data Submitted to DMHAS by Month

	Jul	rug	ocp	70 TIONEIIS Subinicea
Admissions				100%
Discharges				100%
Services				100%
	1 or mo	nitted to DMHAS		

#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		6	11%	50%	56%	-39%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested		259	98%	75%	84%	23%
Abstinence/Reduced Drug Use		191	72%	55%	50%	17%
Stable Living Situation	· · ·	241	91%	95%	83%	-4%
Employed	<b>—</b> 1 <sup>·</sup>	53	20%	50%	39%	-30%
Self Help	<b>i</b> 1	30	11%	60%	19%	-49%
Improved/Maintained Axis V GAF Score	<b>—</b> '	38	21%	75%	53%	-54%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		186	88%	90%	74%	-2%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		49	82%	75%	76%	7%



\* State Avg based on 116 Active Standard Outpatient Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	20	20	0%
Admits	-	5	-100% 🔻
Discharges	2	1	100% 🔺
Service Hours	79	140	-44% 🔻

Mental Health - Case Management - Outreach & Engagement

## 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
Admission	S				0%
Discharge	5				67%
Services					100%
Services	1	or mo	re Recor	ds Subr	nitted to DMHAS

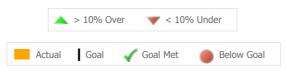
	> 10% 0	ver 🔻 < 10º	% Under	
Actual	Goal	🞻 Goal Met	Below	Goal

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

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

Data	Submi	tted	to	DMHAS by Month	
	Jul	Aug	Sep	% Months Submitted	

Admissions		0%
Discharges		0%
	1 or more Records Submitted to DMHAS	



\* State Avg based on 6 Active Outreach & Engagement Programs

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

## Data Submission Quality

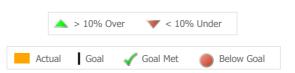
Data Entry		Actual	State Avg
Valid NOMS Data		N/A	97%
Valid TEDS Data	ĺ	N/A	93%
On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	41%
- ·			
Cooccurring		Actual	State Avg
MH Screen Complete		N/A	96%
SA Screen Complete		N/A	96%

## **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	56%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		N/A	N/A	55%	50%	-55%	-
Employed	l.	N/A	N/A	50%	39%	-50%	-
Improved/Maintained Axis V GAF Score	· 1	N/A	N/A	75%	53%	-75%	-
Not Arrested	i	N/A	N/A	75%	84%	-75%	-
Self Help		N/A	N/A	60%	19%	-60%	-
Stable Living Situation		N/A	N/A	95%	83%	-95%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		N/A	N/A	90%	74%	N/A	-

## Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
	1 or mo	ore Recor	ds Subr	nitted to DMHAS



\* State Avg based on 116 Active Standard Outpatient Programs

#### SCRC Residential Detox 986600

Cornell Scott-Hill Health Corporation Addiction - Residential Services - Medically Monitored Detox 3.7D Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	431	513	-16% 🔻	
Admits	442	549	-19% 🔻	
Discharges	444	554	-20% 🔻	
Bed Days	1,658	2,139	-22% 🔻	

# Data Submission Quality

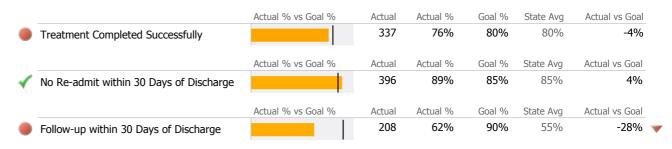
Data Entry	Actual	State Avg
√ Valid NOMS Data	100%	96%
🗸 Valid TEDS Data	100%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	N/A
Cooccurring	Actual	State Avg
🞻 MH Screen Complete	99%	99%
🞸 SA Screen Complete	99%	99%
Diagnosis	Actual	State Ava
Diagitusis	Actual	Jule Avy

🞻 Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	96%	99%

# Data Submitted to DMHAS by Month

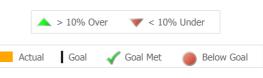
	Jui	Aug	Scp	70 PIONUIS Submitted
Admissions				100%
Discharges				100%
	1 or mo	re Recor	ds Subr	nitted to DMHAS

#### Discharge Outcomes



#### Bed Utilization





\* State Avg based on 8 Active Medically Monitored Detox 3.7D Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

#### **Program Activity**

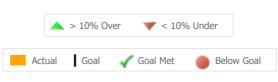
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	25	20	25%	
Admits	-	1	-100%	▼
Discharges	-	1	-100%	▼
Service Hours	1,211	1,890	-36%	▼
Social Rehab/PHP/IOP Days	0	0		

#### Service Utilization



# Data Submitted to DMHAS by Month

		Jui	Aug	Sep	70 MONUNS SUDINILLEU
Admissions	6				0%
Discharges	;				0%
Services					100%
		1 or mo	ore Recor	ds Subn	nitted to DMHAS



\* State Avg based on 39 Active Social Rehabilitation Programs