

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	19	19	0%
	Admits			
	Discharges			
	Service Hours		-	

▲ > 10% Over 1 Yr Ago ▼ > 10% Under 1Yr Ago

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health	Case Management	19	100.0%

Client Demographics

Age	#	%	State Avg
18-25			8%
26-34	5	26%	19%
35-44	6	32%	24%
45-54	1	5%	18%
55-64	4	21%	19%
65+	3	16%	10%

Ethnicity	#	%	State Avg
Non-Hispanic	18	95%	65%
Unknown	1	5%	14%
Hispanic-Cuban			0%
Hispanic-Mexican			1%
Hispanic-Other			10%
Hisp-Puerto Rican			10%

Gender	#	%	State Avg
Female	11	58%	41%
Male	8	42%	59%
Transgender			0%

Race	#	%	State Avg
White/Caucasian	18	95%	60%
Other	1	5%	12%
Am. Indian/Native Alaskan			1%
Asian			1%
Black/African American			17%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%
Unknown			8%

Unique Clients | State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	19	19	0%
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data		N/A 93%
On-Time Periodic	Actual	State Avg
6 Month Updates		0% 66%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis		100% 25%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	62%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		0	0%	20%	18%	-20% ▼
Social Support		0	0%	60%	72%	-60% ▼
Stable Living Situation		0	0%	80%	82%	-80% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		0	0%	90%	84%	N/A ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 24 Active Standard Case Management Programs

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