New Milford Hospital
New Milford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2018 - December 2018   (Data as of Mar 19, 2019)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	365	393	-7%	
	Admits	17	38	-55%	▼
	Discharges	42	38	11%	▲
	Service Hours	659	1,068	-38%	▼

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Mental Health				
	Outpatient		365	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		23	6%	11%
26-34		72	20%	23%
35-44		54	15%	21%
45-54		73	20%	21%
55-64		90	25%	18%
65+		53	15%	6%

Gender

		#	%		State Avg
Female		227	62%	▲	41%
Male		138	38%	▼	59%
Transgender					0%

Ethnicity

		#	%		State Avg
Non-Hispanic		349	96%	▲	71%
Hispanic-Other		9	2%		7%
Hisp-Puerto Rican		4	1%	▼	13%
Unknown		2	1%		9%
Hispanic-Mexican		1	0%		1%
Hispanic-Cuban					0%

Race

		#	%		State Avg
White/Caucasian		350	96%	▲	63%
Black/African American		9	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 - December 2018 (Data as of Mar 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	365	393	-7%	
Admits	17	38	-55%	▼
Discharges	42	38	11%	▲
Service Hours	659	1,068	-38%	▼

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	66%

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

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	99%	89%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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		4	10%	50%	53%	-40%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		342	93%	60%	67%	33%	▲
✓ Employed		129	35%	30%	23%	5%	
✓ Stable Living Situation		355	97%	95%	84%	2%	
● Improved/Maintained Axis V GAF Score		43	12%	75%	47%	-63%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		258	80%	90%	83%	-10%	

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		1	6%	75%	67%	-69%	▼

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 93 Active Standard Outpatient Programs