Charlotte Hungerford Hospital
Torrington, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - December 2021   (Data as of Apr 18, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	3,602	3,222	12%	▲
	Admits	283	331	-15%	▼
	Discharges	44	153	-71%	▼
	Service Hours	3,955	3,444	15%	▲

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Outpatient	3,354	92.1%
	Case Management	190	5.2%
Addiction			
	Case Management	96	2.6%

Consumer Satisfaction Survey   (Based on 205 FY21 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Participation in Treatment		95%	80%	92%
✓	Quality and Appropriateness		92%	80%	93%
✓	General Satisfaction		92%	80%	92%
✓	Respect		90%	80%	91%
✓	Access		90%	80%	88%
✓	Overall		88%	80%	91%
●	Outcome		69%	80%	83%
●	Recovery		64%	80%	79%

Legend: ▮ Satisfied % | Goal %   ▮ 0-80%   ▮ 80-100%   ✓ Goal Met   ● Under Goal

Client Demographics

Age

		#	%	State Avg
18-25		320	9%	9%
26-34		611	17%	21%
35-44		623	17%	23%
45-54		646	18%	19%
55-64		767	21%	19%
65+		633	18%	9%

Gender

		#	%		State Avg
Female		2,171	60%	▲	41%
Male		1,426	40%	▼	59%
Transgender					0%

Ethnicity

		#	%		State Avg
Non-Hispanic		3,201	89%	▲	68%
Unknown		258	7%		11%
Hispanic-Other		132	4%		8%
Hisp-Puerto Rican		11	0%	▼	11%
Hispanic-Cuban					0%
Hispanic-Mexican					1%

Race

		#	%		State Avg
White/Caucasian		3,189	89%	▲	62%
Unknown		175	5%		6%
Other		128	4%		13%
Black/African American		87	2%	▼	17%
Asian		14	0%		1%
Am. Indian/Native Alaskan		5	0%		0%
Multiple Races		3	0%		1%
Hawaiian/Other Pacific Islander		1	0%		0%

Legend: ▮ Unique Clients | State Avg   ▲ > 10% Over State Avg   ▼ > 10% Under State Avg

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

Addiction Case Management - Torrington
Charlotte Hungerford Hospital
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	96	196	-51%	▼
Admits	30	47	-36%	▼
Discharges	18	134	-87%	▼
Service Hours	27	28	-1%	

Data Submission Quality

Data Entry	Actual % vs Goal %	Actual	State Avg
✓ Valid NOMS Data		99%	94%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		0%	56%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		18	100%	50%	69%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Employed		10	10%	20%	29%	-10%	▼
🔴 Stable Living Situation		55	57%	80%	80%	-23%	▼
🔴 Self Help		11	11%	60%	51%	-49%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		10	13%	90%	77%	-77%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	☐	☐	☐	☐	☐	☐	100%
Discharges		☐	☐	☐	☐	☐	83%
Services		☐			☐	☐	50%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

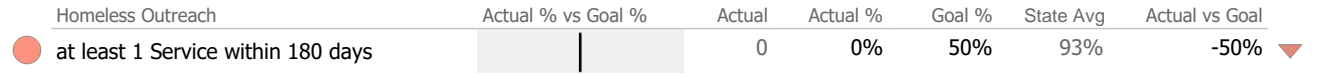🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 13 Active Standard Case Management Programs

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

MH Svs to the Homeless 503294
Charlotte Hungerford Hospital
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	190	190	0%
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Service Engagement

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
at least 1 Service within 180 days		0	0%	50%	93%	-50% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							0%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 47 Active Outreach & Engagement Programs

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

Outpatient 503-210
Charlotte Hungerford Hospital
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3,354	2,891	16%	▲
Admits	253	284	-11%	▼
Discharges	26	19	37%	▲
Service Hours	3,928	3,416	15%	▲

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		64%	87%

On-Time Periodic		Actual	State Avg
6 Month Updates 🔴		20%	55%

Co-occurring		Actual	State Avg
MH Screen Complete		8%	89%
SA Screen Complete		39%	89%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	98%

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		0	0%	50%	42%	-50%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Employed		628	19%	30%	23%	-11%	▼
🔴 Social Support		1,436	43%	60%	59%	-17%	▼
🔴 Stable Living Situation		11	0%	95%	69%	-95%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		1,460	44%	90%	80%	-46%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 2 or more Services within 30 days		175	69%	75%	77%	-6%

Legend:
▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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