Natchaug Hospital
Mansfield Center, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2013 - June 2014   (Data as of Sep 16, 2014)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	542	736	-26%	▼
	Admits	586	823	-29%	▼
	Discharges	592	829	-29%	▼
	Bed Days	1,161	845	37%	▲

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Inpatient Services	437	78.7%
	IOP	83	15.0%
Mental Health			
	Inpatient Services	35	6.3%

Consumer Satisfaction Survey   (Based on 98 FY13 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔	Participation in Treatment		97%	80%	92%
✔	Quality and Appropriateness		96%	80%	93%
✔	General Satisfaction		95%	80%	92%
✔	Respect		92%	80%	91%
✔	Access		87%	80%	88%
✔	Overall		87%	80%	91%
🔴	Outcome		71%	80%	83%
🔴	Recovery		69%	80%	79%

Satisfied %	Goal %	0-80%	80-100%	✔ Goal Met	🔴 Under Goal

Client Demographics

Age

Age	#	%	State Avg
18-25	99	18%	16%
26-34	95	18%	23%
35-44	123	23%	20%
45-54	130	24%	24%
55-64	74	14%	14%
65+	16	3%	4%

Gender

Gender	#	%	State Avg
Male	315	58%	60%
Female	227	42%	40%

Ethnicity

Ethnicity	#	%		State Avg
Non-Hispanic	499	92%	▲	75%
Hisp-Puerto Rican	20	4%		12%
Hispanic-Other	19	4%		6%
Hispanic-Mexican	2	0%		0%
Unknown	2	0%		6%
Hispanic-Cuban				0%

Race

Race	#	%		State Avg
White/Caucasian	484	89%	▲	65%
Black/African American	35	6%	▼	17%
Other	12	2%	▼	14%
Am. Indian/Native Alaskan	4	1%		1%
Multiple Races	4	1%		1%
Unknown	2	0%		3%
Asian	1	0%		1%
Hawaiian/Other Pacific Islander				0%

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

189 Storrs Rd. AIP 849-110
Natchaug Hospital
Mental Health - Inpatient Services - Acute Psychiatric

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2013 - June 2014 (Data as of Sep 16, 2014)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	35	30	17%	▲
Admits	32	30	7%	
Discharges	36	25	44%	▲
Bed Days	1,161	845	37%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		36	100%	95%	69%	5%	
🔴	No Re-admit within 30 Days of Discharge		25	69%	85%	87%	-16%	▼
🔴	Follow-up within 30 Days of Discharge		18	50%	90%	47%	-40%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Avg Utilization Rate		2	49 days	0.1	159%	90%	110%	69%	▲

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

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

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

▮ Actual	⏐ Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 26 Active Acute Psychiatric Programs

Detox Fee for Serv 4.2 704600
Natchaug Hospital
Addiction - Inpatient Services - Medically Managed Detox 4.2

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2013 - June 2014 (Data as of Sep 16, 2014)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	437	610	-28%	▼
Admits	478	680	-30%	▼
Discharges	478	689	-31%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		98%	99%
✔ Valid TEDS Data		100%	98%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	N/A

Cooccurring		Actual	State Avg
MH Screen Complete		0%	84%
SA Screen Complete		0%	84%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	100%
✔ Valid Axis V GAF Score		100%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		454	95%	80%	71%	15%	▲
✔ No Re-admit within 30 Days of Discharge		447	94%	85%	83%	9%	
🔴 Follow-up within 30 Days of Discharge		137	30%	90%	42%	-60%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Improved/Maintained Axis V GAF Score		477	100%	95%	91%	5%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%

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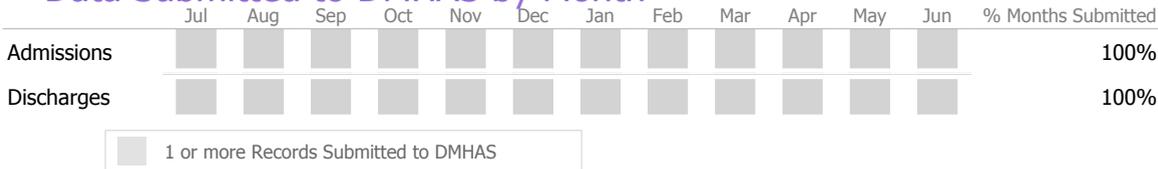
▲ > 10% Over   ▼ < 10% Under

Actual	Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 3 Active Medically Managed Detox 4.2 Programs

RiverEast IOP   70473
Natchaug Hospital
Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2013 - June 2014 (Data as of Sep 16, 2014)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	83	123	-33%	▼
Admits	76	113	-33%	▼
Discharges	78	115	-32%	▼
Service Hours	-	-		
Social Rehab/PHP/IOP Days	0	0		

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		86%	96%
✓ Valid TEDS Data		99%	99%

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

Cooccurring		Actual	State Avg
MH Screen Complete		0%	93%
SA Screen Complete		0%	93%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	100%
Valid Axis V GAF Score		25%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		47	60%	50%	60%	10%	▲
🔴 Follow-up within 30 Days of Discharge		10	21%	90%	49%	-69%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		81	91%	75%	94%	16%	▲
✓ Abstinence/Reduced Drug Use		50	56%	55%	64%	1%	
🔴 Self Help		43	48%	60%	49%	-12%	▼
🔴 Employed		19	21%	50%	28%	-29%	▼
🔴 Stable Living Situation		49	55%	95%	93%	-40%	▼
🔴 Improved/Maintained Axis V GAF Score		4	5%	75%	80%	-70%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		0	0%	90%	84%	N/A	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 50 Active Standard IOP Programs