

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	14	5	180%	▲
	Admits	11	4	175%	▲
	Discharges	11	3	267%	▲
	Service Hours	-	-	-	
	Bed Days	522	248	110%	▲

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health	Inpatient Services	14	100.0%

Client Demographics

Age	#	%	State Avg
18-25	1	7%	8%
26-34	3	21%	19%
35-44	4	29%	24%
45-54			▼ 18%
55-64	5	36%	▲ 19%
65+	1	7%	10%

Ethnicity	#	%	State Avg
Non-Hispanic	14	100%	▲ 65%
Hispanic-Cuban			0%
Hispanic-Mexican			1%
Hispanic-Other			10%
Hisp-Puerto Rican			10%
Unknown			▼ 14%

Gender	#	%	State Avg
Female	9	69%	▲ 41%
Male	4	31%	▼ 59%
Transgender			0%

Race	#	%	State Avg
White/Caucasian	12	86%	▲ 60%
Black/African American	2	14%	17%
Am. Indian/Native Alaskan			1%
Asian			1%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%
Other			▼ 12%
Unknown			8%

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

Survey Data Not Available

Intermediate Care Contract

Natchaug Hospital

Mental Health - Inpatient Services - Acute Psychiatric - Intermediate

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2023 - December 2023 (Data as of Mar 26, 2024)

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Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	NaN
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	N/A
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		11	100%	95%	100%	5%
● No Re-admit within 30 Days of Discharge		9	82%	85%	82%	-3%
● Follow-up within 30 Days of Discharge		6	55%	90%	55%	-35% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Improved/Maintained Function Score		11	100%	95%	100%	5%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		3	81 days	0.2	95%	90%	32%	5%

Legend: ■ < 90% ■ 90-110% ■ > 110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■	■	■	■	100%
Discharges	■	■	■	■	■	■	83%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 1 Active Acute Psychiatric - Intermediate Programs

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