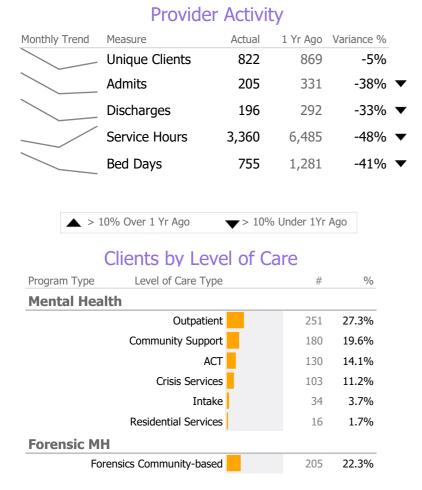
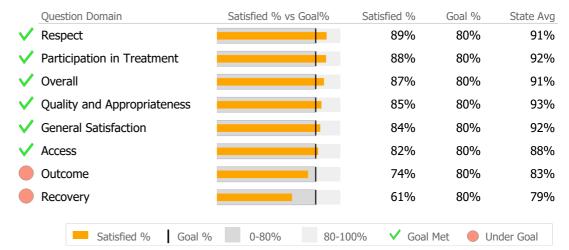
#### Southeastern Mental Health Authority Norwich, CT

#### Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

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



#### Consumer Satisfaction Survey (Based on 105 FY20 Surveys)



#### **Client Demographics**

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	95	12%	8%	Male 🗾	502	61%	58%
26-34	165	20%	21%	Female	316	38%	42%
35-44	164	20%	22%	Transgender	3	0%	0%
45-54	171	21%	20%				
55-64	143	18%	20%				
65+	79	10%	9%	Race	#	%	State Avg
				White/Caucasian	539	69%	63%
Ethnicity	#	%	State Avg	Black/African American	114	15%	16%
Non-Hispanic	639	78%	69%	Other	57	7%	13%
Unknown	95	12%	11%	Unknown	30	4%	5%
Hisp-Puerto Rican	44	5%	12%	Multiple Races	26	3%	1%
Hispanic-Other	42	5%	8%	Asian	9	1%	1%
				Am. Indian/Native Alaskan	8	1%	1%
Hispanic-Cuban	1	0%	0%	Hawaiian/Other Pacific Islander	2	0%	0%
Hispanic-Mexican	1	0%	1%				
	Unique C	lients	State Avg	▲ > 10% Over State Avg	> 10% L	Inder St	ate Avg

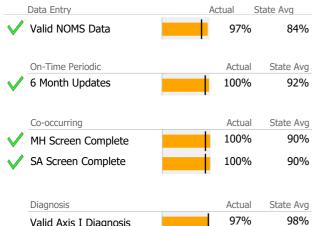
#### ACCESS

Southeastern Mental Health Authority Mental Health - ACT - Assertive Community Treatment

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	79	70	13%	
Admits	8	8	0%	
Discharges	9	5	80%	
Service Hours	917	1,580	-42%	▼

## Data Submission Quality

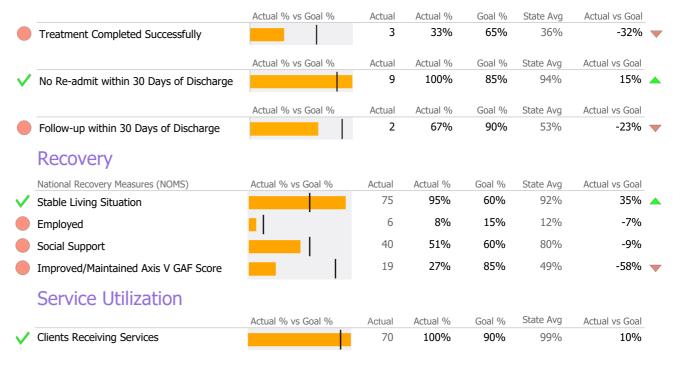


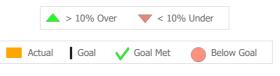
Diagriosis		/ tecaal	State Hig
Valid Axis I Diagnosis		97%	98%
Valid Axis V GAF Score	, in the second se	91%	87%

# Data Submitted to DMHAS by Month



#### **Discharge Outcomes**





\* State Avg based on 23 Active Assertive Community Treatment Programs

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

## Data Submission Quality

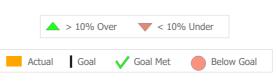
Data Entry		Actual	State Avg
Valid NOMS Data		N/A	86%
On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	54%
Co-occurring		Actua	State Avg
MH Screen Complete		N/A	
SA Screen Complete	j	N/A	76%

#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	33%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		N/A	N/A	30%	20%	-30%	
Improved/Maintained Axis V GAF Score		N/A	N/A	75%	40%	-75%	
Social Support		N/A	N/A	60%	59%	-60%	
Stable Living Situation	· ·	N/A	N/A	95%	73%	-95%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		N/A	N/A	90%	75%	N/A	▼

## Data Submitted to DMHAS by Month

	Jui	Aug	Sep	70 MOITUIS SUDITILLEU
Admissions				0%
Discharges				0%
	1 or mo	re Recor	ds Subr	nitted to DMHAS



\* State Avg based on 84 Active Standard Outpatient Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	25	-64%	▼
Admits	9	30	-70%	▼
Discharges	8	30	-73%	▼

#### Crisis

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Evaluation within 1.5 hours of Request		2	40%	75%	79%	-35%	▼
<ul> <li>Community Location Evaluation</li> </ul>		5	100%	80%	71%	20%	
Follow-up Service within 48 hours		0	NA	90%	68%	-90%	▼

# Data Submitted to DMHAS by Month Jul Aug Sep % Months Submitted Admissions 67%

Discharges	67	%
	1 or more Records Submitted to DMHAS	

	<b>^</b> >	10% Over	r 🔻 < 1	0% Under	
Act	ual	Goal	🗸 Goal Met	Belo	w Goal

\* State Avg based on 25 Active Mobile Crisis Team Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1	4	-75% 🔻
Admits	-	1	-100% 🔻
Discharges	-	1	-100% 🔻
Service Hours	-	-	

## Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted
Admission	5				0%
Discharges	6				0%
Services					0%
	1 or more Records Submitted to DMHAS				

	> 10% 0	ver 🔻 < 10	% Under	
Actual	Goal	🗸 Goal Met	Below G	ioal

\* State Avg based on 3 Active Re-entry Programs Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	101	116	-13% 🔻
Admits	-	-	
Discharges	5	4	25% 🔺
Service Hours	132	375	-65% 🔻

## Data Submission Quality

Data Entry	Actual S	State Avg
Valid NOMS Data	95%	86%
On-Time Periodic	Actual	State Avg
6 Month Updates	33%	54%
Co-occurring	Actual	State Avg
MH Screen Complete	N/A	75%
SA Screen Complete	N/A	76%

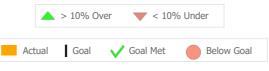
Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		100%	97%
Valid Axis V GAF Score	,	100%	90%

# Data Submitted to DMHAS by Month



#### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		4	80%	50%	33%	30%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		85	84%	60%	59%	24%	
	Stable Living Situation		93	92%	95%	73%	-3%	
	Employed	I	11	11%	30%	20%	-19%	-
	Improved/Maintained Axis V GAF Score		48	49%	75%	40%	-26%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		92	96%	90%	75%	6%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		0	0%	75%	76%	-75%	•



\* State Avg based on 84 Active Standard Outpatient Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	96	82	17%	
Admits	114	98	16%	
Discharges	113	98	15%	

#### Crisis

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Evaluation within 1.5 hours of Request		72	72%	75%	79%	-3%
$\checkmark$	Community Location Evaluation		98	98%	80%	71%	18% 🔺
	Follow-up Service within 48 hours		2	20%	90%	68%	-70% 🔻

## Data Submitted to DMHAS by Month

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

	> 10% C	Over 🔻 < 10	1% Under	
Actual	Goal	V Goal Met	Belo	w Goal

\* State Avg based on 25 Active Mobile Crisis Team Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	23	-4%	
Admits	1	4	-75% 🔻	
Discharges	-	1	-100% 🔻	

#### Data Submitted to DMHAS by Month

		Jui	Aug	Sep	% Months Submitted
Admissions	5				33%
Discharges					0%
		1 or mo	re Recor	ds Subr	nitted to DMHAS

		> 10% Ove	er	▼	< 10%	Unde	r		
Act	tual	Goal	$\checkmark$	Goal	Met		Belo	w Goal	

\* State Avg based on 1 Active Outreach & Engagement Programs

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

# Data Submitted to DMHAS by Month

	Jui	Aug	Sep	70 MONUIS SUDINILLEU
Admissions				0%
Discharges				0%
	1 or mo	ore Reco	rds Subr	nitted to DMHAS

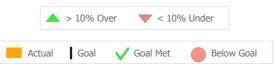
	> 10% 0	ver 🔻 < 100	% Under
Actual	Goal	V Goal Met	Below Goal

\* State Avg based on 0 Active Housing Assistance Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	34	38	-11% 🔻
Admits	29	35	-17% 🔻
Discharges	28	32	-13% 🔻
Service Hours	61	71	-14% 🔻

## Data Submitted to DMHAS by Month

		JUI	Aug	Sep	% Months Submitted		
Admission	S				100%		
Discharge	5				100%		
Services					100%		
		1 or more Records Submitted to DMHAS					



\* State Avg based on 17 Active Central Intake Programs

Actual

0

Actual %

0%

State Avg

66%

Goal %

0%

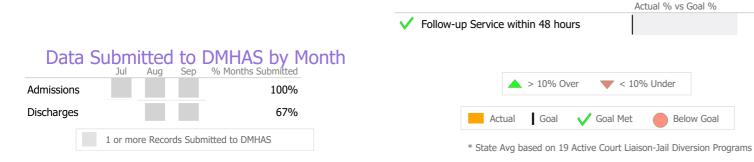
Actual vs Goal

0%

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	154	199	-23%	▼
Admits	12	99	-88%	▼
Discharges	10	74	-86%	▼

#### Jail Diversion



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 mo	ore Recor	rds Subr	nitted to DMHAS

	<b></b>	> 10% Ove	r	▼	< 10%	Unde	r		
Act	ual	Goal	$\checkmark$	Goal I	Met		Belov	w Goa	

\* State Avg based on 17 Active Other Programs

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

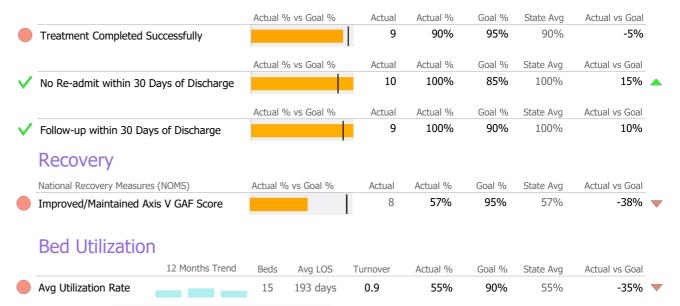
#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	16	37	-57% 🔻	
Admits	6	22	-73% 🔻	
Discharges	10	22	-55% 🔻	
Bed Days	755	1,281	-41% 🔻	

## Data Submission Quality

Data Entry	Actual	State Avg
🗸 Valid NOMS Data	95	% 95%
	·	
On-Time Periodic	Actu	al State Avg
✓ 6 Month Updates	75	% 75%
·		
Co-occurring	Actu	ual State Avg
V MH Screen Complete	100	% 100%
V SA Screen Complete	100	% 100%
•		
Diagnosis	Actu	al State Avg
Valid Axis I Diagnosis	88	% 88%

#### **Discharge Outcomes**





## Data Submitted to DMHAS by Month

88%

88%



Valid Axis V GAF Score

	> 10% 0	ver 🔻 < 109	% Under	
Actual	Goal	V Goal Met	Belo	w Goal

\* State Avg based on 1 Active Sub-Acute Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	154	128	20%	
Admits	15	5	200%	
Discharges	5	6	-17%	▼
Service Hours	617	702	-12%	▼

# Data Submission Quality

Data Entry	Actual S	tate Avg
Valid NOMS Data	97%	86%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	70%	54%
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	75%
V SA Screen Complete	100%	76%

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	94%	97%
Valid Axis V GAF Score	75%	90%

# Data Submitted to DMHAS by Month



## Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		3	60%	50%	33%	10%
_						
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		124	81%	60%	59%	21% 🔺
Stable Living Situation		141	92%	95%	73%	-3%
Employed		28	18%	30%	20%	-12%
Improved/Maintained Axis V GAF Score		49	37%	75%	40%	-38%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		137	92%	90%	75%	2%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		10	67%	75%	76%	-8%



\* State Avg based on 84 Active Standard Outpatient Programs

State Avg

66%

Goal %

0%

Actual vs Goal

0%

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	28	33	-15%	▼
Admits	3	5	-40%	▼
Discharges	-	4	-100%	▼

#### Jail Diversion



	▲ > 10% Ove	r 🛛 💙 < 10% Under	
Actu	ual Goal	V Goal Met 🛛 🛑 Belo	w Goal

Actual % vs Goal %

Actual

0

Actual %

0%

\* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	180	180	0%
Admits	4	17	-76% 🔻
Discharges	6	8	-25% 🔻
Service Hours	625	1,715	-64% 🔻

## Data Submission Quality

Data Entry	Δ	ctual	State Avg
Valid NOMS Data		94%	80%
On-Time Periodic		Actual	State Avg
6 Month Updates		71%	85%
Co-occurring		Actual	State Avg
V MH Screen Complete		100%	78%
V SA Screen Complete		100%	61%
•			
Diagnosis		Actual	Ctata Ava
Diagnosis		Actual	State Avg
🗸 Valid Axis I Diagnosis		98%	98%

#### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		5	83%	65%	61%	18%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Stable Living Situation		167	93%	80%	89%	13%	
$\checkmark$	Social Support		116	64%	60%	81%	4%	
	Employed	<b> </b>	20	11%	20%	13%	-9%	
	Improved/Maintained Axis V GAF Score	<u> </u>	50	29%	65%	56%	-36%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		171	98%	90%	94%	8%	

	> 10% 0	ver 🔻 < 109	% Under	
Actual	Goal	V Goal Met	Below Goa	I

\* State Avg based on 36 Active CSP Programs

## Data Submitted to DMHAS by Month

97%

96%

		Jui	Aug	Sep	70 Monuns Submitted
Admissions	6				100%
Discharges					67%
Services					100%
	1.		Deee	ala Culan	nitted to DMHAS
	10	or moi	e Reco	ras Subri	litted to DMHAS

Valid Axis V GAF Score

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 mo	ore Recor	ds Subr	nitted to DMHAS

	<b></b>	• 10% Ove	r	▼	< 10%	Unde	r		
Act	tual	Goal	$\checkmark$	Goal	Met		Belov	w Goal	

\* State Avg based on 17 Active Other Programs

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

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	52	54	-4%
Admits	4	7	-43% 🔻
Discharges	2	7	-71% 🔻
Service Hours	1,007	2,041	-51% 🔻

## Data Submission Quality

	Data Entry	Actual	State Avg
	Valid NOMS Data	80%	84%
	On-Time Periodic	 Actual	State Avg
	6 Month Updates	47%	92%
	Co-occurring	Actual	State Avg
$\checkmark$	MH Screen Complete	100%	90%
$\checkmark$	SA Screen Complete	100%	90%
	Diagnosis	Actual	State Avg

#### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		1	50%	65%	36%	-15%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	No Re-admit within 30 Days of Discharge		1	50%	85%	94%	-35%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Follow-up within 30 Days of Discharge		1	100%	90%	53%	10%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Stable Living Situation		28	54%	60%	92%	-6%	
	Social Support		27	52%	60%	80%	-8%	
	Employed		2	4%	15%	12%	-11%	
	Improved/Maintained Axis V GAF Score	·	30	67%	85%	49%	-18%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		50	100%	90%	99%	10%	

#### Data Submitted to DMHAS by Month

100%

94%

98%

87%

Jul	Aug	Sep	% Months Submitted					
			100%					
			33%					
			100%					
1 or more Records Submitted to DMHAS								

Valid Axis I Diagnosis

Valid Axis V GAF Score

	<b>^</b> >	> 10% Ove	er	▼ < 10%	Under	
Act	ual	Goal	$\checkmark$	Goal Met	Belo	w Goal

\* State Avg based on 23 Active Assertive Community Treatment Programs