Norwalk Hospital
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2017 - December 2017   (Data as of Mar 21, 2018)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	919	1,084	-15%	▼
	Admits	55	44	25%	▲
	Discharges	76	207	-63%	▼
	Service Hours	5,675	5,611	1%	

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Outpatient	916	86.7%
	Community Support	141	13.3%

Consumer Satisfaction Survey   (Based on 253 FY17 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Quality and Appropriateness		96%	80%	93%
✓	Overall		95%	80%	91%
✓	Participation in Treatment		95%	80%	92%
✓	General Satisfaction		93%	80%	92%
✓	Respect		92%	80%	91%
✓	Access		89%	80%	88%
✓	Outcome		84%	80%	83%
🔴	Recovery		79%	80%	79%

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

Client Demographics

Age

Age	#	%	State Avg
18-25	38	4%	12%
26-34	123	13%	23%
35-44	137	15%	20%
45-54	207	23%	22%
55-64	262	29% ▲	18%
65+	151	16%	6%

Gender

Gender	#	%	State Avg
Female	539	59% ▲	41%
Male	380	41% ▼	59%
Transgender			0%

Race

Race	#	%	State Avg
White/Caucasian	596	65%	65%
Black/African American	168	18%	16%
Other	130	14%	13%
Unknown	14	2%	3%
Asian	5	1%	1%
Multiple Races	4	0%	1%
Am. Indian/Native Alaskan	1	0%	1%
Hawaiian/Other Pacific Islander	1	0%	0%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	724	79%	74%
Hispanic-Other	113	12%	7%
Hisp-Puerto Rican	54	6%	13%
Hispanic-Mexican	15	2%	1%
Unknown	13	1%	6%
Hispanic-Cuban			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 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	916	1,078	-15%	▼
Admits	46	27	70%	▲
Discharges	59	182	-68%	▼
Service Hours	3,186	3,593	-11%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		96%	93%

On-Time Periodic		Actual	State Avg
6 Month Updates		50%	68%

Cooccurring		Actual	State Avg
MH Screen Complete		54%	86%
SA Screen Complete		50%	83%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		98%	96%
Valid Axis V GAF Score		70%	88%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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	10%	50%	42%	-40%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Social Support		456	50%	60%	68%	-10%	
🔴 Employed		153	17%	30%	22%	-13%	▼
🔴 Stable Living Situation		719	78%	95%	84%	-17%	▼
🔴 Improved/Maintained Axis V GAF Score		82	9%	75%	48%	-66%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		634	74%	90%	85%	-16%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 2 or more Services within 30 days		30	65%	75%	68%	-10%	

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 92 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 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	141	152	-7%	
Admits	9	17	-47%	▼
Discharges	17	25	-32%	▼
Service Hours	2,489	2,017	23%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	100%	98%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	91%	91%

Cooccurring		Actual	State Avg
✓	MH Screen Complete	100%	89%
✓	SA Screen Complete	100%	88%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	98%
✓	Valid Axis V GAF Score	100%	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							83%
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	12%	65%	67%	-53%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		138	98%	60%	81%	38%	▲
✓	Stable Living Situation		136	96%	80%	92%	16%	▲
🔴	Employed		19	13%	20%	13%	-7%	
🔴	Improved/Maintained Axis V GAF Score		37	28%	65%	61%	-37%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Clients Receiving Services		123	99%	90%	98%	9%	
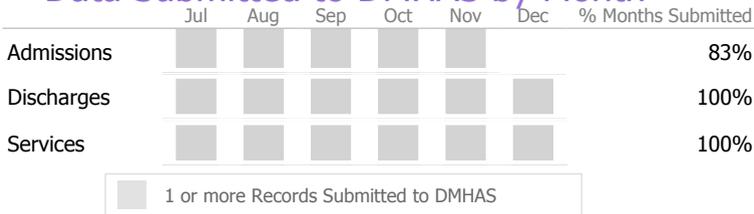
▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 48 Active CSP Programs