New Milford Hospital
New Milford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2015 - March 2016   (Data as of Jun 15, 2016)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	414	397	4%	
	Admits	87	66	32%	▲
	Discharges	63	77	-18%	▼
	Service Hours	1,565	1,305	20%	▲

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Mental Health				
	Outpatient		414	100.0%

Consumer Satisfaction Survey   (Based on 122 FY15 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Access		99%	80%	88%
✓	Quality and Appropriateness		99%	80%	93%
✓	General Satisfaction		98%	80%	92%
✓	Participation in Treatment		97%	80%	92%
✓	Overall		96%	80%	91%
✓	Respect		96%	80%	91%
✓	Outcome		91%	80%	83%
✓	Recovery		83%	80%	79%

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

Client Demographics

Age

Age		#	%	State Avg
18-25		35	8%	15%
26-34		70	17%	24%
35-44		77	19%	19%
45-54		87	21%	23%
55-64		89	21%	15%
65+		56	14%	5%

Gender

Gender		#	%		State Avg
Female		255	62%	▲	40%
Male		159	38%	▼	60%
Transgender					0%

Ethnicity

Ethnicity		#	%		State Avg
Non-Hispanic		389	94%	▲	75%
Hispanic-Other		11	3%		7%
Hisp-Puerto Rican		10	2%		12%
Unknown		3	1%		5%
Hispanic-Mexican		1	0%		1%
Hispanic-Cuban					0%

Race

Race		#	%		State Avg
White/Caucasian		395	95%	▲	65%
Black/African American		11	3%	▼	17%
Other		4	1%	▼	13%
Unknown		3	1%		3%
Multiple Races		1	0%		1%
Am. Indian/Native Alaskan					0%
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 2015 - March 2016 (Data as of Jun 15, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	414	397	4%	
Admits	87	66	32%	▲
Discharges	63	77	-18%	▼
Service Hours	1,565	1,305	20%	▲

Data Submission Quality

Data Entry	Actual % vs Goal %	Actual	State Avg
✔ Valid NOMS Data		100%	92%

On-Time Periodic	Actual % vs Goal %	Actual	State Avg
✔ 6 Month Updates		100%	62%

Cooccurring	Actual % vs Goal %	Actual	State Avg
✔ MH Screen Complete		97%	77%
✔ SA Screen Complete		97%	74%

Diagnosis	Actual % vs Goal %	Actual	State Avg
✔ Valid Axis I Diagnosis		100%	99%
✔ Valid Axis V GAF Score		99%	85%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		10	16%	50%	42%	-34%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		395	95%	60%	69%	35%	▲
✔ Employed		142	34%	30%	21%	4%	
✔ Stable Living Situation		407	98%	95%	86%	3%	
🔴 Improved/Maintained Axis V GAF Score		61	17%	75%	52%	-58%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		334	95%	90%	84%	5%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 2 or more Services within 30 days		65	75%	75%	65%	0%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										89%
Services										100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

█ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs