New Milford Hospital
New Milford, 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	283	276	3%	
	Admits	3	6	-50%	▼
	Discharges	21	1	2000%	
	Service Hours	265	267	-1%	

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

Consumer Satisfaction Survey   (Based on 124 FY25 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	General Satisfaction		94%	80%	92%
✓	Overall		94%	80%	91%
✓	Outcome		94%	80%	83%
✓	Respect		94%	80%	91%
✓	Participation in Treatment		93%	80%	92%
✓	Quality and Appropriateness		90%	80%	93%
✓	Access		85%	80%	88%

Satisfied %	Goal %	0-80%	80-100%	✓ Goal Met	● Under Goal

Clients by Level of Care

Program Type	Level of Care Type		#	%
Mental Health				
	Outpatient		283	100.0%

Client Demographics

Age

		#	%	State Avg
18-25		8	3%	9%
26-34		47	17%	18%
35-44		49	17%	25%
45-54		50	18%	18%
55-64		69	24%	19%
65+		59	21%	11%

Gender

		#	%		State Avg
Female		183	65%	▲	41%
Male		100	35%	▼	58%
Transgender/Other					0%

Ethnicity

		#	%		State Avg
Non-Hispanic		262	93%	▲	64%
Hispanic-Other		8	3%		12%
Hisp-Puerto Rican		6	2%		10%
Unknown		4	1%	▼	13%
Hispanic-Mexican		3	1%		1%
Hispanic-Cuban					0%

Race

		#	%		State Avg
White/Caucasian		274	97%	▲	59%
Black/African American		5	2%	▼	17%
Other		3	1%	▼	12%
Asian		1	0%		1%
Am. Indian/Native Alaskan					1%
Multiple Races					1%
Hawaiian/Other Pacific Islander					0%
Unknown					8%

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

23 Poplar St. OP Clin 515-210
New Milford Hospital
Mental Health - Outpatient - Standard Outpatient

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	283	276	3%	
Admits	3	6	-50%	▼
Discharges	21	1	2000%	▲
Service Hours	265	267	-1%	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		100%	89%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	50%

Diagnosis		Actual	State Avg
Valid MH/SU Diagnosis		100%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		1	5%	50%	45%	-45%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Employed		25	9%	30%	28%	-21%	▼
● Social Support		47	17%	60%	55%	-43%	▼
Self Help		5	2%	N/A	21%	N/A	
● Improved/Maintained Function Score		0	0%	75%	34%	-75%	▼
● Stable Living Situation		50	18%	95%	69%	-77%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		192	69%	90%	88%	-21%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		0	0%	75%	75%	-75%	▼

Data Submitted to DMHAS for Month

	Jul	Aug	Sep	% Months Submitted
Admissions			▪	33%
Discharges	▪	▪	▪	100%
Services	▪	▪	▪	100%

1 or more Records Submitted to DMHAS
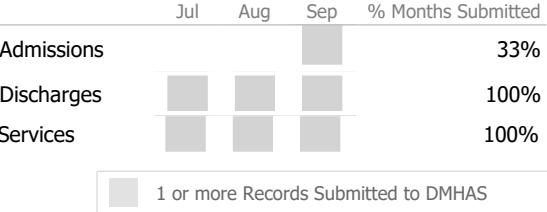
▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 76 Active Standard Outpatient Programs