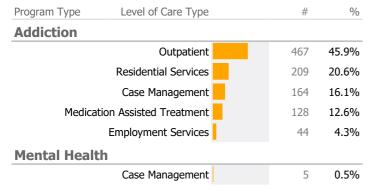
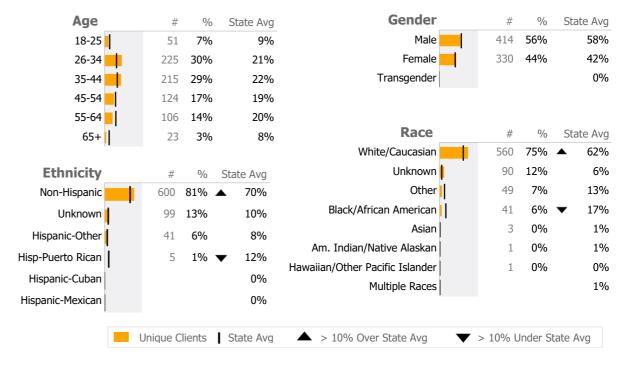
#### **Provider Activity** Monthly Trend Actual 1 Yr Ago Variance % Measure **Unique Clients -12%** ▼ 745 846 589 671 -12% **▼** Admits 512 708 -28% ▼ Discharges Service Hours **-77%** ▼ 1,191 5,112 **Bed Days** 8,791 8,318 6% ▲ > 10% Over 1 Yr Ago > 10% Under 1Yr Ago Clients by Level of Care





### Client Demographics



#### 221 Migeon-PILOTS Development 562-551

McCall Foundation Inc

Service Hours

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

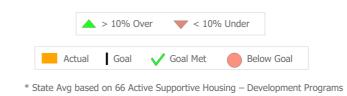
#### **Program Activity** Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Measure 1 Yr Ago Variance % Actual 100% 85% 15% Stable Living Situation **Unique Clients** 25% 2 Service Utilization Admits Discharges Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % Clients Receiving Services -65% -25% 90% 97%

#### **Data Submission Quality**

Data Entry	Actual S	State Avg
Valid NOMS Data	85%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	89%

2



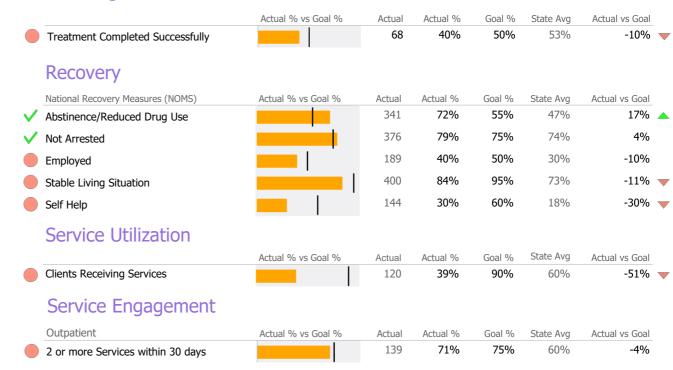


## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	462	546	-15%	•
Admits	199	312	-36%	•
Discharges	168	334	-50%	•
Service Hours	861	3,616	-76%	•

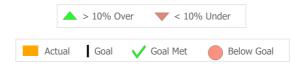
### **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	80%	85%
✓ Valid TEDS Data	83%	84%
On-Time Periodic	Actua	l State Avg
6 Month Updates	2%	21%
Co-occurring	Actua	l State Avg
MH Screen Complete	74%	90%
✓ SA Screen Complete	97%	96%
Diagnosis	Actua	l State Avg
✓ Valid Axis I Diagnosis	100%	99%









<sup>\*</sup> State Avg based on 107 Active Standard Outpatient Programs

#### **Carnes Wks Intens Res 940601**

McCall Foundation Inc

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

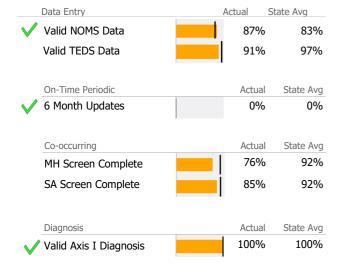
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

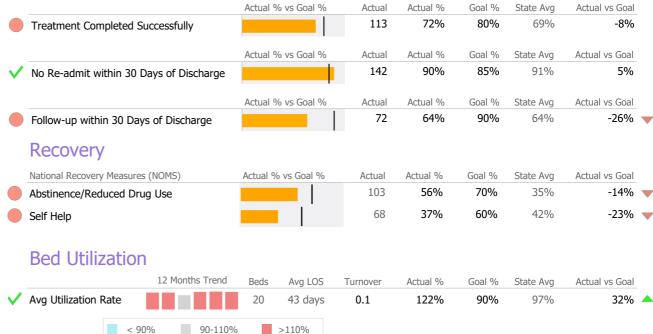
Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	169	177	-5%	
Admits	167	162	3%	
Discharges	157	161	-2%	
Bed Days	4,485	3,601	25% 🔺	

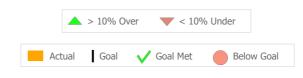
#### **Data Submission Quality**











<sup>\*</sup> State Avg based on 7 Active SA Intensive Res. Rehabilitation 3.7 Programs

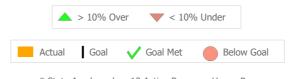
#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	20	29	-31%	•
Admits	10	17	-41%	•
Discharges	11	17	-35%	•
Bed Days	1,781	2,149	-17%	•

#### Discharge Outcomes



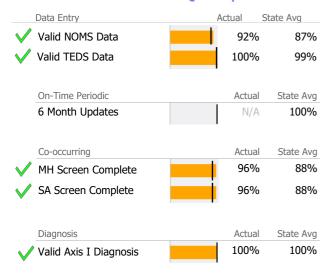


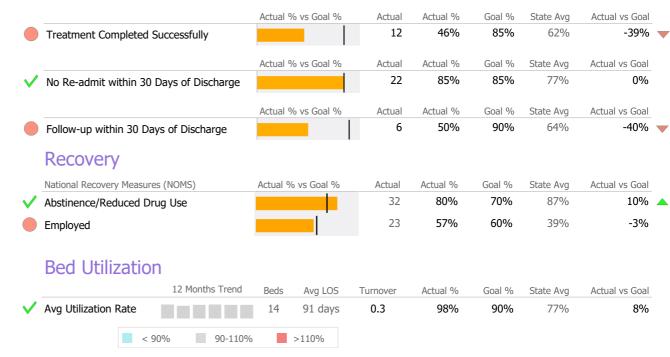


#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	39	40	-3%
Admits	26	26	0%
Discharges	26	26	0%
Bed Days	2,525	2,568	-2%

#### **Data Submission Quality**









<sup>\*</sup> State Avg based on 8 Active Transitional/Halfway House 3.1 Programs

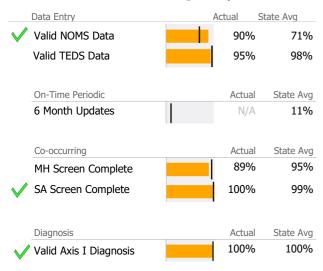
#### Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	9		
Admits	9	-	
Discharges	2	_	

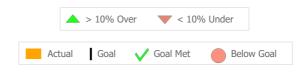
## **Data Submission Quality**



### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		0	0%	50%	72%	-50%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
<b>V</b>	Abstinence/Reduced Drug Use		8	89%	55%	29%	34%	_
<b>V</b>	Self Help		7	78%	60%	31%	18%	
<b>V</b>	Employed		5	56%	50%	29%	6%	
<b>V</b>	Not Arrested		7	78%	75%	49%	3%	
	Stable Living Situation		7	78%	95%	74%	-17%	





<sup>\*</sup> State Avg based on 7 Active Naltrexone Programs

Data Entry

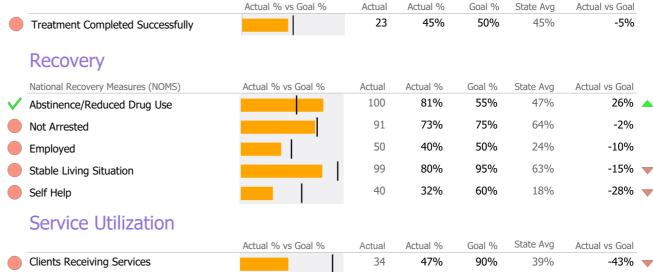
State Avg

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	122	101	21%	•
Admits	55	48	15%	•
Discharges	51	39	31%	•
Service Hours	161	935	-83%	•

#### **Data Submission Quality**

Valid NOMS Data	76%	87%
Valid TEDS Data	92%	96%
On-Time Periodic	Actual	State Avg
6 Month Updates	5%	26%
Co-occurring	Actual	State Avg
MH Screen Complete	60%	73%
✓ SA Screen Complete	96%	86%
Diagnasia	A atural	Chaha Assa
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis		









<sup>\*</sup> State Avg based on 22 Active Buprenorphine Maintenance Programs

Addiction - Case Management - Outreach & Engagement

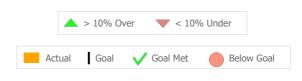
#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	15	22	-32% ▼
Admits	3	12	<b>-75%</b> ▼
Discharges	13	11	18% 🔺
Service Hours	3	112	<b>-97% ▼</b>

#### Service Engagement







<sup>\*</sup> State Avg based on 23 Active Outreach & Engagement Programs

Addiction - Employment Services - Employment Services

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

Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	44	54	-19%	•
Admits	33	25	32%	•
Discharges	30	41	-27%	•
Service Hours	84	134	-37%	•

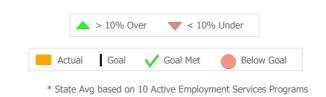
#### Recovery



#### **Data Submission Quality**

Data Entry	Actual	State Avg
✓ Valid NOMS Data	95%	81%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	35%

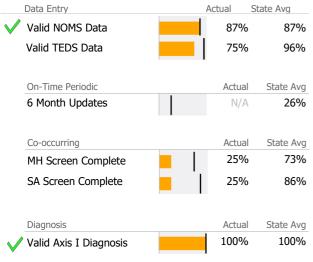
		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admission	S							100%
Discharges	5							67%
Services								50%
		1 or m	ore Record	ls Subm	itted to	DMHAS		



## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	8		
Admits	8	-	
Discharges	3	-	
Service Hours	12	_	

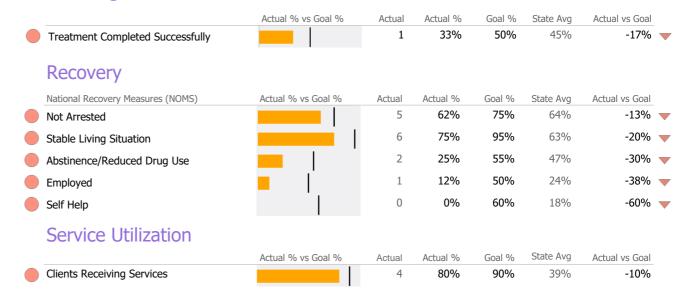
#### **Data Submission Quality**

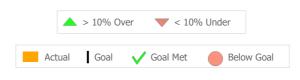


### Data Submitted to DMHAS by Month % Months Submitted

100% Admissions 33% Discharges Services 17%

1 or more Records Submitted to DMHAS





<sup>\*</sup> State Avg based on 22 Active Buprenorphine Maintenance Programs

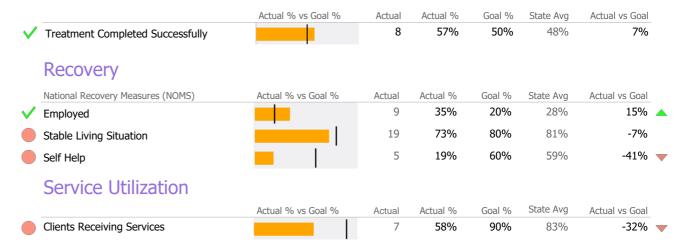
#### **Program Activity**

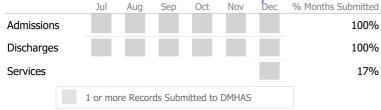
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	25	26	-4%	
Admits	22	6	267%	•
Discharges	14	8	75%	•
Service Hours	26	76	-66%	•

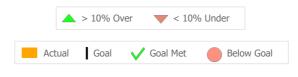
#### **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	62%	93%
On-Time Periodic	Actua	State Avg
6 Month Updates	N/A	63%

#### Discharge Outcomes





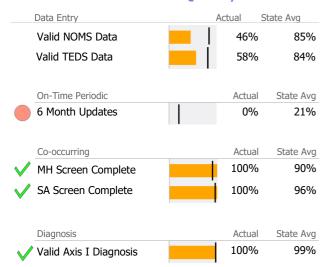


<sup>\*</sup> State Avg based on 8 Active Standard Case Management Programs

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	23	35	-34%	•
Admits	7	19	-63%	•
Discharges	6	21	-71%	•
Service Hours	12	240	-95%	•

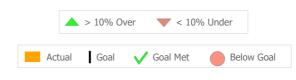
#### **Data Submission Quality**









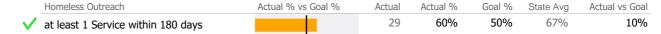


<sup>\*</sup> State Avg based on 107 Active Standard Outpatient Programs

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	131	79	66%	•
Admits	48	44	9%	
Discharges	29	50	-42%	•
Service Hours	33	-		

#### Service Engagement



Data	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							83%
Services							67%
	1 or mo	re Record	ds Subm	nitted to	DMHAS		



<sup>\*</sup> State Avg based on 23 Active Outreach & Engagement Programs