

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	296	279	6%
	Admits	39	58	-33% ▼
	Discharges	29	48	-40% ▼
	Service Hours	59	46	29% ▲
	Bed Days	4,231	3,693	15% ▲

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

Consumer Satisfaction Survey

(Based on 20 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Quality and Appropriateness		100%	80%	93%
✓ Respect		100%	80%	91%
✓ Access		100%	80%	88%
✓ Participation in Treatment		95%	80%	92%
✓ General Satisfaction		95%	80%	92%
✓ Overall		95%	80%	91%
✓ Outcome		95%	80%	83%
● Recovery		74%	80%	79%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health	Outpatient	157	52.0%
	Case Management	62	20.5%
	Other	50	16.6%
	Residential Services	33	10.9%

Client Demographics

Age	#	%	State Avg
18-25	74	25%	▲ 9%
26-34	57	19%	21%
35-44	32	11%	▼ 23%
45-54	47	16%	19%
55-64	49	17%	19%
65+	37	13%	9%

Gender	#	%	State Avg
Female	156	53%	▲ 41%
Male	140	47%	▼ 59%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	175	59%	68%
Hisp-Puerto Rican	88	30%	▲ 11%
Hispanic-Other	31	10%	8%
Hispanic-Cuban	1	0%	0%
Unknown	1	0%	▼ 11%
Hispanic-Mexican			1%

Race	#	%	State Avg
White/Caucasian	105	35%	▼ 62%
Other	82	28%	▲ 13%
Black/African American	64	22%	17%
Unknown	40	14%	6%
Asian	4	1%	1%
Hawaiian/Other Pacific Islander	1	0%	0%
Am. Indian/Native Alaskan			0%
Multiple Races			1%

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

Eli's Retreat 610242

Hartford Hospital

Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	10	30% ▲
Admits	6	5	20% ▲
Discharges	7	5	40% ▲
Bed Days	1,032	947	9%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	86%
Co-occurring	Actual	State Avg
MH Screen Complete	83%	92%
SA Screen Complete	83%	89%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		5	71%	75%	67%	-4%
No Re-admit within 30 Days of Discharge		7	100%	85%	82%	15% ▲
Follow-up within 30 Days of Discharge		4	80%	90%	80%	-10%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		5	178 days	0.3	112%	90%	91%	22% ▲

■ < 90%
 ■ 90-110%
 ■ > 110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							67%
Discharges							83%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over
 ▼ < 10% Under

■ Actual
 | Goal
 ✓ Goal Met
 ● Below Goal

* State Avg based on 29 Active MH Intensive Res. Rehabilitation Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	157	161	-2%
Admits	5	25	-80% ▼
Discharges	11	16	-31% ▼
Service Hours	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	87%
On-Time Periodic		
6 Month Updates	99%	55%
Co-occurring		
MH Screen Complete	0%	89%
SA Screen Complete	0%	89%
Diagnosis		
Valid Axis I Diagnosis	100%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		7	64%	50%	42%	14% ▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		151	96%	60%	59%	36% ▲
✓ Stable Living Situation		155	99%	95%	69%	4%
● Employed		31	20%	30%	23%	-10%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		0	0%	90%	80%	N/A ▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		0	0%	75%	77%	-75% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■		■		■	■	67%
Discharges	■	■	■		■	■	83%
Services							0%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

Potential Program

Hartford Hospital

Mental Health - Outpatient - Standard Outpatient

Program Activity

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

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data		N/A 87%
On-Time Periodic		
6 Month Updates		N/A 55%
Co-occurring		
MH Screen Complete		N/A 89%
SA Screen Complete		N/A 89%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	42%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		N/A	N/A	30%	23%	-30% ▼
Social Support		N/A	N/A	60%	59%	-60% ▼
Stable Living Situation		N/A	N/A	95%	69%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		N/A	N/A	90%	80%	N/A ▼

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

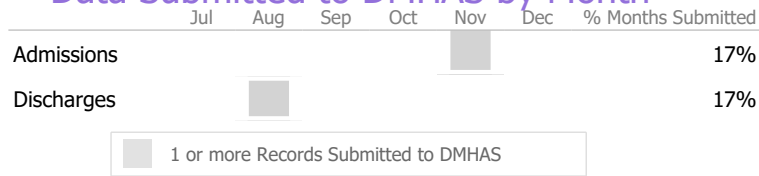
* State Avg based on 74 Active Standard Outpatient Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	50	47	6%
Admits	1	1	0%
Discharges	2	-	

Data Submitted to DMHAS by Month



* State Avg based on 24 Active Other Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	21	17	24% ▲
Admits	4	1	300% ▲
Discharges	5	3	67% ▲
Bed Days	3,199	2,746	16% ▲

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	98%
On-Time Periodic		
6 Month Updates	92%	86%
Co-occurring		
MH Screen Complete	100%	92%
SA Screen Complete	100%	89%
Diagnosis		
Valid Axis I Diagnosis	100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		5	100%	75%	67%	25% ▲
No Re-admit within 30 Days of Discharge		4	80%	85%	82%	-5%
Follow-up within 30 Days of Discharge		5	100%	90%	80%	10%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		20	719 days	0.5	87%	90%	91%	-3%

Legend: ■ < 90% ■ 90-110% ■ > 110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							50%
Discharges							50%

Legend: ■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 29 Active MH Intensive Res. Rehabilitation Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	62	48	29% ▲
Admits	23	26	-12% ▼
Discharges	4	24	-83% ▼
Service Hours	59	46	29% ▲

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	94%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	55%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		2	50%	50%	64%	0%

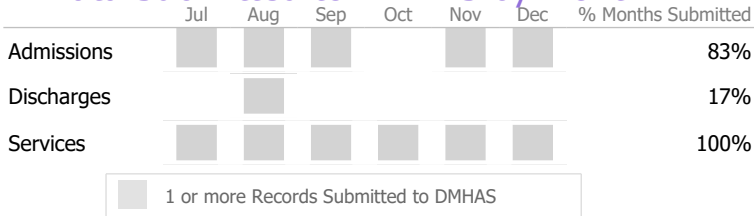
Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		55	89%	60%	69%	29% ▲
✓ Stable Living Situation		57	92%	80%	72%	12% ▲
✓ Employed		17	27%	20%	15%	7%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		37	64%	90%	80%	-26% ▼

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 30 Active Standard Case Management Programs