Norwalk Hospital
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2015 - June 2016   (Data as of Sep 12, 2016)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	1,476	1,792	-18%	▼
	Admits	203	293	-31%	▼
	Discharges	288	497	-42%	▼
	Service Hours	10,505	12,979	-19%	▼
	Bed Days	37	18	106%	▲

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Mental Health				
	Outpatient		1,460	89.4%
	Community Support		166	10.2%
	Inpatient Services		7	0.4%

Consumer Satisfaction Survey   (Based on 253 FY15 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔	Access		92%	80%	88%
✔	Quality and Appropriateness		92%	80%	93%
✔	Respect		92%	80%	91%
✔	Participation in Treatment		92%	80%	92%
✔	Overall		91%	80%	91%
✔	General Satisfaction		90%	80%	92%
🔴	Outcome		79%	80%	83%
🔴	Recovery		76%	80%	79%

■ Satisfied % | Goal % ▨ 0-80% ▨ 80-100% ✔ Goal Met 🔴 Under Goal

Client Demographics

Age

	#	%	State Avg
18-25	109	7%	15%
26-34	212	14%	24%
35-44	243	16%	19%
45-54	362	25%	22%
55-64	373	25%	15%
65+	176	12%	4%

Gender

	#	%		State Avg
Female	886	60%	▲	40%
Male	590	40%	▼	60%
Transgender				0%

Ethnicity

	#	%	State Avg
Non-Hispanic	1,153	78%	75%
Hispanic-Other	188	13%	7%
Hisp-Puerto Rican	84	6%	12%
Unknown	27	2%	6%
Hispanic-Mexican	23	2%	1%
Hispanic-Cuban	1	0%	0%

Race

	#	%	State Avg
White/Caucasian	922	62%	65%
Black/African American	276	19%	16%
Other	240	16%	13%
Unknown	21	1%	3%
Asian	10	1%	1%
Multiple Races	4	0%	1%
Hawaiian/Other Pacific Islander	2	0%	0%
Am. Indian/Native Alaskan	1	0%	1%

■ 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 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,460	1,759	-17%	▼
Admits	123	235	-48%	▼
Discharges	248	432	-43%	▼
Service Hours	7,936	10,822	-27%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		87%	92%

On-Time Periodic		Actual	State Avg
6 Month Updates		41%	63%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		81%	78%
✓ SA Screen Complete		84%	76%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		98%	99%
Valid Axis V GAF Score		74%	86%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		18	7%	50%	42%	-43%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Employed		249	17%	30%	22%	-13%	▼
● Social Support		616	42%	60%	69%	-18%	▼
● Stable Living Situation		1,103	75%	95%	86%	-20%	▼
● Improved/Maintained Axis V GAF Score		88	6%	75%	53%	-69%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		924	76%	90%	86%	-14%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		80	65%	75%	65%	-10%

Data Submitted to DMHAS by Month
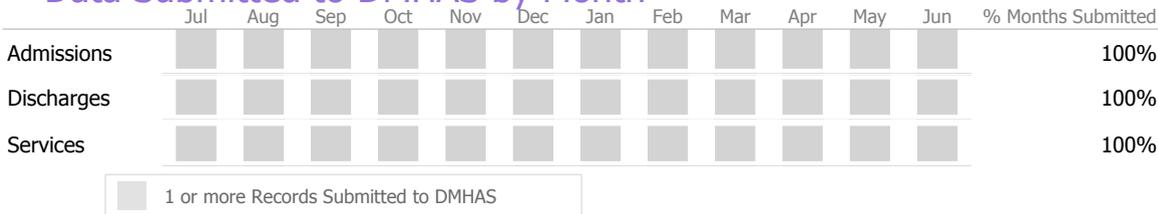
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

Acute Psychiatric Inpt.115-111
Norwalk Hospital
Mental Health - Inpatient Services - Acute Psychiatric

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	36	-81%	▼
Admits	8	38	-79%	▼
Discharges	9	37	-76%	▼
Bed Days	37	18	106%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		9	100%	95%	57%	5%	
●	No Re-admit within 30 Days of Discharge		7	78%	85%	90%	-7%	
●	Follow-up within 30 Days of Discharge		4	44%	90%	54%	-46%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
●	Avg Utilization Rate		1	5 days	0.1	60%	90%	104%	-30%	▼

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													17%
Discharges													17%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 29 Active Acute Psychiatric Programs

BHH ADULT NAE
Norwalk Hospital
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	42%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Employed		N/A	N/A	30%	22%	-30% ▼
● Improved/Maintained Axis V GAF Score		N/A	N/A	75%	53%	-75% ▼
● Social Support		N/A	N/A	60%	69%	-60% ▼
● Stable Living Situation		N/A	N/A	95%	86%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		N/A	N/A	90%	86%	N/A ▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	92%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	63%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	78%
SA Screen Complete		N/A	76%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

BHH CHILDREN Program
Norwalk Hospital
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													0%

	1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

Actual	Goal	✓ Goal Met	● Below Goal

* State Avg based on 38 Active Outreach & Engagement 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 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	166	121	37%	▲
Admits	72	20	260%	▲
Discharges	31	28	11%	▲
Service Hours	2,569	2,157	19%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		3	10%	65%	69%	-55%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		162	98%	60%	80%	38%	▲
✓	Stable Living Situation		160	96%	80%	92%	16%	▲
🔴	Employed		16	10%	20%	12%	-10%	▼
🔴	Improved/Maintained Axis V GAF Score		86	67%	95%	60%	-28%	▼

Data Submission Quality

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

	On-Time Periodic		Actual	State Avg
✓	6 Month Updates		93%	89%

	Cooccurring		Actual	State Avg
✓	MH Screen Complete		99%	83%
✓	SA Screen Complete		100%	81%

	Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis		100%	99%
✓	Valid Axis V GAF Score		100%	86%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		133	99%	90%	98%	9%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%
Discharges		▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	92%
Services	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS
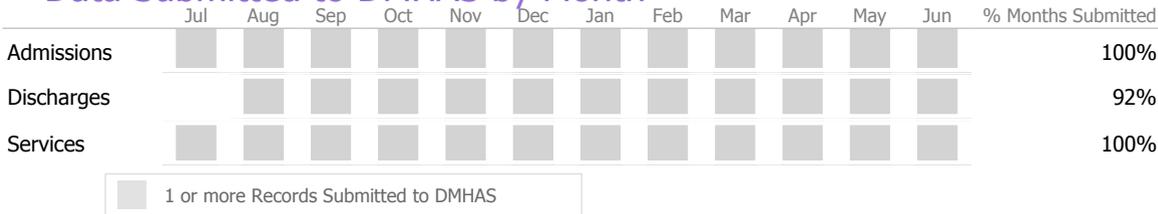
▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 44 Active CSP Programs