Positive Directions
Westport, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	33	25	32% ▲
	Admits	2	11	-82% ▼
	Discharges	5	4	25% ▲
	Service Hours	155	111	39% ▲

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	33	100.0%

Consumer Satisfaction Survey

(Based on 6 FY20 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ General Satisfaction		100%	80%	92%
✓ Outcome		100%	80%	83%
✓ Recovery		100%	80%	79%
✓ Quality and Appropriateness		83%	80%	93%
✓ Participation in Treatment		83%	80%	92%
✓ Overall		83%	80%	91%
✓ Respect		83%	80%	91%
✓ Access		83%	80%	88%

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

Client Demographics

Age	#	%	State Avg
18-25	9	30% ▲	8%
26-34	5	17%	21%
35-44	4	13%	22%
45-54	3	10%	20%
55-64	8	27%	20%
65+	1	3%	9%

Gender	#	%	State Avg
Female	21	64% ▲	42%
Male	12	36% ▼	58%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	29	88% ▲	69%
Hispanic-Other	2	6%	8%
Hisp-Puerto Rican	2	6%	12%
Hispanic-Cuban			0%
Hispanic-Mexican			1%
Unknown		▼	11%

Race	#	%	State Avg
White/Caucasian	27	82% ▲	63%
Other	4	12%	13%
Black/African American	2	6%	16%
Am. Indian/Native Alaskan			1%
Asian			1%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%
Unknown			5%

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

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

420 Post Road SA OP 790200
Positive Directions
Addiction - Outpatient - Standard Outpatient

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	33	25	32% ▲
Admits	2	11	-82% ▼
Discharges	5	4	25% ▲
Service Hours	155	111	39% ▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	87%
✓ Valid TEDS Data	100%	87%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	79%	17%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	91%
✓ SA Screen Complete	100%	96%

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

Data Submitted to DMHAS by Month

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

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully	0	0%	50%	46%	-50% ▼

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Not Arrested	32	97%	75%	68%	22% ▲
✓ Abstinence/Reduced Drug Use	22	67%	55%	41%	12% ▲
✓ Stable Living Situation	33	100%	95%	66%	5%
● Employed	14	42%	50%	26%	-8%
● Self Help	15	45%	60%	17%	-15% ▼
● Improved/Maintained Axis V GAF Score	4	17%	75%	34%	-58% ▼

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services	25	89%	90%	45%	-1%

Service Engagement

Outpatient	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days	2	100%	75%	58%	25% ▲

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 105 Active Standard Outpatient Programs

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