SCADD
Lebanon, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - December 2020   (Data as of Apr 06, 2021)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	1,236	2,246	-45%	▼
	Admits	1,174	2,462	-52%	▼
	Discharges	1,225	2,519	-51%	▼
	Service Hours	2,370	6,059	-61%	▼
	Bed Days	14,754	25,610	-42%	▼
	S.Rehab/PHP/IOP	525	1,375	-62%	▼

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Addiction				
	Residential Services		633	45.4%
	Outpatient		428	30.7%
	IOP		47	3.4%
	Medication Assisted Treatment		42	3.0%
Forensic SA				
	Forensics Community-based		209	15.0%
	Case Management		36	2.6%

Consumer Satisfaction Survey   (Based on 195 FY20 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Participation in Treatment		85%	80%	92%
✓	Respect		82%	80%	91%
✓	Quality and Appropriateness		81%	80%	93%
🔴	Overall		77%	80%	91%
🔴	Recovery		76%	80%	79%
🔴	General Satisfaction		74%	80%	92%
🔴	Outcome		74%	80%	83%
🔴	Access		69%	80%	88%

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

Client Demographics

Age	#	%	State Avg
18-25	106	9%	9%
26-34	411	33% ▲	21%
35-44	355	29%	22%
45-54	196	16%	19%
55-64	145	12%	20%
65+	23	2%	8%

Gender	#	%	State Avg
Male	944	77% ▲	58%
Female	288	23% ▼	42%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	984	80%	70%
Hisp-Puerto Rican	138	11%	12%
Unknown	68	6%	10%
Hispanic-Other	40	3%	8%
Hispanic-Cuban	3	0%	0%
Hispanic-Mexican	3	0%	0%

Race	#	%	State Avg
White/Caucasian	865	70%	62%
Black/African American	193	16%	17%
Other	120	10%	13%
Unknown	34	3%	6%
Am. Indian/Native Alaskan	14	1%	1%
Hawaiian/Other Pacific Islander	6	0%	0%
Asian	3	0%	1%
Multiple Races	1	0%	1%

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.

Bank St 922402
SCADD
Addiction - Residential Services - Transitional/Halfway House 3.1

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	28	33	-15% ▼
Admits	21	25	-16% ▼
Discharges	21	23	-9%
Bed Days	1,427	1,719	-17% ▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	87%
✓	Valid TEDS Data	100%	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	100%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	88%
✓	SA Screen Complete	100%	88%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Treatment Completed Successfully		11	52%	85%	62%	-33% ▼
●	No Re-admit within 30 Days of Discharge		16	76%	85%	77%	-9%
●	Follow-up within 30 Days of Discharge		8	73%	90%	64%	-17% ▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Abstinence/Reduced Drug Use		28	93%	70%	87%	23% ▲
●	Employed		12	40%	60%	39%	-20% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		10	70 days	0.3	78%	90%	77%	-12% ▼

█ < 90%   ▢ 90-110%   ▮ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

█ Actual | Goal   ✓ Goal Met   ● Below Goal

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

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

Coit St Women-DMHAS 922401
SCADD
Addiction - Residential Services - Transitional/Halfway House 3.1

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	19	35	-46%	▼
Admits	9	25	-64%	▼
Discharges	14	25	-44%	▼
Bed Days	1,273	1,665	-24%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		10	71%	85%	62%	-14%	▼
✓	No Re-admit within 30 Days of Discharge		13	93%	85%	77%	8%	
🔴	Follow-up within 30 Days of Discharge		8	80%	90%	64%	-10%	

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	87%
✓	Valid TEDS Data	100%	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	100%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	88%
✓	SA Screen Complete	100%	88%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%

Recovery

National Recovery Measures (NOMS)

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		19	100%	70%	87%	30%	▲
🔴	Employed		9	47%	60%	39%	-13%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		11	130 days	0.4	63%	90%	77%	-27%	▼
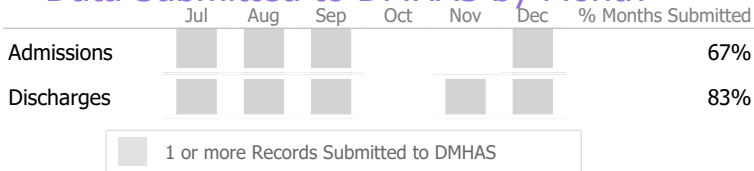
Legend: ▢ < 90%   ▢ 90-110%   🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▢	▢	▢			▢	67%
Discharges	▢	▢	▢		▢	▢	83%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

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

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

Detox 922600
SCADD
Addiction - Residential Services - Medically Monitored Detox 3.7D

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	464	600	-23%	▼
Admits	544	721	-25%	▼
Discharges	555	719	-23%	▼
Bed Days	2,332	3,041	-23%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Treatment Completed Successfully		345	62%	80%	65%	-18%	▼
●	No Re-admit within 30 Days of Discharge		442	80%	85%	80%	-5%	
●	Follow-up within 30 Days of Discharge		171	50%	90%	53%	-40%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	89%	79%
✓	Valid TEDS Data	100%	98%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	N/A

Co-occurring		Actual	State Avg
✓	MH Screen Complete	97%	94%
✓	SA Screen Complete	98%	94%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
●	Avg Utilization Rate		20	4 days	0.0	63%	90%	75%	-27%	▼

▨ < 90%	▨ 90-110%	▨ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▨	▨	▨	▨	▨	▨	100%
Discharges	▨	▨	▨	▨	▨	▨	100%

▨ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

▨ Actual	│ Goal	✓ Goal Met	● Below Goal

* State Avg based on 7 Active Medically Monitored Detox 3.7D Programs

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

Lebanon Pines-CSSD 922702
SCADD
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

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	23	63	-63%	▼
Admits	18	41	-56%	▼
Discharges	20	43	-53%	▼
Bed Days	1,645	3,826	-57%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		8	40%	70%	64%	-30%	▼
🔴	No Re-admit within 30 Days of Discharge		14	70%	85%	87%	-15%	▼
🔴	Follow-up within 30 Days of Discharge		4	50%	90%	69%	-40%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	92%	90%
✔	Valid TEDS Data	100%	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	7%

Co-occurring		Actual	State Avg
	MH Screen Complete	90%	92%
✔	SA Screen Complete	100%	92%

Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	100%

Recovery

National Recovery Measures (NOMS)

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Abstinence/Reduced Drug Use		23	88%	70%	64%	18%	▲

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		22	98 days	0.6	41%	90%	77%	-49%	▼

■ < 90%   ■ 90-110%   ■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

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

Lebanon Pines-DMHAS 922701
SCADD
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

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	122	259	-53%	▼
Admits	123	193	-36%	▼
Discharges	106	185	-43%	▼
Bed Days	6,729	13,149	-49%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		55	52%	70%	64%	-18%	▼
🔴	No Re-admit within 30 Days of Discharge		74	70%	85%	87%	-15%	▼
🔴	Follow-up within 30 Days of Discharge		40	73%	90%	69%	-17%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✅	Valid NOMS Data	90%	90%
✅	Valid TEDS Data	100%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	7%

Co-occurring		Actual	State Avg
✅	MH Screen Complete	99%	92%
✅	SA Screen Complete	99%	92%

Diagnosis		Actual	State Avg
✅	Valid Axis I Diagnosis	100%	100%

Recovery

National Recovery Measures (NOMS)

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✅	Abstinence/Reduced Drug Use		112	78%	70%	64%	8%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		76	69 days	0.5	48%	90%	77%	-42%	▼

🟦 < 90% ⬜ 90-110% 🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▦	▦	▦	▦	▦	▦	100%
Discharges	▦	▦	▦	▦	▦	▦	100%

▦ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✅ Goal Met   🔴 Below Goal

* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

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

Main St Men 922403
SCADD
Addiction - Residential Services - Transitional/Halfway House 3.1

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	33	43	-23%	▼
Admits	27	31	-13%	▼
Discharges	32	31	3%	
Bed Days	1,348	2,210	-39%	▼

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		15	47%	85%	62%	-38%	▼
● No Re-admit within 30 Days of Discharge		25	78%	85%	77%	-7%	
● Follow-up within 30 Days of Discharge		6	40%	90%	64%	-50%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		91%	87%
✔ Valid TEDS Data		100%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	100%

Co-occurring		Actual	State Avg
✔ MH Screen Complete		100%	88%
✔ SA Screen Complete		100%	88%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	100%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Abstinence/Reduced Drug Use		33	94%	70%	87%	24%	▲
● Employed		5	14%	60%	39%	-46%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		13	58 days	0.3	56%	90%	77%	-34%	▼

< 90%	90-110%	>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✔ Goal Met   ● Below Goal

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

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

New London IOP 922750
SCADD
Addiction - IOP - Standard IOP

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	47	140	-66%	▼
Admits	41	135	-70%	▼
Discharges	36	133	-73%	▼
Service Hours	126	9		
Social Rehab/PHP/IOP Days	525	1,026	-49%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	84%	80%
✓	Valid TEDS Data	100%	84%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	1%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	98%	83%
✓	SA Screen Complete	96%	83%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%
Services							100%

 1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		20	56%	50%	61%	6%	
●	Follow-up within 30 Days of Discharge		15	75%	90%	57%	-15%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		30	61%	55%	52%	6%	
✓	Not Arrested		37	76%	75%	81%	1%	
●	Employed		17	35%	50%	26%	-15%	▼
●	Stable Living Situation		39	80%	95%	84%	-15%	▼
●	Self Help		12	24%	60%	25%	-36%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		9	69%	90%	55%	-21%	▼

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 52 Active Standard IOP Programs

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

New London Outpatient 922407
SCADD
Addiction - Outpatient - Standard Outpatient

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	428	679	-37%	▼
Admits	316	552	-43%	▼
Discharges	332	603	-45%	▼
Service Hours	2,013	3,398	-41%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	86%	85%
✓	Valid TEDS Data	99%	84%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	100%	21%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	97%	90%
✓	SA Screen Complete	97%	96%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%
Services							100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Treatment Completed Successfully		146	44%	50%	53%	-6%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		342	76%	55%	47%	21% ▲
🔴 Not Arrested		333	74%	75%	74%	-1%
🔴 Employed		211	47%	50%	30%	-3%
🔴 Stable Living Situation		412	92%	95%	73%	-3%
🔴 Self Help		124	28%	60%	18%	-32% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		127	99%	90%	60%	9%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 2 or more Services within 30 days		178	58%	75%	60%	-17% ▼

▲ > 10% Over   ▼ < 10% Under

■ Actual	│ Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 107 Active Standard Outpatient Programs

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

Norwich IOP 922350
SCADD
Addiction - IOP - Standard IOP

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	0	54		▼
Admits	-	49	-100%	▼
Discharges	-	52	-100%	▼
Service Hours	-	-		

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	80%
Valid TEDS Data		N/A	84%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	1%

Co-occurring		Actual	State Avg
MH Screen Complete		N/A	83%
SA Screen Complete		N/A	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
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	50%	61%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	57%	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%	52%	-55% ▼
● Employed		N/A	N/A	50%	26%	-50% ▼
● Not Arrested		N/A	N/A	75%	81%	-75% ▼
● Self Help		N/A	N/A	60%	25%	-60% ▼
● Stable Living Situation		N/A	N/A	95%	84%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		N/A	N/A	90%	55%	N/A ▼

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 52 Active Standard IOP Programs

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

Norwich Outpatient 922200
SCADD
Addiction - Outpatient - Standard Outpatient

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	1	391	-100%	▼
Admits	1	315	-100%	▼
Discharges	1	336	-100%	▼
Service Hours	-	2,039	-100%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	100%	85%
✔	Valid TEDS Data	100%	84%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	21%

Co-occurring		Actual	State Avg
✔	MH Screen Complete	100%	90%
	SA Screen Complete	0%	96%

Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							17%
Discharges							17%
Services							17%

1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		0	0%	50%	53%	-50%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Employed		1	100%	50%	30%	50%	▲
✔	Stable Living Situation		1	100%	95%	73%	5%	
🔴	Abstinence/Reduced Drug Use		0	0%	55%	47%	-55%	▼
🔴	Self Help		0	0%	60%	18%	-60%	▼
🔴	Not Arrested		0	0%	75%	74%	-75%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		N/A	N/A	90%	60%	N/A	▼

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		0	0%	75%	60%	-75%	▼
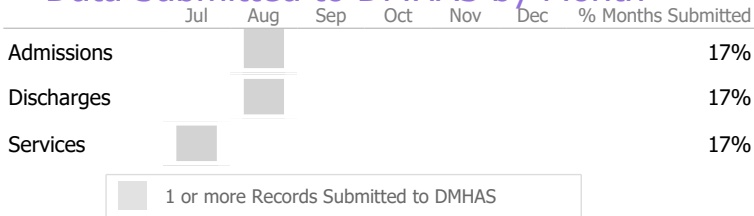
▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 107 Active Standard Outpatient Programs

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

Post-Release Transitional Forensic Case Management
SCADD
Forensic SA - Case Management - Standard Case Management

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	29	50	-42%	▼
Admits	17	36	-53%	▼
Discharges	23	40	-43%	▼
Service Hours	111	364	-69%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Treatment Completed Successfully		10	43%	50%	63%	-7%

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Self Help		28	93%	60%	52%	33%	▲
✓	Social Support		28	93%	60%	73%	33%	▲
✓	Stable Living Situation		26	87%	80%	48%	7%	
✓	Employed		8	27%	20%	17%	7%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	4%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		7	100%	90%	22%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▪	▪	▪			▪	83%
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 8 Active Standard Case Management Programs

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

Pre-Release Transitional Forensic Case Management
SCADD
Forensic SA - Case Management - Standard Case Management

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	16	112	-86%	▼
Admits	11	68	-84%	▼
Discharges	11	63	-83%	▼
Service Hours	27	151	-82%	▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	4%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		9	82%	50%	63%	32%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Self Help		16	94%	60%	52%	34%	▲
✓ Social Support		16	94%	60%	73%	34%	▲
● Stable Living Situation		12	71%	80%	48%	-9%	
● Employed		0	0%	20%	17%	-20%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		5	83%	90%	22%	-7%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							83%
Discharges							67%
Services							100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under
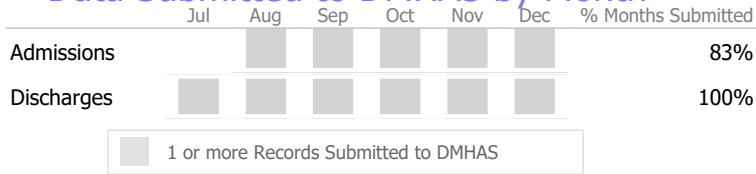
Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 8 Active Standard Case Management Programs

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

PTIP-Main Street 922705

SCADD

Forensic SA - Forensics Community-based - Pre-trial Intervention 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	156	324	-52%	▼
Admits	11	132	-92%	▼
Discharges	31	129	-76%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		▢	▢		▢	▢	83%
Discharges	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

◼ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 16 Active Pre-trial Intervention Programs Programs

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

SOR E-MAT
SCADD
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

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	37	60	-38%	▼
Admits	17	35	-51%	▼
Discharges	15	36	-58%	▼
Service Hours	71	99	-28%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	91%	87%
✓	Valid TEDS Data	99%	96%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	100%	26%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	88%	73%
✓	SA Screen Complete	88%	86%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							83%
Discharges							83%
Services							100%

☐ 1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		12	80%	50%	45%	30%	▲

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		32	86%	55%	47%	31%	▲
✓	Self Help		24	65%	60%	18%	5%	
✓	Not Arrested		29	78%	75%	64%	3%	
✓	Stable Living Situation		36	97%	95%	63%	2%	
●	Employed		17	46%	50%	24%	-4%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Clients Receiving Services		21	95%	90%	39%	5%	
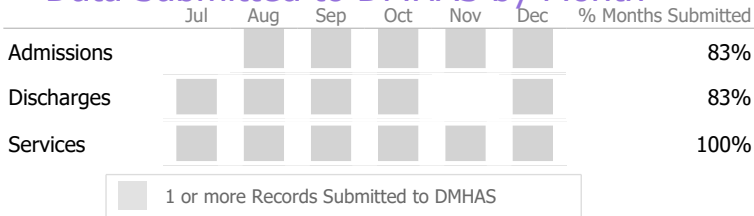
▲ > 10% Over	▼ < 10% Under

☐ Actual	│ Goal	✓ Goal Met	● Below Goal

* State Avg based on 22 Active Buprenorphine Maintenance Programs

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

SOR MAT Employment
SCADD
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

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	15	1	1400%	▲
Admits	11	1	1000%	▲
Discharges	15	1	1400%	▲
Service Hours	3	-		

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	73%	87%
✔	Valid TEDS Data	100%	96%

On-Time Periodic		Actual	State Avg
	6 Month Updates	N/A	26%

Co-occurring		Actual	State Avg
✔	MH Screen Complete	100%	73%
✔	SA Screen Complete	100%	86%

Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	100%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions			▦	▦			33%
Discharges			▦	▦	▦		67%
Services		▦	▦	▦			67%

▦ 1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		0	0%	50%	45%	-50%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Abstinence/Reduced Drug Use		12	80%	55%	47%	25%	▲
✔	Employed		9	60%	50%	24%	10%	
🔴	Stable Living Situation		14	93%	95%	63%	-2%	
🔴	Not Arrested		5	33%	75%	64%	-42%	▼
🔴	Self Help		1	7%	60%	18%	-53%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		N/A	N/A	90%	39%	N/A	▼
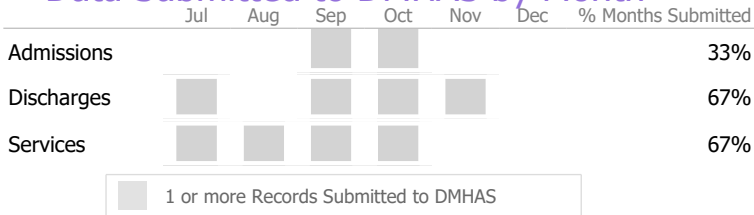
▲ > 10% Over	▼ < 10% Under

▭ Actual	❘ Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 22 Active Buprenorphine Maintenance Programs

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

SOR-MAT-Naltrexone
SCADD
Addiction - Medication Assisted Treatment - Naltrexone

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	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	71%
Valid TEDS Data		N/A	98%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	11%

Co-occurring		Actual	State Avg
MH Screen Complete		N/A	95%
SA Screen Complete		N/A	99%

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%	29%	-55% ▼
● Employed		N/A	N/A	50%	29%	-50% ▼
● Not Arrested		N/A	N/A	75%	49%	-75% ▼
● Self Help		N/A	N/A	60%	31%	-60% ▼
● Stable Living Situation		N/A	N/A	95%	74%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		N/A	N/A	90%	56%	N/A ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 7 Active Naltrexone Programs

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

STR TPP - New London
SCADD
Forensic SA - Forensics Community-based - Court Liaison-Jail Diversion

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	53	143	-63%	▼
Admits	7	103	-93%	▼
Discharges	13	100	-87%	▼
Service Hours	20			

Service Utilization
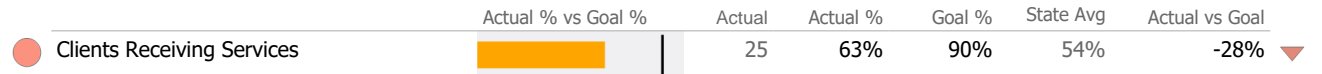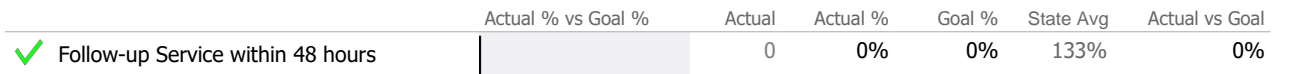
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services	▭	25	63%	90%	54%	-28%	▼

Jail Diversion

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up Service within 48 hours	▭	0	0%	0%	133%	0%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		▭	▭			▭	50%
Discharges	▭	▭	▭	▭	▭	▭	100%
Services	▭	▭	▭	▭			67%

▭ 1 or more Records Submitted to DMHAS
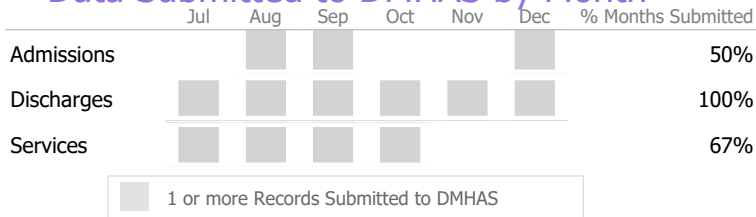
▲ > 10% Over   ▼ < 10% Under

▭ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 5 Active Court Liaison-Jail Diversion Programs

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