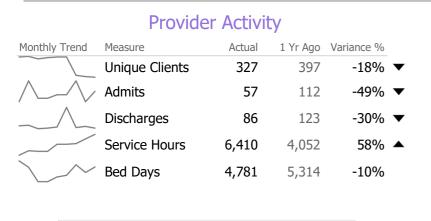
#### Hartford Hospital Hartford, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

(Based on 89 FY18 Surveys)

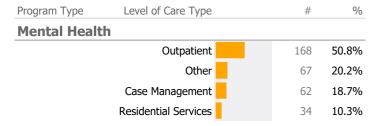
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)



> 10% Over 1 Yr Ago

igstarrow > 10% Under 1Yr Ago

#### Clients by Level of Care



#### Question Domain Satisfied % vs Goal% Satisfied % Goal % State Avg Participation in Treatment 92% 94% 80% $\checkmark$ ✓ Quality and Appropriateness 93% 80% 93% $\checkmark$ General Satisfaction 92% 80% 92% 80% 91% Respect 90% V Overall 80% 91% 83% ✓ Access 80% 88% 80% Outcome 69% 80% 83% Recovery 53% 80% 79% 80-100% 0-80% ✓ Goal Met Satisfied % Goal % Under Goal

**Consumer Satisfaction Survey** 

#### **Client Demographics**

Age

18-25

26-34

35-44 45-54 55-64 65+

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

	#	%	State Avg	Gender	#	%	St	ate Avg
	82	25%	<b>▲</b> 12%	Female	180	55%		40%
	54	17%	24%	Male 📒	146	45%	▼	60%
	41	13%	21%	Transgender				0%
	63	19%	20%					
	54	17%	17%					
	33	10%	6%	Race	#	%	St	ate Avg
				White/Caucasian 📒 📔	127	39%	▼	63%
	#	%	State Avg	Other 📘	87	27%		14%
	183	56%	▼ 71%	Black/African American	51	16%		16%
	105	32%	<b>▲</b> 13%	Unknown 📙	51	16%		5%
	26	8%	7%	Asian	10	3%		1%
	10	40/	00/	Hawaiian/Other Pacific Islander	1	0%		0%
	12	4%	9%	Am. Indian/Native Alaskan				1%
	1	0%	0%	Multiple Races				1%
			1%					
ι	Jnique C	lients	State Avg	▲ > 10% Over State Avg	<b>v</b> > 10% L	Inder S	tate	Avg

## Eli's Retreat 610242

#### Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

# **Program Activity**

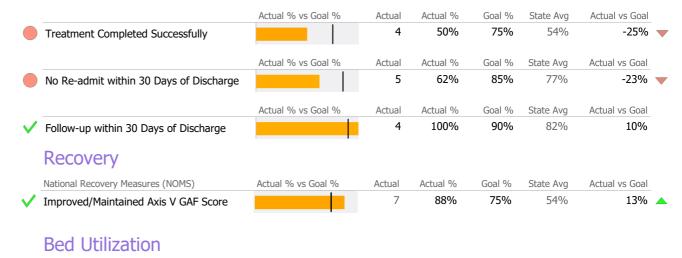
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	15	-13%	▼
Admits	8	10	-20%	▼
Discharges	8	10	-20%	▼
Bed Days	1,199	1,318	-9%	

# Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	95%
	•	
Cooccurring	Actual	State Avg
V MH Screen Complete	100%	91%
V SA Screen Complete	100%	91%

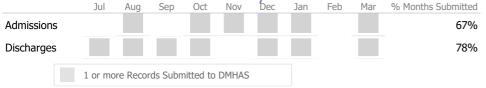
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	95%
Valid Axis V GAF Score	100%	89%

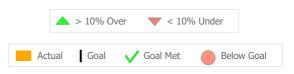
## **Discharge Outcomes**



	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		5	136 days	0.2	88%	90%	93%	-2%
<	90% 90-110%		>110%					

#### Data Submitted to DMHAS by Month





\* State Avg based on 28 Active MH Intensive Res. Rehabilitation Programs

Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

## Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	168	225	-25% 🔻
Admits	-	41	-100% 🔻
Discharges	33	57	-42% 🔻
Service Hours	-	-	

# Data Submission Quality

Valid Axis V GAF Score

Da	ta Entry		Actual	State Avg	
Va	lid NOMS Data		84%	96%	
		·			
On	-Time Periodic		Actual	State Avg	
V 6 I	Month Updates		99%	63%	
		·			
Со	occurring		Actual	State Avg	
Mł	H Screen Complete		3%	92%	
SA	Screen Complete	Í	0%	92%	
Dia	agnosis		Actual	State Avg	
Va 🗸	lid Axis I Diagnosis		100%	97%	

## Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		0	0%	50%	52%	-50%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Stable Living Situation		139	83%	95%	85%	-12%	
Employed	<b>–</b> 1 .	22	13%	30%	25%	-17%	
Social Support	<u> </u>	45	27%	60%	67%	-33%	
Improved/Maintained Axis V GAF Score	<b>–</b> 1	28	17%	75%	51%	-58%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	86%	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%	69%	-75%	

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										33%
Services										0%
	1 or mo	ore Reco	rds Subn	nitted to	DMHAS					

99%

91%



\* State Avg based on 94 Active Standard Outpatient Programs

## Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	67	80	-16%	▼
Admits	10	22	-55%	▼
Discharges	16	18	-11%	▼

## Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										78%
Discharges										78%
	1 or mo	ore Recor	ds Subn	nitted to	DMHAS					

	<b>^</b> >	10% Ove	r	-	< 10%	Unde	r	
Actu	Jal	Goal	<b>~</b>	Goal I	Met		Belov	v Goal

\* State Avg based on 18 Active Other Programs

Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

## **Program Activity**

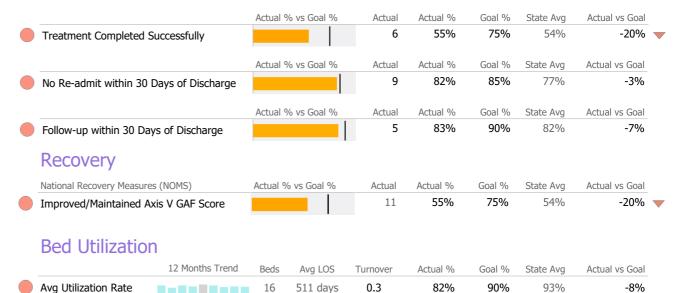
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	24	24	0%
Admits	11	9	22% 🔺
Discharges	11	10	10%
Bed Days	3,582	3,996	-10%

# Data Submission Quality

Valid Axis V GAF Score

Data Entry	Actual	State Avg
Valid NOMS Data	100%	99%
On-Time Periodic	Actual	State Avg
V 6 Month Updates	100%	95%
Cooccurring	Actual	State Avg
V MH Screen Complete	100%	91%
V SA Screen Complete	100%	91%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	95%

## **Discharge Outcomes**



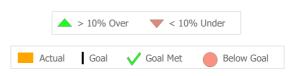
< 90%	90-110%	>110%

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										89%
Discharges										67%
	1 or mo	re Recor	ds Subr	nitted to	DMHAS					

100%

89%



\* State Avg based on 28 Active MH Intensive Res. Rehabilitation Programs

Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

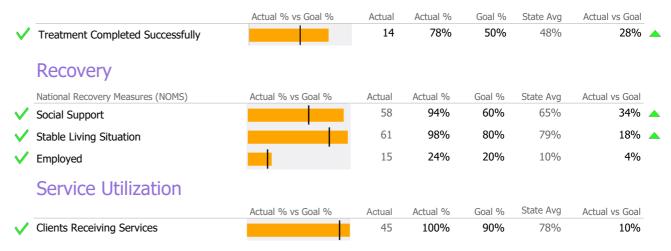
## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	62	60	3%
Admits	28	30	-7%
Discharges	18	28	-36% 🔻
Service Hours	6,410	4,052	58% 🔺

## Data Submission Quality

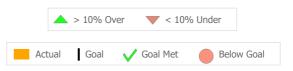
	Data Entry	Actual	State Avg
$\checkmark$	Valid NOMS Data	100%	94%
	On-Time Periodic	 Actual	State Avg
	6 Month Updates	4%	69%

## **Discharge Outcomes**



#### Data Submitted to DMHAS by Month





\* State Avg based on 25 Active Standard Case Management Programs