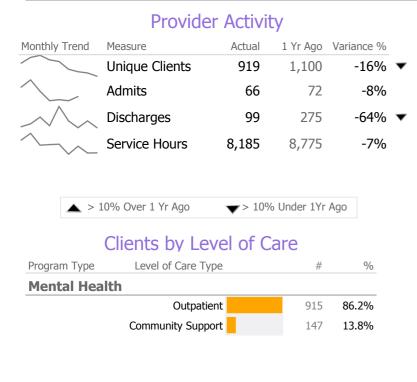**Norwalk Hospital**
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2017 - March 2018   (Data as of Jun 13, 2018)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	919	1,100	-16%	▼
	Admits	66	72	-8%	
	Discharges	99	275	-64%	▼
	Service Hours	8,185	8,775	-7%	

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Outpatient	915	86.2%
	Community Support	147	13.8%

Consumer Satisfaction Survey   (Based on 253 FY17 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Quality and Appropriateness		96%	80%	93%
✓	Overall		95%	80%	91%
✓	Participation in Treatment		95%	80%	92%
✓	General Satisfaction		93%	80%	92%
✓	Respect		92%	80%	91%
✓	Access		89%	80%	88%
✓	Outcome		84%	80%	83%
🔴	Recovery		79%	80%	79%

▮ Satisfied %		Goal %	▮ 0-80%	▮ 80-100%	✓ Goal Met	🔴 Under Goal

Client Demographics

Age

Age		#	%		State Avg
18-25		40	4%		13%
26-34		123	13%	▼	24%
35-44		136	15%		20%
45-54		206	22%		21%
55-64		262	29%	▲	17%
65+		151	16%	▲	5%

Gender

Gender		#	%		State Avg
Female		537	58%	▲	40%
Male		382	42%	▼	60%
Transgender					0%

Ethnicity

Ethnicity		#	%	State Avg
Non-Hispanic		726	79%	73%
Hispanic-Other		111	12%	7%
Hisp-Puerto Rican		55	6%	12%
Hispanic-Mexican		14	2%	1%
Unknown		13	1%	7%
Hispanic-Cuban				0%

Race

Race		#	%	State Avg
White/Caucasian		595	65%	64%
Black/African American		169	18%	16%
Other		129	14%	13%
Unknown		14	2%	4%
Asian		6	1%	1%
Multiple Races		4	0%	1%
Am. Indian/Native Alaskan		1	0%	1%
Hawaiian/Other Pacific Islander		1	0%	0%

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

24 Stevens St OP Clin.115-211
Norwalk Hospital
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018 (Data as of Jun 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	915	1,093	-16%	▼
Admits	50	46	9%	
Discharges	76	240	-68%	▼
Service Hours	4,395	5,502	-20%	▼

Data Submission Quality

Data Entry	Actual % vs Goal %	Actual	State Avg
✔ Valid NOMS Data		96%	94%

On-Time Periodic	Actual % vs Goal %	Actual	State Avg
6 Month Updates		50%	69%

Cooccurring	Actual % vs Goal %	Actual	State Avg
MH Screen Complete		58%	87%
SA Screen Complete		55%	87%

Diagnosis	Actual % vs Goal %	Actual	State Avg
✔ Valid Axis I Diagnosis		98%	96%
Valid Axis V GAF Score		70%	89%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		7	9%	50%	44%	-41%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Social Support		463	51%	60%	69%	-9%	
🔴 Employed		156	17%	30%	23%	-13%	▼
🔴 Stable Living Situation		728	79%	95%	85%	-16%	▼
🔴 Improved/Maintained Axis V GAF Score		94	10%	75%	51%	-65%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		634	75%	90%	88%	-15%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 2 or more Services within 30 days		33	66%	75%	68%	-9%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪			78%
Discharges	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Services	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

Community Support Program
Norwalk Hospital
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018 (Data as of Jun 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	147	160	-8%	
Admits	16	26	-38%	▼
Discharges	23	35	-34%	▼
Service Hours	3,790	3,273	16%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		2	9%	65%	68%	-56%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		143	97%	60%	82%	37%	▲
✓	Stable Living Situation		143	97%	80%	92%	17%	▲
🔴	Employed		26	18%	20%	13%	-2%	
🔴	Improved/Maintained Axis V GAF Score		42	30%	65%	64%	-35%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	98%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		99%	95%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	89%
✓ SA Screen Complete		100%	88%

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

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		125	100%	90%	99%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▪	▪	▪	▪	▪		▪		▪	78%
Discharges	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Services	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 48 Active CSP Programs