Norwalk Hospital
Norwalk, 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	1,821	1,838	-1%	
	Admits	262	301	-13%	▼
	Discharges	475	298	59%	▲
	Service Hours	12,647	13,098	-3%	
	Bed Days	158	344	-54%	▼

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Mental Health				
	Outpatient		1,783	91.9%
	Community Support		121	6.2%
	Inpatient Services		36	1.9%

Consumer Satisfaction Survey   (Based on 254 FY14 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔	Participation in Treatment		93%	80%	92%
✔	Quality and Appropriateness		91%	80%	93%
✔	General Satisfaction		91%	80%	92%
✔	Respect		90%	80%	91%
✔	Overall		87%	80%	91%
✔	Access		87%	80%	88%
🔴	Outcome		79%	80%	83%
🔴	Recovery		74%	80%	79%

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

Client Demographics

Age

Age		#	%	State Avg
18-25		150	8%	16%
26-34		275	15%	24%
35-44		327	18%	19%
45-54		446	25%	23%
55-64		430	24%	14%
65+		190	10%	4%

Gender

Gender		#	%		State Avg
Female		1,095	60%	▲	40%
Male		725	40%	▼	60%

Race

Race		#	%	State Avg
White/Caucasian		1,163	64%	66%
Black/African American		331	18%	17%
Other		282	15%	13%
Unknown		29	2%	3%
Asian		10	1%	1%
Multiple Races		4	0%	1%
Hawaiian/Other Pacific Islander		2	0%	0%
Am. Indian/Native Alaskan				1%

Ethnicity

Ethnicity		#	%	State Avg
Non-Hispanic		1,433	79%	75%
Hispanic-Other		225	12%	6%
Hisp-Puerto Rican		105	6%	12%
Unknown		29	2%	6%
Hispanic-Mexican		28	2%	1%
Hispanic-Cuban		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 2014 - June 2015 (Data as of Sep 17, 2015)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,783	1,794	-1%	
Admits	204	219	-7%	
Discharges	410	211	94%	▲
Service Hours	10,490	10,730	-2%	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		82%	94%

On-Time Periodic		Actual	State Avg
6 Month Updates		37%	66%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		94%	67%
✔ SA Screen Complete		94%	62%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		98%	98%
Valid Axis V GAF Score		69%	92%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		31	8%	50%	40%	-42%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Employed		276	15%	30%	21%	-15%	▼
🔴 Social Support		616	34%	60%	66%	-26%	▼
🔴 Stable Living Situation		1,192	67%	95%	85%	-28%	▼
🔴 Improved/Maintained Axis V GAF Score		25	1%	75%	57%	-74%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		1,059	77%	90%	86%	-13%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ 2 or more Services within 30 days		159	78%	75%	69%	3%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%

☐ 1 or more Records Submitted to DMHAS
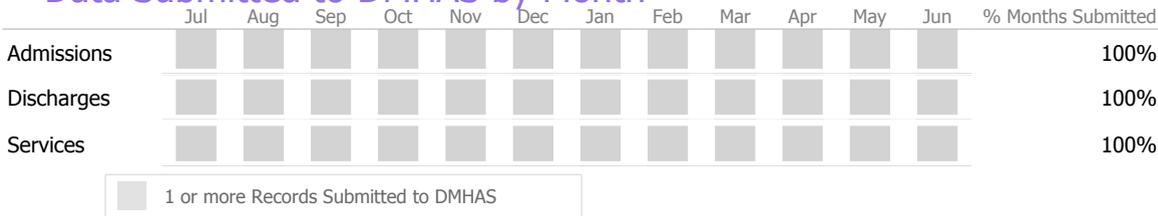
▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

Acute Psychiatric Inpt.115-111
Norwalk 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	36	47	-23%	▼
Admits	38	49	-22%	▼
Discharges	37	51	-27%	▼
Bed Days	158	344	-54%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		37	100%	95%	72%	5%	
✓	No Re-admit within 30 Days of Discharge		35	95%	85%	88%	10%	
🔴	Follow-up within 30 Days of Discharge		12	32%	90%	50%	-58%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		1	5 days	0.0	43%	90%	108%	-47%	▼

⬜ < 90%	⬜ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	100%
Discharges	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜		92%

⬜ 1 or more Records Submitted to DMHAS
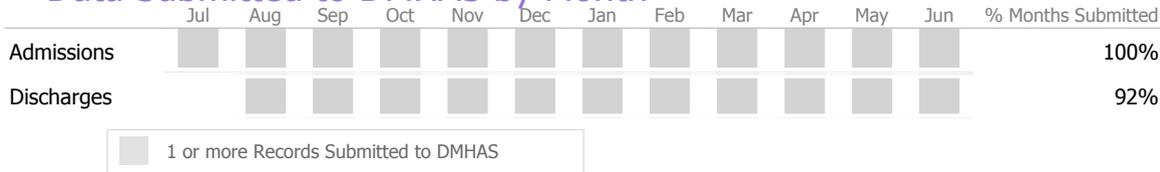
▲ > 10% Over	▼ < 10% Under

🟧 Actual	❘ Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 29 Active Acute Psychiatric Programs

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

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	121	137	-12%	▼
Admits	20	33	-39%	▼
Discharges	28	36	-22%	▼
Service Hours	2,157	2,368	-9%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		11	39%	65%	70%	-26%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		118	97%	60%	76%	37%	▲
✓	Stable Living Situation		118	97%	80%	92%	17%	▲
🔴	Employed		19	16%	20%	11%	-4%	
🔴	Improved/Maintained Axis V GAF Score		72	65%	95%	61%	-30%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	100%	96%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	99%	92%

Cooccurring		Actual	State Avg
✓	MH Screen Complete	91%	67%
✓	SA Screen Complete	100%	65%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	97%
✓	Valid Axis V GAF Score	100%	93%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		94	100%	90%	96%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪		▪	▪	▪	▪			▪	▪	▪	▪	75%
Discharges	▪	▪	▪	▪		▪	▪	▪	▪	▪	▪	▪	75%
Services	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%

▪ 1 or more Records Submitted to DMHAS

Legend:
▲ > 10% Over   ▼ < 10% Under
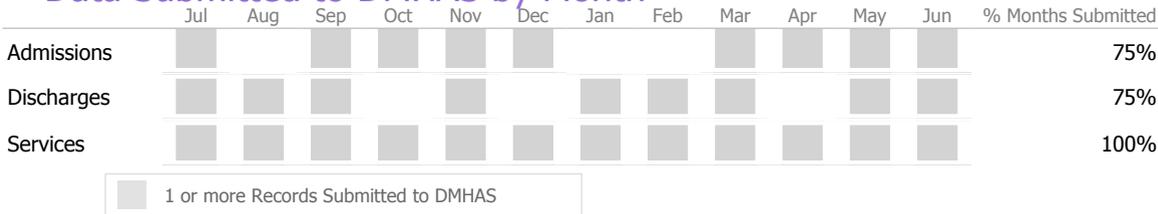
🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 40 Active CSP Programs