Norwalk Hospital
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2016 - September 2016   (Data as of Jan 06, 2017)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	1,213	1,369	-11%	▼
	Admits	27	62	-56%	▼
	Discharges	101	63	60%	▲
	Service Hours	1,764	3,270	-46%	▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Outpatient	1,206	89.3%
	Community Support	145	10.7%

Consumer Satisfaction Survey   (Based on 288 FY16 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔	Participation in Treatment		98%	80%	92%
✔	Quality and Appropriateness		98%	80%	93%
✔	Overall		97%	80%	91%
✔	General Satisfaction		95%	80%	92%
✔	Respect		94%	80%	91%
✔	Access		94%	80%	88%
✔	Outcome		88%	80%	83%
✔	Recovery		82%	80%	79%

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

Client Demographics

Age

Age	#	%	State Avg
18-25	69	6%	12%
26-34	163	13%	22%
35-44	192	16%	19%
45-54	294	24%	23%
55-64	319	26%	18%
65+	175	14%	6%

Gender

Gender	#	%		State Avg
Female	721	59%	▲	42%
Male	492	41%	▼	58%
Transgender				0%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	965	80%	75%
Hispanic-Other	142	12%	7%
Hisp-Puerto Rican	68	6%	12%
Hispanic-Mexican	19	2%	1%
Unknown	19	2%	6%
Hispanic-Cuban			0%

Race

Race	#	%	State Avg
White/Caucasian	755	62%	65%
Black/African American	236	19%	16%
Other	191	16%	13%
Unknown	17	1%	3%
Asian	8	1%	1%
Multiple Races	4	0%	1%
Am. Indian/Native Alaskan	1	0%	1%
Hawaiian/Other Pacific Islander	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 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1,206	1,360	-11% ▼
Admits	17	45	-62% ▼
Discharges	91	50	82% ▲
Service Hours	894	2,715	-67% ▼

Data Submission Quality

Data Entry	Actual % vs Goal	Actual	State Avg
Valid NOMS Data		87%	93%

On-Time Periodic	Actual % vs Goal	Actual	State Avg
6 Month Updates		38%	58%

Cooccurring	Actual % vs Goal	Actual	State Avg
✔ MH Screen Complete		95%	83%
✔ SA Screen Complete		95%	81%

Diagnosis	Actual % vs Goal	Actual	State Avg
✔ Valid Axis I Diagnosis		98%	97%
Valid Axis V GAF Score		72%	86%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		6	7%	50%	42%	-43% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Employed		156	13%	30%	19%	-17% ▼
● Social Support		460	38%	60%	64%	-22% ▼
● Stable Living Situation		810	67%	95%	80%	-28% ▼
● Improved/Maintained Axis V GAF Score		71	6%	75%	45%	-69% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		567	51%	90%	69%	-39% ▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		6	35%	75%	64%	-40% ▼

▲ > 10% Over   ▼ < 10% Under

▭ Actual	│ Goal	✔ Goal Met	● Below Goal

* State Avg based on 94 Active Standard Outpatient 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 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	145	103	41%	▲
Admits	10	9	11%	▲
Discharges	10	4	150%	▲
Service Hours	871	555	57%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	97%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		96%	88%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	87%
✔ SA Screen Complete		100%	86%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	98%
✔ Valid Axis V GAF Score		100%	92%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				67%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		2	20%	65%	74%	-45%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		142	98%	60%	79%	38%	▲
✔ Stable Living Situation		141	97%	80%	92%	17%	▲
🔴 Employed		15	10%	20%	12%	-10%	▼
🔴 Improved/Maintained Axis V GAF Score		75	62%	95%	58%	-33%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		135	100%	90%	94%	10%

▲ > 10% Over   ▼ < 10% Under

🟧 Actual   ┃ Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 47 Active CSP Programs