#### **Day Kimball Hospital**

Putnam, CT

# Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

	Provide	er Activity	/					Client I	Demographics
Monthly Trend	Measure	Variance %							
ſ	Unique Clients	19	12	58%		#	%	State Avg	Gender
$\wedge$	Admits	7	12	-42%	▼ 18-25	2	11%	11%	Female
~ \	Admits	,	14	12 /0	26-34	5 2	26%	23%	Male 📒
	Discharges				35-44 🗾	4 2	21%	22%	Transgender
	Service Hours		1	-100%	✓ 45-54	4 2	21%	20%	
				10070	55-64	1	5%	<b>▼</b> 18%	
					65+	3 1	16%	6%	Race
									White/Caucasian
<b>▲</b> >	▲ > 10% Over 1 Yr Ago $>$ 10% Under		Jnder 1Yr /	Ago	Ethnicity	#	%	State Avg	Other
					Non-Hispanic	18 <b>9</b>	5%	▲ 69%	Am. Indian/Native Alaskan
	Clients by Level of Care		re		Unknown	1	5%	11%	Asian
Program Type	Level of Care Ty	уре	#	%	Hispanic-Cuban			0%	Black/African American
Mental Health									Multiple Races
	Case Managem	ent	19	100.0%	Hispanic-Mexican			1%	Hawaiian/Other Pacific Islander
				Hispanic-Other			8%	Unknown	
					Hisp-Puerto Rican			▼ 11%	

▼ > 10% Under State Avg

%

%

95% 🔺

•

 $\mathbf{T}$ 

58%

8 42%

State Avg

State Avg

62%

13%

1%

1%

17%

1% 0%

6%

40%

60%

0%

#

11

#

18

1 5%

### Survey Data Not Available

▲ > 10% Over State Avg

Unique Clients State Avg

#### Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

# Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	19	12	58% 🔺
Admits	7	12	-42% 🔻
Discharges	-	-	
Service Hours	-	1	-100% 🔻

# Data Submission Quality

Valid Axis V GAF Score

Data Entry		Actual	State Avg
Valid NOMS Data		100%	94%
On-Time Periodic		Actual	State Avg
6 Month Updates		0%	58%
-			
Co-occurring		Actual	State Avg
MH Screen Complete		0%	79%
SA Screen Complete	Í	0%	77%
Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		100%	35%

#### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		N/A	N/A	50%	60%	N/A	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		19	100%	60%	72%	40%	
$\checkmark$	Stable Living Situation		18	95%	80%	78%	15%	
	Employed		1	5%	20%	13%	-15%	▼
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		0	0%	90%	83%	N/A	

#### Data Submitted to DMHAS by Month

	Ju	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													25%
Discharges													0%
Services													8%
	1 or	more Reco	rds Subr	nitted to	DMHAS								

31%

100%



\* State Avg based on 24 Active Standard Case Management Programs