#### **Danbury Hospital**

Danbury, CT

### Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

58%

42%

0%

5%

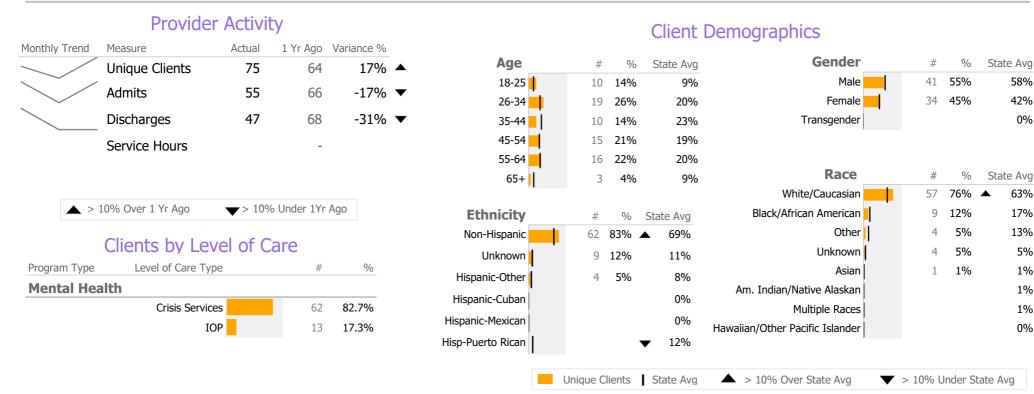
1%

1%

1%

0%

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)



#### Survey Data Not Available

Variances in data may be indicative of operational adjustments related to the pandemic.

#### **152 West St. IOP 506-220** Danbury Hospital Mental Health - IOP - Standard IOP

## Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	9	44%	
Admits	6	1	500%	
Discharges	3	3	0%	
Service Hours	-	-		
Social Rehab/PHP/IOP Days	0	0		

## Data Submission Quality

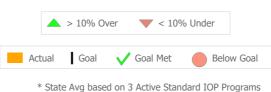
Data Entry		Actual S	tate Avg
Valid NOMS Data		100%	96%
On-Time Periodic		Actual	State Avg
V 6 Month Updates		0%	0%
Co-occurring		Actual	State Avg
MH Screen Complete		0%	76%
SA Screen Complete	İ	0%	76%
Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		100%	98%

## Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				67%
Services				0%
	1 or mo	ore Recor	ds Subr	nitted to DMHAS

## Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		1	33%	50%	79%	-17%	▼
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		0	0%	90%	88%	-90%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		7	54%	60%	60%	-6%	
Employed	<b>—</b>	2	15%	30%	22%	-15%	
Stable Living Situation		7	54%	95%	73%	-41%	▼
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	59%	N/A	



#### Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	62	55	13%	
Admits	49	65	-25%	▼
Discharges	44	65	-32%	▼

#### Crisis

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
<ul> <li>Evaluation within 1.5 hours of Request</li> </ul>		37	88%	75%	70%	13%	
<ul> <li>Community Location Evaluation</li> </ul>		41	98%	80%	70%	18%	
Follow-up Service within 48 hours		5	19%	90%	66%	-71%	

# Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted		
Admissions				100%		
Discharges				100%		
1 or more Records Submitted to DMHAS						

	> 10% 0	ver 🔻 < 10 <sup>4</sup>	% Under	
Actual	Goal	V Goal Met	Belo	w Goal

\* State Avg based on 26 Active Mobile Crisis Team Programs