New Milford Hospital
New Milford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
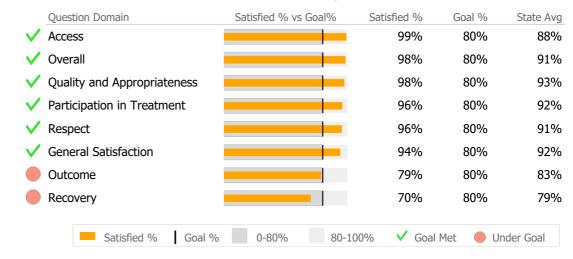Reporting Period: July 2019 - September 2019   (Data as of Dec 27, 2019)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	330	355	-7%
	Admits	10	6	67% ▲
	Discharges	17	29	-41% ▼
	Service Hours	466	332	40% ▲

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

Clients by Level of Care

Program Type / Level of Care Type		#	%
Mental Health			
Outpatient		330	100.0%

Consumer Satisfaction Survey   (Based on 121 FY19 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Access		99%	80%	88%
✓	Overall		98%	80%	91%
✓	Quality and Appropriateness		98%	80%	93%
✓	Participation in Treatment		96%	80%	92%
✓	Respect		96%	80%	91%
✓	General Satisfaction		94%	80%	92%
●	Outcome		79%	80%	83%
●	Recovery		70%	80%	79%

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

Client Demographics

Age

Age	#	%	State Avg
18-25	21	6%	9%
26-34	60	18%	22%
35-44	50	15%	21%
45-54	68	21%	20%
55-64	82	25%	20%
65+	49	15%	7%

Gender

Gender	#	%	State Avg
Female	206	62% ▲	41%
Male	124	38% ▼	59%
Transgender			0%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	316	96% ▲	71%
Hispanic-Other	6	2%	7%
Hisp-Puerto Rican	5	2%	12%
Unknown	2	1%	9%
Hispanic-Mexican	1	0%	1%
Hispanic-Cuban			0%

Race

Race	#	%	State Avg
White/Caucasian	318	96% ▲	64%
Black/African American	6	2% ▼	16%
Other	3	1% ▼	13%
Am. Indian/Native Alaskan	1	0%	1%
Multiple Races	1	0%	1%
Unknown	1	0%	5%
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
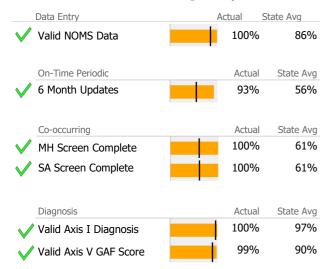New Milford Hospital
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	330	355	-7%	
Admits	10	6	67%	▲
Discharges	17	29	-41%	▼
Service Hours	466	332	40%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	100%	86%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	93%	56%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	61%
✓	SA Screen Complete	100%	61%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	97%
✓	Valid Axis V GAF Score	99%	90%

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		0	0%	50%	46%	-50%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		314	95%	60%	62%	35%	▲
✓ Employed		141	43%	30%	22%	13%	▲
✓ Stable Living Situation		319	97%	95%	79%	2%	
● Improved/Maintained Axis V GAF Score		17	6%	75%	42%	-69%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		250	80%	90%	74%	-10%	

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		4	40%	75%	78%	-35%	▼

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 89 Active Standard Outpatient Programs