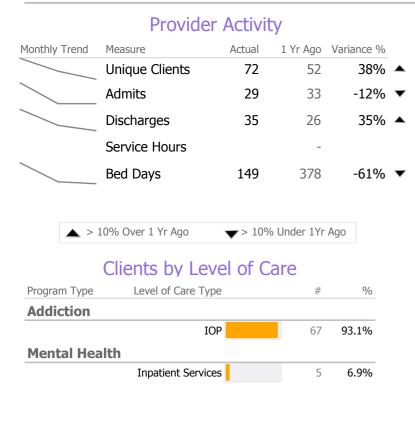
Natchaug Hospital

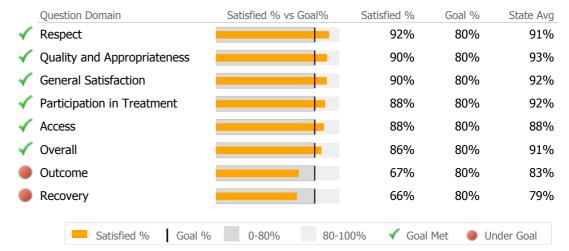
Mansfield Center, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

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



Consumer Satisfaction Survey (Based on 166 FY15 Surveys)



Client Demographics

Age

Ethnicity Non-Hispanic Hisp-Puerto Rican Hispanic-Cuban Hispanic-Mexican Hispanic-Other Unknown

Unique Clients State Avg

18-25

26-34 35-44 45-54 55-64

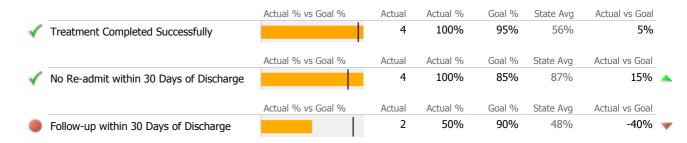
#	%	State Avg	Gender	#	%	State Avg
12	17%	13%	Male	49	68%	58%
23	32%	22%	Female 📒	23	32%	42%
13	18%	19%				
17	24%	24%				
6	8%	17%	Race	#	%	State Avg
1	1%	5%	White/Caucasian	67	93%	▲ 66%
			Black/African American	4	6%	16%
#	%	State Avg	Other	1	1%	▼ 13%
69	96%	▲ 75%	Am. Indian/Native Alaskan			0%
3	4%	12%	Asian			1%
		0%	Multiple Races			1%
		1%	Hawaiian/Other Pacific Islander			0%
			Unknown			3%
		6%				
		5%				

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	14	-64%	▼
Admits	3	10	-70%	▼
Discharges	4	12	-67%	▼
Bed Days	149	378	-61%	•

Discharge Outcomes



Bed Utilization

		12 Months 7	Frend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization F	Rate		-	2	78 days	0.4	81%	90%	105%	-9%
	< 90%	% 9	0-110%		>110%					

Data Submitted to DMHAS by Month

		501 7	ug	ocp	70 T TOTTETTS SUDI	meeca
Admissions	5					33%
Discharges	;					67%
	1 0	or more F	Records	Submi	itted to DMHAS	

	> 10% O	ver 🔻 < 100	% Under
Actual	Goal	🞻 Goal Met	Below Goal

* State Avg based on 29 Active Acute Psychiatric Programs

Program Activity

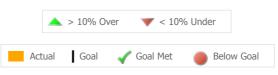
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

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	% Months Submitted
Admissions				0%
Discharges				0%
	1 or mo	re Recor	ds Subr	nitted to DMHAS



* State Avg based on 0 Active Observation Bed Programs

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 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
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	N/A
Cooccurring	Actual	State Avg
MH Screen Complete	N/A	0%
SA Screen Complete	N/A	0%

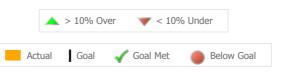
Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	95%	100%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	100%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	85%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal

Na	cional Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Im	proved/Maintained Axis V GAF Score		N/A	N/A	95%	100%	-95%	-

Data Submitted to DMHAS by Month

		JUI	Aug	Sep	% Months Submitted
Admission	S				0%
Discharge	5				0%
		1 or mo	re Recor	ds Subr	nitted to DMHAS



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

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	67	38	76% 🔺
Admits	26	23	13% 🔺
Discharges	31	14	121% 🔺
Service Hours	-	-	
Social Rehab/PHP/IOP Days	0	0	

Data Submission Quality

	Data Entry		Actual	State Avg
\checkmark	Valid NOMS Data		98%	97%
	Valid TEDS Data		93%	99%
	On-Time Periodic		Actual	State Avg
	6 Month Updates		0%	33%
	Cooccurring		Actual	State Avg
	MH Screen Complete		0%	96%
	SA Screen Complete		0%	96%
		•		
	Diagnasia		Ashual	Chata Aura

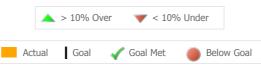
	Diagnosis	Actual	State Avg
\checkmark	Valid Axis I Diagnosis	100%	97%
	Valid Axis V GAF Score	90%	97%

Data Submitted to DMHAS by Month

Jul	Aug	Sep	% Months Submitted
			100%
			100%
			0%
1 or mo	re Recor	ds Subr	nitted to DMHAS
			1 or more Records Subr

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Treatment Completed Successfully		21	68%	50%	61%	18%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		1	5%	90%	51%	-85%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		53	79%	75%	87%	4%	
Employed		26	39%	50%	34%	-11%	,
Abstinence/Reduced Drug Use		26	39%	55%	46%	-16%	,
Stable Living Situation		50	75%	95%	88%	-20%	,
Self Help		20	30%	60%	32%	-30%	,
Improved/Maintained Axis V GAF Score		28	55%	75%	81%	-20%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	74%	N/A	-



* State Avg based on 50 Active Standard IOP Programs