**Community Mental Health Affiliates**
New Britain, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2015 - March 2016   (Data as of Jun 15, 2016)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 2,075 | 2,127 | -2% | |
| | Admits | 1,362 | 1,095 | 24% | ▲ |
| | Discharges | 1,524 | 1,386 | 10% | |
| | Service Hours | 49,280 | 43,468 | 13% | ▲ |
| | Bed Days | 19,711 | 19,740 | 0% | |
| | S.Rehab/PHP/IOP | 5,686 | 5,015 | 13% | ▲ |

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

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Outpatient | 878 | 30.6% |
| | Crisis Services | 331 | 11.5% |
| | Social Rehabilitation | 226 | 7.9% |
| | Community Support | 175 | 6.1% |
| | ACT | 170 | 5.9% |
| | Case Management | 154 | 5.4% |
| | Employment Services | 135 | 4.7% |
| | Residential Services | 91 | 3.2% |
| **Forensic MH** | | | |
| | Forensics Community-based | 404 | 14.1% |
| | Outpatient | 193 | 6.7% |
| | Case Management | 5 | 0.2% |
| **Addiction** | | | |
| | Outpatient | 106 | 3.7% |

## Consumer Satisfaction Survey   (Based on 507 FY15 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✔ | Quality and Appropriateness | | 92% | 80% | 93% |
| ✔ | Participation in Treatment | | 92% | 80% | 92% |
| ✔ | General Satisfaction | | 92% | 80% | 92% |
| ✔ | Respect | | 91% | 80% | 91% |
| ✔ | Overall | | 91% | 80% | 91% |
| ✔ | Access | | 88% | 80% | 88% |
| ✔ | Outcome | | 81% | 80% | 83% |
| ● | Recovery | | 74% | 80% | 79% |

Legend: Satisfied % | Goal % | 0-80% | 80-100% | ✔ Goal Met | ● Under Goal

## Client Demographics

### Age

| Age | # | % | State Avg |
|---|---|---|---|
| 18-25 | 328 | 16% | 15% |
| 26-34 | 421 | 20% | 24% |
| 35-44 | 358 | 17% | 19% |
| 45-54 | 538 | 26% | 23% |
| 55-64 | 341 | 17% | 15% |
| 65+ | 80 | 4% | 5% |

### Gender

| Gender | # | % | State Avg |
|---|---|---|---|
| Male | 1,072 | 52% | 60% |
| Female | 1,001 | 48% | 40% |
| Transgender | | | 0% |

### Ethnicity

| Ethnicity | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 1,290 | 62% | ▼ | 75% |
| Hisp-Puerto Rican | 460 | 22% | | 12% |
| Unknown | 249 | 12% | | 5% |
| Hispanic-Other | 71 | 3% | | 7% |
| Hispanic-Cuban | 3 | 0% | | 0% |
| Hispanic-Mexican | 2 | 0% | | 1% |

### Race

| Race | # | % | State Avg |
|---|---|---|---|
| White/Caucasian | 1,388 | 67% | 65% |
| Other | 331 | 16% | 13% |
| Black/African American | 242 | 12% | 17% |
| Unknown | 94 | 5% | 3% |
| Hawaiian/Other Pacific Islander | 9 | 0% | 0% |
| Asian | 6 | 0% | 1% |
| Am. Indian/Native Alaskan | 4 | 0% | 0% |
| Multiple Races | 1 | 0% | 1% |

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

**Adult OP - Torrington 603216**
Community Mental Health Affiliates
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 98 | 124 | -21% ▼ |
| Admits | 34 | 59 | -42% ▼ |
| Discharges | 38 | 41 | -7% |
| Service Hours | 720 | 564 | 28% ▲ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 88% | 92% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 95% | 62% |

| Cooccurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 91% | 77% |
| ✓ SA Screen Complete | | 92% | 74% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 85% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 10 | 26% | 50% | 42% | -24% ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 88 | 90% | 60% | 69% | 30% ▲ |
| ✓ Stable Living Situation | | 96 | 98% | 95% | 86% | 3% |
| 🔴 Employed | | 11 | 11% | 30% | 21% | -19% ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 53 | 70% | 75% | 52% | -5% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 59 | 98% | 90% | 84% | 8% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 27 | 79% | 75% | 65% | 4% |

## Data Submitted to DMHAS by Month
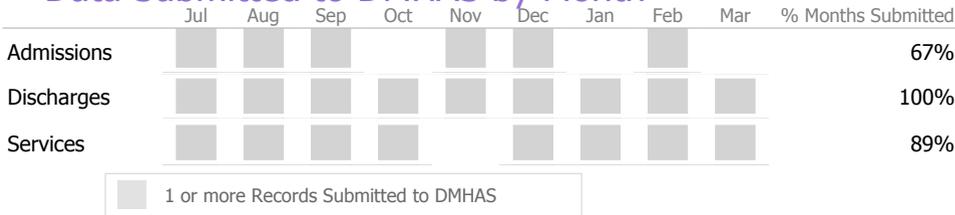
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ■ | ■ | ■ | | ■ | | | ■ | | 67% |
| Discharges | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |
| Services | ■ | ■ | ■ | ■ | | ■ | ■ | ■ | ■ | 89% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual   | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Adult OP2 - Whiting**
Community Mental Health Affiliates
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 68 | | |
| Admits | 68 | - | |
| Discharges | 5 | - | |
| Service Hours | 320 | - | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 96% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 95% | 62% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 88% | 77% |
| ✔ SA Screen Complete | | 87% | 74% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 85% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 2 | 40% | 50% | 42% | -10% ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 61 | 90% | 60% | 69% | 30% ▲ |
| ✔ | Stable Living Situation | | 66 | 97% | 95% | 86% | 2% |
| 🔴 | Employed | | 9 | 13% | 30% | 21% | -17% ▼ |
| ✔ | Improved/Maintained Axis V GAF Score | | 21 | 84% | 75% | 52% | 9% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 62 | 98% | 90% | 84% | 8% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | 2 or more Services within 30 days | | 37 | 54% | 75% | 65% | -21% ▼ |

## Data Submitted to DMHAS by Month
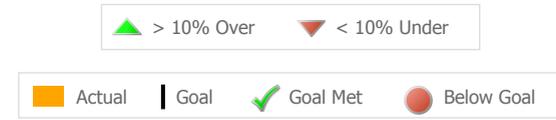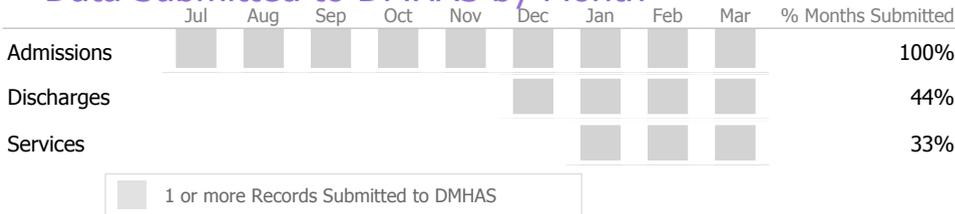
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | | | | | | ▢ | ▢ | ▢ | ▢ | 44% |
| Services | | | | | | | ▢ | ▢ | ▢ | 33% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Adult Outpatient 603-214**
Community Mental Health Affiliates
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 613 | 928 | -34% | ▼ |
| Admits | 75 | 100 | -25% | ▼ |
| Discharges | 161 | 353 | -54% | ▼ |
| Service Hours | 9,221 | 7,421 | 24% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 97% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 93% | 62% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 75% | 77% |
| ✔ SA Screen Complete | | 74% | 74% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 85% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 76 | 47% | 50% | 42% | -3% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 566 | 92% | 60% | 69% | 32% | ▲ |
| ✔ Stable Living Situation | | 585 | 95% | 95% | 86% | 0% | |
| 🔴 Employed | | 88 | 14% | 30% | 21% | -16% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 272 | 48% | 75% | 52% | -27% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 457 | 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 | | 67 | 91% | 75% | 65% | 16% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | 100% |
| Services | | | | | | | | | | 89% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Assertive Comm Tx Team 603292**
Community Mental Health Affiliates
Mental Health - ACT - Assertive Community Treatment

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 81 | 103 | -21% | ▼ |
| Admits | 11 | 15 | -27% | ▼ |
| Discharges | 15 | 34 | -56% | ▼ |
| Service Hours | 4,461 | 5,250 | -15% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 96% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 98% | 74% |

| Cooccurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 91% | 80% |
| ✔ SA Screen Complete | | 91% | 76% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 100% |
| ✔ Valid Axis V GAF Score | | 100% | 76% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 10 | 67% | 65% | 45% | 2% | |
| ✔ | No Re-admit within 30 Days of Discharge | | 13 | 100% | 85% | 94% | 15% | ▲ |
| ⬤ | Follow-up within 30 Days of Discharge | | 7 | 70% | 90% | 51% | -20% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 79 | 98% | 60% | 87% | 38% | ▲ |
| ✔ Social Support | | 78 | 96% | 60% | 74% | 36% | ▲ |
| ⬤ Employed | | 5 | 6% | 15% | 9% | -9% | |
| ⬤ Improved/Maintained Axis V GAF Score | | 46 | 63% | 85% | 47% | -22% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 66 | 100% | 90% | 98% | 10% |

## Data Submitted to DMHAS by Month
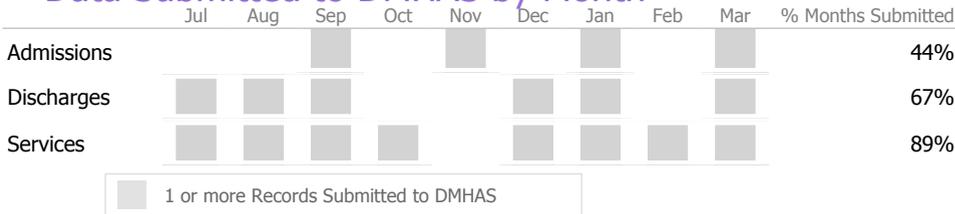
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▢ | | ▢ | | ▢ | | ▢ | 44% |
| Discharges | ▢ | ▢ | ▢ | | | ▢ | ▢ | | | 67% |
| Services | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | 89% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✔ Goal Met    ⬤ Below Goal

* State Avg based on 10 Active Assertive Community Treatment Programs

**BHH ADULT NAE**
Community Mental Health Affiliates
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## 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 | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 62% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 77% |
| SA Screen Complete | | N/A | 74% |

## 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% | 21% | -30% ▼ |
| Improved/Maintained Axis V GAF Score | | N/A | N/A | 75% | 52% | -75% ▼ |
| Social Support | | N/A | N/A | 60% | 69% | -60% ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 86% | -95% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Clients Receiving Services | | N/A | N/A | 90% | 84% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 93 Active Standard Outpatient Programs

**BHH CHILDREN Program**
Community Mental Health Affiliates
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

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

## 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% | 21% | -30% ▼ |
| 🔴 Social Support | | N/A | N/A | 60% | 69% | -60% ▼ |
| 🔴 Stable Living Situation | | N/A | N/A | 95% | 86% | -95% ▼ |

## Service Utilization

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

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 62% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 93 Active Standard Outpatient Programs

**Choices Comm Pgm-YAS 603373**
Community Mental Health Affiliates
Mental Health - ACT - Assertive Community Treatment

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 92 | 91 | 1% | |
| Admits | 15 | 38 | -61% | ▼ |
| Discharges | 27 | 35 | -23% | ▼ |
| Service Hours | 4,660 | 5,758 | -19% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 98% | 96% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 97% | 74% |

| Cooccurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 61% | 80% |
| SA Screen Complete | | 46% | 76% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 100% |
| ✓ Valid Axis V GAF Score | | 100% | 76% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 13 | 48% | 65% | 45% | -17% | ▼ |
| ✓ | No Re-admit within 30 Days of Discharge | | 24 | 89% | 85% | 94% | 4% | |
| 🔴 | Follow-up within 30 Days of Discharge | | 6 | 46% | 90% | 51% | -44% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 90 | 96% | 60% | 87% | 36% | ▲ |
| ✓ Social Support | | 89 | 95% | 60% | 74% | 35% | ▲ |
| ✓ Employed | | 14 | 15% | 15% | 9% | 0% | |
| 🔴 Improved/Maintained Axis V GAF Score | | 45 | 52% | 85% | 47% | -33% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 68 | 100% | 90% | 98% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 89% |
| Discharges | | | | | | | | | | 100% |
| Services | | | | | | | | | | 89% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 10 Active Assertive Community Treatment Programs

**Choices Res Pgm 1-YAS  603-241**
Community Mental Health Affiliates
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 16 | 19 | -16% | ▼ |
| Admits | 5 | 7 | -29% | ▼ |
| Discharges | 7 | 6 | 17% | ▲ |
| Bed Days | 3,096 | 3,270 | -5% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 4 | 57% | 60% | 65% | -3% | |
| 🔴 | Follow-up within 30 Days of Discharge | | 3 | 75% | 90% | 79% | -15% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 15 | 94% | 60% | 88% | 34% | ▲ |
| ✓ | Stable Living Situation | | 16 | 100% | 95% | 97% | 5% | |
| ✓ | Employed | | 4 | 25% | 25% | 8% | 0% | |
| 🔴 | Improved/Maintained Axis V GAF Score | | 9 | 60% | 95% | 70% | -35% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 93% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 88% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 89% | 81% |
| SA Screen Complete | | 67% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 100% |
| ✓ Valid Axis V GAF Score | | 100% | 94% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 12 | 585 days | 0.3 | 94% | 90% | 93% | 4% |

| | < 90% | | 90-110% | | >110% |
|---|---|---|---|---|---|
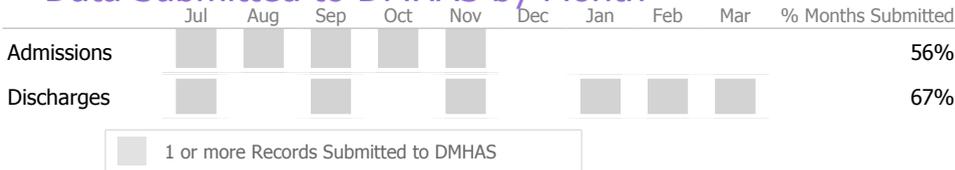
## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | | | | | 56% |
| Discharges | ▪ | | ▪ | | ▪ | ▪ | ▪ | ▪ | | 67% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| Actual | Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|

* State Avg based on 73 Active Supervised Apartments Programs

**CORP 2 - Post Release**
Community Mental Health Affiliates
Forensic MH - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 3 | 7 | -57% | ▼ |
| Admits | 2 | 4 | -50% | ▼ |
| Discharges | 1 | 5 | -80% | ▼ |
| Service Hours | 11 | 67 | -83% | ▼ |

## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| Valid NOMS Data | 80% | 91% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| ✔ 6 Month Updates | 100% | 57% |

| Cooccurring | Actual | State Avg |
|---|---|---|
| MH Screen Complete | 67% | 94% |
| SA Screen Complete | 67% | 93% |

| Diagnosis | Actual | State Avg |
|---|---|---|
| ✔ Valid Axis I Diagnosis | 100% | 98% |
| ✔ Valid Axis V GAF Score | 100% | 31% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 0 | 0% | 50% | 5% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Employed | | 0 | 0% | 20% | 4% | -20% | ▼ |
| 🔴 Social Support | | 1 | 33% | 60% | 48% | -27% | ▼ |
| 🔴 Stable Living Situation | | 1 | 33% | 80% | 68% | -47% | ▼ |
| 🔴 Self Help | | 0 | 0% | 60% | 94% | -60% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 2 | 100% | 90% | 100% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▪ | | | | | | ▪ | 22% |
| Discharges | | | | | ▪ | | | | | 11% |
| Services | | ▪ | ▪ | ▪ | | ▪ | ▪ | | | 56% |

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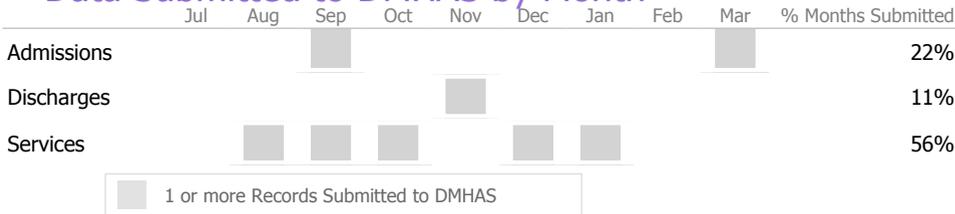
▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 4 Active Standard Case Management Programs

**Crisis Services/ Respite Bed Program**
Community Mental Health Affiliates
Mental Health - Crisis Services - Respite Bed

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 22 | 19 | 16% | ▲ |
| Admits | 19 | 13 | 46% | ▲ |
| Discharges | 18 | 14 | 29% | ▲ |
| Bed Days | 1,324 | 1,548 | -14% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | No Re-admit within 30 Days of Discharge | | 18 | 100% | 85% | 91% | 15% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 12 | 80% | 90% | 74% | -10% | |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 4 | 116 days | 0.1 | 120% | 90% | 86% | 30% | ▲ |

| | < 90% | | 90-110% | | >110% |
|---|---|---|---|---|---|

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 89% |
| Discharges | ▢ | ▢ | | | ▢ | ▢ | ▢ | ▢ | ▢ | 78% |

▢ 1 or more Records Submitted to DMHAS
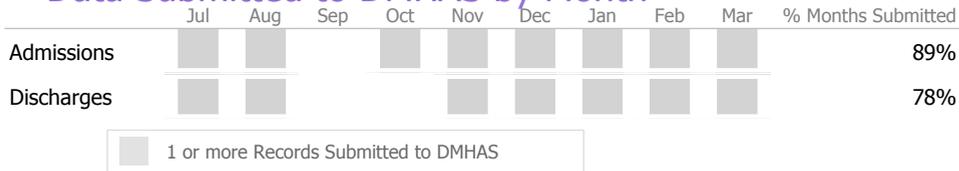
| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| Actual | | Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|---|

* State Avg based on 9 Active Respite Bed Programs

**CSP/Recovery Pathways 603290, New Britain**
Community Mental Health Affiliates
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 175 | 219 | -20% | ▼ |
| Admits | 38 | 21 | 81% | ▲ |
| Discharges | 53 | 66 | -20% | ▼ |
| Service Hours | 3,905 | 2,990 | 31% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 24 | 45% | 65% | 69% | -20% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 158 | 88% | 60% | 80% | 28% | ▲ |
| ✔ | Stable Living Situation | | 168 | 94% | 80% | 92% | 14% | ▲ |
| ● | Employed | | 16 | 9% | 20% | 11% | -11% | ▼ |
| ● | Improved/Maintained Axis V GAF Score | | 75 | 49% | 95% | 59% | -46% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 87% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 98% | 89% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 84% | 80% |
| ✔ SA Screen Complete | | 84% | 79% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 99% | 99% |
| ✔ Valid Axis V GAF Score | | 99% | 84% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 114 | 90% | 90% | 97% | 0% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | 89% |
| Services | | | | | | | | | | 89% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

| ▬ Actual | | Goal | ✔ Goal Met | ● Below Goal |
|---|---|---|---|---|

* State Avg based on 40 Active CSP Programs

**Ctr for Employment Dev 603-270**
Community Mental Health Affiliates
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 135 | 177 | -24% | ▼ |
| Admits | 51 | 77 | -34% | ▼ |
| Discharges | 60 | 90 | -33% | ▼ |
| Service Hours | 3,693 | 3,614 | 2% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Employed | | 58 | 42% | 35% | 40% | 7% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 79 | 100% | 90% | 96% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 73% | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 91% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | 100% |
| Services | | | | | | | | | | 89% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

🟧 Actual   | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 40 Active Employment Services Programs

**Harvest House 603251**
Community Mental Health Affiliates
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 10 | 8 | 25% | ▲ |
| Admits | 2 | 1 | 100% | ▲ |
| Discharges | 2 | 1 | 100% | ▲ |
| Bed Days | 2,090 | 1,856 | 13% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 89% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 87% |
| ✔ SA Screen Complete | | 100% | 87% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 95% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 2 | 100% | 80% | 72% | 20% | ▲ |
| 🔴 | No Re-admit within 30 Days of Discharge | | 0 | 0% | 85% | 81% | -85% | ▼ |
| 🔴 | Follow-up within 30 Days of Discharge | | 0 | 0% | 90% | 77% | -90% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 9 | 90% | 60% | 80% | 30% | ▲ |
| ✔ | Stable Living Situation | | 10 | 100% | 90% | 98% | 10% | |
| 🔴 | Improved/Maintained Axis V GAF Score | | 2 | 25% | 95% | 65% | -70% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 8 | 2,416 days | 0.3 | 95% | 90% | 98% | 5% |

| ☐ < 90% | ☐ 90-110% | 🟥 >110% |
|---|---|---|

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | ☐ | | | | ☐ | 22% |
| Discharges | ☐ | | | | | | | | ☐ | 22% |

☐ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ☐ Actual | | Goal | ✔ Goal Met | 🔴 Below Goal |
|---|---|---|---|---|

\* State Avg based on 24 Active Group Home Programs

**HOCC Polish SA Outpt.  680200**
Community Mental Health Affiliates
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 20 | 23 | -13% | ▼ |
| Admits | 15 | 17 | -12% | ▼ |
| Discharges | 11 | 15 | -27% | ▼ |
| Service Hours | 21 | 35 | -40% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 96% | 97% |
| ✔ Valid TEDS Data | | 98% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 57% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 0% | 96% |
| SA Screen Complete | | 84% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 100% |
| ✔ Valid Axis V GAF Score | | 100% | 95% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 5 | 45% | 50% | 54% | -5% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Not Arrested | | 16 | 80% | 75% | 90% | 5% | |
| ✔ Stable Living Situation | | 20 | 100% | 95% | 89% | 5% | |
| ✔ Abstinence/Reduced Drug Use | | 12 | 60% | 55% | 58% | 5% | |
| ✔ Employed | | 10 | 50% | 50% | 42% | 0% | |
| 🔴 Improved/Maintained Axis V GAF Score | | 9 | 60% | 75% | 67% | -15% | ▼ |
| 🔴 Self Help | | 0 | 0% | 60% | 22% | -60% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 6 | 67% | 90% | 82% | -23% | ▼ |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 3 | 20% | 75% | 78% | -55% | ▼ |

## Data Submitted to DMHAS by Month
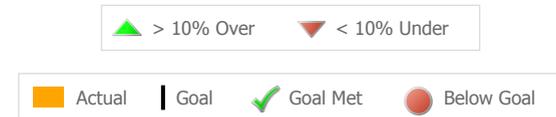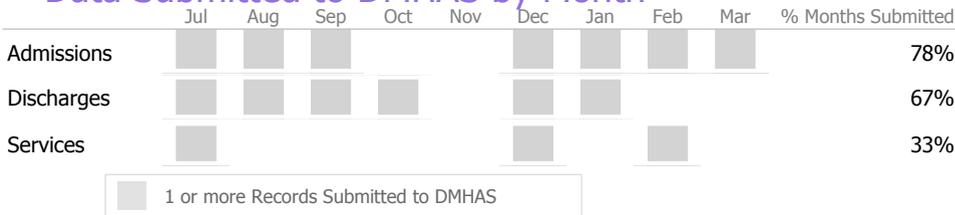
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 78% |
| Discharges | | | | | | | | | | 67% |
| Services | | | | | | | | | | 33% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual   | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 115 Active Standard Outpatient Programs

**Intensive ACTT Res Sup 603-265**
Community Mental Health Affiliates
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 18 | 13 | 38% | ▲ |
| Admits | 6 | 5 | 20% | ▲ |
| Discharges | 6 | 1 | 500% | ▲ |
| Bed Days | 3,138 | 3,055 | 3% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 96% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 88% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 90% | 81% |
| ✓ SA Screen Complete | | 90% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 100% |
| ✓ Valid Axis V GAF Score | | 94% | 94% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 5 | 83% | 60% | 65% | 23% | ▲ |
| 🔴 Follow-up within 30 Days of Discharge | | 4 | 80% | 90% | 79% | -10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 16 | 89% | 60% | 88% | 29% | ▲ |
| 🔴 Stable Living Situation | | 17 | 94% | 95% | 97% | -1% | |
| 🔴 Employed | | 4 | 22% | 25% | 8% | -3% | |
| 🔴 Improved/Maintained Axis V GAF Score | | 9 | 64% | 95% | 70% | -31% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 13 | 807 days | 0.3 | 88% | 90% | 93% | -2% | |

| □ < 90% | ▨ 90-110% | ▮ >110% |
|---|---|---|

## Data Submitted to DMHAS by Month
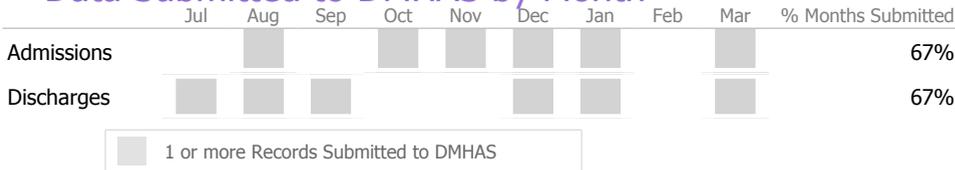
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▨ | | ▨ | ▨ | ▨ | ▨ | | ▨ | 67% |
| Discharges | ▨ | ▨ | ▨ | | | ▨ | ▨ | | ▨ | 67% |

▨ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

| ▬ Actual | │ Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|

* State Avg based on 73 Active Supervised Apartments Programs

**Intensive Outpatient/Standard Intensive Outpatient**
Community Mental Health Affiliates
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 198 | 120 | 65% | ▲ |
| Admits | 183 | 117 | 56% | ▲ |
| Discharges | 162 | 113 | 43% | ▲ |
| Service Hours | 1,189 | 518 | 130% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 62% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 77% |
| ✓ SA Screen Complete | | 99% | 74% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 85% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 82 | 51% | 50% | 42% | 1% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 183 | 88% | 60% | 69% | 28% | ▲ |
| ✓ Improved/Maintained Axis V GAF Score | | 137 | 85% | 75% | 52% | 10% | |
| 🔴 Stable Living Situation | | 172 | 83% | 95% | 86% | -12% | ▼ |
| 🔴 Employed | | 15 | 7% | 30% | 21% | -23% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 45 | 98% | 90% | 84% | 8% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 172 | 97% | 75% | 65% | 22% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | 89% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

Legend: ▬ Actual  | Goal  ✓ Goal Met  🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Jail Diversion     603-341**
Community Mental Health Affiliates
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 329 | 318 | 3% | |
| Admits | 184 | 205 | -10% | |
| Discharges | 252 | 174 | 45% | ▲ |
| Service Hours | 1,983 | 2,191 | -10% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 88 | 96% | 90% | 45% | 6% |

## Jail Diversion

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Follow-up Service within 48 hours | | 73 | 22% | 0% | 19% | 22% ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | 100% |
| Services | | | | | | | | | | 89% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

Actual  | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 18 Active Court Liaison-Jail Diversion Programs

**Jail Diversion-Women 603342**
Community Mental Health Affiliates
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 119 | 148 | -20% | ▼ |
| Admits | 71 | 72 | -1% | |
| Discharges | 63 | 89 | -29% | ▼ |
| Service Hours | 2,786 | 2,642 | 5% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 67 | 100% | 90% | 45% | 10% |

## Jail Diversion

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Follow-up Service within 48 hours | | 25 | 43% | 0% | 19% | 43% ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Discharges | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Services | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | 89% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

| Actual | | Goal | ✓ Goal Met | ● Below Goal |

\* State Avg based on 18 Active Court Liaison-Jail Diversion Programs

**JD Forensic Counseling Svs**
Community Mental Health Affiliates
Forensic MH - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 193 | 232 | -17% ▼ |
| Admits | 91 | 96 | -5% |
| Discharges | 125 | 116 | 8% |
| Service Hours | 2,464 | 2,261 | 9% |

## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| Valid NOMS Data | 88% | 89% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| ✔ 6 Month Updates | 94% | 89% |

| Cooccurring | Actual | State Avg |
|---|---|---|
| MH Screen Complete | 97% | 98% |
| SA Screen Complete | 96% | 97% |

| Diagnosis | Actual | State Avg |
|---|---|---|
| ✔ Valid Axis I Diagnosis | 100% | 100% |
| ✔ Valid Axis V GAF Score | 100% | 80% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 54 | 43% | 50% | 40% | -7% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Social Support | | 124 | 60% | 60% | 61% | 0% |
| 🔴 Employed | | 47 | 23% | 30% | 18% | -7% |
| ✔ Improved/Maintained Axis V GAF Score | | 129 | 75% | 75% | 62% | 0% |
| 🔴 Stable Living Situation | | 163 | 79% | 95% | 80% | -16% ▼ |
| 🔴 Self Help | | 4 | 2% | 60% | 27% | -58% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 79 | 98% | 90% | 98% | 8% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 83 | 93% | 75% | 92% | 18% ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | 100% |
| Services | | | | | | | | | | 89% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 2 Active Standard Outpatient Programs

**Latino SA Outpatient 680201**
Community Mental Health Affiliates
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 86 | 84 | 2% | |
| Admits | 79 | 22 | 259% | ▲ |
| Discharges | 84 | 21 | 300% | ▲ |
| Service Hours | 2,127 | 1,718 | 24% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 100% | 97% |
| ✔ | Valid TEDS Data | 98% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ | 6 Month Updates | 100% | 57% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ | MH Screen Complete | 99% | 96% |
| ✔ | SA Screen Complete | 99% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid Axis I Diagnosis | 100% | 100% |
| ✔ | Valid Axis V GAF Score | 100% | 95% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 64 | 76% | 50% | 54% | 26% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Abstinence/Reduced Drug Use | | 117 | 81% | 55% | 58% | 26% | ▲ |
| ✔ | Not Arrested | | 142 | 99% | 75% | 90% | 24% | ▲ |
| ✔ | Improved/Maintained Axis V GAF Score | | 114 | 85% | 75% | 67% | 10% | |
| ● | Stable Living Situation | | 132 | 92% | 95% | 89% | -3% | |
| ● | Employed | | 11 | 8% | 50% | 42% | -42% | ▼ |
| ● | Self Help | | 0 | 0% | 60% | 22% | -60% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 60 | 100% | 90% | 82% | 10% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | 2 or more Services within 30 days | | 62 | 82% | 75% | 78% | 7% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | 89% |
| Services | | | | | | | | | | 89% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 115 Active Standard Outpatient Programs

**MACTT-Modified Assertive Community Treatment Team**
Community Mental Health Affiliates
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 63 | 37 | 70% | ▲ |
| Admits | 23 | 37 | -38% | ▼ |
| Discharges | 30 | 1 | 2900% | ▲ |
| Service Hours | 1,436 | 270 | | |

## Service Engagement
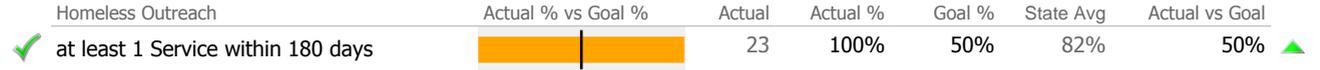
| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ at least 1 Service within 180 days | | 23 | 100% | 50% | 82% | 50% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | 100% |
| Discharges | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | 100% |
| Services | ☐ | ☐ | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ | 89% |

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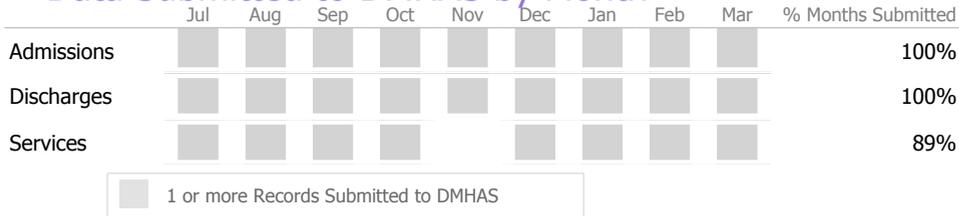
▲ > 10% Over     ▼ < 10% Under

🟧 Actual     | Goal     ✔ Goal Met     🔴 Below Goal

* State Avg based on 38 Active Outreach & Engagement Programs

**Next Steps 603551**
Community Mental Health Affiliates
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 28 | 24 | 17% | ▲ |
| Admits | 9 | - | | |
| Discharges | 1 | 3 | -67% | ▼ |
| Service Hours | 786 | 773 | 2% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 27 | 96% | 85% | 80% | 11% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 25 | 93% | 90% | 94% | 3% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 94% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 81% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | ▢ | ▢ | | ▢ | ▢ | 44% |
| Discharges | | ▢ | | | | | | | | 11% |
| Services | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | 89% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 71 Active Supportive Housing – Scattered Site Programs

**Parkview Res Intensive 03241X**
Community Mental Health Affiliates
Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)
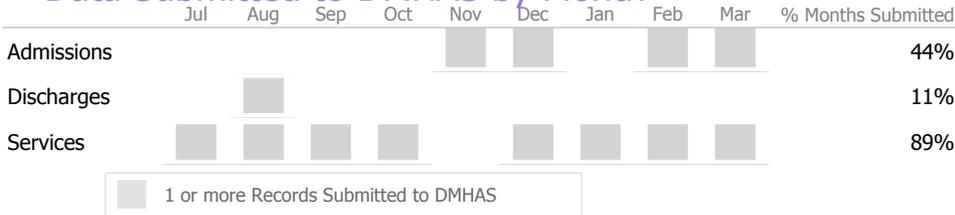
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 18 | 21 | -14% | ▼ |
| Admits | 5 | 5 | 0% | |
| Discharges | 4 | 7 | -43% | ▼ |
| Bed Days | 4,199 | 4,010 | 5% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 2 | 50% | 75% | 53% | -25% | ▼ |
| 🔴 | No Re-admit within 30 Days of Discharge | | 2 | 67% | 85% | 76% | -18% | ▼ |
| ✔ | Follow-up within 30 Days of Discharge | | 2 | 100% | 90% | 93% | 10% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 76% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 90% |
| ✔ SA Screen Complete | | 100% | 89% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 69% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Improved/Maintained Axis V GAF Score | | 9 | 53% | 75% | 45% | -22% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 17 | 808 days | 0.3 | 90% | 90% | 89% | 0% |
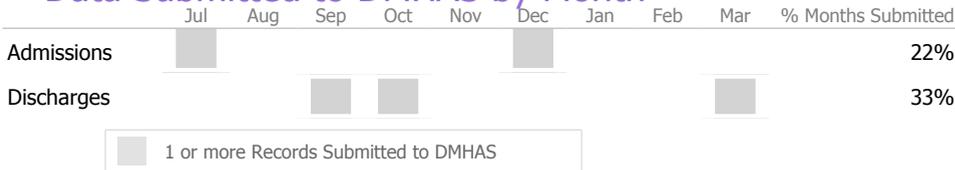
Legend: ▢ < 90%   ▢ 90-110%   🟥 >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | | | | | ▢ | | | | 22% |
| Discharges | | | ▢ | ▢ | | | | ▢ | | 33% |

▢ 1 or more Records Submitted to DMHAS

Legend:
▲ > 10% Over    ▼ < 10% Under

🟧 Actual   | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 8 Active MH Intensive Res. Rehabilitation Programs

**Pleasant House**
Community Mental Health Affiliates
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 9 | -44% | ▼ |
| Admits | 1 | 3 | -67% | ▼ |
| Discharges | - | 3 | -100% | ▼ |
| Bed Days | 1,369 | 1,490 | -8% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 80% | 88% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 82% | 81% |
| ✔ SA Screen Complete | | 82% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 100% |
| ✔ Valid Axis V GAF Score | | 100% | 94% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 65% | N/A |

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 79% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 4 | 80% | 60% | 88% | 20% | ▲ |
| ✔ Stable Living Situation | | 5 | 100% | 95% | 97% | 5% | |
| ● Improved/Maintained Axis V GAF Score | | 4 | 80% | 95% | 70% | -15% | ▼ |
| ● Employed | | 0 | 0% | 25% | 8% | -25% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 6 | 736 days | 0.4 | 83% | 90% | 93% | -7% |

☐ < 90%   ☐ 90-110%   ☐ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | | | | | | | | | 11% |
| Discharges | | | | | | | | | | 0% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

☐ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 73 Active Supervised Apartments Programs

**State Hospital D/C Behavioral Health OP**
Community Mental Health Affiliates
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 2 | 2 | 0% |
| Admits | - | - | |
| Discharges | 1 | - | |
| Service Hours | 1 | 42 | -98% ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 62% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 0% | 77% |
| SA Screen Complete | | 0% | 74% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 85% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 1 | 100% | 50% | 42% | 50% ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 2 | 100% | 60% | 69% | 40% ▲ |
| ✓ | Stable Living Situation | | 2 | 100% | 95% | 86% | 5% |
| ● | Improved/Maintained Axis V GAF Score | | 1 | 50% | 75% | 52% | -25% ▼ |
| ● | Employed | | 0 | 0% | 30% | 21% | -30% ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 1 | 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 | | 0 | 0% | 75% | 65% | -75% ▼ |

## Data Submitted to DMHAS by Month
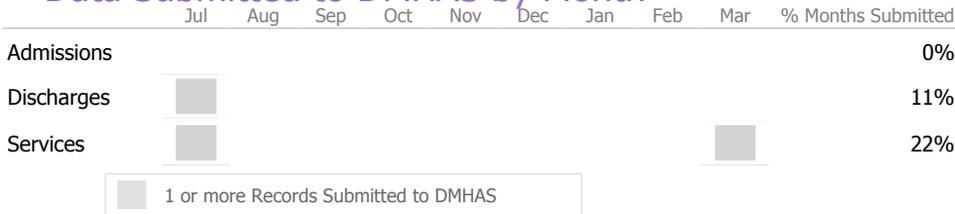
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | ▢ | | | | | | | | | 11% |
| Services | ▢ | | | | | | | ▢ | | 22% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| ▬ Actual | ▏ Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on 93 Active Standard Outpatient Programs

**Supportive Housing 603293**
Community Mental Health Affiliates
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---------|--------|----------|------------|
| Unique Clients | 70 | 70 | 0% |
| Admits | - | 1 | -100% ▼ |
| Discharges | 2 | 2 | 0% |
| Service Hours | 2,093 | 1,918 | 9% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 69 | 99% | 85% | 80% | 14% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 68 | 100% | 90% | 94% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 89% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 81% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | ▢ | | | ▢ | | | | | | 22% |
| Services | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | 89% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

◼ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 71 Active Supportive Housing – Scattered Site Programs

**Team Time Club House 603-281**
Community Mental Health Affiliates
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)
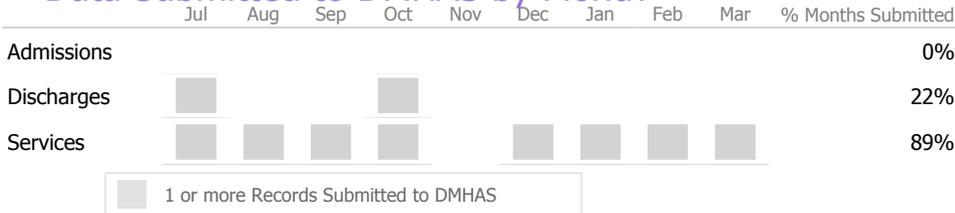
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 226 | 194 | 16% | ▲ |
| Admits | 64 | 31 | 106% | ▲ |
| Discharges | 67 | 30 | 123% | ▲ |
| Service Hours | 7,400 | 5,264 | 41% | ▲ |
| Social Rehab/PHP/IOP Days | 5,686 | 5,015 | 13% | ▲ |

## Service Utilization
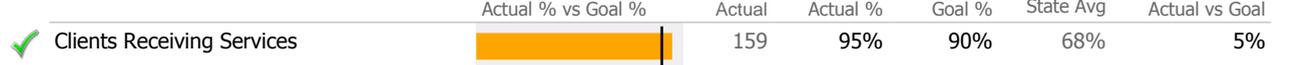
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 159 | 95% | 90% | 68% | 5% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | | ▢ | 78% |
| Services | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | 89% |

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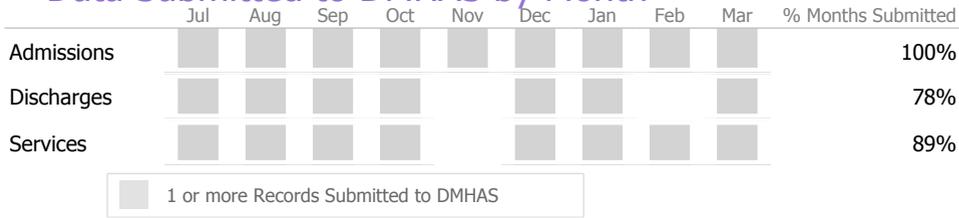
▲ > 10% Over  ▼ < 10% Under

■ Actual  | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 39 Active Social Rehabilitation Programs

**Transitional Living Ct 603-240**
Community Mental Health Affiliates
Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 32 | 27 | 19% | ▲ |
| Admits | 15 | 11 | 36% | ▲ |
| Discharges | 17 | 10 | 70% | ▲ |
| Bed Days | 4,495 | 4,511 | 0% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 8 | 47% | 75% | 53% | -28% | ▼ |
| 🔴 | No Re-admit within 30 Days of Discharge | | 14 | 82% | 85% | 76% | -3% | |
| ✔ | Follow-up within 30 Days of Discharge | | 8 | 100% | 90% | 93% | 10% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 98% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 76% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 90% |
| ✔ SA Screen Complete | | 99% | 89% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 69% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Improved/Maintained Axis V GAF Score | | 14 | 50% | 75% | 45% | -25% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ✔ | Avg Utilization Rate | | 17 | 787 days | 0.3 | 96% | 90% | 89% | 6% |

| ▢ < 90% | ▢ 90-110% | ▢ >110% |
|---|---|---|

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | | ▢ | ▢ | ▢ | | ▢ | ▢ | 78% |

▢ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▮ Actual | ▏ Goal | ✔ Goal Met | 🔴 Below Goal |
|---|---|---|---|

\* State Avg based on 8 Active MH Intensive Res. Rehabilitation Programs

**Wheeler Comm Response Tm662200**
Community Mental Health Affiliates
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 313 | 138 | 127% | ▲ |
| Admits | 296 | 131 | 126% | ▲ |
| Discharges | 310 | 119 | 161% | ▲ |

## Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Evaluation within 1.5 hours of Request | | 256 | 88% | 75% | 64% | 13% | ▲ |
| ✔ Community Location Evaluation | | 234 | 81% | 80% | 59% | 1% | |
| ✔ Follow-up Service within 48 hours | | 127 | 91% | 90% | 51% | 1% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | 100% |

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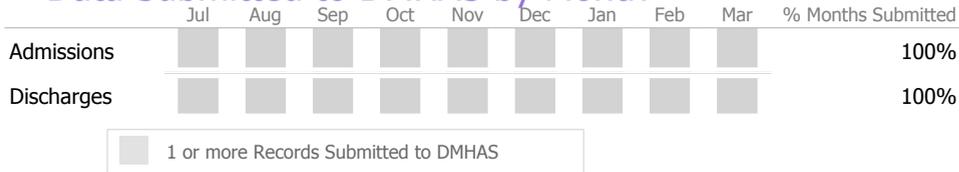
▲ > 10% Over     ▼ < 10% Under

Actual │ Goal  ✔ Goal Met  ● Below Goal

* State Avg based on 25 Active Mobile Crisis Team Programs