New Milford Hospital
New Milford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	355	371	-4%
	Admits	6	16	-63% ▼
	Discharges	29	25	16% ▲
	Service Hours	332	509	-35% ▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Outpatient	355	100.0%

Consumer Satisfaction Survey (Based on 130 FY18 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Access		100%	80%	88%
✓ General Satisfaction		99%	80%	92%
✓ Participation in Treatment		98%	80%	92%
✓ Quality and Appropriateness		98%	80%	93%
✓ Respect		98%	80%	91%
✓ Overall		98%	80%	91%
✓ Recovery		86%	80%	79%
✓ Outcome		85%	80%	83%

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

Client Demographics

Age	#	%	State Avg
18-25	21	6%	10%
26-34	70	20%	22%
35-44	54	15%	20%
45-54	70	20%	21%
55-64	87	25%	19%
65+	53	15%	7%

Gender	#	%	State Avg
Female	222	63% ▲	41%
Male	133	37% ▼	58%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	340	96% ▲	71%
Hispanic-Other	9	3%	7%
Hisp-Puerto Rican	3	1% ▼	13%
Unknown	2	1%	8%
Hispanic-Mexican	1	0%	1%
Hispanic-Cuban			0%

Race	#	%	State Avg
White/Caucasian	341	96% ▲	63%
Black/African American	8	2% ▼	16%
Other	2	1% ▼	13%
Unknown	2	1%	5%
Am. Indian/Native Alaskan	1	0%	1%
Multiple Races	1	0%	1%
Asian			1%
Hawaiian/Other Pacific Islander			0%

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

23 Poplar St. OP Clin 515-210
New Milford Hospital
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	355	371	-4%	
Admits	6	16	-63%	▼
Discharges	29	25	16%	▲
Service Hours	332	509	-35%	▼

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	65%	65%

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

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	96%
✓ Valid Axis V GAF Score	99%	89%

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		3	10%	50%	55%	-40%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		332	94%	60%	65%	34%	▲
✓ Employed		125	35%	30%	22%	5%	
✓ Stable Living Situation		346	97%	95%	82%	2%	
● Improved/Maintained Axis V GAF Score		29	8%	75%	42%	-67%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		250	77%	90%	79%	-13%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		1	17%	75%	68%	-58%	▼

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 93 Active Standard Outpatient Programs