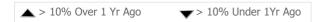**Day Kimball Hospital**
Putnam, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
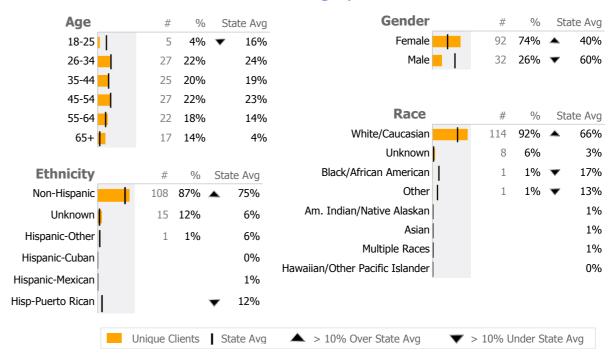Reporting Period: July 2014 - June 2015   (Data as of Sep 17, 2015)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	124	412	-70%	▼
	Admits	28	10	180%	▲
	Discharges	46	316	-85%	▼
	Service Hours	639	496	29%	▲

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Mental Health				
	Outpatient		124	100.0%

Consumer Satisfaction Survey   (Based on 2 FY14 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔	Quality and Appropriateness		100%	80%	93%
✔	Participation in Treatment		100%	80%	92%
✔	Respect		100%	80%	91%
✔	Access		100%	80%	88%
🔴	General Satisfaction		50%	80%	92%
🔴	Overall		50%	80%	91%
🔴	Outcome		50%	80%	83%
🔴	Recovery		50%	80%	79%

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

Client Demographics

Age

Age		#	%		State Avg
18-25		5	4%	▼	16%
26-34		27	22%		24%
35-44		25	20%		19%
45-54		27	22%		23%
55-64		22	18%		14%
65+		17	14%		4%

Gender

Gender		#	%		State Avg
Female		92	74%	▲	40%
Male		32	26%	▼	60%

Ethnicity

Ethnicity		#	%		State Avg
Non-Hispanic		108	87%	▲	75%
Unknown		15	12%		6%
Hispanic-Other		1	1%		6%
Hispanic-Cuban					0%
Hispanic-Mexican					1%
Hisp-Puerto Rican				▼	12%

Race

Race		#	%		State Avg
White/Caucasian		114	92%	▲	66%
Unknown		8	6%		3%
Black/African American		1	1%	▼	17%
Other		1	1%	▼	13%
Am. Indian/Native Alaskan					1%
Asian					1%
Multiple Races					1%
Hawaiian/Other Pacific Islander					0%

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

320 Pomfret AIP 414-110
Day Kimball Hospital
Mental Health - Inpatient Services - Acute Psychiatric

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
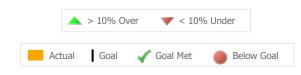Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	0	3		▼
Admits	-	3	-100%	▼
Discharges	-	3	-100%	▼

Discharge Outcomes

	Actual % vs Goal %		Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully			N/A	N/A	95%	72%	N/A
	Actual % vs Goal %		Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge			N/A	N/A	85%	88%	N/A
	Actual % vs Goal %		Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge			N/A	N/A	90%	50%	N/A

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

☐ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 29 Active Acute Psychiatric Programs

Pomfret St-1st Init-OP414-210X
Day Kimball Hospital
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
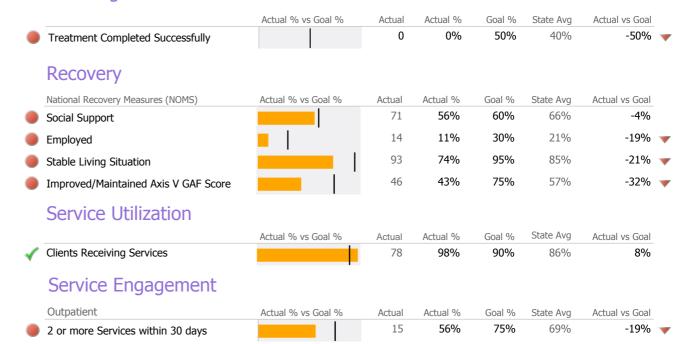Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	124	409	-70%	▼
Admits	28	7	300%	▲
Discharges	46	313	-85%	▼
Service Hours	639	496	29%	▲

Data Submission Quality

Data Entry	Actual % vs Goal %	Actual	State Avg
Valid NOMS Data		78%	94%

On-Time Periodic	Actual % vs Goal %	Actual	State Avg
6 Month Updates		59%	66%

Cooccurring	Actual % vs Goal %	Actual	State Avg
✓ MH Screen Complete		97%	67%
✓ SA Screen Complete		94%	62%

Diagnosis	Actual % vs Goal %	Actual	State Avg
✓ Valid Axis I Diagnosis		100%	98%
✓ Valid Axis V GAF Score		99%	92%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		0	0%	50%	40%	-50%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Social Support		71	56%	60%	66%	-4%	
● Employed		14	11%	30%	21%	-19%	▼
● Stable Living Situation		93	74%	95%	85%	-21%	▼
● Improved/Maintained Axis V GAF Score		46	43%	75%	57%	-32%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		78	98%	90%	86%	8%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		15	56%	75%	69%	-19%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪	▪	▪					▪		▪	58%
Discharges				▪	▪	▪				▪		▪	42%
Services		▪	▪	▪	▪			▪	▪	▪		▪	67%

▢ 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