Norwalk Hospital
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2017 - September 2017   (Data as of Dec 13, 2017)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	920	1,084	-15%	▼
	Admits	44	29	52%	▲
	Discharges	14	115	-88%	▼
	Service Hours	2,155	2,762	-22%	▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Outpatient	917	86.8%
	Community Support	139	13.2%

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		40	4%	11%
26-34		119	13%	22%
35-44		135	15%	19%
45-54		207	23%	22%
55-64		266	29%	19%
65+	▲	152	17%	6%

Gender

Gender		#	%		State Avg
Female		538	58%	▲	41%
Male		382	42%	▼	58%
Transgender					0%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	725	79%	74%
Hispanic-Other	111	12%	7%
Hisp-Puerto Rican	55	6%	13%
Hispanic-Mexican	16	2%	1%
Unknown	13	1%	6%
Hispanic-Cuban			0%

Race

Race		#	%	State Avg
White/Caucasian		598	65%	65%
Black/African American		169	18%	16%
Other		129	14%	13%
Unknown		14	2%	3%
Asian		5	1%	1%
Multiple Races		3	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
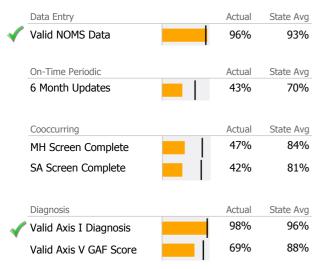Norwalk Hospital
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	917	1,078	-15%	▼
Admits	37	19	95%	▲
Discharges	5	105	-95%	▼
Service Hours	857	1,891	-55%	▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		43%	70%

Cooccurring		Actual	State Avg
MH Screen Complete		47%	84%
SA Screen Complete		42%	81%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		98%	96%
Valid Axis V GAF Score		69%	88%

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		2	40%	50%	40%	-10%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Social Support		425	46%	60%	67%	-14%	▼
● Employed		136	15%	30%	21%	-15%	▼
● Stable Living Situation		678	74%	95%	83%	-21%	▼
● Improved/Maintained Axis V GAF Score		40	5%	75%	43%	-70%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		550	60%	90%	78%	-30%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		23	62%	75%	67%	-13%	▼

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

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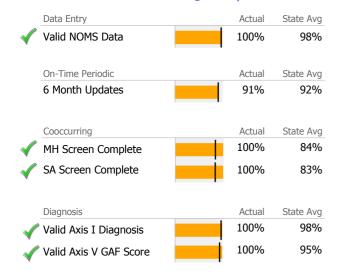Norwalk Hospital
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	139	145	-4%	
Admits	7	10	-30%	▼
Discharges	9	10	-10%	
Service Hours	1,298	871	49%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		91%	92%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	84%
✔ SA Screen Complete		100%	83%

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	% 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		1	11%	65%	65%	-54%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		136	98%	60%	82%	38%	▲
✔ Stable Living Situation		135	97%	80%	93%	17%	▲
🔴 Employed		16	12%	20%	12%	-8%	
🔴 Improved/Maintained Axis V GAF Score		32	27%	65%	58%	-38%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		128	98%	90%	98%	8%

▲ > 10% Over   ▼ < 10% Under

☐ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 48 Active CSP Programs