# Community Mental Health Affiliates
New Britain, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2017 - September 2017   (Data as of Dec 13, 2017)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 1,641 | 1,574 | 4% | |
| | Admits | 483 | 650 | -26% | ▼ |
| | Discharges | 468 | 569 | -18% | ▼ |
| | Service Hours | 22,527 | 16,658 | 35% | ▲ |
| | Bed Days | 6,272 | 6,615 | -5% | |
| | S.Rehab/PHP/IOP | 1,765 | 1,388 | 27% | ▲ |

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

## Consumer Satisfaction Survey   (Based on 703 FY17 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Participation in Treatment | | 92% | 80% | 92% |
| ✓ | Quality and Appropriateness | | 91% | 80% | 93% |
| ✓ | General Satisfaction | | 91% | 80% | 92% |
| ✓ | Respect | | 91% | 80% | 91% |
| ✓ | Overall | | 91% | 80% | 91% |
| ✓ | Access | | 89% | 80% | 88% |
| ● | Outcome | | 79% | 80% | 83% |
| ● | Recovery | | 74% | 80% | 79% |

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

## Clients by Level of Care

| Program Type / Level of Care Type | # | % |
|---|---|---|
| **Mental Health** | | |
| Outpatient | 781 | 35.9% |
| Crisis Services | 176 | 8.1% |
| Case Management | 166 | 7.6% |
| Social Rehabilitation | 165 | 7.6% |
| Community Support | 155 | 7.1% |
| ACT | 136 | 6.3% |
| Employment Services | 106 | 4.9% |
| Residential Services | 73 | 3.4% |
| **Forensic MH** | | |
| Forensics Community-based | 196 | 9.0% |
| Outpatient | 168 | 7.7% |
| **Addiction** | | |
| Outpatient | 53 | 2.4% |

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 206 | 13% | 11% |
| 26-34 | 303 | 19% | 22% |
| 35-44 | 308 | 19% | 19% |
| 45-54 | 384 | 24% | 22% |
| 55-64 | 326 | 20% | 19% |
| 65+ | 80 | 5% | 6% |

### Gender

| | # | % | State Avg |
|---|---|---|---|
| Male | 853 | 52% | 58% |
| Female | 787 | 48% | 41% |
| Transgender | | | 0% |

### Ethnicity

| | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 877 | 53% | ▼ | 74% |
| Hisp-Puerto Rican | 472 | 29% | ▲ | 13% |
| Unknown | 232 | 14% | | 6% |
| Hispanic-Other | 57 | 3% | | 7% |
| Hispanic-Mexican | 2 | 0% | | 1% |
| Hispanic-Cuban | 1 | 0% | | 0% |

### Race

| | # | % | State Avg |
|---|---|---|---|
| White/Caucasian | 971 | 59% | 65% |
| Other | 383 | 23% | 13% |
| Black/African American | 197 | 12% | 16% |
| Unknown | 72 | 4% | 3% |
| Asian | 10 | 1% | 1% |
| Hawaiian/Other Pacific Islander | 5 | 0% | 0% |
| Am. Indian/Native Alaskan | 3 | 0% | 1% |
| Multiple Races | | | 1% |

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

**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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 734 | 477 | 54% | ▲ |
| Admits | 104 | 94 | 11% | ▲ |
| Discharges | 86 | 64 | 34% | ▲ |
| Service Hours | 5,437 | 2,942 | 85% | ▲ |

## Data Submission Quality

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

| On-Time Periodic | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 96% | 70% |

| Cooccurring | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 84% |
| ✓ SA Screen Complete | | 99% | 81% |

| Diagnosis | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 96% |
| ✓ Valid Axis V GAF Score | | 100% | 88% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 28 | 33% | 50% | 40% | -17% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 673 | 91% | 60% | 67% | 31% | ▲ |
| 🔴 Stable Living Situation | | 698 | 94% | 95% | 83% | -1% | |
| 🔴 Employed | | 97 | 13% | 30% | 21% | -17% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 312 | 63% | 75% | 43% | -12% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 626 | 96% | 90% | 78% | 6% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 94 | 91% | 75% | 67% | 16% | ▲ |

▲ > 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 62 | 66 | -6% | |
| Admits | 7 | 2 | 250% | ▲ |
| Discharges | 2 | 6 | -67% | ▼ |
| Service Hours | 2,009 | 1,272 | 58% | ▲ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 83% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 94% |
| ✔ SA Screen Complete | | 96% | 94% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 98% |
| ✔ Valid Axis V GAF Score | | 100% | 86% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 67% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 2 | 100% | 65% | 49% | 35% | ▲ |
| ✔ No Re-admit within 30 Days of Discharge | | 2 | 100% | 85% | 94% | 15% | ▲ |
| ● Follow-up within 30 Days of Discharge | | 1 | 50% | 90% | 55% | -40% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 60 | 97% | 60% | 88% | 37% | ▲ |
| ✔ Social Support | | 59 | 95% | 60% | 78% | 35% | ▲ |
| ● Employed | | 4 | 6% | 15% | 12% | -9% | |
| ● Improved/Maintained Axis V GAF Score | | 29 | 57% | 85% | 43% | -28% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 60 | 100% | 90% | 99% | 10% |

Legend:
▲ > 10% Over   ▼ < 10% Under

■ Actual   | Goal   ✔ Goal Met   ● Below Goal

\* State Avg based on 15 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 29 | 14 | 107% | ▲ |
| Admits | 10 | 14 | -29% | ▼ |
| Discharges | 23 | - | | |
| Service Hours | 42 | 13 | | |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 70% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 84% |
| ✔ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 96% |
| ✔ Valid Axis V GAF Score | | 100% | 88% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 17 | 74% | 50% | 40% | 24% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 21 | 72% | 60% | 67% | 12% | ▲ |
| ✔ Improved/Maintained Axis V GAF Score | | 20 | 83% | 75% | 43% | 8% | |
| ● Stable Living Situation | | 25 | 86% | 95% | 83% | -9% | |
| ● Employed | | 3 | 10% | 30% | 21% | -20% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 4 | 67% | 90% | 78% | -23% | ▼ |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | 7 | 70% | 75% | 67% | -5% |

▲ > 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 2017 - September 2017   (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 32 | 26 | 23% | ▲ |
| Admits | 1 | 6 | -83% | ▼ |
| Discharges | 4 | - | | |
| Service Hours | 127 | 8 | | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 3 | 75% | 50% | 40% | 25% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 32 | 100% | 60% | 67% | 40% | ▲ |
| ✔ | Stable Living Situation | | 32 | 100% | 95% | 83% | 5% | |
| ● | Employed | | 1 | 3% | 30% | 21% | -27% | ▼ |

## Data Submission Quality

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

| | On-Time Periodic | | Actual | State Avg |
|---|---|---|---|---|
| ✔ | 6 Month Updates | | 100% | 70% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 27 | 96% | 90% | 78% | 6% | |

## Service Engagement

| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | 2 or more Services within 30 days | | 1 | 100% | 75% | 67% | 25% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | ▪ | | 33% |
| Discharges | ▪ | ▪ | ▪ | 100% |
| Services | ▪ | ▪ | ▪ | 100% |

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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 74 | 73 | 1% | |
| Admits | 6 | 8 | -25% | ▼ |
| Discharges | 1 | 6 | -83% | ▼ |
| Service Hours | 3,058 | 1,695 | 80% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 98% | 83% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 88% | 94% |
| SA Screen Complete | | 88% | 94% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 98% |
| ✔ Valid Axis V GAF Score | | 100% | 86% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | 100% |
| Discharges | | ▪ | | 33% |
| Services | ▪ | ▪ | ▪ | 100% |

▫ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 1 | 100% | 65% | 49% | 35% | ▲ |
| ✔ | No Re-admit within 30 Days of Discharge | | 1 | 100% | 85% | 94% | 15% | ▲ |
| ✔ | Follow-up within 30 Days of Discharge | | 1 | 100% | 90% | 55% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Stable Living Situation | | 72 | 97% | 60% | 88% | 37% | ▲ |
| ✔ | Social Support | | 68 | 92% | 60% | 78% | 32% | ▲ |
| ● | Employed | | 7 | 9% | 15% | 12% | -6% | |
| ● | Improved/Maintained Axis V GAF Score | | 31 | 52% | 85% | 43% | -33% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 73 | 100% | 90% | 99% | 10% | |

▲ > 10% Over    ▼ < 10% Under

▭ Actual  | Goal  ✔ Goal Met  ● Below Goal

* State Avg based on 15 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 12 | 12 | 0% | ▼ |
| Admits | 2 | 1 | 100% | ▲ |
| Discharges | 1 | 2 | -50% | ▼ |
| Bed Days | 985 | 1,055 | -7% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 98% | 99% |

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 85% |
| ✓ SA Screen Complete | | 100% | 83% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 96% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 33% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 0 | 0% | 60% | 77% | -60% | ▼ |

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 80% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 8 | 67% | 60% | 85% | 7% | |
| ● Stable Living Situation | | 11 | 92% | 95% | 98% | -3% | |
| ● Employed | | 1 | 8% | 25% | 6% | -17% | ▼ |
| ● Improved/Maintained Axis V GAF Score | | 3 | 33% | 95% | 66% | -62% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 12 | 553 days | 1.0 | 89% | 90% | 95% | -1% |

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

▲ > 10% Over    ▼ < 10% Under

| | | | |
|---|---|---|---|
| ▢ Actual | ❘ Goal | ✓ Goal Met | ● Below Goal |

* State Avg based on 70 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 0 | 1 | ▼ |
| Admits | - | - | |
| Discharges | - | 1 | -100% ▼ |
| Service Hours | - | - | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 6% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Employed | | N/A | N/A | 20% | 11% | -20% ▼ |
| ● Self Help | | N/A | N/A | 60% | 95% | -60% ▼ |
| ● Social Support | | N/A | N/A | 60% | 54% | -60% ▼ |
| ● Stable Living Situation | | N/A | N/A | 80% | 71% | -80% ▼ |

## 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 | 84% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 100% |
| SA Screen Complete | | N/A | 94% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | N/A | N/A | 90% | 100% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 8 | 0% | |
| Admits | 6 | 5 | 20% | ▲ |
| Discharges | 5 | 5 | 0% | |
| Bed Days | 261 | 255 | 2% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | No Re-admit within 30 Days of Discharge | | 5 | 100% | 85% | 89% | 15% | ▲ |

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Follow-up within 30 Days of Discharge | | 5 | 100% | 90% | 82% | 10% | |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 4 | 61 days | 0.5 | 71% | 90% | 73% | -19% | ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 10 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 155 | 154 | 1% | |
| Admits | 20 | 19 | 5% | |
| Discharges | 15 | 20 | -25% | ▼ |
| Service Hours | 2,061 | 1,555 | 33% | ▲ |

## Data Submission Quality

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

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 96% | 92% |

| Cooccurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 84% |
| ✔ SA Screen Complete | | 96% | 83% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 98% |
| ✔ Valid Axis V GAF Score | | 100% | 95% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 10 | 67% | 65% | 65% | 2% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 132 | 85% | 60% | 82% | 25% | ▲ |
| ✔ Stable Living Situation | | 144 | 93% | 80% | 93% | 13% | ▲ |
| ● Employed | | 15 | 10% | 20% | 12% | -10% | ▼ |
| ● Improved/Maintained Axis V GAF Score | | 70 | 59% | 65% | 58% | -6% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 139 | 99% | 90% | 98% | 9% |

▲ > 10% Over    ▼ < 10% Under

Actual | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 48 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 106 | 95 | 12% | ▲ |
| Admits | 4 | 18 | -78% | ▼ |
| Discharges | 32 | 23 | 39% | ▲ |
| Service Hours | 709 | 1,055 | -33% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Employed | | 35 | 33% | 35% | 44% | -2% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 72 | 97% | 90% | 94% | 7% |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 98% | 95% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

Actual  |  Goal  ✔ Goal Met  🔴 Below Goal

* State Avg based on 41 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 9 | 7 | 29% | ▲ |
| Admits | 1 | 1 | 0% | |
| Discharges | 1 | - | | |
| Bed Days | 687 | 644 | 7% | |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 82% |

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

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| Discharges | | | | 33% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 1 | 100% | 80% | 90% | 20% | ▲ |
| ✓ No Re-admit within 30 Days of Discharge | | 1 | 100% | 85% | 100% | 15% | ▲ |
| ✓ Follow-up within 30 Days of Discharge | | 1 | 100% | 90% | 84% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 8 | 89% | 60% | 85% | 29% | ▲ |
| ✓ Stable Living Situation | | 9 | 100% | 90% | 99% | 10% | |
| 🔴 Improved/Maintained Axis V GAF Score | | 1 | 12% | 95% | 62% | -83% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 8 | 2,591 days | 0.9 | 93% | 90% | 96% | 3% |

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

▲ > 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 5 | 5 | 0% |
| Admits | - | 5 | -100% ▼ |
| Discharges | 1 | - | |
| Service Hours | 20 | 21 | -1% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 95% |
| ✔ Valid TEDS Data | | 100% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 34% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 99% |
| SA Screen Complete | | N/A | 99% |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | ▢ | | | 33% |
| Services | ▢ | | ▢ | 67% |

☐ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 0 | 0% | 50% | 55% | -50% ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Abstinence/Reduced Drug Use | | 4 | 80% | 55% | 52% | 25% ▲ |
| ✔ Not Arrested | | 5 | 100% | 75% | 82% | 25% ▲ |
| ✔ Employed | | 3 | 60% | 50% | 39% | 10% |
| ✔ Stable Living Situation | | 5 | 100% | 95% | 82% | 5% |
| 🔴 Improved/Maintained Axis V GAF Score | | 1 | 20% | 75% | 49% | -55% ▼ |
| 🔴 Self Help | | 0 | 0% | 60% | 33% | -60% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 4 | 100% | 90% | 60% | 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% | 74% | -75% ▼ |

▲ > 10% Over    ▼ < 10% Under

☐ Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 113 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 12 | 14 | -14% | ▼ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | 2 | 4 | -50% | ▼ |
| Bed Days | 1,078 | 1,094 | -1% | |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 85% |
| ✔ SA Screen Complete | | 100% | 83% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 96% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 33% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 2 | 100% | 60% | 77% | 40% | ▲ |
| ✔ Follow-up within 30 Days of Discharge | | 2 | 100% | 90% | 80% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 11 | 92% | 60% | 85% | 32% | ▲ |
| ✔ Stable Living Situation | | 12 | 100% | 95% | 98% | 5% | |
| 🔴 Employed | | 1 | 8% | 25% | 6% | -17% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 8 | 80% | 95% | 66% | -15% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 12 | 611 days | 1.0 | 98% | 90% | 95% | 8% |

■ < 90%   ■ 90-110%   ■ >110%

▲ > 10% Over   ▼ < 10% Under

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

* State Avg based on 70 Active Supervised Apartments 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 147 | 156 | -6% | |
| Admits | 49 | 55 | -11% | ▼ |
| Discharges | 48 | 66 | -27% | ▼ |
| Service Hours | 580 | 655 | -11% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | ▭ | 89 | 88% | 90% | 43% | -2% |

## Jail Diversion

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Follow-up Service within 48 hours | ▭ | 10 | 1% | 0% | 2% | 1% |

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

| ▭ Actual | ❘ Goal | ✔ Goal Met | 🔴 Below Goal |
|---|---|---|---|

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▨ | ▨ | ▨ | 100% |
| Discharges | ▨ | ▨ | ▨ | 100% |
| Services | ▨ | ▨ | ▨ | 100% |

| ▨ 1 or more Records Submitted to DMHAS |
|---|

**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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 63 | 61 | 3% | |
| Admits | 20 | 19 | 5% | |
| Discharges | 11 | 25 | -56% | ▼ |
| Service Hours | 488 | 609 | -20% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 43 | 83% | 90% | 43% | -7% |

## Jail Diversion

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Follow-up Service within 48 hours | | 6 | 3% | 0% | 2% | 3% |

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

| 🟧 Actual | ▌Goal | ✔ Goal Met | 🔴 Below Goal |
|---|---|---|---|

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

**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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 168 | 133 | 26% | ▲ |
| Admits | 30 | 39 | -23% | ▼ |
| Discharges | 15 | 43 | -65% | ▼ |
| Service Hours | 1,477 | 971 | 52% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 92% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 75% | 81% |

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

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 99% | 99% |
| ✔ Valid Axis V GAF Score | | 98% | 93% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 5 | 33% | 50% | 26% | -17% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 148 | 88% | 60% | 83% | 28% | ▲ |
| ● | Stable Living Situation | | 149 | 89% | 95% | 87% | -6% | |
| ● | Employed | | 31 | 18% | 30% | 16% | -12% | ▼ |
| ● | Improved/Maintained Axis V GAF Score | | 68 | 65% | 75% | 50% | -10% | |
| ● | Self Help | | 14 | 8% | 60% | 27% | -52% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 144 | 94% | 90% | 95% | 4% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | 2 or more Services within 30 days | | 29 | 97% | 75% | 97% | 22% | ▲ |

▲ > 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 48 | 84 | -43% | ▼ |
| Admits | 6 | 43 | -86% | ▼ |
| Discharges | 5 | 8 | -38% | ▼ |
| Service Hours | 441 | 910 | -52% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 93% | 95% |
| ✓ Valid TEDS Data | | 99% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 34% |

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

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | | 67% |
| Discharges | ▢ | ▢ | | 67% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 3 | 60% | 50% | 55% | 10% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Abstinence/Reduced Drug Use | | 35 | 71% | 55% | 52% | 16% | ▲ |
| ✓ Not Arrested | | 43 | 88% | 75% | 82% | 13% | ▲ |
| ● Stable Living Situation | | 43 | 88% | 95% | 82% | -7% | |
| ● Improved/Maintained Axis V GAF Score | | 23 | 57% | 75% | 49% | -18% | ▼ |
| ● Employed | | 2 | 4% | 50% | 39% | -46% | ▼ |
| ● Self Help | | 0 | 0% | 60% | 33% | -60% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 43 | 98% | 90% | 60% | 8% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 5 | 83% | 75% | 74% | 8% |

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

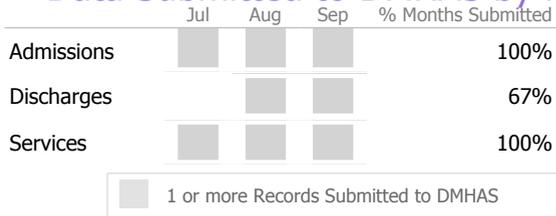**MACTT-Modified Assertive Community Treatment Team**
Community Mental Health Affiliates
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 61 | 47 | 30% | ▲ |
| Admits | 8 | 13 | -38% | ▼ |
| Discharges | 4 | 6 | -33% | ▼ |
| Service Hours | 747 | 488 | 53% | ▲ |

## Service Engagement

| Homeless Outreach | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | at least 1 Service within 180 days | | 8 | 100% | 50% | 92% | 50% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | | ▢ | ▢ | 67% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✔ Goal Met    ⬤ Below Goal

* State Avg based on 39 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 30 | 24 | 25% | ▲ |
| Admits | - | - | | |
| Discharges | - | - | | |
| Service Hours | 321 | 129 | 149% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 26 | 87% | 85% | 87% | 2% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 25 | 83% | 90% | 92% | -7% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 98% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 85% | 86% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual | Goal  ✔ Goal Met  🔴 Below Goal

* State Avg based on 69 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 16 | 16 | 0% | |
| Admits | 2 | 1 | 100% | ▲ |
| Discharges | 1 | 2 | -50% | ▼ |
| Bed Days | 1,314 | 1,295 | 1% | |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 94% |
| ✓ SA Screen Complete | | 100% | 94% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 97% |
| ✓ Valid Axis V GAF Score | | 100% | 90% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | ☐ | ☐ | 67% |
| Discharges | | ☐ | | 33% |

☐ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 1 | 100% | 75% | 59% | 25% | ▲ |
| 🔴 No Re-admit within 30 Days of Discharge | | 0 | 0% | 85% | 73% | -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 | |
|---|---|---|---|---|---|---|---|
| 🔴 Improved/Maintained Axis V GAF Score | | 6 | 46% | 75% | 37% | -29% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 16 | 917 days | 1.0 | 89% | 90% | 90% | -1% |

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

▲ > 10% Over    ▼ < 10% Under

▨ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

\* State Avg based on 13 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 6 | -17% | ▼ |
| Admits | - | - | | |
| Discharges | - | 1 | -100% | ▼ |
| Bed Days | 460 | 478 | -4% | |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 85% |
| ✓ SA Screen Complete | | 100% | 83% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 96% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |

☐ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 77% | 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% | 80% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 5 | 100% | 95% | 98% | 5% | |
| ✓ Social Support | | 3 | 60% | 60% | 85% | 0% | |
| ● Employed | | 0 | 0% | 25% | 6% | -25% | ▼ |
| ● Improved/Maintained Axis V GAF Score | | 2 | 40% | 95% | 66% | -55% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 6 | 1,137 days | 1.2 | 83% | 90% | 95% | -7% |

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

▲ > 10% Over      ▼ < 10% Under

| ☐ Actual | | Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|---|

* State Avg based on 70 Active Supervised Apartments Programs

**State Hospital D/C Behavioral Health**
Community Mental Health Affiliates
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 14 | | |
| Admits | 1 | - | |
| Discharges | 2 | - | |
| Service Hours | 34 | - | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 90% | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 86% | 70% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| Discharges | | | | 67% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 1 | 50% | 50% | 79% | 0% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 13 | 93% | 80% | 81% | 13% ▲ |
| 🔴 Social Support | | 7 | 50% | 60% | 68% | -10% |
| 🔴 Employed | | 0 | 0% | 20% | 8% | -20% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 11 | 92% | 90% | 58% | 2% |

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

| 🟧 Actual | | Goal | ✔ Goal Met | 🔴 Below Goal |

* State Avg based on 29 Active Standard Case Management 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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 72 | 70 | 3% | |
| Admits | 1 | 2 | -50% | ▼ |
| Discharges | 1 | 1 | 0% | |
| Service Hours | 903 | 558 | 62% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 66 | 92% | 85% | 87% | 7% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 70 | 99% | 90% | 92% | 9% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 97% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 93% | 86% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▣ | | | 33% |
| Discharges | | | ▣ | 33% |
| Services | ▣ | ▣ | ▣ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual   | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 69 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 2017 - September 2017  (Data as of Dec 13, 2017)
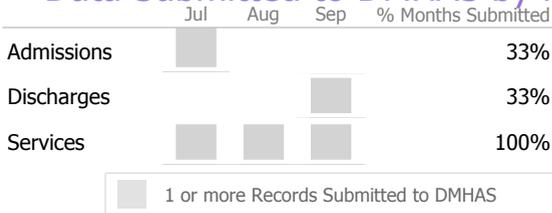
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 165 | 182 | -9% | |
| Admits | 14 | 13 | 8% | |
| Discharges | 19 | 46 | -59% | ▼ |
| Service Hours | 2,953 | 2,223 | 33% | ▲ |
| Social Rehab/PHP/IOP Days | 1,765 | 1,388 | 27% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 136 | 93% | 90% | 65% | 3% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

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

| ▮ Actual | | Goal | ✓ Goal Met | ● Below Goal |
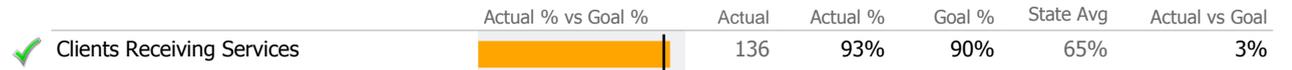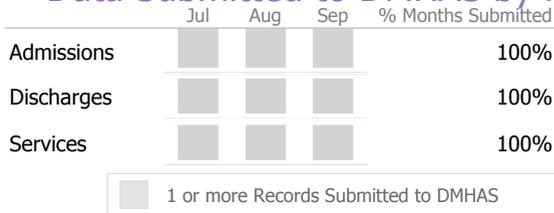
* State Avg based on 36 Active Social Rehabilitation Programs

**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 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 21 | 23 | -9% | |
| Admits | 4 | 5 | -20% | ▼ |
| Discharges | 7 | 3 | 133% | ▲ |
| Bed Days | 1,487 | 1,794 | -17% | ▼ |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 86% | 94% |
| SA Screen Complete | | 86% | 94% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 97% |
| ✔ Valid Axis V GAF Score | | 100% | 90% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 100% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 5 | 71% | 75% | 59% | -4% | |
| ✔ No Re-admit within 30 Days of Discharge | | 6 | 86% | 85% | 73% | 1% | |
| 🔴 Follow-up within 30 Days of Discharge | | 4 | 80% | 90% | 77% | -10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Improved/Maintained Axis V GAF Score | | 6 | 35% | 75% | 37% | -40% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 17 | 531 days | 0.8 | 95% | 90% | 90% | 5% |

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

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 13 Active MH Intensive Res. Rehabilitation Programs
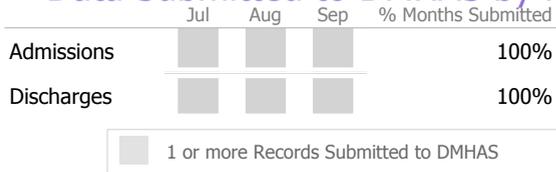
**Wheeler Comm Response Tm662200**
Community Mental Health Affiliates
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017  (Data as of Dec 13, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 168 | 148 | 14% | ▲ |
| Admits | 110 | 123 | -11% | ▼ |
| Discharges | 114 | 125 | -9% | |

## Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Evaluation within 1.5 hours of Request | | 116 | 94% | 75% | 69% | 19% | ▲ |
| ✔ Community Location Evaluation | | 122 | 98% | 80% | 77% | 18% | ▲ |
| ✔ Follow-up Service within 48 hours | | 48 | 98% | 90% | 58% | 8% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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