**Day Kimball Hospital**
Putnam, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2025 -September 2025 (Data as of Dec 15, 2025)

## 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 | | | | 9% |
| 26-34 | 5 | 26% | | 18% |
| 35-44 | 6 | 32% | | 25% |
| 45-54 | 1 | 5% | ▼ | 18% |
| 55-64 | 4 | 21% | | 19% |
| 65+ | 3 | 16% | | 11% |

| Gender | # | % | | State Avg |
|---|---|---|---|---|
| Female | 11 | 58% | ▲ | 41% |
| Male | 8 | 42% | ▼ | 58% |
| Transgender/Other | | | | 0% |

| Ethnicity | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 18 | 95% | ▲ | 64% |
| Unknown | 1 | 5% | | 13% |
| Hispanic-Cuban | | | | 0% |
| Hispanic-Mexican | | | | 1% |
| Hispanic-Other | | | ▼ | 12% |
| Hisp-Puerto Rican | | | | 10% |

| Race | # | % | | State Avg |
|---|---|---|---|---|
| White/Caucasian | 18 | 95% | ▲ | 59% |
| 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 2025 - September 2025 (Data as of Dec 15, 2025)

## 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% | 65% |

| Diagnosis | Actual | State Avg |
|---|---|---|
| Valid MH/SU Diagnosis | 100% | 19% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 70% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Employed | | 0 | 0% | 20% | 12% | -20% |
| Self Help | | 0 | 0% | N/A | 35% | N/A |
| Social Support | | 0 | 0% | 60% | 66% | -60% |
| Stable Living Situation | | 0 | 0% | 80% | 71% | -80% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Clients Receiving Services | | 0 | 0% | 90% | 80% | -90% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % 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 22 Active Standard Case Management Programs