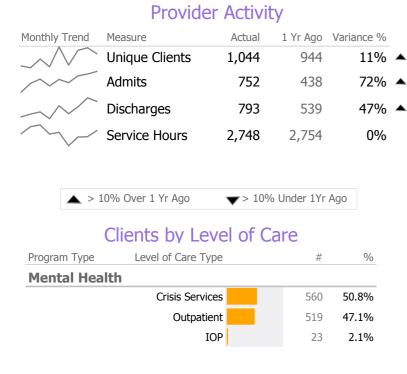
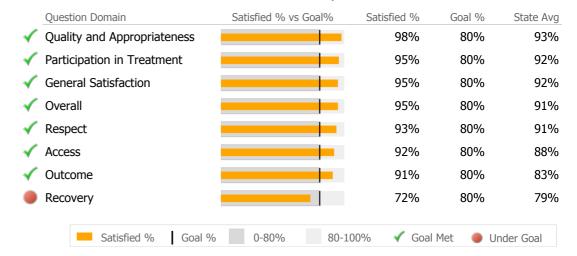
#### **Danbury Hospital**

Danbury, CT

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)



## Consumer Satisfaction Survey (Based on 132 FY16 Surveys)



### **Client Demographics**

| Age               |       | # %           | State Avg | Gender                          | #         | %       | Stat    | te Avg |
|-------------------|-------|---------------|-----------|---------------------------------|-----------|---------|---------|--------|
| 18-25 📕           | 1     | 22 <b>12%</b> | 14%       | Female                          | 541       | 52%     |         | 40%    |
| 26-34             | 1     | 55 <b>15%</b> | 24%       | Male 🗾                          | 503       | 48%     | •       | 60%    |
| 35-44             | 1     | 53 <b>15%</b> | 20%       | Transgender                     |           |         |         | 0%     |
| 45-54             | 2     | 20 <b>22%</b> | 22%       |                                 |           |         |         |        |
| 55-64             | 2     | 20 <b>22%</b> | 16%       |                                 |           |         |         |        |
| 65+               | 1     | 44 14%        | 5%        | Race                            | #         | %       | Stat    | te Avg |
|                   |       |               |           | White/Caucasian                 | 805       | 77%     |         | 65%    |
| Ethnicity         |       | # %           | State Avg | Other 📘                         | 132       | 13%     |         | 13%    |
| Non-Hispanic      | 87    | 4 84%         | 74%       | Black/African American          | 69        | 7%      |         | 17%    |
| Hispanic-Other    | . 10  | 4 10%         | 7%        | Asian                           | 22        | 2%      |         | 1%     |
| Unknown           | 2     | 9 3%          | 6%        | Unknown                         | 11        | 1%      |         | 3%     |
| Hisp-Puerto Rican |       | 1 2%          | 12%       | Multiple Races                  | 3         | 0%      |         | 1%     |
|                   |       |               |           | Am. Indian/Native Alaskan       | 2         | 0%      |         | 1%     |
| Hispanic-Mexican  | 1     | 2 1%          | 1%        | Hawaiian/Other Pacific Islander |           |         |         | 0%     |
| Hispanic-Cuban    |       | 4 <b>0%</b>   | 0%        |                                 |           |         |         |        |
|                   |       |               |           |                                 |           |         |         |        |
| l                 | Uniqu | e Clients     | State Avg | > 10% Over State Avg            | 🛡 > 10% l | Jnder S | tate Av | vg     |

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

# **Program Activity**

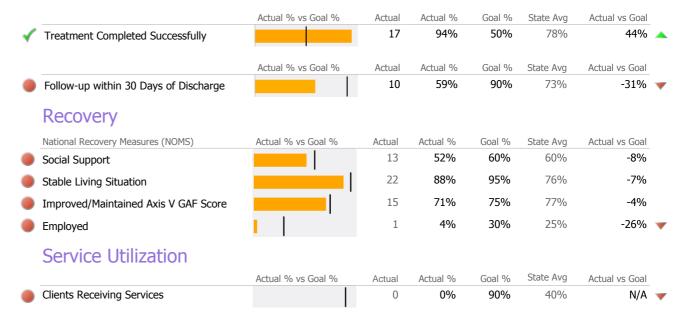
| Measure                      | Actual | 1 Yr Ago | Variance % |  |
|------------------------------|--------|----------|------------|--|
| Unique Clients               | 23     | 21       | 10%        |  |
| Admits                       | 16     | 21       | -24% 🔻     |  |
| Discharges                   | 18     | 16       | 13% 🔺      |  |
| Service Hours                | -      | -        |            |  |
| Social Rehab/PHP/IOP<br>Days | 0      | 0        |            |  |

# Data Submission Quality

Valid Axis V GAF Score

| Data Entry               | Actua   | I State Avg |
|--------------------------|---------|-------------|
| 🗸 Valid NOMS Data        | 89%     | 86%         |
| On-Time Periodic         | Actua   | I State Avg |
| ✓ 6 Month Updates        | 0%      | 0%          |
| Cooccurring              | Actua   | I State Avg |
| MH Screen Complete       | 23%     | 81%         |
| SA Screen Complete       | 64%     | 83%         |
| Diagnasia                | A shure | Chata Aura  |
| Diagnosis                | Actua   | State Avg   |
| 🞻 Valid Axis I Diagnosis | 100%    | 99%         |

### **Discharge Outcomes**

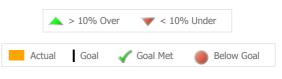


#### Data Submitted to DMHAS by Month

|                                      | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|--------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions                           |     |     |     |     |     |     |     |     |     | 89%                |
| Discharges                           |     |     |     |     |     |     |     |     |     | 89%                |
| Services                             |     |     |     |     |     |     |     |     |     | 0%                 |
| 1 or more Records Submitted to DMHAS |     |     |     |     |     |     |     |     |     |                    |

100%

90%



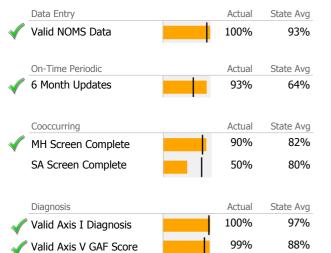
\* State Avg based on 5 Active Standard IOP Programs

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 519    | 635      | -18%       | • |
| Admits         | 14     | 37       | -62%       | • |
| Discharges     | 54     | 142      | -62%       | • |
| Service Hours  | 2,748  | 2,754    | 0%         |   |

# Data Submission Quality



# **Discharge Outcomes**

|          |                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|----------|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
|          | Treatment Completed Successfully     |                    | 18     | 33%      | 50%    | 41%       | -17%           | - |
|          | Recovery                             |                    |        |          |        |           |                |   |
|          | National Recovery Measures (NOMS)    | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| <b>«</b> | Social Support                       |                    | 491    | 95%      | 60%    | 68%       | 35%            |   |
| <b>«</b> | Stable Living Situation              |                    | 502    | 97%      | 95%    | 85%       | 2%             |   |
|          | Employed                             | <b>—</b>           | 88     | 17%      | 30%    | 22%       | -13%           | - |
|          | Improved/Maintained Axis V GAF Score |                    | 8      | 2%       | 75%    | 53%       | -73%           | - |
|          | Service Utilization                  |                    |        |          |        |           |                |   |
|          |                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|          | Clients Receiving Services           |                    | 374    | 80%      | 90%    | 85%       | -10%           |   |
|          | Service Engagement                   |                    |        |          |        |           |                |   |
|          | Outpatient                           | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|          | 2 or more Services within 30 days    |                    | 7      | 50%      | 75%    | 64%       | -25%           | - |
|          |                                      |                    |        |          |        |           |                |   |

#### Data Submitted to DMHAS by Month

|            | Jul     | Aug      | Sep      | Oct       | Nov   | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|---------|----------|----------|-----------|-------|-----|-----|-----|-----|--------------------|
| Admissions |         |          |          |           |       |     |     |     |     | 89%                |
| Discharges |         |          |          |           |       |     |     |     |     | 44%                |
| Services   |         |          |          |           |       |     |     |     |     | 100%               |
|            | 1 or me | ore Reco | rds Subn | nitted to | DMHAS |     |     |     |     |                    |



\* State Avg based on 93 Active Standard Outpatient Programs

# Program Activity

| Measure        | Actual | 1 Yr Ago | Variance % |  |
|----------------|--------|----------|------------|--|
| Unique Clients | 560    | 339      | 65%        |  |
| Admits         | 722    | 380      | 90%        |  |
| Discharges     | 721    | 381      | 89%        |  |

### Crisis

|   |  | Actual % vs Goal %      | Actual     | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--|-------------------------|------------|----------|--------|-----------|----------------|
|   | Evaluation within 1.5 hours of Request |                         | 558        | 70%      | 75%    | 68%       | -5%            |
|   | Community Location Evaluation          |                         | 76         | 9%       | 80%    | 75%       | -71% 🔻         |
|   | Follow-up Service within 48 hours      |                         | 82         | 19%      | 90%    | 60%       | -71% 🔻         |
| Data Submitted to DMHAS by Month<br>Jul Aug Sep Oct Nov Dec Jan Feb | Mar % Months Submitted                 | ▲ > 10% Over            | ▼ < 1      | 0% Under |        |           |                |
| Discharges  | 100%                                   | Actual Goal 🚽           | 🖉 Goal Met | Belov    | w Goal |           |                |
| 1 or more Records Submitted to DMHAS                                |  | * State Avg based on 25 |            |          |        |           |                |