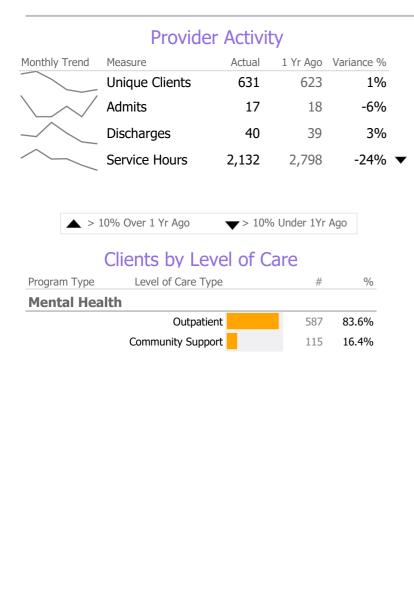
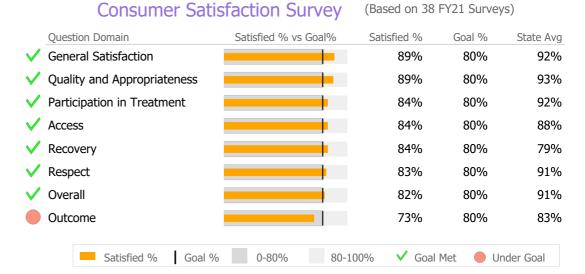
Norwalk Hospital

Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)





Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	21	3%	9%	Female	344	55%	▲ 41%
26-34	65	10%	▼ 21%	Male 📒	287	45%	▼ 59%
35-44 📒	100	16%	23%	Transgender			0%
45-54	126	20%	19%				
55-64	168	27%	19%				
65+	151	24%	▲ 9%	Race	#	%	State Avg
				White/Caucasian	420	67%	62%
Ethnicity	#	%	State Avg	Black/African American	117	19%	17%
Non-Hispanic	489	77%	68%	Other <mark> </mark>	74	12%	13%
Hispanic-Other	87	14%	8%	Unknown	9	1%	6%
Hisp-Puerto Rican	38	6%	11%	Multiple Races	5	1%	1%
Hispanic-Mexican	9	1%	1%	Asian	4	1%	1%
•				Am. Indian/Native Alaskan	2	0%	0%
Unknown	8	1%	11%	Hawaiian/Other Pacific Islander			0%
Hispanic-Cuban			0%				
	Unique C	lients	State Avg	▲ > 10% Over State Avg	/ > 10% L	Jnder St	tate Avg

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

24 Stevens St OP Clin.115-211 Norwalk Hospital Mental Health - Outpatient - Standard Outpatient

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	587	583	1%
Admits	4	7	-43% 🔻
Discharges	15	18	-17% 🔻
Service Hours	1,092	1,433	-24% 🔻

Data Submission Quality

Data Entry	Actua	State Avg
Valid NOMS Data	9	98% 87%
On-Time Periodic	A	ctual State Avg
✓ 6 Month Updates	7	75% 55%
•		
Co-occurring	A	ctual State Avg
MH Screen Complete		0% 89%
SA Screen Complete		0% 89%
Diagnosis	A	ctual State Avg
Valid Axis I Diagnosis	10	00% 98%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		3	20%	50%	42%	-30%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		352	60%	60%	59%	0%	
	Employed	— · ·	83	14%	30%	23%	-16%	
	Stable Living Situation		438	75%	95%	69%	-20%	▼
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		362	63%	90%	80%	-27%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		1	25%	75%	77%	-50%	

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admission	5							50%
Discharges	5							100%
Services								83%
		1 or mo	ore Recor	ds Subn	nitted to	DMHAS		

	> 10% 0	ver v < 100	% Under
Actual	Goal	V Goal Met	Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	115	125	-8%
Admits	13	11	18% 🔺
Discharges	25	21	19% 🔺
Service Hours	1,041	1,365	-24% 🔻

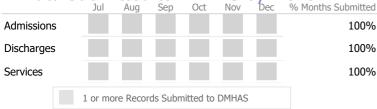
Data Submission Quality

Data Entry	Actual	State Avg
🗸 Valid NOMS Data	99%	83%
On-Time Periodic	Actual	State Avg
🗸 6 Month Updates	100%	83%
·		
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	96%
SA Screen Complete	31%	95%
	1	
Diagnosis	Actual	State Avg
Diagriosis	1	5
🗸 Valid Axis I Diagnosis	100%	98%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		7	28%	65%	57%	-37%	•
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		108	94%	60%	80%	34%	
\checkmark	Stable Living Situation		115	100%	80%	86%	20%	
\checkmark	Employed	_	23	20%	20%	14%	0%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		90	99%	90%	98%	9%	

Data Submitted to DMHAS by Month



	> 10% 0	ver 🔻 < 100	% Under	
Actual	Goal	V Goal Met	Below Goal	

* State Avg based on 36 Active CSP Programs