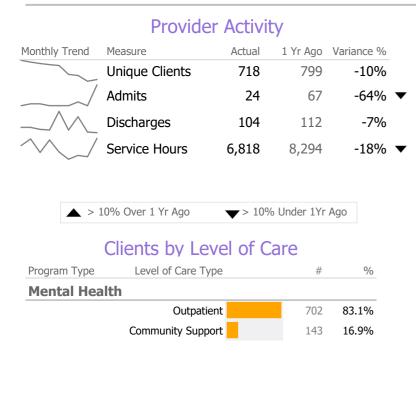
#### **Norwalk Hospital**

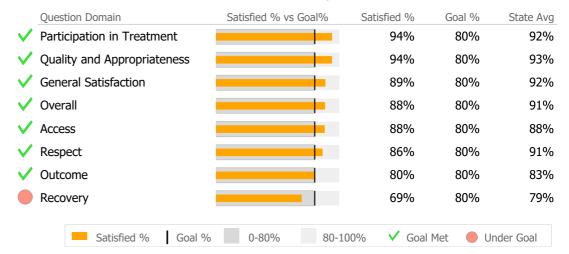
Norwalk, CT

#### Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

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



#### **Consumer Satisfaction Survey** (Based on 207 FY18 Surveys)



#### **Client Demographics**

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	22	3%	12%	Female	407	57%	<b>▲</b> 40%
26-34	84	12%	▼ 24%	Male 🗾	311	43%	▼ 60%
35-44 📒	102	14%	21%	Transgender			0%
45-54	159	22%	20%				
55-64	211	29%	<b>▲</b> 17%				
65+	139	19%	<b>▲</b> 6%	Race	#	%	State Avg
				White/Caucasian	461	64%	63%
Ethnicity	#	%	State Avg	Black/African American 📕	144	20%	16%
Non-Hispanic	566	79%	71%	Other <mark> </mark>	94	13%	14%
Hispanic-Other	91	13%	7%	Unknown	10	1%	5%
Hisp-Puerto Rican	41	6%	13%	Asian	4	1%	1%
Hispanic-Mexican	11	2%	1%	Multiple Races	4	1%	1%
				Hawaiian/Other Pacific Islander	1	0%	0%
Unknown	9	1%	9%	Am. Indian/Native Alaskan			1%
Hispanic-Cuban			0%				
	Unique C	lients	State Avg	▲ > 10% Over State Avg ▼	> 10% U	Inder St	ate Avg

#### 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	702	795	-12%
Admits	4	51	-92%
Discharges	86	89	-3%
Service Hours	2,472	4,504	-45%

# Data Submission Quality

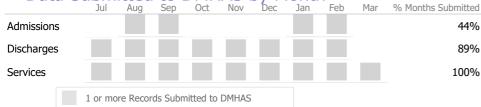
	Data Entry	Actual	State Avg
$\checkmark$	Valid NOMS Data	97%	96%
	On-Time Periodic	Actual	State Avg
	OII-TIME PENDUIC	Actual	State Avy
	6 Month Updates	57%	63%
	Cooccurring	Actual	State Avg
	MH Screen Complete	75%	92%
	SA Screen Complete	75%	92%

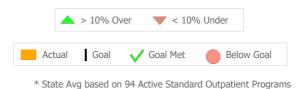


#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		6	7%	50%	52%	-43%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		382	54%	60%	67%	-6%
Stable Living Situation	· · · ·	607	86%	95%	85%	-9%
Employed	<b>—</b>   .	112	16%	30%	25%	-14%
Improved/Maintained Axis V GAF Score	<u> </u>	137	20%	75%	51%	-55%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services	Actual % vs Goal %	Actual 497	Actual % 81%	Goal % 90%	State Avg 86%	Actual vs Goal -9%
Clients Receiving Services Service Engagement	Actual % vs Goal %				5	
	Actual % vs Goal %				5	

# Data Submitted to Sep Oct Nov Dec Jan





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

#### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	143	147	-3%
Admits	20	16	25% 🔺
Discharges	18	23	-22% 🔻
Service Hours	4,346	3,790	15% 🔺

## Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	98%
	•	
On-Time Periodic	Actual	State Avg
6 Month Updates	98%	82%
Cooccurring	Actual	State Avg
MH Screen Complete	75%	90%
SA Screen Complete	75%	90%
	-	
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	98%
Valid Axis V GAF Score	99%	96%

#### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		1	6%	65%	69%	-59%	▼
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		137	95%	60%	82%	35%	
$\checkmark$	Stable Living Situation		141	98%	80%	92%	18%	
$\checkmark$	Employed	<u> </u>	32	22%	20%	13%	2%	
	Improved/Maintained Axis V GAF Score	<b>–</b>	13	10%	65%	65%	-55%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		126	100%	90%	99%	10%	

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										89%
Discharges										89%
Services										100%
	1 or mo	ore Reco	rds Subr	nitted to	DMHAS					



\* State Avg based on 37 Active CSP Programs