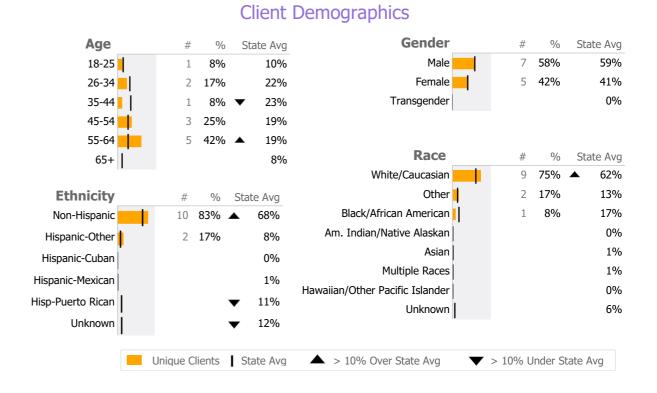
Mansfield Center, CT

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Provider Activity 1 Yr Ago Variance % Monthly Trend Measure Actual **Unique Clients** 12 8 50% 🔺 Admits 12 10 20% Discharges 11 **-100%** ▼ Service Hours **Bed Days** 880 195 351% > 10% Under 1Yr Ago ▲ > 10% Over 1 Yr Ago Clients by Level of Care Program Type Level of Care Type % **Mental Health** Inpatient Services 12 100.0%



Survey Data Not Available

189 Storrs Rd. AIP 849-110

Natchaug Hospital

Mental Health - Inpatient Services - Acute Psychiatric

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes 1 Yr Ago Measure Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Variance % Actual **Unique Clients** N/A 95% 84% N/A Treatment Completed Successfully N/A 3 Admits -100% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges -100% N/A N/A 85% 94% N/A No Re-admit within 30 Days of Discharge Actual % Goal % State Ava Actual % vs Goal % Actual Actual vs Goal N/A N/A 90% 67% Follow-up within 30 Days of Discharge N/A **Bed Utilization** 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal 2 Avg Utilization Rate N/A N/A 0% 90% 88%



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

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	_	_	

Data Submission Quality

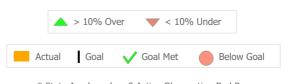
Data Entry	Actual S	Actual State Avg		
Valid NOMS Data	N/A	NaN		
Valid TEDS Data	N/A	N/A		
On-Time Periodic	Actual	State Avg		
6 Month Updates	N/A	N/A		
Co-occurring	Actual	State Avg		
MH Screen Complete	N/A	N/A		
SA Screen Complete	N/A	N/A		

Data Submitted to DMHAS by Month
Jul Aug Sep Oct Nov Dec Jan Feb Mar % Months Submitted

Admissions

Discharges

1 or more Records Submitted to DMHAS

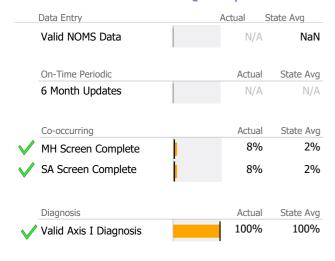


^{*} State Avg based on 0 Active Observation Bed Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	6	100%	•
Admits	12	7	71%	•
Discharges	-	7	-100%	•
Bed Days	880	158	457%	•

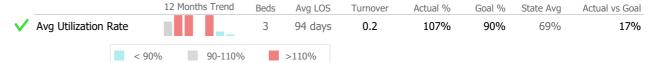
Data Submission Quality



Discharge Outcomes

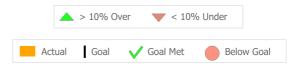
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	95%	100%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	93%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	67%	N/A

Bed Utilization



Data Submitted to DMHAS by Month





^{*} State Avg based on 2 Active Acute Pyschiatric - Intermediate Programs