Backus Hospital
Norwich, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
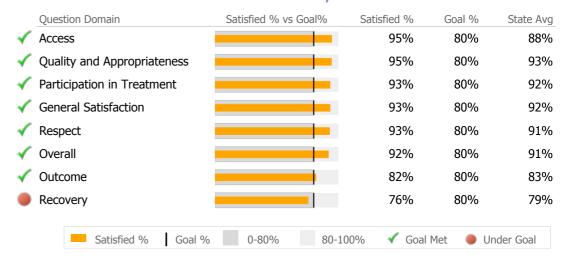Reporting Period: July 2018 - December 2018 (Data as of Mar 19, 2019)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	382	408	-6%
	Admits		28	-100% ▼
	Discharges		40	-100% ▼
	Service Hours		726	-100% ▼

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Mental Health				
	Outpatient		382	100.0%

Consumer Satisfaction Survey (Based on 76 FY18 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔ Access		95%	80%	88%
✔ Quality and Appropriateness		95%	80%	93%
✔ Participation in Treatment		93%	80%	92%
✔ General Satisfaction		93%	80%	92%
✔ Respect		93%	80%	91%
✔ Overall		92%	80%	91%
✔ Outcome		82%	80%	83%
🔴 Recovery		76%	80%	79%

🟧 Satisfied %		Goal %	0-80%	80-100%	✔ Goal Met	🔴 Under Goal

Client Demographics

Age

		#	%		State Avg
18-25		9	2%		11%
26-34		21	5%	▼	23%
35-44		40	10%	▼	21%
45-54		82	21%		21%
55-64		116	30%	▲	18%
65+		114	30%	▲	6%

Gender

		#	%		State Avg
Female		247	65%	▲	41%
Male		135	35%	▼	59%
Transgender					0%

Ethnicity

		#	%		State Avg
Non-Hispanic		360	94%	▲	71%
Hispanic-Other		22	6%		7%
Hispanic-Cuban					0%
Hispanic-Mexican					1%
Hisp-Puerto Rican				▼	13%
Unknown					9%

Race

		#	%		State Avg
White/Caucasian		327	86%	▲	63%
Other		28	7%		13%
Black/African American		24	6%		16%
Am. Indian/Native Alaskan		2	1%		1%
Asian		1	0%		1%
Multiple Races					1%
Hawaiian/Other Pacific Islander					0%
Unknown					5%

🟧 Unique Clients	| State Avg	▲ > 10% Over State Avg	▼ > 10% Under State Avg

326 Washington St. OP 401-210
Backus Hospital
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - December 2018 (Data as of Mar 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	382	408	-6%	
Admits	-	28	-100%	▼
Discharges	-	22	-100%	▼
Service Hours	-	723	-100%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	96%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	66%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	91%
SA Screen Complete		N/A	91%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	97%
✔ Valid Axis V GAF Score		99%	89%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							17%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	53%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Employed		14	4%	30%	23%	-26%	▼
● Social Support		56	15%	60%	67%	-45%	▼
● Improved/Maintained Axis V GAF Score		30	8%	75%	47%	-67%	▼
● Stable Living Situation		55	14%	95%	84%	-81%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		0	0%	90%	83%	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%	67%	-75%	▼

▲ > 10% Over   ▼ < 10% Under

■ Actual		Goal	✔ Goal Met	● Below Goal

* State Avg based on 93 Active Standard Outpatient Programs