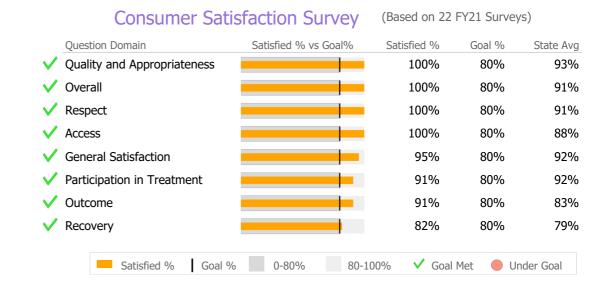
Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

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

Provider Activity Monthly Trend Measure Actual 1 Yr Ago Variance % **Unique Clients** 292 305 -4% Admits 20 -13% ▼ 21 33 -36% ▼ Discharges -37% ▼ Service Hours 808 1,287 ▲ > 10% Over 1 Yr Ago > 10% Under 1Yr Ago Clients by Level of Care Program Type Level of Care Type % **Mental Health** 292 100.0% Outpatient



Gender Age # % State Avg State Avg 18-25 5% 189 65% 41% 15 10% Female Male 103 35% 59% 26-34 47 16% 22% Transgender 0% 35-44 50 17% 23% 45-54 53 18% 18% 55-64 77 26% 18% **Race** % State Avg 65+ 50 17% 8% White/Caucasian 283 97% 61% **Ethnicity** Black/African American 5 2% 17% State Avg # % Other 1% 13% Non-Hispanic 275 94% 68% Multiple Races 0% 1% Hispanic-Other 2% 9% Am. Indian/Native Alaskan 0% Hisp-Puerto Rican 11% 2% Asian 1% Hispanic-Mexican 1% Hawaiian/Other Pacific Islander 0% Unknown 1% ▼ 12% Unknown 6% Hispanic-Cuban 0%

▲ > 10% Over State Avg

▼ > 10% Under State Avg

Client Demographics

Unique Clients State Avg

23 Poplar St. OP Clin 515-210

New Milford Hospital

Mental Health - Outpatient - Standard Outpatient

1 or more Records Submitted to DMHAS

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 % Goal % Actual vs Goal Actual 1 Yr Ago Variance % Actual Actual % State Avg **Unique Clients** 292 305 -4% 19% 50% 41% -31% Treatment Completed Successfully Admits 20 23 -13% Recovery Discharges 21 33 **-36% ▼** National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual 808 Service Hours 1,287 **-37% ▼** 285 98% 60% 62% 38% 🔺 Social Support **Employed** 141 48% 30% 26% 18% **Data Submission Quality** 287 98% 95% 73% 3% Stable Living Situation Data Entry State Avg Actual Service Utilization Valid NOMS Data 100% 88% State Avg Actual % vs Goal % Actual % Actual vs Goal Actual Goal % Clients Receiving Services 202 75% 90% 84% -15% On-Time Periodic State Avg Actual 0% 6 Month Updates 49% Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Co-occurring State Avg Actual Actual 6 79% 30% 75% -45% -MH Screen Complete 100% 90% 2 or more Services within 30 days SA Screen Complete 100% 91% Diagnosis Actual State Avg 100% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted Sep Nov Mar Feb Apr May Jun > 10% Over < 10% Under</p> Admissions 67% Discharges 50% Goal Goal Met Below Goal Services 83% * State Avg based on 74 Active Standard Outpatient Programs