Torrington, CT

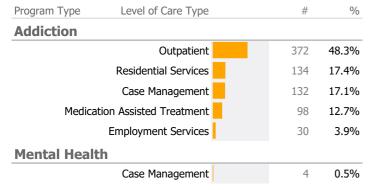
Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)



- ▲ > 10% Over 1 Yr Ago
- \checkmark > 10% Under 1Yr Ago

Clients by Level of Care



Consumer Satisfaction Survey (Based on 464 FY20 Surveys) Question Domain Satisfied % vs Goal% Satisfied % Goal % State Avg Quality and Appropriateness 98% 80% 93% \checkmark General Satisfaction 98% 80% 92% \checkmark \checkmark Overall 97% 80% 91% Participation in Treatment 80% 92% 97% \checkmark ✓ Respect 80% 91% 96% ✓ Access 88% 95% 80% V Outcome 93% 80% 83% \checkmark Recovery 91% 80% 79% 0-80% 80-100% ✓ Goal Met Satisfied % Goal % Under Goal

Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	40	7%	8%	Male 🗾	318	53%	58%
26-34	172	29%	21%	Female	278	47%	42%
35-44	174	29%	22%	Transgender			0%
45-54 📕	97	16%	20%				
55-64	94	16%	20%				
65+	19	3%	9%	Race	#	%	State Avg
				White/Caucasian	448	75%	▲ 63%
Ethnicity	#	%	State Avg	Unknown 📘	74	12%	5%
Non-Hispanic	485	81%	▲ 69%	Other <mark> </mark>	37	6%	13%
Unknown	81	14%	11%	Black/African American	34	6%	16%
Hispanic-Other	26	4%	8%	Asian	3	1%	1%
Hisp-Puerto Rican	5	1%		Am. Indian/Native Alaskan	1	0%	1%
	5	1%	•	Multiple Races			1%
Hispanic-Cuban			0%	Hawaiian/Other Pacific Islander			0%
Hispanic-Mexican			1%	·			
	Unique C	lients	State Avg	▲ > 10% Over State Avg ▼	> 10% L	Inder Si	tate Avg

221 Migeon-PILOTS Development 562-551

McCall Foundation Inc

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	1	-	
Discharges	2	-	
Service Hours	2	-	

	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		5	100%	85%	93%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		1	33%	90%	96%	-57%	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	90%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				33%
Discharges				33%
Services				0%
	1 or mo	ore Recor	ds Subr	nitted to DMHAS

	> 10% 0	ver 🔻 < 10	% Under	
Actual	Goal	V Goal Met	Belo	w Goal

* State Avg based on 66 Active Supportive Housing – Development Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Docovory

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	367	409	-10%	▼
Admits	94	164	-43%	▼
Discharges	98	180	-46%	▼
Service Hours	354	1,850	-81%	▼

Data Submission Quality

Data Entry		Actual S	tate Avg
Valid NOMS Data		78%	87%
Valid TEDS Data		80%	87%
On-Time Periodic		Actual	State Avg
6 Month Updates	•	32%	17%
Co-occurring		Actual	State Avg
MH Screen Complete		69%	91%
V SA Screen Complete		97%	96%
		•	

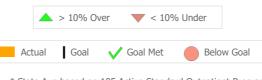
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	83%	96%

Data Submitted to Sep OMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		39	40%	50%	46%	-10%)
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	I
Abstinence/Reduced Drug Use		282	76%	55%	41%	21%	,
Not Arrested		305	82%	75%	68%	7%)
Stable Living Situation	· · · · ·	328	88%	95%	66%	-7%)
Employed	· · ·	154	42%	50%	26%	-8%)
Self Help	<u> </u>	109	29%	60%	17%	-31%)
Improved/Maintained Axis V GAF Score	i	163	62%	75%	34%	-13%	,
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	1
Clients Receiving Services		65	24%	90%	45%	-66%	,
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	I
2 or more Services within 30 days		65	70%	75%	58%	-5%	,



* State Avg based on 105 Active Standard Outpatient Programs

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	102	96	6%	
Admits	96	79	22%	
Discharges	86	79	9%	
Bed Days	2,162	1,817	19%	

Data Submission Quality

Data Entry	Actual S	State Avg
Valid NOMS Data	88%	86%
Valid TEDS Data	90%	97%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	13%
Co. occurring	Actual	State Ava
Co-occurring	1	State Avg
MH Screen Complete	80%	92%
SA Screen Complete	77%	93%
Diagnosis	Actual	State Avg

Blagitobio		710001	otate / try
Valid Axis I Di	agnosis	100%	100%
Valid Axis V G	AF Score	82%	90%

Data Submitted to DMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Ava	Actual vs Goal
	Actual % vs Goal %				J	
Treatment Completed Successfully		58	67%	80%	65%	-13%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		73	85%	85%	90%	0%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		35	60%	90%	62%	-30%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Improved/Maintained Axis V GAF Score		64	74%	75%	79%	-1%

Bed Utilization

Self Help

Abstinence/Reduced Drug Use



59

39

53%

35%

70%

60%

30%

35%

-17% 🗨

-25% 🔷

Actual 🛛 Goal 🗸 Goal Met 🔶 Below Goal	

* State Avg based on 7 Active SA Intensive Res. Rehabilitation 3.7 Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	14	22	-36% 🔻
Admits	4	10	-60% 🔻
Discharges	5	10	-50% 🔻
Bed Days	910	1,080	-16% 🔻

Discharge Outcomes



Data Submitted to DMHAS by Month





* State Avg based on 12 Active Recovery House Programs

Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

68%

0%

70%

75%

84%

63%

-2% -75% 🛡

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	27	28	-4%
Admits	14	14	0%
Discharges	14	14	0%
Bed Days	1,278	1,284	0%

Data Submission Quality

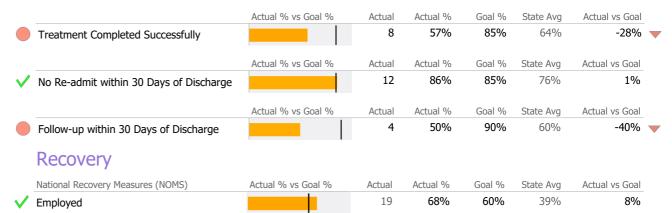
Data Entry	Actual S	State Avg
Valid NOMS Data	89%	89%
Valid TEDS Data	99%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	N/A
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	94%
V SA Screen Complete	100%	94%
•		
Diagnosis	Actual	State Avg

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		100%	100%
Valid Axis V GAF Score		7%	81%

Data Submitted to DMHAS by Month

	Jui	Aug	Sep	70 MONUNS SUDINILLEU					
Admissions				100%					
Discharges				100%					
1 or more Records Submitted to DMHAS									

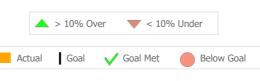
Discharge Outcomes



Abstinence/Reduced Drug Use		19
Improved/Maintained Axis V GAF Score		0

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization	Rate		14	90 days	0.5	99%	90%	76%	9%
	< 90%	90-110%		>110%					



* State Avg based on 8 Active Transitional/Halfway House 3.1 Programs



Data Submission Quality

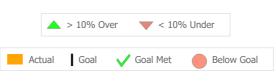
Data Entry	Actual	State Avg
Valid NOMS Data	N/A	69%
Valid TEDS Data	N/A	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%
Co-occurring	Actual	State Avg
MH Screen Complete	N/A	97%
SA Screen Complete	N/A	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	72%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		N/A	N/A	55%	21%	-55% 🔻
Employed		N/A	N/A	50%	29%	-50% 🔻
Improved/Maintained Axis V GAF Score		N/A	N/A	75%	57%	-75% 🔷
Not Arrested		N/A	N/A	75%	50%	-75% 🔷
Self Help		N/A	N/A	60%	28%	-60% 🔻
Stable Living Situation	· · · ·	N/A	N/A	95%	71%	-95% 🔻

Data Submitted to DMHAS by Month

	Jui	Aug	JCP	70 FIOTUIS Submitted
Admissions				0%
Discharges				0%
	1 or mo	re Recor	ds Subn	nitted to DMHAS



* State Avg based on 7 Active Naltrexone Programs

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	96	77	25%	
Admits	27	24	13%	
Discharges	27	19	42%	
Service Hours	84	512	-84%	▼

Data Submission Quality

Data Entry	A	Actual	State Avg
Valid NOMS Data		81%	88%
Valid TEDS Data		93%	96%
	•		
On-Time Periodic		Actual	State Avg
6 Month Updates		41%	31%
Co-occurring		Actual	State Avg
MH Screen Complete		63%	77%
V SA Screen Complete		96%	88%

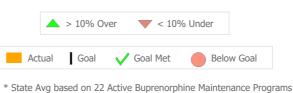
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	83%	97%

Data Submitted to DMHAS by Month



Discharge Outcomes

 ■ Treatment Completed Successfully 9 33% 50% 34% -17% Recovery National Recovery Measures (NOMS) Actual % s Goal % Actual % Actual % 81 84% 55% 45% 29% 	
National Recovery Measures (NOMS) Actual % vs Goal % Actual % Actual % Goal % State Avg Actual vs Goal	
A hotimoneo / Deduced Drug Lies 81 84% 55% 45% 20%	
VAbstinence/Reduced Drug Use8184%55%45%29%	
✓ Not Arrested 77 80% 75% 61% 5%	
Employed 43 45% 50% 23% -5%	
Stable Living Situation 84 88% 95% 60% -7%	
Improved/Maintained Axis V GAF Score 54 71% 75% 31% -4%	
Self Help 34 35% 60% 17% -25%	-
Service Utilization	
Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal	
Clients Receiving Services 14 20% 90% 36% -70%	



Measure	Actual	1 Yr Ago	Variance %
Unique Clients	14	15	-7%
Admits	2	5	-60% 🔻
Discharges	2	4	-50% 🔻
Service Hours	3	47	-94% 🔻

Service Engagement



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
6				67%
;				67%
				67%
1 (or mor	e Recor	ds Subn	nitted to DMHAS
	5	5	5	5

	> 10% 0	ver 🔻 < 10)% Under	
Actual	Goal	🗸 Goal Met	Belo	w Goal

* State Avg based on 22 Active Outreach & Engagement Programs

SOR - Employment

McCall Foundation Inc

Addiction - Employment Services - Employment Services

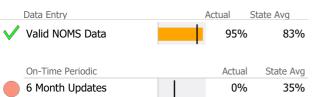
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	30	43	-30%	▼
Admits	18	14	29%	
Discharges	21	28	-25%	▼
Service Hours	45	64	-30%	▼

Data Submission Quality

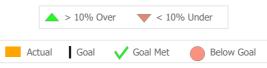


Data Submitted to DMHAS by Month



Recovery

	,							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Employed		21	68%	35%	29%	33%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		5	50%	90%	37%	-40%	▼



* State Avg based on 11 Active Employment Services Programs

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4		
Admits	4	-	
Discharges	3	-	
Service Hours	5	-	

Data Submission Quality

Data Entry	Actual S	itate Avg
Valid NOMS Data	76%	88%
Valid TEDS Data	55%	96%
	•	
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	31%
Co-occurring	Actual	State Avg
MH Screen Complete	25%	77%
SA Screen Complete	25%	88%
Diagnosis	Actual	State Avg

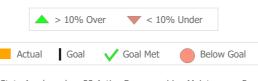
Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	100%	97%

Data Submitted to DMHAS by Month

	Jui	Aug	Sep	70 MONUNS SUDMILLEU		
Admissions				100%		
Discharges				67%		
Services				0%		
1 or more Records Submitted to DMHAS						

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		1	33%	50%	34%	-17%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		4	100%	95%	60%	5%	
	Employed	—	1	25%	50%	23%	-25%	
	Abstinence/Reduced Drug Use		1	25%	55%	45%	-30%	
	Improved/Maintained Axis V GAF Score		1	33%	75%	31%	-42%	
	Not Arrested		1	25%	75%	61%	-50%	
	Self Help		0	0%	60%	17%	-60%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		1	100%	90%	36%	10%	



* State Avg based on 22 Active Buprenorphine Maintenance Programs

Addiction - Case Management - Standard Case Management

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	24	-25%	▼
Admits	14	4	250%	
Discharges	7	3	133%	
Service Hours	10	41	-75%	▼

Data Submission Quality

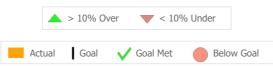
Data Entry	Actual St	tate Avg
Valid NOMS Data	59%	94%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	63%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted		
Admissions				100%		
Discharges				100%		
Services				0%		
1 or more Records Submitted to DMHAS						

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		3	43%	50%	38%	-7%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		7	39%	20%	27%	19%
Stable Living Situation		13	72%	80%	82%	-8%
Self Help		5	28%	60%	60%	-32%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		4	36%	90%	80%	-54%



* State Avg based on 8 Active Standard Case Management Programs

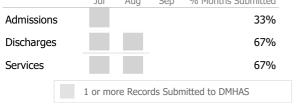
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	23	24	-4%
Admits	7	7	0%
Discharges	3	12	-75% 🔻
Service Hours	12	149	-92% 🔻

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	46%	87%
Valid TEDS Data	53%	87%
On-Time Periodic	Actual	State Avg
6 Month Updates	46%	17%
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	91%
V SA Screen Complete	100%	96%
Diagnosis	Actual	State Avg

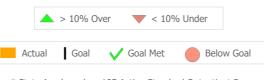
Diagnosis	Actual	State Avy
Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	65%	96%

Data Submitted to DMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		2	67%	50%	46%	17%	-
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		15	65%	55%	41%	10%	
Employed		10	43%	50%	26%	-7%	
Stable Living Situation	i	20	87%	95%	66%	-8%	
Not Arrested		13	57%	75%	68%	-18%	
Improved/Maintained Axis V GAF Score	i	10	62%	75%	34%	-13%	
Self Help	– .	4	17%	60%	17%	-43%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Clients Receiving Services		8	40%	90%	45%	-50%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		2	29%	75%	58%	-46%	



* State Avg based on 105 Active Standard Outpatient Programs

McCall Foundation Inc Addiction - Case Management - Outreach & Engagement

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	104	62	68% 🔺
Admits	20	24	-17% 🔻
Discharges	10	30	-67% 🔻
Service Hours	17	-	

Service Engagement



Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted	
Admission	S				100%	
Discharges					67%	
Services					67%	
	1 or more Records Submitted to DMHAS					

	> 10% Ov	er 🔻 < 10	% Under	
Actual	Goal	V Goal Met	Belo	w Goal

* State Avg based on 22 Active Outreach & Engagement Programs