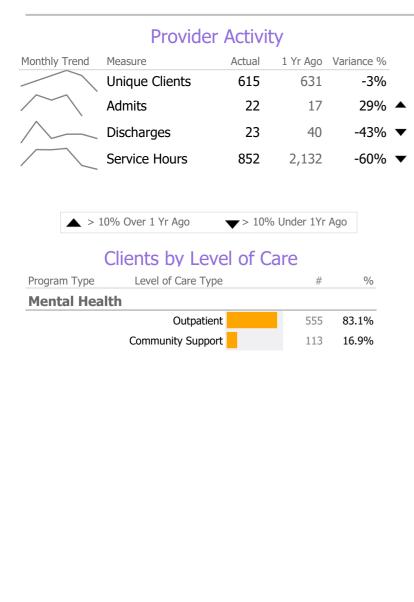
Norwalk Hospital

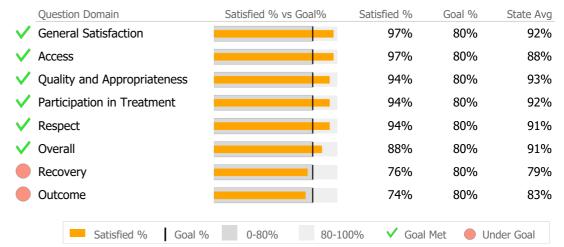
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)



Consumer Satisfaction Survey (Based on 32 FY22 Surveys)



Client Demographics

Age	÷	¥ %	State Avg	Gender	#	%	State Avg
18-25	1	7 3%	9%	Female	334	54%	▲ 42%
26-34	6	6 11%	20%	Male 🗾	281	46%	▼ 58%
35-44 📕	9	7 16%	24%	Transgender			0%
45-54 📕	11	3 18%	18%				
55-64	17	28%	20%				
65+	15	2 25%	▲ 9%	Race	#	%	State Avg
				White/Caucasian	407	66%	62%
Ethnicity	#	%	State Avg	Black/African American	113	18%	17%
Non-Hispanic	479	78%	69%	Other <mark> </mark>	75	12%	13%
Hispanic-Other	79	13%	8%	Unknown	9	1%	6%
Hisp-Puerto Rican	42	7%	11%	Multiple Races	5	1%	1%
Hispanic-Mexican	10		1%	Asian	4	1%	1%
				Am. Indian/Native Alaskan	2	0%	1%
Unknown	5	1%	11%	Hawaiian/Other Pacific Islander			0%
Hispanic-Cuban			0%				
	Unique	Clients	State Avg	▲ > 10% Over State Avg	> 10% L	Inder St	tate Avg

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

Community Support Program Norwalk Hospital Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

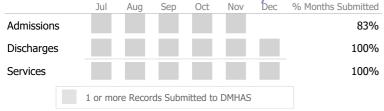
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	113	115	-2%	
Admits	21	13	62% 🔺	
Discharges	17	25	-32% 🔻	
Service Hours	844	1,041	-19% 🔻	

Data Submission Quality

Data Entry	 Actual	State Avg
Valid NOMS Data	100%	88%
On-Time Periodic	Actual	State Avg
6 Month Updates	62%	83%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	97%

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		5	29%	65%	55%	-36%	▼
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		106	94%	60%	78%	34%	
\checkmark	Stable Living Situation		110	97%	80%	86%	17%	
\checkmark	Employed		24	21%	20%	14%	1%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		94	98%	90%	96%	8%	

Data Submitted to DMHAS by Month



Actual Goal 🗸 Goal Met 🔴 Below Goa		> 10% O	ver 🛛 💙 < 10	% Under
	Actual	Goal	V Goal Met	Below Goa

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

Discharge Outcomes

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	555	587	-5%
Admits	1	4	-75% 🔻
Discharges	6	15	-60% 🔻
Service Hours	8	1,092	-99% 🔻

Data Submission Quality

Actual	State Avg
99%	90%
Actual	State Avg
34%	51%
Actual	State Avg
100%	98%
	Actual Actual Actual

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		0	0%	50%	43%	-50%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		393	71%	60%	59%	11%	
	Employed		86	15%	30%	24%	-15%	
	Stable Living Situation		413	74%	95%	72%	-21%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		5	1%	90%	80%	-89%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		0	0%	75%	79%	-75%	-

Data Submitted to DMHAS by Month



	> 10% 0	ver 🔻 < 109	% Under	
Actual	Goal	V Goal Met	Below Go	bal

* State Avg based on 73 Active Standard Outpatient Programs