

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	251	321	-22% ▼
	Admits	87	172	-49% ▼
	Discharges	112	161	-30% ▼
	Service Hours	910	1,299	-30% ▼
	Bed Days	840	861	-2%

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

Consumer Satisfaction Survey

(Based on 62 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Participation in Treatment		92%	80%	92%
✓ Respect		89%	80%	91%
✓ General Satisfaction		89%	80%	92%
✓ Quality and Appropriateness		88%	80%	93%
✓ Overall		82%	80%	91%
● Access		76%	80%	88%
● Outcome		70%	80%	83%
● Recovery		58%	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	184	73.0%
	Crisis Services	68	27.0%

Client Demographics

Age	#	%	State Avg
18-25	25	10%	10%
26-34	49	20%	22%
35-44	43	17%	23%
45-54	59	24%	18%
55-64	58	23%	18%
65+	17	7%	8%

Gender	#	%	State Avg
Female	137	55%	▲ 41%
Male	114	45%	▼ 59%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	207	82%	▲ 68%
Hisp-Puerto Rican	23	9%	11%
Unknown	12	5%	12%
Hispanic-Other	7	3%	9%
Hispanic-Cuban	1	0%	0%
Hispanic-Mexican	1	0%	1%

Race	#	%	State Avg
White/Caucasian	124	49%	▼ 61%
Black/African American	81	32%	▲ 17%
Other	26	10%	13%
Unknown	10	4%	6%
Am. Indian/Native Alaskan	4	2%	0%
Asian	4	2%	1%
Multiple Races	1	0%	1%
Hawaiian/Other Pacific Islander	1	0%	0%

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

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

Respite Bed Program

Yale-New Haven Hospital

Mental Health - Crisis Services - Respite Bed

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	68	118	-42% ▼
Admits	66	121	-45% ▼
Discharges	69	121	-43% ▼
Bed Days	840	861	-2%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ No Re-admit within 30 Days of Discharge		64	93%	85%	89%	8%
● Follow-up within 30 Days of Discharge		28	54%	90%	80%	-36% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		7	14 days	0.1	33%	90%	49%	-57% ▼

■ < 90%
 ■ 90-110%
 ■ >110%

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual
 | Goal
 ✓ Goal Met
 ● Below Goal

* State Avg based on 10 Active Respite Bed Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	184	203	-9%
Admits	21	51	-59% ▼
Discharges	43	40	8%
Service Hours	910	1,299	-30% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	99%	88%
On-Time Periodic		
6 Month Updates	63%	49%
Co-occurring		
MH Screen Complete	100%	90%
SA Screen Complete	95%	91%
Diagnosis		
Valid Axis I Diagnosis	100%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		3	7%	50%	41%	-43% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		137	74%	60%	62%	14% ▲
Stable Living Situation		172	93%	95%	73%	-2%
Employed		45	24%	30%	26%	-6%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		141	100%	90%	84%	10%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		5	24%	75%	79%	-51% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■		■	■	■	■	■		■		75%
Discharges	■	■		■	■	■	■	■		■		■	75%
Services	■		■	■	■	■	■	■	■	■	■	■	92%

■ 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.