**Center for Human Development**
Springfield, MA

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2018 - September 2018   (Data as of Dec 14, 2018)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|---|
| | Unique Clients | 432 | 444 | -3% |
| | Admits | 27 | 36 | -25% ▼ |
| | Discharges | 43 | 48 | -10% |
| | Service Hours | 10,644 | 11,491 | -7% |
| | Bed Days | 3,454 | 3,469 | 0% |

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

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Case Management | 276 | 60.7% |
| | Residential Services | 105 | 23.1% |
| | Other | 48 | 10.5% |
| | Recovery Support | 26 | 5.7% |

## Consumer Satisfaction Survey   (Based on 304 FY18 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | General Satisfaction | | 94% | 80% | 92% |
| ✓ | Quality and Appropriateness | | 94% | 80% | 93% |
| ✓ | Participation in Treatment | | 94% | 80% | 92% |
| ✓ | Overall | | 93% | 80% | 91% |
| ✓ | Respect | | 91% | 80% | 91% |
| ✓ | Access | | 91% | 80% | 88% |
| ✓ | Outcome | | 83% | 80% | 83% |
| ✓ | Recovery | | 81% | 80% | 79% |

| ▬ Satisfied % | | Goal % | 0-80% | 80-100% | ✓ Goal Met | ⬤ Under Goal |
|---|---|---|---|---|---|---|

## Client Demographics

### Age

| Age | # | % | State Avg |
|---|---|---|---|
| 18-25 | 55 | 13% | 10% |
| 26-34 | 51 | 12% | 22% |
| 35-44 | 77 | 18% | 20% |
| 45-54 | 111 | 26% | 21% |
| 55-64 | 117 | 27% | 19% |
| 65+ | 21 | 5% | 7% |

### Gender

| Gender | # | % | State Avg |
|---|---|---|---|
| Male | 292 | 68% | 59% |
| Female | 140 | 32% | 41% |
| Transgender | | | 0% |

### Ethnicity

| Ethnicity | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 362 | 84% | ▲ | 71% |
| Hispanic-Other | 38 | 9% | | 7% |
| Hisp-Puerto Rican | 30 | 7% | | 13% |
| Hispanic-Cuban | 1 | 0% | | 0% |
| Unknown | 1 | 0% | | 8% |
| Hispanic-Mexican | | | | 1% |

### Race

| Race | # | % | State Avg |
|---|---|---|---|
| White/Caucasian | 269 | 62% | 63% |
| Black/African American | 113 | 26% | 16% |
| Other | 36 | 8% | 13% |
| Asian | 6 | 1% | 1% |
| Multiple Races | 5 | 1% | 1% |
| Am. Indian/Native Alaskan | 3 | 1% | 1% |
| Hawaiian/Other Pacific Islander | | | 0% |
| Unknown | | | 5% |

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

**BOS 193 Units Litchfield Cty**
Center for Human Development
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 17 | 18 | -6% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 373 | 317 | 17% ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 17 | 100% | 85% | 86% | 15% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 17 | 100% | 90% | 94% | 10% |

## Data Submission Quality

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

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

## 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 74 Active Supportive Housing – Scattered Site Programs
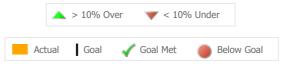
# CIS Coaching
Center for Human Development
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 2 | 2 | 0% | |
| Admits | - | 2 | -100% | ▼ |
| Discharges | - | - | | |
| Service Hours | 37 | 277 | -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 5 Active Specialing Programs

**CM/SupHmlesHsgPilots 523-552**
Center for Human Development
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 62 | 61 | 2% | |
| Admits | 1 | 1 | 0% | |
| Discharges | 6 | 2 | 200% | ▲ |
| Service Hours | 961 | 1,081 | -11% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 59 | 95% | 85% | 86% | 10% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 57 | 100% | 90% | 94% | 10% |

## Data Submission Quality

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

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | ▪ | 33% |
| 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 74 Active Supportive Housing – Scattered Site Programs

**CMHmlesSupHsgPilots 523-551**
Center for Human Development
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 32 | 33 | -3% | |
| Admits | 1 | - | | |
| Discharges | 4 | 1 | 300% | ▲ |
| Service Hours | 370 | 624 | -41% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 28 | 88% | 85% | 86% | 3% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 28 | 100% | 90% | 94% | 10% |

## Data Submission Quality

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

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| 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 74 Active Supportive Housing – Scattered Site Programs

**CMHmlesSupHsgPilots 523-553**
Center for Human Development
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 17 | 17 | 0% | |
| Admits | - | 2 | -100% | ▼ |
| Discharges | 1 | 2 | -50% | ▼ |
| Service Hours | 219 | 389 | -44% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 16 | 94% | 85% | 86% | 9% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 16 | 100% | 90% | 94% | 10% |

## Data Submission Quality

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

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| 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 74 Active Supportive Housing – Scattered Site Programs

**Community Integration Services**
Center for Human Development
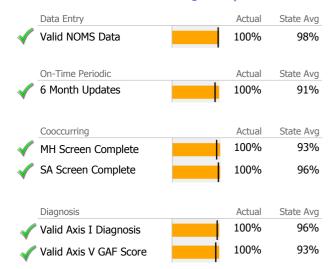Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 7 | 14% | ▲ |
| Admits | 2 | - | | |
| Discharges | - | - | | |
| Bed Days | 583 | 644 | -9% | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 75% | 43% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 86% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 70% | N/A |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 93% |
| ✔ SA Screen Complete | | 100% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 96% |
| ✔ Valid Axis V GAF Score | | 100% | 93% |

## 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% | 47% | -15% ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 8 | 980 days | 1.0 | 79% | 90% | 93% | -11% ▼ |

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

## Data Submitted to DMHAS by Month

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

**Compas House**
Center for Human Development
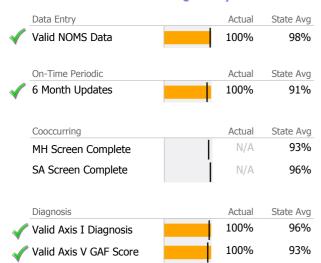Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 5 | 5 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 171 | 52 | |
| Bed Days | 460 | 460 | 0% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 75% | 43% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 86% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 70% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Improved/Maintained Axis V GAF Score | | 2 | 40% | 75% | 47% | -35% ▼ |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 93% |
| SA Screen Complete | | N/A | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 96% |
| ✔ Valid Axis V GAF Score | | 100% | 93% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 5 | 1,501 days | 1.0 | 100% | 90% | 93% | 10% |

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

## 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 21 Active MH Intensive Res. Rehabilitation Programs

**Crossover Group Home 604-240**
Center for Human Development
Mental Health - Residential Services - Group Home
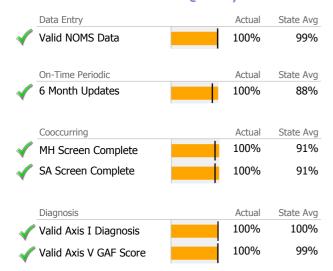
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 9 | 13 | -31% | ▼ |
| Admits | 2 | 5 | -60% | ▼ |
| Discharges | 1 | 5 | -80% | ▼ |
| Bed Days | 699 | 673 | 4% | |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 91% |
| ✓ SA Screen Complete | | 100% | 91% |

| 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 | | | | 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% | 80% | 84% | 20% | ▲ |
| ● | No Re-admit within 30 Days of Discharge | | 0 | 0% | 85% | 88% | -85% | ▼ |
| ✓ | Follow-up within 30 Days of Discharge | | 1 | 100% | 90% | 90% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 8 | 89% | 60% | 79% | 29% | ▲ |
| ✓ Stable Living Situation | | 9 | 100% | 90% | 93% | 10% | |
| ● Improved/Maintained Axis V GAF Score | | 4 | 57% | 95% | 64% | -38% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 8 | 285 days | 0.9 | 95% | 90% | 93% | 5% |

☐ < 90%  ☐ 90-110%  ☐ >110%

▲ > 10% Over   ▼ < 10% Under

☐ Actual  | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 24 Active Group Home Programs

**CTLP Supervised Apts 604-250Y**
Center for Human Development
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
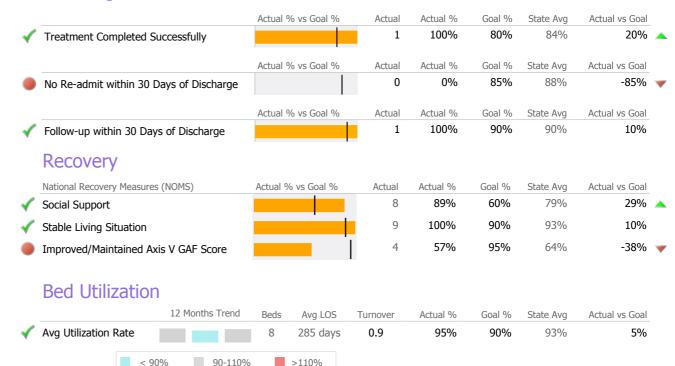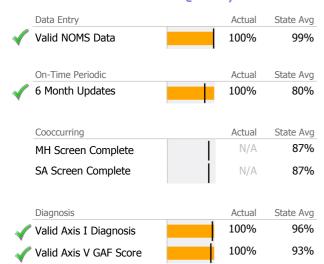Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 7 | 8 | -13% | ▼ |
| Admits | - | - | | |
| Discharges | 1 | - | | |
| Bed Days | 582 | 736 | -21% | ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 80% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 87% |
| SA Screen Complete | | N/A | 87% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 96% |
| ✓ Valid Axis V GAF Score | | 100% | 93% |

## 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 | | 1 | 100% | 60% | 63% | 40% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 0 | 0% | 90% | 80% | -90% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 7 | 100% | 60% | 80% | 40% | ▲ |
| ✓ | Stable Living Situation | | 7 | 100% | 95% | 92% | 5% | |
| 🔴 | Employed | | 1 | 14% | 25% | 11% | -11% | ▼ |
| 🔴 | Improved/Maintained Axis V GAF Score | | 4 | 57% | 95% | 59% | -38% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 8 | 1,064 days | 1.1 | 79% | 90% | 95% | -11% | ▼ |

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

▲ > 10% Over    ▼ < 10% Under

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

* State Avg based on 62 Active Supervised Apartments Programs

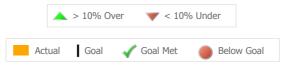**General Coaching 605-290**
Center for Human Development
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---------|--------|----------|------------|---|
| Unique Clients | 1 | 3 | -67% | ▼ |
| Admits | - | - | | |
| Discharges | - | 1 | -100% | ▼ |
| Service Hours | 79 | 15 | | |

## 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 5 Active Specialing Programs

**Hospitality Center (Homeless CM 2)**
Center for Human Development
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 16 | 18 | -11% | ▼ |
| Admits | 6 | 8 | -25% | ▼ |
| Discharges | 6 | 8 | -25% | ▼ |
| Service Hours | - | - | | |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ at least 1 Service within 180 days | | 6 | 100% | 50% | 92% | 50% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | ▢ | ▢ | 67% |
| 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

**Housing First 604557**
Center for Human Development
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 9 | 9 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 236 | 138 | 71% ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 9 | 100% | 85% | 86% | 15% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 9 | 100% | 90% | 94% | 10% |

## Data Submission Quality

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

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

## 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 74 Active Supportive Housing – Scattered Site Programs

**HUD BOS - 134**
Center for Human Development
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 39 | 39 | 0% | |
| Admits | - | 2 | -100% | ▼ |
| Discharges | 3 | - | | |
| Service Hours | 580 | 665 | -13% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 37 | 95% | 85% | 86% | 10% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 37 | 100% | 90% | 94% | 10% |

## Data Submission Quality

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

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| 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 74 Active Supportive Housing – Scattered Site Programs

**Lotus Home 603-241**
Center for Human Development
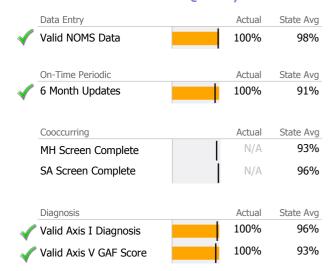Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 5 | 5 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Bed Days | 460 | 460 | 0% |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 93% |
| SA Screen Complete | | N/A | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 96% |
| ✔ Valid Axis V GAF Score | | 100% | 93% |

## 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 | 75% | 43% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 86% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 70% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Improved/Maintained Axis V GAF Score | | 4 | 80% | 75% | 47% | 5% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 5 | 709 days | 1.0 | 100% | 90% | 93% | 10% |

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

▲ > 10% Over    ▼ < 10% Under

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

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

**Odyssey House**
Center for Human Development
Mental Health - Residential Services - MH Intensive Res. Rehabilitation
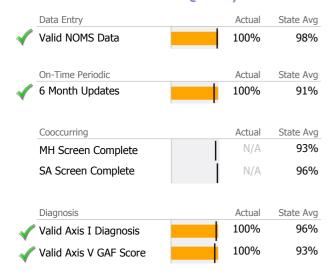
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 4 | 5 | -20% | ▼ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | - | 1 | -100% | ▼ |
| Bed Days | 368 | 312 | 18% | ▲ |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 75% | 43% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 86% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 70% | N/A |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 93% |
| SA Screen Complete | | N/A | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 96% |
| ✔ Valid Axis V GAF Score | | 100% | 93% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Improved/Maintained Axis V GAF Score | | 4 | 100% | 75% | 47% | 25% ▲ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 4 | 702 days | 1.0 | 100% | 90% | 93% | 10% |

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

## 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 21 Active MH Intensive Res. Rehabilitation Programs

**PATH - CM Outreach and Eng**
Center for Human Development
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
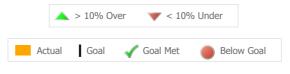Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 65 | 62 | 5% | |
| Admits | 4 | 6 | -33% | ▼ |
| Discharges | 14 | 13 | 8% | |
| Service Hours | 28 | 19 | 52% | ▲ |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ at least 1 Service within 180 days | | 4 | 100% | 50% | 92% | 50% | ▲ |

## Data Submitted to DMHAS by Month

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

▢ 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

**PSRB Coaching**
Center for Human Development
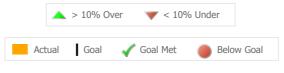Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 1 | 1 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 174 | 178 | -2% |

## 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 5 Active Specialing Programs

**Res SuppApts Torr. 523-261**
Center for Human Development
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 15 | 15 | 0% |
| Admits | - | 1 | -100% ▼ |
| Discharges | - | - | |
| Service Hours | 747 | 758 | -2% |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 95% |
| SA Screen Complete | | N/A | 92% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 95% |
| ✓ Valid Axis V GAF Score | | 100% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| 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 | | N/A | N/A | 50% | 73% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 14 | 93% | 60% | 83% | 33% ▲ |
| ✓ Stable Living Situation | | 14 | 93% | 85% | 95% | 8% |
| ● Employed | | 1 | 7% | 25% | 12% | -18% ▼ |
| ● Improved/Maintained Axis V GAF Score | | 10 | 67% | 95% | 63% | -28% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 15 | 100% | 90% | 98% | 10% |

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 39 Active Residential Support Programs

**Residential Supp Apts 604-260**
Center for Human Development
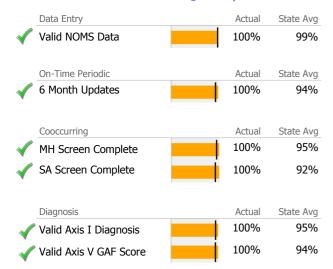Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 34 | 33 | 3% | |
| Admits | 2 | 1 | 100% | ▲ |
| Discharges | - | 2 | -100% | ▼ |
| Service Hours | 3,515 | 3,658 | -4% | |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 95% |
| ✔ SA Screen Complete | | 100% | 92% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 95% |
| ✔ Valid Axis V GAF Score | | 100% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 0% |
| 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 | | N/A | N/A | 50% | 73% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 32 | 94% | 60% | 83% | 34% | ▲ |
| ✔ Stable Living Situation | | 34 | 100% | 85% | 95% | 15% | ▲ |
| 🔴 Employed | | 1 | 3% | 25% | 12% | -22% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 19 | 61% | 95% | 63% | -34% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 34 | 100% | 90% | 98% | 10% |

| | | |
|---|---|---|
| ▲ > 10% Over | ▼ < 10% Under | |
| Actual | Goal | ✔ Goal Met | 🔴 Below Goal |

* State Avg based on 39 Active Residential Support Programs

**ResSupApts 523-262**
Center for Human Development
Mental Health - Residential Services - Residential Support

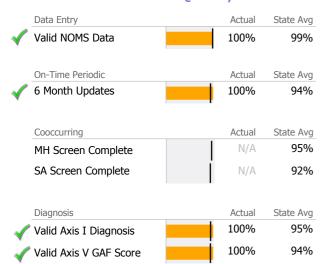Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 14 | 16 | -13% | ▼ |
| Admits | - | - | | |
| Discharges | 1 | - | | |
| Service Hours | 512 | 773 | -34% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 1 | 100% | 50% | 73% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 13 | 93% | 60% | 83% | 33% | ▲ |
| ✔ | Stable Living Situation | | 13 | 93% | 85% | 95% | 8% | |
| 🔴 | Employed | | 1 | 7% | 25% | 12% | -18% | ▼ |
| 🔴 | Improved/Maintained Axis V GAF Score | | 8 | 62% | 95% | 63% | -33% | ▼ |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| | MH Screen Complete | N/A | 95% |
| | SA Screen Complete | N/A | 92% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid Axis I Diagnosis | 100% | 95% |
| ✔ | Valid Axis V GAF Score | 100% | 94% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 13 | 100% | 90% | 98% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| 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 39 Active Residential Support Programs

**Samuels Court 523560**
Center for Human Development
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 11 | 9 | 22% | ▲ |
| Admits | 1 | - | | |
| Discharges | - | 1 | -100% | ▼ |
| Service Hours | 285 | 331 | -14% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 11 | 100% | 85% | 92% | 15% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 11 | 100% | 90% | 95% | 10% |

## Data Submission Quality

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

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | ▮ | 33% |
| 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 52 Active Supportive Housing – Development Programs

**Sequoia House**
Center for Human Development
Mental Health - Residential Services - MH Intensive Res. Rehabilitation
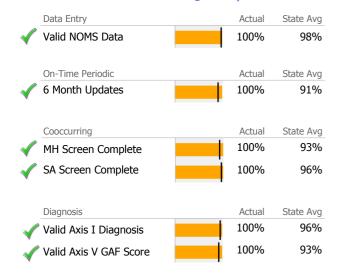
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 3 | 2 | 50% | ▲ |
| Admits | 1 | - | | |
| Discharges | 1 | - | | |
| Bed Days | 136 | 184 | -26% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 1 | 100% | 75% | 43% | 25% | ▲ |
| ✓ | No Re-admit within 30 Days of Discharge | | 1 | 100% | 85% | 86% | 15% | ▲ |
| ✓ | Follow-up within 30 Days of Discharge | | 1 | 100% | 90% | 70% | 10% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 100% | 98% |

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 100% | 93% |
| ✓ | SA Screen Complete | 100% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 96% |
| ✓ | Valid Axis V GAF Score | 100% | 93% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Improved/Maintained Axis V GAF Score | | 1 | 50% | 75% | 47% | -25% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 3 | 1,036 days | 1.0 | 49% | 90% | 93% | -41% | ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | ▢ | 33% |
| 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
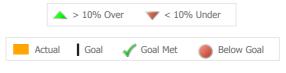
**Shared Living**
Center for Human Development
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
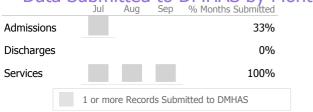Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

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

## 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 5 Active Specialing Programs

**SHP 4 - 263**
Center for Human Development
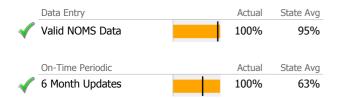Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 7 | 7 | 0% |
| Admits | 1 | 1 | 0% |
| Discharges | - | - | |
| Service Hours | 191 | 66 | 189% ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 7 | 100% | 85% | 86% | 15% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 7 | 100% | 90% | 94% | 10% |

## Data Submission Quality

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

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| 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 74 Active Supportive Housing – Scattered Site Programs

**Special Svcs Team 604270**
Center for Human Development
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 6 | -17% | ▼ |
| Admits | - | - | | |
| Discharges | - | 2 | -100% | ▼ |
| Service Hours | 901 | 769 | 17% | ▲ |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 43% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 4 | 80% | 60% | 63% | 20% | ▲ |
| ✔ Stable Living Situation | | 5 | 100% | 80% | 76% | 20% | ▲ |
| 🔴 Employed | | 0 | 0% | 20% | 9% | -20% | ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 63% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 5 | 100% | 90% | 69% | 10% |

## 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 30 Active Standard Case Management Programs

**Specialing, 232-285**
Center for Human Development
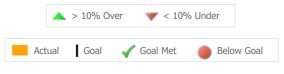Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 11 | 11 | 0% | |
| Admits | 1 | - | | |
| Discharges | 2 | 1 | 100% | ▲ |
| Service Hours | 272 | 319 | -15% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | ▪ | | 33% |
| 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 5 Active Specialing Programs

**Transitional Coaching**
Center for Human Development
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 9 | 9 | 0% | |
| Admits | - | - | | |
| Discharges | - | - | | |
| Service Hours | 572 | 812 | -30% | ▼ |

## 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 5 Active Specialing Programs

**Valley Park PILOTS Dev.523-551**
Center for Human Development
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 5 | 5 | 0% |
| Admits | - | 1 | -100% ▼ |
| Discharges | - | - | |
| Service Hours | 147 | 44 | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 5 | 100% | 85% | 92% | 15% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 5 | 100% | 90% | 95% | 10% |

## Data Submission Quality

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

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

## 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 52 Active Supportive Housing – Development Programs

**Woodside**
Center for Human Development
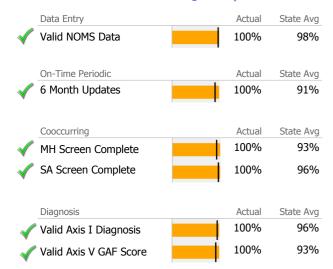Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 2 | | |
| Admits | 1 | - | |
| Discharges | - | - | |
| Bed Days | 166 | - | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 98% |

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 93% |
| ✓ SA Screen Complete | | 100% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 96% |
| ✓ Valid Axis V GAF Score | | 100% | 93% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| 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 | 75% | 43% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 86% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 70% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Improved/Maintained Axis V GAF Score | | 1 | 100% | 75% | 47% | 25% ▲ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 3 | 204 days | 1.5 | 60% | 90% | 93% | -30% ▼ |

■ < 90%  ■ 90-110%  ■ >110%

▲ > 10% Over   ▼ < 10% Under

■ Actual   | Goal   ✓ Goal Met   ● Below Goal

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

**YAS Broad Street Program 276**
Center for Human Development
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018   (Data as of Dec 14, 2018)

## Program Activity

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

## Data Submission Quality

| Data Entry | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 80% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 87% |
| SA Screen Complete | | N/A | 87% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 63% | N/A |
| 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 |
|---|---|---|---|---|---|---|
| 🔴 Employed | | N/A | N/A | 25% | 11% | -25% ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | N/A | N/A | 95% | 59% | -95% ▼ |
| 🔴 Social Support | | N/A | N/A | 60% | 80% | -60% ▼ |
| 🔴 Stable Living Situation | | N/A | N/A | 95% | 92% | -95% ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 2 | N/A | N/A | 0% | 90% | 95% | -90% |

## 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

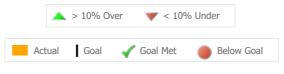* State Avg based on 62 Active Supervised Apartments Programs

**YAS Coaching 604275**
Center for Human Development
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 2 | 2 | 0% | |
| Admits | 1 | 1 | 0% | |
| Discharges | - | - | | |
| Service Hours | 275 | 205 | 34% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | | | 33% |
| 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 5 Active Specialing Programs

**YAS Fiduciary - 222**
Center for Human Development
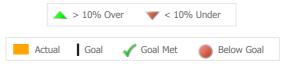Mental Health - Other - Fiduciary

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 14 | 13 | 8% | |
| Admits | 1 | 2 | -50% | ▼ |
| Discharges | - | - | | |
| Service Hours | - | - | | |

## Data Submitted to DMHAS by Month

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

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

▢ Actual  | Goal  ✔ Goal Met  ● Below Goal

* State Avg based on 3 Active Fiduciary Programs

**YAS Fiduciary - 223**
Center for Human Development
Mental Health - Other - Fiduciary

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

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

## Data Submitted to DMHAS by Month

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

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

☐ Actual   | Goal   ✔ Goal Met   ● Below Goal

\* State Avg based on 3 Active Fiduciary Programs

**YAS Fiduciary, 523-221**
Center for Human Development
Mental Health - Other - Fiduciary

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - September 2018  (Data as of Dec 14, 2018)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 32 | 41 | -22% | ▼ |
| Admits | 2 | 2 | 0% | |
| Discharges | 2 | 9 | -78% | ▼ |

## Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

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

| ▯ Actual | ❘ Goal | ✔ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on 3 Active Fiduciary Programs