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

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2017 - March 2018   (Data as of Jun 13, 2018)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 2,210 | 2,080 | 6% | |
| | Admits | 1,463 | 1,764 | -17% | ▼ |
| | Discharges | 1,450 | 1,435 | 1% | |
| | Service Hours | 66,113 | 50,687 | 30% | ▲ |
| | Bed Days | 18,953 | 19,344 | -2% | |
| | S.Rehab/PHP/IOP | 5,316 | 4,540 | 17% | ▲ |

▲ > 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 | 1,131 | 36.7% | |
| Crisis Services | 307 | 10.0% | |
| Community Support | 188 | 6.1% | |
| Social Rehabilitation | 183 | 5.9% | |
| Case Management | 181 | 5.9% | |
| ACT | 159 | 5.2% | |
| Employment Services | 136 | 4.4% | |
| Residential Services | 93 | 3.0% | |
| **Forensic MH** | | | |
| Forensics Community-based | 285 | 9.3% | |
| Outpatient | 242 | 7.9% | |
| Case Management | 4 | 0.1% | |
| **Addiction** | | | |
| Medication Assisted Treatment | 112 | 3.6% | |
| Outpatient | 57 | 1.9% | |

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 329 | 15% | 13% |
| 26-34 | 424 | 20% | 24% |
| 35-44 | 425 | 20% | 20% |
| 45-54 | 477 | 22% | 21% |
| 55-64 | 405 | 19% | 17% |
| 65+ | 96 | 4% | 5% |

### Gender

| | # | % | State Avg |
|---|---|---|---|
| Male | 1,138 | 52% | 60% |
| Female | 1,070 | 48% | 40% |
| Transgender | | | 0% |

### Ethnicity

| | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 1,163 | 53% | ▼ | 73% |
| Hisp-Puerto Rican | 642 | 29% | ▲ | 12% |
| Unknown | 313 | 14% | | 7% |
| Hispanic-Other | 86 | 4% | | 7% |
| Hispanic-Mexican | 5 | 0% | | 1% |
| Hispanic-Cuban | 1 | 0% | | 0% |

### Race

| | # | % | | State Avg |
|---|---|---|---|---|
| White/Caucasian | 1,314 | 59% | | 64% |
| Other | 523 | 24% | ▲ | 13% |
| Black/African American | 269 | 12% | | 16% |
| Unknown | 84 | 4% | | 4% |
| Asian | 9 | 0% | | 1% |
| Am. Indian/Native Alaskan | 6 | 0% | | 1% |
| Hawaiian/Other Pacific Islander | 5 | 0% | | 0% |
| Multiple Races | | | | 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 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 110 | 91 | 21% | ▲ |
| Admits | 58 | 38 | 53% | ▲ |
| Discharges | 45 | 40 | 13% | ▲ |
| Service Hours | 2,644 | 1,341 | 97% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 88% | 94% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 69% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 93% | 87% |
| ✓ SA Screen Complete | | 97% | 87% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 96% |
| ✓ Valid Axis V GAF Score | | 100% | 89% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 13 | 29% | 50% | 44% | -21% | ▼ |

## Recovery

National Recovery Measures (NOMS)

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 87 | 77% | 60% | 69% | 17% | ▲ |
| ✓ Stable Living Situation | | 108 | 96% | 95% | 85% | 1% | |
| ● Employed | | 21 | 19% | 30% | 23% | -11% | ▼ |
| ● Improved/Maintained Axis V GAF Score | | 65 | 68% | 75% | 51% | -7% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 68 | 100% | 90% | 88% | 10% |

## Service Engagement

Outpatient

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 47 | 84% | 75% | 68% | 9% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 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 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 945 | 586 | 61% | ▲ |
| Admits | 343 | 227 | 51% | ▲ |
| Discharges | 402 | 139 | 189% | ▲ |
| Service Hours | 15,693 | 8,691 | 81% | ▲ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 99% | 69% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 98% | 87% |
| ✔ SA Screen Complete | | 97% | 87% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 96% |
| ✔ Valid Axis V GAF Score | | 100% | 89% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 194 | 48% | 50% | 44% | -2% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 859 | 89% | 60% | 69% | 29% | ▲ |
| 🔴 Stable Living Situation | | 909 | 94% | 95% | 85% | -1% | |
| 🔴 Employed | | 139 | 14% | 30% | 23% | -16% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 566 | 69% | 75% | 51% | -6% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 557 | 99% | 90% | 88% | 9% | |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 294 | 88% | 75% | 68% | 13% | ▲ |

## Data Submitted to DMHAS by Month

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

☐ 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

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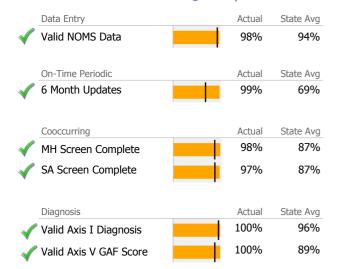Mental Health - ACT - Assertive Community Treatment

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
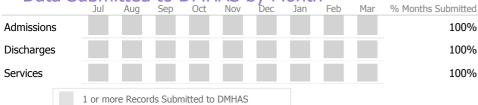Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 76 | 69 | 10% | ▲ |
| Admits | 22 | 5 | 340% | ▲ |
| Discharges | 7 | 18 | -61% | ▼ |
| Service Hours | 5,703 | 3,737 | 53% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 95% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 94% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 95% |
| ✔ SA Screen Complete | | 94% | 94% |

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

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 5 | 71% | 65% | 49% | 6% | |
| ✔ | No Re-admit within 30 Days of Discharge | | 5 | 100% | 85% | 93% | 15% | ▲ |
| ● | Follow-up within 30 Days of Discharge | | 2 | 40% | 90% | 57% | -50% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Stable Living Situation | | 75 | 97% | 60% | 89% | 37% | ▲ |
| ✔ | Social Support | | 74 | 96% | 60% | 80% | 36% | ▲ |
| ● | Employed | | 4 | 5% | 15% | 13% | -10% | |
| ● | Improved/Maintained Axis V GAF Score | | 38 | 61% | 85% | 50% | -24% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 70 | 100% | 90% | 99% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |
| Discharges | | ■ | ■ | | ■ | ■ | ■ | | | 56% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 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
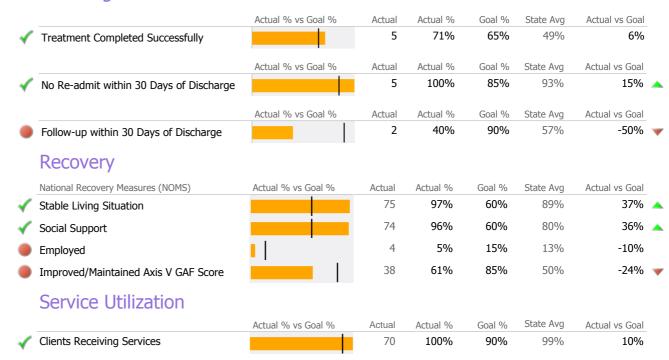Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)
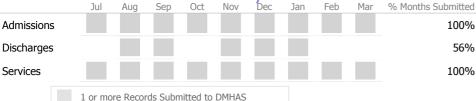
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 55 | 42 | 31% | ▲ |
| Admits | 41 | 44 | -7% | |
| Discharges | 47 | 34 | 38% | ▲ |
| Service Hours | 137 | 71 | 92% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 94% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 69% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 87% |
| ✓ SA Screen Complete | | 98% | 87% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 96% |
| ✓ Valid Axis V GAF Score | | 100% | 89% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 36 | 77% | 50% | 44% | 27% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 47 | 80% | 60% | 69% | 20% | ▲ |
| ● Stable Living Situation | | 53 | 90% | 95% | 85% | -5% | |
| ✓ Improved/Maintained Axis V GAF Score | | 39 | 80% | 75% | 51% | 5% | |
| ● Employed | | 6 | 10% | 30% | 23% | -20% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 11 | 92% | 90% | 88% | 2% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | 22 | 55% | 75% | 68% | -20% | ▼ |

## Data Submitted to DMHAS by Month

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

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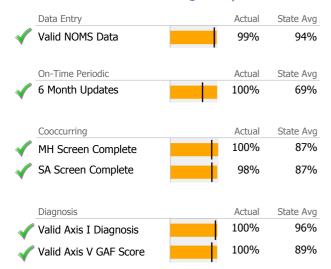Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 51 | 47 | 9% | |
| Admits | 21 | 27 | -22% | ▼ |
| Discharges | 20 | 15 | 33% | ▲ |
| Service Hours | 429 | 108 | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 94% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 69% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 9 | 45% | 50% | 44% | -5% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 53 | 100% | 60% | 69% | 40% | ▲ |
| ✔ | Stable Living Situation | | 51 | 96% | 95% | 85% | 1% | |
| 🔴 | Employed | | 1 | 2% | 30% | 23% | -28% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 31 | 94% | 90% | 88% | 4% | |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | 2 or more Services within 30 days | | 18 | 86% | 75% | 68% | 11% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | 89% |
| 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 - March 2018  (Data as of Jun 13, 2018)
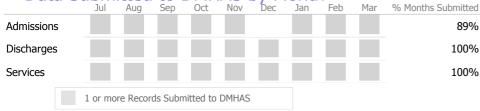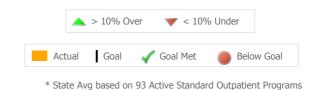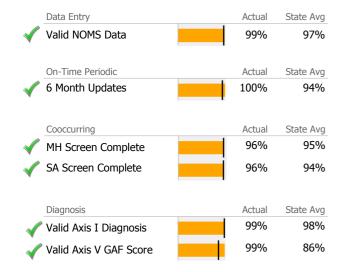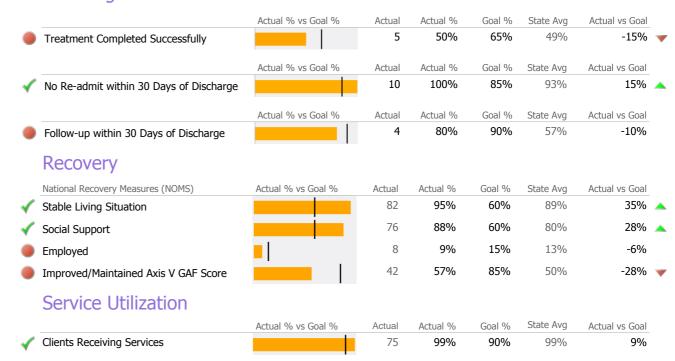
## Program Activity

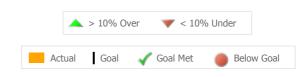| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 86 | 83 | 4% | ▼ |
| Admits | 18 | 18 | 0% | |
| Discharges | 10 | 21 | -52% | ▼ |
| Service Hours | 8,842 | 5,046 | 75% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 5 | 50% | 65% | 49% | -15% | ▼ |
| ✓ | No Re-admit within 30 Days of Discharge | | 10 | 100% | 85% | 93% | 15% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 4 | 80% | 90% | 57% | -10% | |

## Data Submission Quality

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

| | On-Time Periodic | | Actual | State Avg |
|---|---|---|---|---|
| ✓ | 6 Month Updates | | 100% | 94% |

| | Cooccurring | | Actual | State Avg |
|---|---|---|---|---|
| ✓ | MH Screen Complete | | 96% | 95% |
| ✓ | SA Screen Complete | | 96% | 94% |

| | Diagnosis | | Actual | State Avg |
|---|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | | 99% | 98% |
| ✓ | Valid Axis V GAF Score | | 99% | 86% |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 82 | 95% | 60% | 89% | 35% | ▲ |
| ✓ | Social Support | | 76 | 88% | 60% | 80% | 28% | ▲ |
| 🔴 | Employed | | 8 | 9% | 15% | 13% | -6% | |
| 🔴 | Improved/Maintained Axis V GAF Score | | 42 | 57% | 85% | 50% | -28% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 75 | 99% | 90% | 99% | 9% |

## Data Submitted to DMHAS by Month

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

☐ 1 or more Records Submitted to DMHAS

▲ > 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
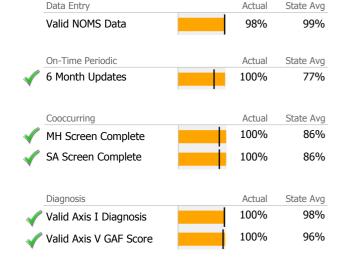Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
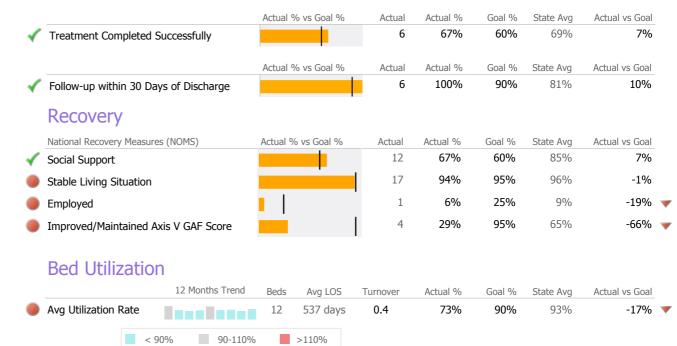Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

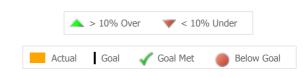| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 17 | 16 | 6% | |
| Admits | 7 | 5 | 40% | ▲ |
| Discharges | 9 | 6 | 50% | ▲ |
| Bed Days | 2,400 | 3,080 | -22% | ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 77% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 86% |
| ✓ SA Screen Complete | | 100% | 86% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 98% |
| ✓ Valid Axis V GAF Score | | 100% | 96% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 6 | 67% | 60% | 69% | 7% |
| ✓ Follow-up within 30 Days of Discharge | | 6 | 100% | 90% | 81% | 10% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 12 | 67% | 60% | 85% | 7% | |
| 🔴 Stable Living Situation | | 17 | 94% | 95% | 96% | -1% | |
| 🔴 Employed | | 1 | 6% | 25% | 9% | -19% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 4 | 29% | 95% | 65% | -66% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 12 | 537 days | 0.4 | 73% | 90% | 93% | -17% | ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | | ▢ | ▢ | ▢ | | ▢ | | ▢ | 67% |
| Discharges | | ▢ | ▢ | | | ▢ | | ▢ | | 44% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

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

* State Avg based on 62 Active Supervised Apartments Programs

**CMHA Moblie Crisis**
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 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 290 | 291 | 0% | |
| Admits | 244 | 293 | -17% | ▼ |
| Discharges | 235 | 261 | -10% | |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Evaluation within 1.5 hours of Request | | 253 | 95% | 75% | 68% | 20% | ▲ |
| ✓ | Community Location Evaluation | | 264 | 99% | 80% | 78% | 19% | ▲ |
| ✓ | Follow-up Service within 48 hours | | 114 | 98% | 90% | 61% | 8% | |

## 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

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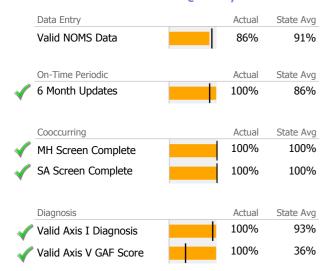Forensic MH - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

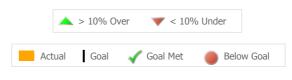| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 4 | 1 | 300% | ▲ |
| Admits | 4 | - | | |
| Discharges | - | 1 | -100% | ▼ |
| Service Hours | 32 | - | | |

## Data Submission Quality

| Data Entry | Actual % vs State Avg | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 86% | 91% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 86% |

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

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 93% |
| ✔ Valid Axis V GAF Score | | 100% | 36% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 15% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 3 | 75% | 60% | 57% | 15% | ▲ |
| 🔴 Employed | | 0 | 0% | 20% | 9% | -20% | ▼ |
| 🔴 Stable Living Situation | | 2 | 50% | 80% | 70% | -30% | ▼ |
| 🔴 Self Help | | 0 | 0% | 60% | 95% | -60% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 4 | 100% | 90% | 100% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▢ | | | | ▢ | ▢ | ▢ | | 44% |
| Discharges | | | | | | | | | | 0% |
| Services | | | | | | | ▢ | ▢ | | 22% |

▢ 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
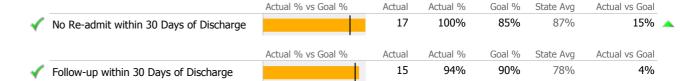Mental Health - Crisis Services - Respite Bed

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 21 | 15 | 40% | ▲ |
| Admits | 19 | 12 | 58% | ▲ |
| Discharges | 17 | 13 | 31% | ▲ |
| Bed Days | 876 | 616 | 42% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | No Re-admit within 30 Days of Discharge | | 17 | 100% | 85% | 87% | 15% | ▲ |

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Follow-up within 30 Days of Discharge | | 15 | 94% | 90% | 78% | 4% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 4 | 61 days | 0.1 | 80% | 90% | 69% | -10% |

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

## 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 10 Active Respite Bed Programs

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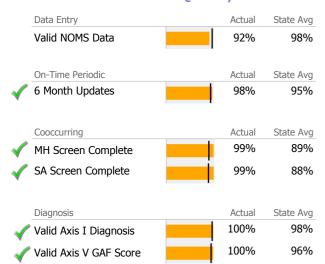Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
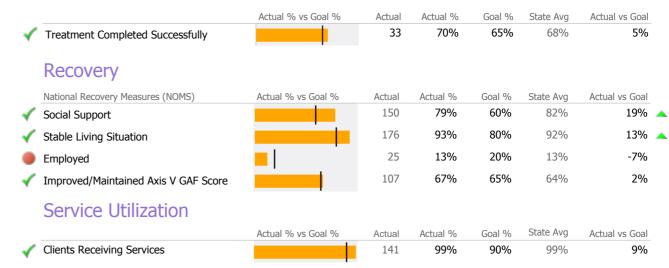Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 188 | 197 | -5% | |
| Admits | 54 | 63 | -14% | ▼ |
| Discharges | 47 | 55 | -15% | ▼ |
| Service Hours | 5,934 | 5,362 | 11% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 92% | 98% |

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 99% | 89% |
| ✓ SA Screen Complete | | 99% | 88% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 98% |
| ✓ Valid Axis V GAF Score | | 100% | 96% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 33 | 70% | 65% | 68% | 5% |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 150 | 79% | 60% | 82% | 19% | ▲ |
| ✓ | Stable Living Situation | | 176 | 93% | 80% | 92% | 13% | ▲ |
| 🔴 | Employed | | 25 | 13% | 20% | 13% | -7% | |
| ✓ | Improved/Maintained Axis V GAF Score | | 107 | 67% | 65% | 64% | 2% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 141 | 99% | 90% | 99% | 9% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 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 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

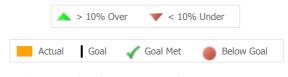| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 136 | 153 | -11% | ▼ |
| Admits | 38 | 78 | -51% | ▼ |
| Discharges | 69 | 60 | 15% | ▲ |
| Service Hours | 2,102 | 2,863 | -27% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Employed | | 47 | 34% | 35% | 43% | -1% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 69 | 100% | 90% | 96% | 10% |

## Data Submission Quality

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

| 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 | | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | 78% |
| 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
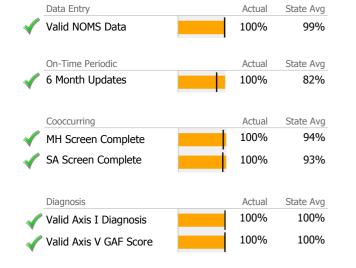Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)
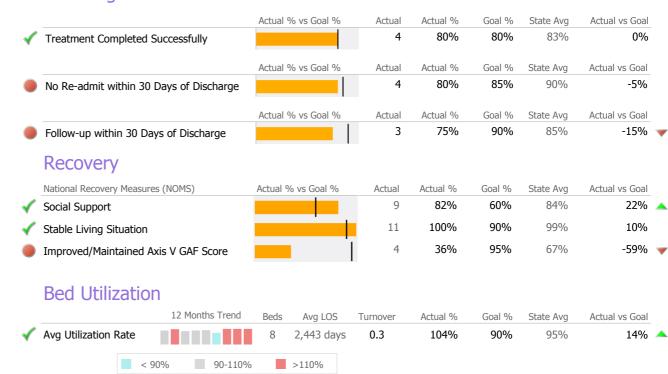
## Program Activity

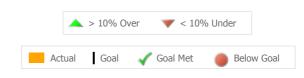| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 11 | 9 | 22% | ▲ |
| Admits | 2 | 3 | -33% | ▼ |
| Discharges | 5 | - | | |
| Bed Days | 2,279 | 2,370 | -4% | |

## 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% | 94% |
| ✓ SA Screen Complete | | 100% | 93% |

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

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 4 | 80% | 80% | 83% | 0% | |
| ● | No Re-admit within 30 Days of Discharge | | 4 | 80% | 85% | 90% | -5% | |
| ● | Follow-up within 30 Days of Discharge | | 3 | 75% | 90% | 85% | -15% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 9 | 82% | 60% | 84% | 22% | ▲ |
| ✓ Stable Living Situation | | 11 | 100% | 90% | 99% | 10% | |
| ● Improved/Maintained Axis V GAF Score | | 4 | 36% | 95% | 67% | -59% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 8 | 2,443 days | 0.3 | 104% | 90% | 95% | 14% | ▲ |

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 | ▮ | | | ▮ | | ▮ | | ▮ | ▮ | 56% |

▮ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

Legend: ▮ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 24 Active Group Home Programs

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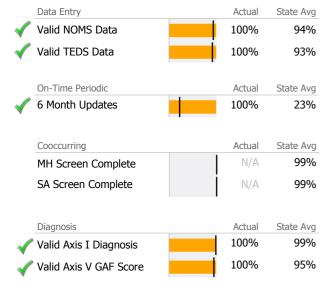Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
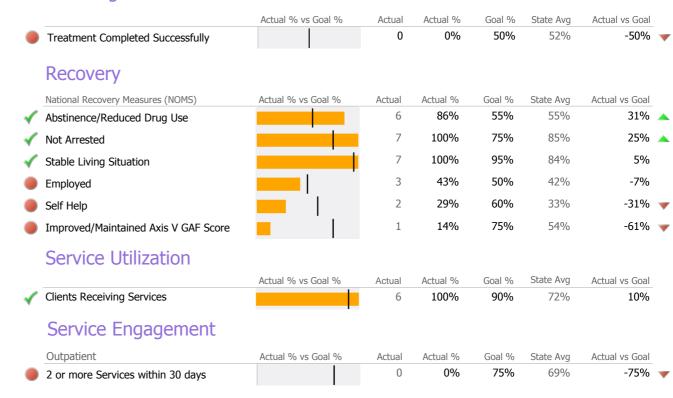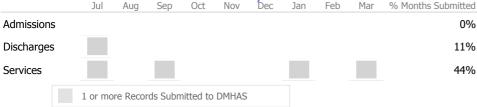Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

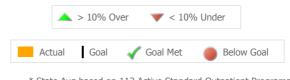| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 7 | 7 | 0% | |
| Admits | - | 7 | -100% | ▼ |
| Discharges | 1 | - | | |
| Service Hours | 196 | 90 | 118% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 100% | 94% |
| ✔ | Valid TEDS Data | 100% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ | 6 Month Updates | 100% | 23% |

| 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% | 99% |
| ✔ | Valid Axis V GAF Score | 100% | 95% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | ■ | | | | | | | | | 11% |
| Services | ■ | | ■ | | | | ■ | | ■ | 44% |

■ 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% | 52% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Abstinence/Reduced Drug Use | | 6 | 86% | 55% | 55% | 31% | ▲ |
| ✔ Not Arrested | | 7 | 100% | 75% | 85% | 25% | ▲ |
| ✔ Stable Living Situation | | 7 | 100% | 95% | 84% | 5% | |
| 🔴 Employed | | 3 | 43% | 50% | 42% | -7% | |
| 🔴 Self Help | | 2 | 29% | 60% | 33% | -31% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 1 | 14% | 75% | 54% | -61% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 6 | 100% | 90% | 72% | 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% | 69% | -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
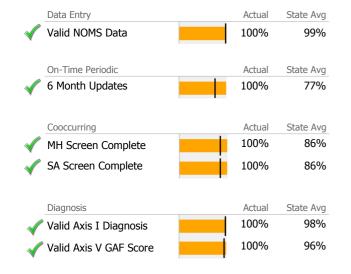Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
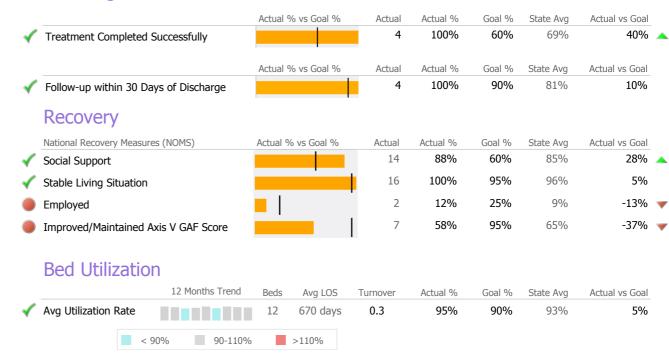Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 16 | 19 | -16% | ▼ |
| Admits | 4 | 6 | -33% | ▼ |
| Discharges | 4 | 9 | -56% | ▼ |
| Bed Days | 3,115 | 3,115 | 0% | |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 77% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 86% |
| ✔ SA Screen Complete | | 100% | 86% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 98% |
| ✔ Valid Axis V GAF Score | | 100% | 96% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 4 | 100% | 60% | 69% | 40% | ▲ |
| ✔ Follow-up within 30 Days of Discharge | | 4 | 100% | 90% | 81% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 14 | 88% | 60% | 85% | 28% | ▲ |
| ✔ Stable Living Situation | | 16 | 100% | 95% | 96% | 5% | |
| 🔴 Employed | | 2 | 12% | 25% | 9% | -13% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 7 | 58% | 95% | 65% | -37% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 12 | 670 days | 0.3 | 95% | 90% | 93% | 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 | | | ▢ | | | ▢ | | ▢ | | 33% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over  ▼ < 10% Under

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

* State Avg based on 62 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 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 226 | 242 | -7% | |
| Admits | 141 | 147 | -4% | |
| Discharges | 145 | 164 | -12% | ▼ |
| Service Hours | 1,666 | 1,822 | -9% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 88 | 98% | 90% | 47% | 8% |

## Jail Diversion

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Follow-up Service within 48 hours | | 110 | 4% | 0% | 3% | 4% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 18 Active Court Liaison-Jail Diversion Programs

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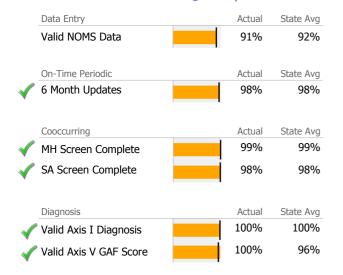Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
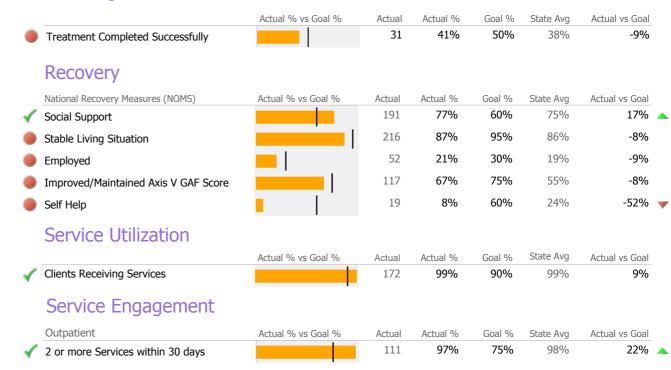Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 80 | 90 | -11% | ▼ |
| Admits | 45 | 53 | -15% | ▼ |
| Discharges | 30 | 68 | -56% | ▼ |
| Service Hours | 1,618 | 1,926 | -16% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 50 | 96% | 90% | 47% | 6% |

## Jail Diversion

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Follow-up Service within 48 hours | | 29 | 7% | 0% | 3% | 7% |

## Data Submitted to DMHAS by Month

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

▢ 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 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

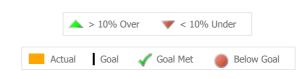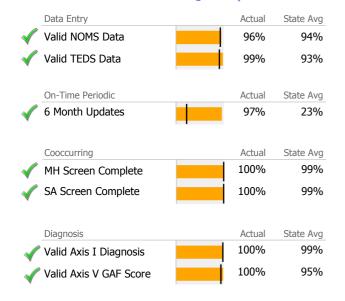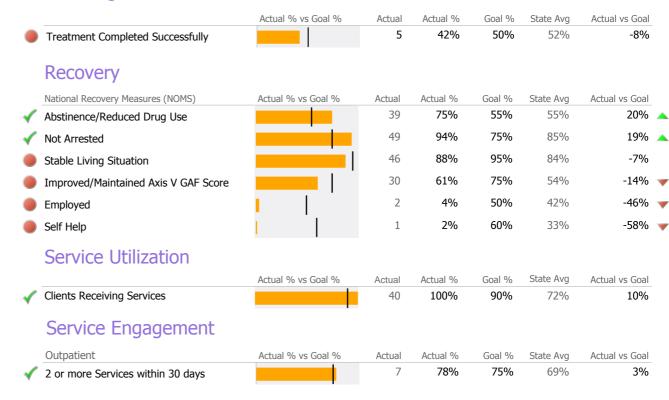| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 242 | 202 | 20% | ▲ |
| Admits | 114 | 119 | -4% | |
| Discharges | 75 | 101 | -26% | ▼ |
| Service Hours | 4,185 | 3,391 | 23% | ▲ |

## Data Submission Quality

| Data Entry | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 91% | 92% |

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 99% | 99% |
| ✓ SA Screen Complete | | 98% | 98% |

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 31 | 41% | 50% | 38% | -9% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 191 | 77% | 60% | 75% | 17% | ▲ |
| 🔴 Stable Living Situation | | 216 | 87% | 95% | 86% | -8% | |
| 🔴 Employed | | 52 | 21% | 30% | 19% | -9% | |
| 🔴 Improved/Maintained Axis V GAF Score | | 117 | 67% | 75% | 55% | -8% | |
| 🔴 Self Help | | 19 | 8% | 60% | 24% | -52% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 172 | 99% | 90% | 99% | 9% | |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 111 | 97% | 75% | 98% | 22% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 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 - March 2018  (Data as of Jun 13, 2018)
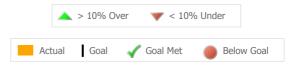
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 50 | 100 | -50% | ▼ |
| Admits | 9 | 62 | -85% | ▼ |
| Discharges | 12 | 22 | -45% | ▼ |
| Service Hours | 1,316 | 2,699 | -51% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 96% | 94% |
| ✓ | Valid TEDS Data | 99% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 97% | 23% |

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

| 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 | | 5 | 42% | 50% | 52% | -8% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Abstinence/Reduced Drug Use | | 39 | 75% | 55% | 55% | 20% | ▲ |
| ✓ | Not Arrested | | 49 | 94% | 75% | 85% | 19% | ▲ |
| 🔴 | Stable Living Situation | | 46 | 88% | 95% | 84% | -7% | |
| 🔴 | Improved/Maintained Axis V GAF Score | | 30 | 61% | 75% | 54% | -14% | ▼ |
| 🔴 | Employed | | 2 | 4% | 50% | 42% | -46% | ▼ |
| 🔴 | Self Help | | 1 | 2% | 60% | 33% | -58% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 40 | 100% | 90% | 72% | 10% | |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 7 | 78% | 75% | 69% | 3% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | | ▪ | ▪ | | | | | 44% |
| Discharges | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | | ▪ | 78% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 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

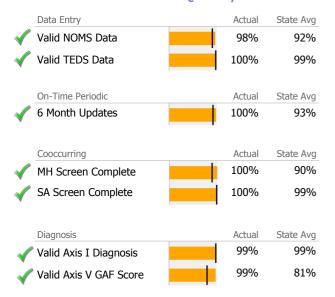Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 77 | 64 | 20% | ▲ |
| Admits | 26 | 31 | -16% | ▼ |
| Discharges | 17 | 23 | -26% | ▼ |
| Service Hours | 1,660 | 1,471 | 13% | ▲ |

## Service Engagement

| Homeless Outreach | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | at least 1 Service within 180 days | | 26 | 100% | 50% | 94% | 50% | ▲ |

## Data Submitted to DMHAS by Month

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

**MATx OP**
Community Mental Health Affiliates
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 112 | 79 | 42% | ▲ |
| Admits | 27 | 79 | -66% | ▼ |
| Discharges | 6 | - | | |
| Service Hours | 923 | - | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 98% | 92% |
| ✔ Valid TEDS Data | | 100% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 93% |

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

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 99% | 99% |
| ✔ Valid Axis V GAF Score | | 99% | 81% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | 89% |
| Discharges | | | | | | | ▢ | ▢ | | 22% |
| Services | | | | | | | | | ▢ | 11% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 5 Active Buprenorphine Maintenance Programs

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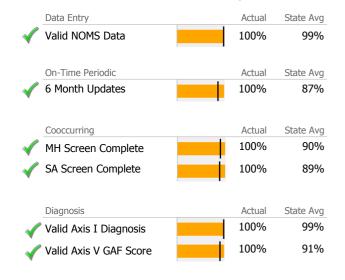Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
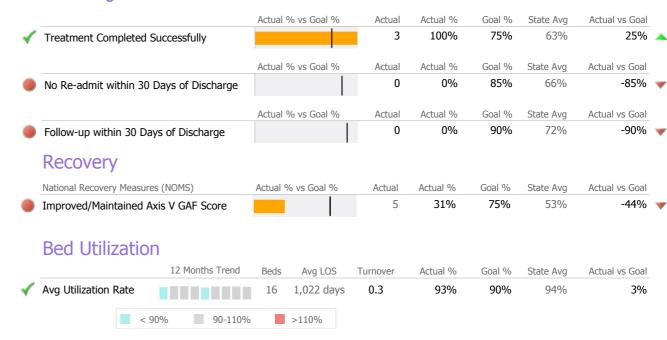Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 28 | 30 | -7% | |
| Admits | - | 6 | -100% | ▼ |
| Discharges | 2 | 2 | 0% | |
| Service Hours | 862 | 440 | 96% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Stable Living Situation | | 25 | 89% | 85% | 86% | 4% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 26 | 100% | 90% | 96% | 10% |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 85% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | ▢ | | | ▢ | 22% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

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

| ▮ Actual | ▏ Goal | ✔ Goal Met | ⬤ Below Goal |

\* State Avg based on 74 Active Supportive Housing – Scattered Site Programs

**Parkview Res Intensive 03241X**
Community Mental Health Affiliates
Mental Health - Residential Services - MH Intensive Res. Rehabilitation
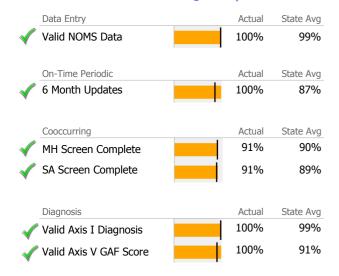
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)
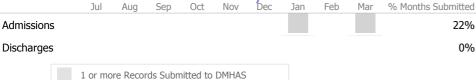
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 18 | 20 | -10% | |
| Admits | 4 | 5 | -20% | ▼ |
| Discharges | 3 | 6 | -50% | ▼ |
| Bed Days | 4,074 | 3,701 | 10% | |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 87% |

| 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% | 91% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 3 | 100% | 75% | 63% | 25% | ▲ |
| ● | No Re-admit within 30 Days of Discharge | | 0 | 0% | 85% | 66% | -85% | ▼ |
| ● | Follow-up within 30 Days of Discharge | | 0 | 0% | 90% | 72% | -90% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Improved/Maintained Axis V GAF Score | | 5 | 31% | 75% | 53% | -44% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 16 | 1,022 days | 0.3 | 93% | 90% | 94% | 3% |

- ☐ < 90%
- ☐ 90-110%
- ☐ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ☐ | ☐ | | ☐ | | | ☐ | | 44% |
| Discharges | | ☐ | | | | ☐ | | ☐ | | 33% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

☐ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 21 Active MH Intensive Res. Rehabilitation Programs

**Pleasant House**
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 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 7 | 7 | 0% | |
| Admits | 2 | 1 | 100% | ▲ |
| Discharges | - | 2 | -100% | ▼ |
| Bed Days | 1,437 | 1,272 | 13% | ▲ |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 75% | 63% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 66% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 72% | N/A |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 87% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 91% | 90% |
| ✔ SA Screen Complete | | 91% | 89% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 91% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Improved/Maintained Axis V GAF Score | | 3 | 60% | 75% | 53% | -15% ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 6 | 1,215 days | 0.4 | 87% | 90% | 94% | -3% |

| 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 | | | | | | | | | | 0% |

▪ 1 or more Records Submitted to DMHAS

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

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

* State Avg based on 21 Active MH Intensive Res. Rehabilitation 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
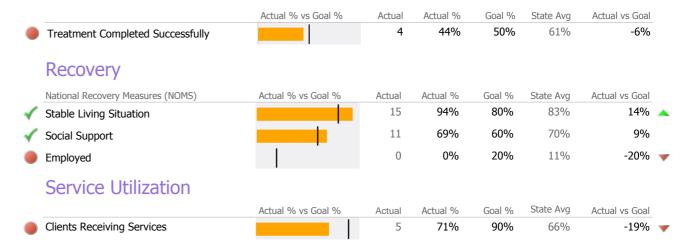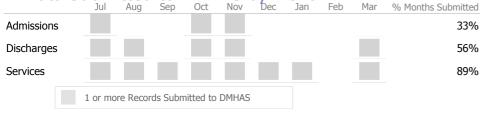Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

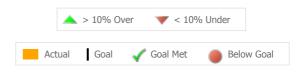| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 16 | 15 | 7% | |
| Admits | 3 | 15 | -80% | ▼ |
| Discharges | 9 | 5 | 80% | ▲ |
| Service Hours | 60 | 18 | | |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 95% | 95% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 62% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 4 | 44% | 50% | 61% | -6% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 15 | 94% | 80% | 83% | 14% | ▲ |
| ✔ Social Support | | 11 | 69% | 60% | 70% | 9% | |
| 🔴 Employed | | 0 | 0% | 20% | 11% | -20% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 5 | 71% | 90% | 66% | -19% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | | | ▪ | ▪ | | | | | 33% |
| Discharges | ▪ | ▪ | | ▪ | ▪ | | | | ▪ | 56% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | 89% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual   | Goal   ✔ Goal Met   🔴 Below Goal

\* State Avg based on 30 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 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 74 | 76 | -3% | |
| Admits | 3 | 8 | -63% | ▼ |
| Discharges | 5 | 4 | 25% | ▲ |
| Service Hours | 2,585 | 1,667 | 55% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 66 | 89% | 85% | 86% | 4% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 69 | 100% | 90% | 96% | 10% |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 85% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ■ | | | | | | ■ | | | 22% |
| Discharges | | | ■ | | ■ | ■ | ■ | ■ | | 56% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

□ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

Legend: ■ Actual   | Goal   ✔ Goal Met   ● Below Goal

\* State Avg based on 74 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
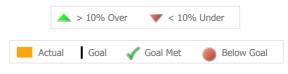Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 183 | 225 | -19% | ▼ |
| Admits | 36 | 63 | -43% | ▼ |
| Discharges | 57 | 92 | -38% | ▼ |
| Service Hours | 8,545 | 6,605 | 29% | ▲ |
| Social Rehab/PHP/IOP Days | 5,316 | 4,540 | 17% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 126 | 98% | 90% | 75% | 8% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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
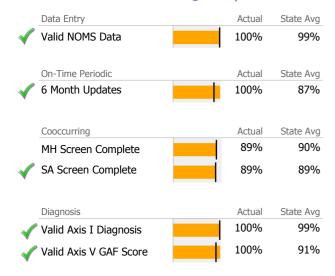
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - March 2018  (Data as of Jun 13, 2018)
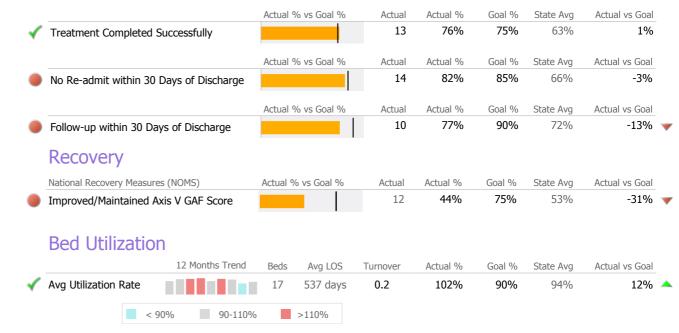
## Program Activity

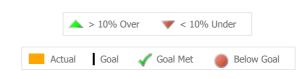| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 33 | 32 | 3% | |
| Admits | 19 | 15 | 27% | ▲ |
| Discharges | 17 | 14 | 21% | ▲ |
| Bed Days | 4,772 | 5,190 | -8% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 13 | 76% | 75% | 63% | 1% | |
| 🔴 | No Re-admit within 30 Days of Discharge | | 14 | 82% | 85% | 66% | -3% | |
| 🔴 | Follow-up within 30 Days of Discharge | | 10 | 77% | 90% | 72% | -13% | ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 87% |

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

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 91% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Improved/Maintained Axis V GAF Score | | 12 | 44% | 75% | 53% | -31% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 17 | 537 days | 0.2 | 102% | 90% | 94% | 12% | ▲ |

🟦 < 90%    ⬜ 90-110%    🟥 >110%

## Data Submitted to DMHAS by Month

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

⬜ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 21 Active MH Intensive Res. Rehabilitation Programs