Gilead Community Services Inc.
Middletown, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	424	371	14% ▲
	Admits	154	112	38% ▲
	Discharges	161	93	73% ▲
	Service Hours	8,995	12,464	-28% ▼
	Bed Days	12,230	12,499	-2%
	S.Rehab/PHP/IOP	17	6,098	-100% ▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	109	21.8%
	ACT	101	20.2%
	Residential Services	84	16.8%
	Community Support	53	10.6%
Addiction			
	Outpatient	153	30.6%

Consumer Satisfaction Survey (Based on 217 FY20 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ General Satisfaction		96%	80%	92%
✓ Participation in Treatment		95%	80%	92%
✓ Overall		94%	80%	91%
✓ Quality and Appropriateness		94%	80%	93%
✓ Access		92%	80%	88%
✓ Respect		91%	80%	91%
✓ Outcome		89%	80%	83%
✓ Recovery		83%	80%	79%

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

Client Demographics

Age	#	%	State Avg
18-25	17	4%	10%
26-34	101	24%	22%
35-44	102	24%	23%
45-54	72	17%	19%
55-64	93	22%	19%
65+	39	9%	8%

Gender	#	%	State Avg
Male	270	64%	58%
Female	150	36%	42%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	355	84% ▲	69%
Hisp-Puerto Rican	30	7%	12%
Hispanic-Other	20	5%	8%
Unknown	17	4%	11%
Hispanic-Mexican	2	0%	0%
Hispanic-Cuban			0%

Race	#	%	State Avg
White/Caucasian	298	70%	62%
Black/African American	59	14%	17%
Other	33	8%	13%
Unknown	18	4%	6%
Multiple Races	12	3%	1%
Asian	3	1%	1%
Am. Indian/Native Alaskan	1	0%	0%
Hawaiian/Other Pacific Islander			0%

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.

ACT Team 306292
Gilead Community Services Inc.
Mental Health - ACT - Assertive Community Treatment

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	101	103	-2%	
Admits	15	12	25%	▲
Discharges	18	19	-5%	
Service Hours	2,833	5,750	-51%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	83%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	92%	91%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	91%
✓ SA Screen Complete	100%	90%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■	■			■	78%
Discharges	■		■	■	■	■	■	■	■	89%
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		11	61%	65%	44%	-4%	
✓ No Re-admit within 30 Days of Discharge		12	92%	85%	94%	7%	
● Follow-up within 30 Days of Discharge		5	45%	90%	57%	-45%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		99	97%	60%	79%	37%	▲
✓ Stable Living Situation		98	96%	60%	92%	36%	▲
✓ Employed		20	20%	15%	15%	5%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		80	95%	90%	99%	5%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 23 Active Assertive Community Treatment Programs

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

Farrell Outpatient Clinic Bassett Street
Gilead Community Services Inc.
Addiction - Outpatient - Standard Outpatient

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	23	6	283%	▲
Admits	16	4	300%	▲
Discharges	5	-		
Service Hours	31	-		

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	85%
✓ Valid TEDS Data	100%	85%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	33%	21%

Co-occurring	Actual	State Avg
MH Screen Complete	70%	91%
SA Screen Complete	83%	97%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■			■		■	■	■	■	67%
Discharges									■	11%
Services										0%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		2	40%	50%	51%	-10%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		22	96%	75%	76%	21%	▲
✓ Abstinence/Reduced Drug Use		17	74%	55%	48%	19%	▲
✓ Employed		13	57%	50%	31%	7%	
✓ Stable Living Situation		22	96%	95%	76%	1%	
● Self Help		6	26%	60%	18%	-34%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		12	67%	90%	69%	-23%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		3	19%	75%	62%	-56%	▼

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 109 Active Standard Outpatient Programs

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

Farrell Outpatient Clinic Main Street
Gilead Community Services Inc.
Addiction - Outpatient - Standard Outpatient

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	150	90	67%	▲
Admits	100	59	69%	▲
Discharges	104	40	160%	▲
Service Hours	1,030	-		

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	85%
✓ Valid TEDS Data	92%	85%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	32%	21%

Co-occurring	Actual	State Avg
MH Screen Complete	79%	91%
SA Screen Complete	82%	97%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		76	73%	50%	51%	23%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		159	96%	75%	76%	21%	▲
✓ Abstinence/Reduced Drug Use		117	70%	55%	48%	15%	▲
✓ Employed		100	60%	50%	31%	10%	
● Stable Living Situation		155	93%	95%	76%	-2%	
● Self Help		30	18%	60%	18%	-42%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		59	92%	90%	69%	2%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		42	46%	75%	62%	-29%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	100%
Discharges	■		■	■	■	■	■	■	■	89%
Services					■	■	■	■	■	56%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 109 Active Standard Outpatient Programs

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

Gateway - CSP
Gilead Community Services Inc.
Mental Health - Community Support - CSP

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	53	55	-4%	
Admits	4	7	-43%	▼
Discharges	5	5	0%	
Service Hours	517	1,950	-73%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	81%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	96%	86%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	85%
✓ SA Screen Complete	100%	72%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		■		■		■		■		44%
Discharges			■		■	■	■			44%
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		3	60%	65%	58%	-5%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		48	91%	60%	81%	31%	▲
✓ Stable Living Situation		53	100%	80%	88%	20%	▲
✓ Employed		11	21%	20%	12%	1%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		48	100%	90%	98%	10%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 36 Active CSP Programs

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

Gateway - Social Rehab 306285
Gilead Community Services Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

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	48	53	-9%	
Admits	-	8	-100%	▼
Discharges	5	5	0%	
Service Hours	-	-		
Social Rehab/PHP/IOP Days	17	2,337	-99%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		9	21%	90%	63%	-69%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges				■	■			■	■	44%
Services				■						11%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

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

Gilead Apartment Program306251
Gilead Community Services Inc.
Mental Health - Residential Services - Residential Support

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	19	22	-14%	▼
Admits	2	7	-71%	▼
Discharges	4	5	-20%	▼
Service Hours	3,066	3,192	-4%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	99%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	85%	93%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	89%
✓ SA Screen Complete	100%	90%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions								■	■	22%
Discharges						■	■			22%
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		2	50%	50%	78%	0%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		17	89%	60%	84%	29%	▲
✓ Stable Living Situation		19	100%	85%	97%	15%	▲
● Employed		3	16%	25%	11%	-9%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		13	87%	90%	98%	-3%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 25 Active Residential Support Programs

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

Gilead One Group Home 306240
Gilead Community Services Inc.
Mental Health - Residential Services - Group Home

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	11	14	-21%	▼
Admits	2	6	-67%	▼
Discharges	2	5	-60%	▼
Bed Days	2,434	2,278	7%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	99%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	82%
✓ SA Screen Complete	100%	92%

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

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		2	100%	80%	90%	20%	▲
✓ No Re-admit within 30 Days of Discharge		2	100%	85%	96%	15%	▲
✓ Follow-up within 30 Days of Discharge		2	100%	90%	89%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		11	100%	60%	88%	40%	▲
✓ Stable Living Situation		11	100%	90%	98%	10%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		9	481 days	0.3	99%	90%	89%	9%

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 24 Active Group Home Programs

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

Gilead Two Group Home 306241
Gilead Community Services Inc.
Mental Health - Residential Services - Group Home

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	8	10	-20%	▼
Admits	2	2	0%	
Discharges	1	2	-50%	▼
Bed Days	2,132	2,161	-1%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	99%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	83%	82%
SA Screen Complete	83%	92%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										22%
Discharges										11%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		1	100%	80%	90%	20%	▲
● No Re-admit within 30 Days of Discharge		0	0%	85%	96%	-85%	▼
✓ Follow-up within 30 Days of Discharge		1	100%	90%	89%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		9	100%	60%	88%	40%	▲
✓ Stable Living Situation		9	100%	90%	98%	10%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		8	981 days	0.3	97%	90%	89%	7%

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 24 Active Group Home Programs

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

Juniper Home YAS
Gilead Community Services Inc.
Mental Health - Residential Services - Supervised Apartments

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	7	6	17%	▲
Admits	2	1	100%	▲
Discharges	2	1	100%	▲
Bed Days	1,328	1,238	7%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	75%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	86%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	89%
SA Screen Complete	50%	74%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										22%
Discharges										22%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		2	100%	60%	78%	40%	▲
✓ Follow-up within 30 Days of Discharge		2	100%	90%	77%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		6	86%	60%	84%	26%	▲
✓ Stable Living Situation		7	100%	95%	94%	5%	
● Employed		0	0%	25%	9%	-25%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	1,302 days	0.3	97%	90%	93%	7%

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

Liberty Home 306230
Gilead Community Services Inc.
Mental Health - Residential Services - Supervised Apartments

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	6	6	0%
Admits	-	1	-100% ▼
Discharges	-	-	
Bed Days	1,644	1,600	3%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	75%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	86%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	89%
SA Screen Complete	N/A	74%

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

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	78%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	77%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		5	83%	60%	84%	23% ▲
✓ Stable Living Situation		6	100%	95%	94%	5%
● Employed		0	0%	25%	9%	-25% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	2,531 days	0.3	100%	90%	93%	10%

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

Magnolia Home YAS
Gilead Community Services Inc.
Mental Health - Residential Services - Supervised Apartments

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	3	4	-25%	▼
Admits	-	1	-100%	▼
Discharges	2	1	100%	▲
Bed Days	571	826	-31%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	75%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	86%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	89%
✓ SA Screen Complete	100%	74%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges			■				■			22%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		2	100%	60%	78%	40%	▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		2	100%	90%	77%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		2	67%	60%	84%	7%	
✓ Stable Living Situation		3	100%	95%	94%	5%	
● Employed		0	0%	25%	9%	-25%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		3	1,263 days	0.4	69%	90%	93%	-21%	▼

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

SCAP - Apartment Program306260
Gilead Community Services Inc.
Mental Health - Residential Services - Residential Support

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	20	15	33%	▲
Admits	6	1	500%	▲
Discharges	6	2	200%	▲
Service Hours	1,518	1,572	-3%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	99%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	75%	93%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	89%
✓ SA Screen Complete	100%	90%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions				■	■	■		■		44%
Discharges		■		■		■				33%
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		6	100%	50%	78%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		19	95%	60%	84%	35%	▲
✓ Stable Living Situation		20	100%	85%	97%	15%	▲
✓ Employed		7	35%	25%	11%	10%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		14	100%	90%	98%	10%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 25 Active Residential Support Programs

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

SCAP - Group Home 306265
Gilead Community Services Inc.
Mental Health - Residential Services - Group Home

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	9	7	29%	▲
Admits	3	2	50%	▲
Discharges	3	1	200%	▲
Bed Days	1,429	1,646	-13%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	33%	84%

Co-occurring	Actual	State Avg
MH Screen Complete	67%	82%
✓ SA Screen Complete	100%	92%

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

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully	3	100%	80%	90%	20%	▲
✓ No Re-admit within 30 Days of Discharge	3	100%	85%	96%	15%	▲
✓ Follow-up within 30 Days of Discharge	3	100%	90%	89%	10%	

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support	9	100%	60%	88%	40%	▲
✓ Stable Living Situation	9	100%	90%	98%	10%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		6	937 days	0.3	87%	90%	89%	-3%

< 90% | 90-110% | >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										22%
Discharges										33%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 24 Active Group Home Programs

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

Social Rehab 306280
Gilead Community Services Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

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	61	67	-9%	
Admits	1	-		
Discharges	4	7	-43%	▼
Service Hours	-	-		
Social Rehab/PHP/IOP Days	0	3,761	-100%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	63%	N/A	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions				■						11%
Discharges		■	■					■		33%
Services										0%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

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

Valor Home 306231
Gilead Community Services Inc.
Mental Health - Residential Services - Supervised Apartments

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	5	5	0%
Admits	-	1	-100%
Discharges	-	-	
Bed Days	1,370	1,375	0%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	75%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	86%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	89%
SA Screen Complete	N/A	74%

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

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	78%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	77%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		5	100%	60%	84%	40% ▲
✓ Stable Living Situation		5	100%	95%	94%	5%
● Employed		1	20%	25%	9%	-5%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	2,182 days	0.3	100%	90%	93%	10%

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

Women's Program 306235
Gilead Community Services Inc.
Mental Health - Residential Services - Supervised Apartments

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	5	5	0%
Admits	1	-	
Discharges	-	-	
Bed Days	1,322	1,375	-4%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	75%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	86%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	89%
✓ SA Screen Complete	100%	74%

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

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	78%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	77%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		5	100%	60%	84%	40% ▲
✓ Employed		2	40%	25%	9%	15% ▲
✓ Stable Living Situation		5	100%	95%	94%	5%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	2,178 days	0.3	96%	90%	93%	6%

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

YAS Fiduiary
Gilead Community Services Inc.
Mental Health - Other - Fiduciary

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

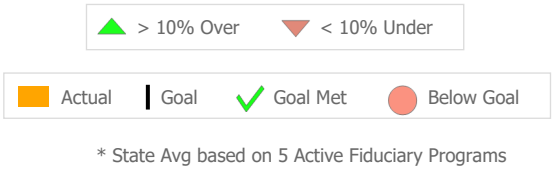
Program Activity

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

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



* State Avg based on 5 Active Fiduciary Programs

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