

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	906	1,298	-30% ▼
	Admits	945	1,495	-37% ▼
	Discharges	985	1,497	-34% ▼
	Service Hours	920	1,230	-25% ▼
	Bed Days	3,271	4,860	-33% ▼

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

Consumer Satisfaction Survey

(Based on 219 FY20 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Quality and Appropriateness		89%	80%	93%
✓ Respect		89%	80%	91%
✓ Participation in Treatment		88%	80%	92%
✓ Overall		85%	80%	91%
✓ General Satisfaction		85%	80%	92%
✓ Outcome		85%	80%	83%
✓ Access		80%	80%	88%
● Recovery		75%	80%	79%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction	Residential Services	756	82.9%
	Medication Assisted Treatment	128	14.0%
Forensic SA	Case Management	15	1.6%
Mental Health	Case Management	13	1.4%

Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	46	5%	10%	Male	627	69%	▲ 58%
26-34	241	27%	22%	Female	277	31%	▼ 42%
35-44	272	30%	23%	Transgender			0%
45-54	189	21%	19%				
55-64	137	15%	19%				
65+	21	2%	8%				
Ethnicity	#	%	State Avg	Race	#	%	State Avg
Non-Hispanic	724	80%	▲ 69%	White/Caucasian	618	68%	62%
Hisp-Puerto Rican	108	12%	12%	Black/African American	160	18%	17%
Hispanic-Other	64	7%	8%	Other	113	12%	13%
Unknown	7	1%	11%	Unknown	8	1%	6%
Hispanic-Cuban	2	0%	0%	Asian	2	0%	1%
Hispanic-Mexican	1	0%	0%	Multiple Races	2	0%	1%
				Hawaiian/Other Pacific Islander	2	0%	0%
				Am. Indian/Native Alaskan	1	0%	0%

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

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

Arrest Diversion - New Haven

Cornell Scott-Hill Health Corporation

Forensic SA - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services

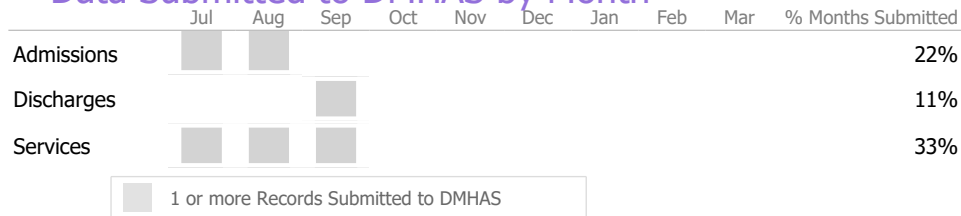
Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	15	37	-59%	▼
Admits	2	24	-92%	▼
Discharges	15	17	-12%	▼
Service Hours	13	122	-90%	▼

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 2 Active Outreach & Engagement Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	1	-	
Discharges	-	1	-100% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	74%
Valid TEDS Data	100%	97%
On-Time Periodic		
6 Month Updates	67%	24%
Co-occurring		
MH Screen Complete	100%	95%
SA Screen Complete	100%	98%
Diagnosis		
Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	76%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		3	75%	55%	37%	20% ▲
✓ Not Arrested		3	75%	75%	58%	0%
● Self Help		2	50%	60%	28%	-10%
● Stable Living Situation		3	75%	95%	79%	-20% ▼
● Employed		1	25%	50%	36%	-25% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										11%
Discharges										0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

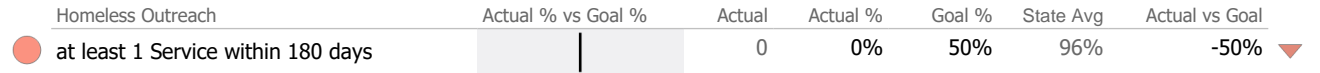
Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 7 Active Naltrexone Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	21	-38% ▼
Admits	-	3	-100% ▼
Discharges	-	8	-100% ▼
Service Hours	-	97	-100% ▼

Service Engagement



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%
Services										0%

1 or more Records Submitted to DMHAS



* State Avg based on 46 Active Outreach & Engagement Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0	11	▼
Admits	-	-	
Discharges	-	11	-100% ▼
Service Hours	-	1	-100% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 9 Active Peer Based Mentoring Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	756	1,051	-28% ▼
Admits	918	1,314	-30% ▼
Discharges	922	1,329	-31% ▼
Bed Days	3,271	4,860	-33% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	80%
Valid TEDS Data	100%	98%
On-Time Periodic		
6 Month Updates	N/A	N/A
Co-occurring		
MH Screen Complete	100%	95%
SA Screen Complete	100%	95%
Diagnosis		
Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		695	75%	80%	67%	-5%
No Re-admit within 30 Days of Discharge		697	76%	85%	80%	-9%
Follow-up within 30 Days of Discharge		385	55%	90%	54%	-35% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		24	4 days	0.0	50%	90%	72%	-40% ▼

Legend: < 90% (light blue), 90-110% (grey), >110% (red)

Data Submitted to DMHAS by Month

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

Legend: 1 or more Records Submitted to DMHAS (grey square)

Legend: ▲ > 10% Over, ▼ < 10% Under

Legend: Actual (orange bar), Goal (vertical line), Goal Met (green checkmark), Below Goal (red circle)

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

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	124	191	-35% ▼
Admits	24	117	-79% ▼
Discharges	28	106	-74% ▼
Service Hours	908	1,011	-10%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	99%	88%
Valid TEDS Data	99%	96%
On-Time Periodic		
6 Month Updates	97%	24%
Co-occurring		
MH Screen Complete	96%	76%
SA Screen Complete	96%	88%
Diagnosis		
Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		14	50%	50%	51%	0%

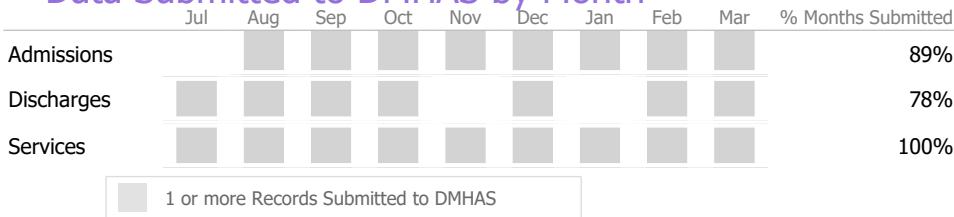
Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		98	78%	55%	47%	23% ▲
✓ Not Arrested		120	96%	75%	66%	21% ▲
✓ Employed		72	58%	50%	24%	8%
✓ Stable Living Situation		122	98%	95%	65%	3%
○ Self Help		13	10%	60%	19%	-50% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		97	100%	90%	36%	10%

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ○ Below Goal

* State Avg based on 21 Active Buprenorphine Maintenance Programs

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