Ability Beyond
Bethel, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	308	316	-3%
	Admits	138	107	29% ▲
	Discharges	108	129	-16% ▼
	Service Hours	2,305	2,102	10%
	Bed Days	19,381	19,840	-2%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Employment Services	240	73.6%
	Residential Services	86	26.4%

Consumer Satisfaction Survey (Based on 131 FY18 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Participation in Treatment		95%	80%	92%
✓ Respect		94%	80%	91%
✓ Overall		93%	80%	91%
✓ Access		93%	80%	88%
✓ Quality and Appropriateness		91%	80%	93%
✓ General Satisfaction		90%	80%	92%
✓ Outcome		86%	80%	83%
✓ Recovery		85%	80%	79%

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

Client Demographics

Age	#	%	State Avg
18-25	46	15%	12%
26-34	72	23%	24%
35-44	49	16%	21%
45-54	67	22%	20%
55-64	60	19%	17%
65+	14	5%	6%

Gender	#	%	State Avg
Male	187	61%	60%
Female	121	39%	40%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	262	85% ▲	71%
Hispanic-Other	25	8%	7%
Hisp-Puerto Rican	14	5%	13%
Unknown	4	1%	9%
Hispanic-Mexican	2	1%	1%
Hispanic-Cuban	1	0%	0%

Race	#	%	State Avg
White/Caucasian	224	73%	63%
Other	38	12%	14%
Black/African American	36	12%	16%
Asian	5	2%	1%
Multiple Races	4	1%	1%
Am. Indian/Native Alaskan	1	0%	1%
Hawaiian/Other Pacific Islander			0%
Unknown			5%

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

Beecher House ABI/TBI - 165
Ability Beyond
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	4	25%	▲
Admits	1	-		
Discharges	-	-		
Bed Days	1,221	1,096	11%	▲

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%	82%
✓ 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		N/A	N/A	80%	84%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	91%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	85%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		5	100%	60%	81%	40%	▲
✓ Stable Living Situation		5	100%	90%	99%	10%	
● Improved/Maintained Axis V GAF Score		2	50%	95%	69%	-45%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	2,243 days	0.4	98%	90%	95%	8%

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

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 24 Active Group Home Programs

Corbin YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3	3	0%
Admits	-	-	
Discharges	-	-	
Bed Days	822	822	0%

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Cooccurring	Actual	State Avg
MH Screen Complete	N/A	87%
SA Screen Complete	N/A	86%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	68%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	65%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		3	100%	60%	82%	40% ▲
✓ Stable Living Situation		3	100%	95%	96%	5%
● Employed		0	0%	25%	13%	-25% ▼
● Improved/Maintained Axis V GAF Score		1	33%	95%	65%	-62% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		3	733 days	0.3	100%	90%	94%	10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Employment Svs (YAS)
Ability Beyond
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	2	250%	▲
Admits	5	2	150%	▲
Discharges	3	-		
Service Hours	93	4		

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		2	29%	35%	42%	-6%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		4	100%	90%	97%	10%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	97%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■		■			■			44%
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 43 Active Employment Services Programs

Employment Svs Reg 1 - 271 (Norwalk)
Ability Beyond
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	83	87	-5%	
Admits	31	27	15%	▲
Discharges	24	31	-23%	▼
Service Hours	919	934	-2%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		45	54%	35%	42%	19%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		60	100%	90%	97%	10%

Data Submission Quality

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

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

Data Submitted to DMHAS by Month

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

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 43 Active Employment Services Programs

Employment Svs Reg 5 - 270 (Danbury)
Ability Beyond
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	152	151	1%	
Admits	84	62	35%	▲
Discharges	67	82	-18%	▼
Service Hours	1,293	1,164	11%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		78	49%	35%	42%	14%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		91	100%	90%	97%	10%

Data Submission Quality

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

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

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 43 Active Employment Services Programs

Fiduciary for Temp Housing Prog (THP) 252
Ability Beyond
Mental Health - Other - Fiduciary

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 5 Active Fiduciary Programs

Grand Street YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3	3	0%
Admits	-	1	-100% ▼
Discharges	-	-	
Bed Days	822	777	6%

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Cooccurring	Actual	State Avg
MH Screen Complete	N/A	87%
SA Screen Complete	N/A	86%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	68%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	65%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		3	100%	60%	82%	40% ▲
✓ Employed		1	33%	25%	13%	8%
✓ Stable Living Situation		3	100%	95%	96%	5%
● Improved/Maintained Axis V GAF Score		2	67%	95%	65%	-28% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		3	875 days	0.3	100%	90%	94%	10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Nicholas Drive YAS - 332
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	10	-10%	
Admits	4	1	300%	▲
Discharges	-	2	-100%	▼
Bed Days	2,115	2,435	-13%	▼

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	86%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	87%
✓ SA Screen Complete	100%	86%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										44%
Discharges										0%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	68%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	65%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		9	100%	60%	82%	40%	▲
✓ Stable Living Situation		9	100%	95%	96%	5%	
● Employed		0	0%	25%	13%	-25%	▼
● Improved/Maintained Axis V GAF Score		4	57%	95%	65%	-38%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		9	585 days	0.4	86%	90%	94%	-4%

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual Goal ✓ Goal Met ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Prospect Street 175
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	-	-	
Discharges	-	-	
Bed Days	1,096	1,096	0%

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	87%
✓ SA Screen Complete	100%	86%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	68%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	65%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		4	100%	60%	82%	40% ▲
✓ Stable Living Situation		4	100%	95%	96%	5%
● Improved/Maintained Axis V GAF Score		3	75%	95%	65%	-20% ▼
● Employed		0	0%	25%	13%	-25% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		4	524 days	0.3	100%	90%	94%	10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Sheffield Apartments #1 YAS - 172
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	8	13%	▲
Admits	2	1	100%	▲
Discharges	2	1	100%	▲
Bed Days	1,919	1,779	8%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	98%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	87%
✓ SA Screen Complete	100%	86%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		2	100%	60%	68%	40%	▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		2	100%	90%	65%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		8	89%	60%	82%	29%	▲
✓ Stable Living Situation		9	100%	95%	96%	5%	
● Employed		0	0%	25%	13%	-25%	▼
● Improved/Maintained Axis V GAF Score		6	86%	95%	65%	-9%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		7	780 days	0.3	100%	90%	94%	10%

< 90% 90-110% >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										11%
Discharges										11%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Sheffield Apartments #2 YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	5	20%	▲
Admits	1	-		
Discharges	1	-		
Bed Days	1,370	1,370	0%	

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	87%
✓ SA Screen Complete	100%	86%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										11%
Discharges										11%

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%	68%	40%	▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		1	100%	90%	65%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		5	83%	60%	82%	23%	▲
✓ Stable Living Situation		6	100%	95%	96%	5%	
● Employed		1	17%	25%	13%	-8%	
● Improved/Maintained Axis V GAF Score		4	80%	95%	65%	-15%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	668 days	0.3	100%	90%	94%	10%

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

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Supervised Res Recovery Program 250
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	17	17	0%	
Admits	7	7	0%	
Discharges	8	7	14%	▲
Bed Days	2,238	2,418	-7%	

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	87%
✓ SA Screen Complete	86%	86%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		■	■	■	■			■	■	67%
Discharges	■	■	■		■	■		■		67%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		4	50%	60%	68%	-10%	▼
Follow-up within 30 Days of Discharge		3	75%	90%	65%	-15%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		13	76%	60%	82%	16%	▲
Stable Living Situation		16	94%	95%	96%	-1%	
Employed		1	6%	25%	13%	-19%	▼
Improved/Maintained Axis V GAF Score		8	62%	95%	65%	-33%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate	■■■■■■■■■■■■	10	591 days	0.3	82%	90%	94%	-8%

■ < 90% ■ 90-110% ■ >110%

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Supervised Res Support Program 251
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	20	-10%	
Admits	2	6	-67%	▼
Discharges	3	4	-25%	▼
Bed Days	4,177	4,245	-2%	

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	87%
✓ SA Screen Complete	100%	86%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions					■	■				22%
Discharges			■		■					22%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		3	100%	60%	68%	40%	▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		3	100%	90%	65%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		16	89%	60%	82%	29%	▲
✓ Stable Living Situation		18	100%	95%	96%	5%	
● Employed		3	17%	25%	13%	-8%	
● Improved/Maintained Axis V GAF Score		3	19%	95%	65%	-76%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		16	1,044 days	0.3	95%	90%	94%	5%

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

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Unionville House ABI/TBI - 166
Ability Beyond
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	-	-	
Discharges	-	-	
Bed Days	1,096	1,096	0%

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	N/A	82%
SA Screen Complete	N/A	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		N/A	N/A	80%	84%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	91%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	85%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		4	100%	90%	99%	10%
● Social Support		2	50%	60%	81%	-10%
● Improved/Maintained Axis V GAF Score		2	50%	95%	69%	-45% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		4	3,149 days	0.3	100%	90%	95%	10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 24 Active Group Home Programs

Woodland House ABI/TBI - 167
Ability Beyond
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	1	-	
Discharges	-	1	-100% ▼
Bed Days	861	1,017	-15% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	95%	99%

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

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	82%
✓ SA Screen Complete	100%	93%

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

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	80%	84%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	91%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	85%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		4	100%	90%	99%	10%
● Social Support		2	50%	60%	81%	-10%
● Improved/Maintained Axis V GAF Score		1	33%	95%	69%	-62% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		4	1,381 days	0.4	79%	90%	95%	-11% ▼

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

▲ > 10% Over | ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 24 Active Group Home Programs

YAS Starr Avenue Supervised Apts 271Y
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	7	-14%	▼
Admits	-	-		
Discharges	-	1	-100%	▼
Bed Days	1,644	1,689	-3%	

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Cooccurring	Actual	State Avg
MH Screen Complete	N/A	87%
SA Screen Complete	N/A	86%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	68%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	65%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		6	100%	60%	82%	40%	▲
✓ Stable Living Situation		6	100%	95%	96%	5%	
● Employed		0	0%	25%	13%	-25%	▼
● Improved/Maintained Axis V GAF Score		1	17%	95%	65%	-78%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	1,543 days	0.3	100%	90%	94%	10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs