SCADD
Lebanon, 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	1,605	2,808	-43%	▼
	Admits	1,763	3,466	-49%	▼
	Discharges	1,794	3,662	-51%	▼
	Service Hours	3,741	8,336	-55%	▼
	Bed Days	21,759	38,189	-43%	▼
	S.Rehab/PHP/IOP	1,268	1,829	-31%	▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Residential Services	885	48.0%
	Outpatient	562	30.5%
	IOP	70	3.8%
	Medication Assisted Treatment	50	2.7%
Forensic SA			
	Forensics Community-based	224	12.2%
	Case Management	51	2.8%

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%

Legend: Satisfied % | Goal % | 0-80% | 80-100% | Goal Met | ● Under Goal

Client Demographics

Age

Age	#	%	State Avg
18-25	142	9%	10%
26-34	519	32%	22%
35-44	464	29%	23%
45-54	271	17%	19%
55-64	185	12%	19%
65+	24	1%	8%

Gender

Gender	#	%		State Avg
Male	1,232	77%	▲	58%
Female	369	23%	▼	42%
Transgender				0%

Ethnicity

Ethnicity	#	%		State Avg
Non-Hispanic	1,297	81%	▲	69%
Hisp-Puerto Rican	176	11%		12%
Unknown	76	5%		11%
Hispanic-Other	47	3%		8%
Hispanic-Mexican	6	0%		0%
Hispanic-Cuban	3	0%		0%

Race

Race	#	%	State Avg
White/Caucasian	1,135	71%	62%
Black/African American	256	16%	17%
Other	142	9%	13%
Unknown	37	2%	6%
Am. Indian/Native Alaskan	18	1%	0%
Hawaiian/Other Pacific Islander	8	0%	0%
Asian	5	0%	1%
Multiple Races	4	0%	1%

Legend: 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	38	44	-14% ▼
Admits	31	36	-14% ▼
Discharges	34	34	0%
Bed Days	2,141	2,607	-18% ▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	87%
✓ Valid TEDS Data	100%	97%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%

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

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		19	56%	85%	65%	-29% ▼
● No Re-admit within 30 Days of Discharge		26	76%	85%	78%	-9%
● Follow-up within 30 Days of Discharge		15	79%	90%	66%	-11% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		39	98%	70%	88%	28% ▲
● Employed		13	32%	60%	38%	-28% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		10	70 days	0.2	78%	90%	77%	-12% ▼

Legend: < 90% | 90-110% | >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	24	42	-43%	▼
Admits	14	33	-58%	▼
Discharges	19	33	-42%	▼
Bed Days	1,597	2,525	-37%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		12	63%	85%	65%	-22%	▼
✔	No Re-admit within 30 Days of Discharge		17	89%	85%	78%	4%	
🔴	Follow-up within 30 Days of Discharge		10	83%	90%	66%	-7%	

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	98%	87%
✔	Valid TEDS Data	100%	97%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%

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

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	96%	70%	88%	26%	▲
🔴	Employed		12	50%	60%	38%	-10%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		11	122 days	0.3	53%	90%	77%	-37%	▼

🟦 < 90%	⬜ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	⬜	⬜	⬜			⬜	⬜	⬜	⬜	78%
Discharges	⬜	⬜	⬜		⬜	⬜	⬜	⬜	⬜	89%

⬜ 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	649	829	-22%	▼
Admits	800	1,057	-24%	▼
Discharges	795	1,059	-25%	▼
Bed Days	3,393	4,597	-26%	▼

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		500	63%	80%	67%	-17%	▼
● No Re-admit within 30 Days of Discharge		620	78%	85%	80%	-7%	
● Follow-up within 30 Days of Discharge		274	55%	90%	54%	-35%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		90%	80%
✓ 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		98%	95%
✓ SA Screen Complete		98%	95%

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	62%	90%	72%	-28%	▼

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	35	75	-53% ▼
Admits	31	53	-42% ▼
Discharges	28	55	-49% ▼
Bed Days	2,364	5,746	-59% ▼

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Treatment Completed Successfully		14	50%	70%	67%	-20% ▼
🔴 No Re-admit within 30 Days of Discharge		20	71%	85%	89%	-14% ▼
🔴 Follow-up within 30 Days of Discharge		8	57%	90%	70%	-33% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Abstinence/Reduced Drug Use		34	87%	70%	68%	17% ▲

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	5%

Co-occurring		Actual	State Avg
✔ MH Screen Complete		94%	89%
✔ SA Screen Complete		100%	89%

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		22	90 days	0.4	39%	90%	79%	-51% ▼

■ < 90%   ■ 90-110%   ■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	175	336	-48%	▼
Admits	177	274	-35%	▼
Discharges	153	283	-46%	▼
Bed Days	10,013	19,424	-48%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		88	58%	70%	67%	-12%	▼
🔴	No Re-admit within 30 Days of Discharge		118	77%	85%	89%	-8%	
🔴	Follow-up within 30 Days of Discharge		65	74%	90%	70%	-16%	▼

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	5%

Co-occurring		Actual	State Avg
✔	MH Screen Complete	97%	89%
✔	SA Screen Complete	97%	89%

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		163	82%	70%	68%	12%	▲

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		76	69 days	0.3	48%	90%	79%	-42%	▼

🟦 < 90%	⬜ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	48	60	-20%	▼
Admits	42	48	-13%	▼
Discharges	40	48	-17%	▼
Bed Days	2,251	3,290	-32%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		20	50%	85%	65%	-35%	▼
🔴	No Re-admit within 30 Days of Discharge		32	80%	85%	78%	-5%	
🔴	Follow-up within 30 Days of Discharge		11	55%	90%	66%	-35%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔️	Valid NOMS Data	89%	87%
✔️	Valid TEDS Data	100%	97%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%

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

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		47	94%	70%	88%	24%	▲
🔴	Employed		7	14%	60%	38%	-46%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		13	63 days	0.2	63%	90%	77%	-27%	▼

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	70	167	-58%	▼
Admits	67	166	-60%	▼
Discharges	64	177	-64%	▼
Service Hours	168	22		
Social Rehab/PHP/IOP Days	1,268	1,381	-8%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		38	59%	50%	60%	9%	
●	Follow-up within 30 Days of Discharge		27	71%	90%	55%	-19%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		47	63%	55%	53%	8%	
●	Stable Living Situation		60	80%	95%	85%	-15%	▼
●	Not Arrested		46	61%	75%	78%	-14%	▼
●	Employed		20	27%	50%	25%	-23%	▼
●	Self Help		17	23%	60%	24%	-37%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	75%	82%
✓	Valid TEDS Data	100%	87%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	99%	85%
✓	SA Screen Complete	98%	85%

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

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Clients Receiving Services		9	82%	90%	58%	-8%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	100%
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 61 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	562	831	-32% ▼
Admits	478	741	-35% ▼
Discharges	479	821	-42% ▼
Service Hours	3,166	4,499	-30% ▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		79%	85%
✓ Valid TEDS Data		99%	85%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		95%	21%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		98%	91%
✓ SA Screen Complete		98%	97%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Treatment Completed Successfully		206	43%	50%	51%	-7%

Recovery

National Recovery Measures (NOMS)

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		450	74%	55%	48%	19% ▲
🔴 Stable Living Situation		556	91%	95%	76%	-4%
🔴 Employed		279	46%	50%	31%	-4%
🔴 Not Arrested		366	60%	75%	76%	-15% ▼
🔴 Self Help		149	24%	60%	18%	-36% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		131	95%	90%	69%	5%

Service Engagement

Outpatient

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 2 or more Services within 30 days		263	59%	75%	62%	-16% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
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 109 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	38	70	-46%	▼
Admits	27	58	-53%	▼
Discharges	31	59	-47%	▼
Service Hours	176	541	-67%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		98%	99%

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		11	35%	50%	66%	-15%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		38	95%	60%	81%	35%	▲
✔	Self Help		36	90%	60%	52%	30%	▲
✔	Stable Living Situation		32	80%	80%	56%	0%	
✔	Employed		9	22%	20%	19%	2%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		8	89%	90%	60%	-1%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▪	▪	▪	▪		▪	▪	▪	▪	89%
Discharges	▪	▪	▪	▪	▪	▪	▪		▪	89%
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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	31	123	-75%	▼
Admits	27	79	-66%	▼
Discharges	23	101	-77%	▼
Service Hours	45	202	-78%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		98%	99%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		21	91%	50%	66%	41%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		32	97%	60%	81%	37%	▲
✓	Self Help		30	91%	60%	52%	31%	▲
●	Employed		3	9%	20%	19%	-11%	▼
●	Stable Living Situation		23	70%	80%	56%	-10%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		10	100%	90%	60%	10%

Data Submitted to DMHAS by Month
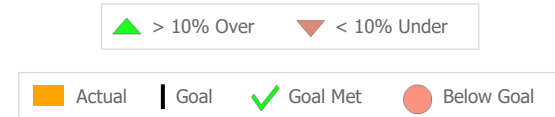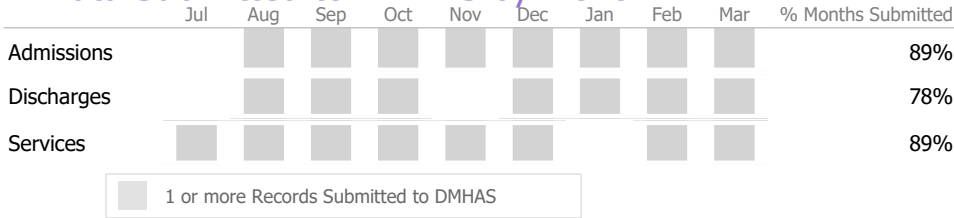
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		▢	▢	▢	▢	▢	▢	▢	▢	89%
Discharges		▢	▢	▢		▢	▢	▢	▢	78%
Services	▢	▢	▢	▢	▢	▢		▢	▢	89%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

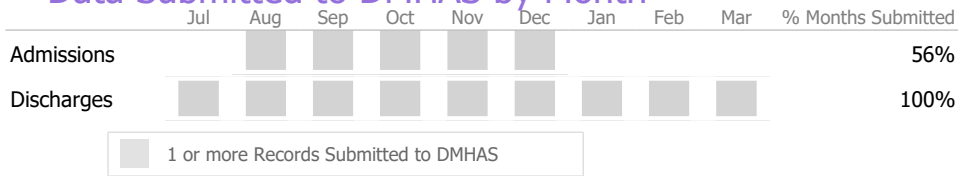| ▮ Actual		Goal	✓ Goal Met	● Below Goal

* 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	162	370	-56%	▼
Admits	11	178	-94%	▼
Discharges	41	195	-79%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		▣	▣	▣	▣	▣				56%
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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	45	68	-34%	▼
Admits	25	44	-43%	▼
Discharges	20	43	-53%	▼
Service Hours	162	131	23%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	88%	88%
✔	Valid TEDS Data	100%	96%

On-Time Periodic		Actual	State Avg
✔	6 Month Updates	100%	24%

Co-occurring		Actual	State Avg
✔	MH Screen Complete	92%	76%
✔	SA Screen Complete	92%	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		15	75%	50%	51%	25%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Abstinence/Reduced Drug Use		37	82%	55%	47%	27%	▲
✔	Stable Living Situation		44	98%	95%	65%	3%	
🔴	Self Help		26	58%	60%	19%	-2%	
🔴	Not Arrested		32	71%	75%	66%	-4%	
🔴	Employed		19	42%	50%	24%	-8%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Clients Receiving Services		24	96%	90%	36%	6%	

Data Submitted to DMHAS by Month
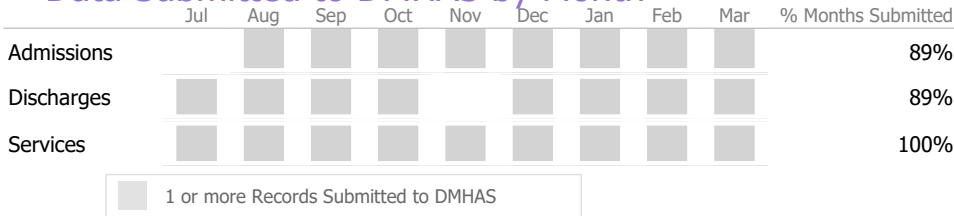
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		☐	☐	☐	☐	☐	☐	☐	☐	89%
Discharges	☐	☐	☐	☐		☐	☐	☐	☐	89%
Services	☐	☐	☐	☐	☐	☐	☐	☐	☐	100%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal ✔ Goal Met 🔴 Below Goal

* State Avg based on 21 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	15	2	650%	▲
Admits	11	2	450%	▲
Discharges	15	1	1400%	▲
Service Hours	3	-		

Data Submission Quality

Data Entry	Actual % vs Goal %	Actual	State Avg
Valid NOMS Data		73%	88%
✓ Valid TEDS Data		100%	96%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	24%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	76%
✓ 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		0	0%	50%	51%	-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%	65%	-2%	
🔴 Not Arrested		5	33%	75%	66%	-42%	▼
🔴 Self Help		1	7%	60%	19%	-53%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		N/A	N/A	90%	36%	N/A	▼

Data Submitted to DMHAS by Month
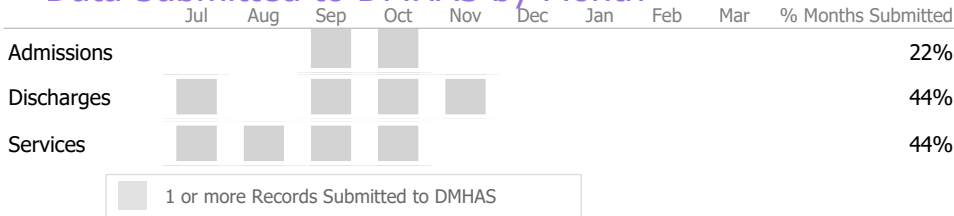
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions			▪	▪						22%
Discharges	▪		▪	▪	▪					44%
Services	▪	▪	▪	▪						44%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Legend: ▬ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 21 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 - March 2021 (Data as of Jun 28, 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	74%
Valid TEDS Data		N/A	97%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	24%

Co-occurring		Actual	State Avg
MH Screen Complete		N/A	95%
SA Screen Complete		N/A	98%

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		N/A	N/A	55%	37%	-55% ▼
Employed		N/A	N/A	50%	36%	-50% ▼
Not Arrested		N/A	N/A	75%	58%	-75% ▼
Self Help		N/A	N/A	60%	28%	-60% ▼
Stable Living Situation		N/A	N/A	95%	79%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		N/A	N/A	90%	79%	N/A ▼

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 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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	62	167	-63%	▼
Admits	21	131	-84%	▼
Discharges	51	132	-61%	▼
Service Hours	21	11	92%	▲

Service Utilization
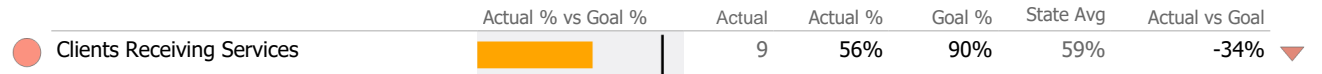
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		9	56%	90%	59%	-34%	▼

Jail Diversion

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Follow-up Service within 48 hours		0	0%	0%	129%	0%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		▪	▪			▪	▪	▪	▪	67%
Discharges	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Services	▪	▪	▪	▪					▪	56%

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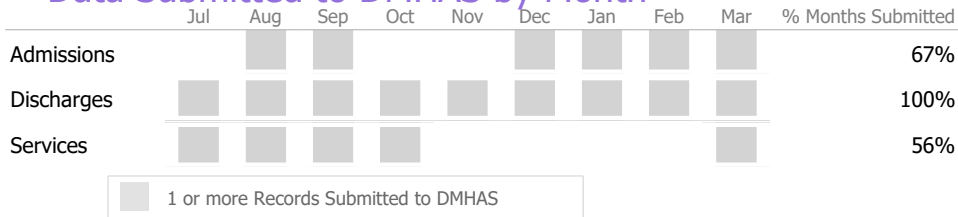
▲ > 10% Over   ▼ < 10% Under

| 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.