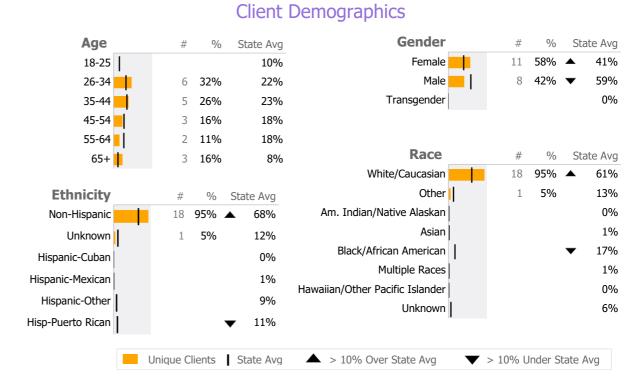
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)





## Survey Data Not Available

## **Clinical Case Management**

Day Kimball Hospital

Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

## **Program Activity Discharge Outcomes** Measure Actual % vs Goal % Actual % Goal % Actual vs Goal Actual Variance % Actual State Avg **Unique Clients** 19 19 0% N/A 50% 63% N/A Treatment Completed Successfully N/A Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Service Hours 0 0% 20% 20% -20% Employed 0 0% 60% 74% -60% -Social Support **Data Submission Quality** 0 0% 80% 78% -80% -Stable Living Situation Data Entry State Avg Service Utilization Valid NOMS Data N/A 95% State Avg Actual % vs Goal % Actual % Actual vs Goal Actual Goal % 0 Clients Receiving Services 0% 90% 90% N/A 🔻 On-Time Periodic State Avg Actual 0% 6 Month Updates 69% Co-occurring Actual State Avg N/A 89% MH Screen Complete SA Screen Complete 83% N/A Diagnosis Actual State Avg 100% 18% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted May Jun Apr > 10% Over < 10% Under</p> Admissions 0% Discharges 0% Goal Met Below Goal Services 0% \* State Avg based on 31 Active Standard Case Management Programs 1 or more Records Submitted to DMHAS