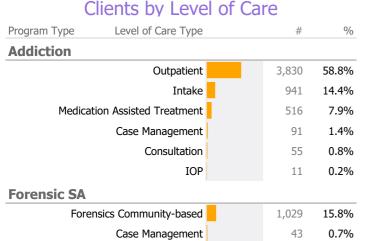
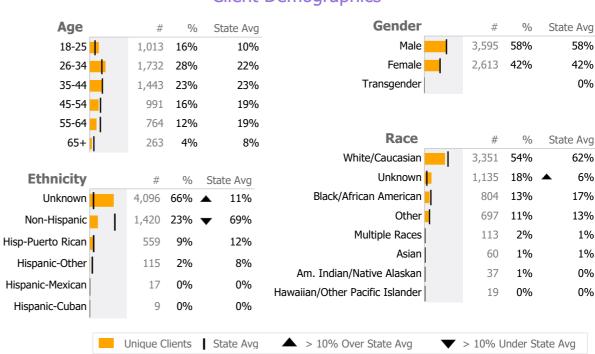
#### **Provider Activity** Monthly Trend Actual 1 Yr Ago Variance % Measure **Unique Clients** 6,216 -2% 6,373 Admits 3,422 3,810 -10% 2.774 **-21%** ▼ Discharges 3,503 Service Hours -4% 11,595 12,107 > 10% Over 1 Yr Ago > 10% Under 1Yr Ago Clients by Level of Care Program Type Level of Care Type %







#### **Access Line**

Wheeler Clinic

Addiction - Intake - Central Intake

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	941	818	15%	•
Admits	1,174	955	23%	•
Discharges	1,174	955	23%	•

Data		IILLEU	tO			יו עט				
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
	1 or mo	ore Record	ds Sub	mitted t	o DMHA	S				



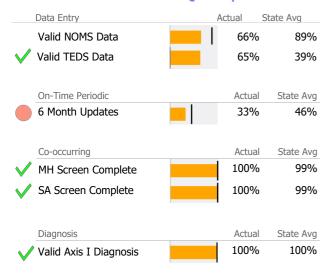
<sup>\*</sup> State Avg based on 1 Active Central Intake Programs

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

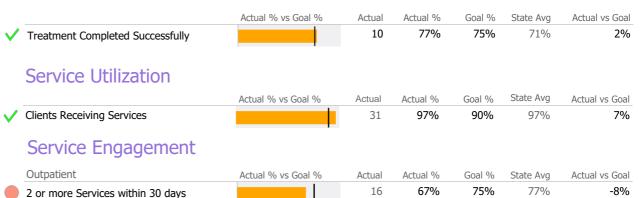
### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	45	33	36%	•
Admits	24	23	4%	
Discharges	13	9	44%	•
Service Hours	363	127	185%	•

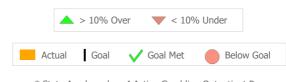
### **Data Submission Quality**



#### Discharge Outcomes







<sup>\*</sup> State Avg based on 4 Active Gambling Outpatient Programs

Addiction - Case Management - Outreach & Engagement

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

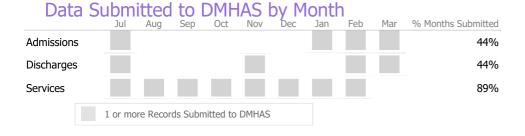
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

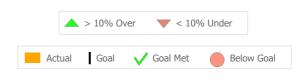
### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	34	72	<b>-53%</b> ▼	
Admits	7	5	40% 🔺	
Discharges	9	22	<b>-59% ▼</b>	
Service Hours	283	309	-8%	

### Service Engagement







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

#### **Program Activity Discharge Outcomes** Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 11 12 -8% 100% 50% 60% 50% 🔺 Treatment Completed Successfully Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 1 0 0% 90% 55% -90% Follow-up within 30 Days of Discharge Service Hours Recovery Social Rehab/PHP/IOP 0 0 Days National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 0 **Employed** 0% 50% 25% -50% **Data Submission Quality** 0 0% 55% 53% -55% -Abstinence/Reduced Drug Use 0 0% 60% 24% -60% Self Help Data Entry Actual State Avg Valid NOMS Data 0% 82% 0 0% 75% 78% -75% Not Arrested Valid TEDS Data 0% 87% 0 95% -95% 🔻 0% 85% Stable Living Situation Service Utilization On-Time Periodic Actual State Avg 6 Month Updates 0% 0% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Clients Receiving Services 0 0% 90% 58% N/A 🔻 Actual State Avg Co-occurring 85% N/A MH Screen Complete SA Screen Complete N/A 85% Diagnosis Actual State Avg 100% 100% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Feb Mar % Months Submitted ▲ > 10% Over < 10% Under</p> 0% Admissions Discharges 11% ✓ Goal Met Actual Goal Below Goal 0% Services \* State Avg based on 61 Active Standard IOP Programs 1 or more Records Submitted to DMHAS

#### **Program Activity Discharge Outcomes** Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 97 129 -25% 21 40% 50% 51% -10% Treatment Completed Successfully 37 Admits 57 -35% Recovery 52 Discharges 54 -4% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 142 444 -68% 🔻 76 78% 75% 76% 3% Not Arrested 45% 55% 48% -10% 44 Abstinence/Reduced Drug Use **Data Submission Quality Employed** 28 29% 50% 31% -21% Data Entry Actual State Avg 71 73% 95% -22% -76% Stable Living Situation Valid NOMS Data 68% 85% 10 10% 60% 18% -50% Self Help Valid TEDS Data 82% 85% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 25% 21% Clients Receiving Services 30 67% 90% 69% -23% Service Engagement Co-occurring Actual State Avg 100% 91% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 100% 97% 19 51% 75% 62% -24% 2 or more Services within 30 days Diagnosis Actual State Avg 98% 99% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% 100% Discharges Actual Goal ✓ Goal Met Below Goal Services 78% \* State Avg based on 109 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

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

\* State Avg based on 7 Active Naltrexone Programs

#### **Program Activity Discharge Outcomes** Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Unique Clients** N/A N/A 50% 76% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal N/A N/A 55% 37% -55% -Abstinence/Reduced Drug Use **Data Submission Quality** 50% 36% -50% N/A N/A **Employed** State Avg Data Entry 58% -75% -Not Arrested N/A N/A 75% Valid NOMS Data N/A 74% 60% 28% -60% -N/A N/A Self Help Valid TEDS Data N/A 97% 95% -95% -N/A N/A 79% Stable Living Situation On-Time Periodic State Avg Actual 6 Month Updates N/A 24% Co-occurring Actual State Avg N/A 95% MH Screen Complete SA Screen Complete N/A 98% Data Submitted to DMHAS by Month Dec Oct Nov Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 0% 0% Discharges Actual ✓ Goal Met Goal Below Goal 1 or more Records Submitted to DMHAS

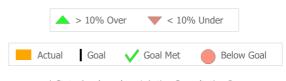
#### **Program Activity Discharge Outcomes** Variance % Actual % State Avg Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % Actual vs Goal **Unique Clients** 516 357 45% N/A N/A 50% 51% N/A Treatment Completed Successfully 123 Admits 111 11% Recovery Discharges 1 -100% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 266 52% 75% 66% -23% -Not Arrested 26% 55% 47% -29% 134 Abstinence/Reduced Drug Use **Data Submission Quality Employed** 43 8% 50% 24% -42% Data Entry Actual State Avg 91 19% -42% 18% 60% Self Help Valid NOMS Data 64% 88% 217 42% 95% 65% -53% Stable Living Situation Valid TEDS Data 100% 96% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 0% 6 Month Updates 24% Clients Receiving Services 0 0% 90% 36% N/A 🔻 Co-occurring Actual State Avg 100% 76% MH Screen Complete SA Screen Complete 100% 88% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> 100% Admissions 0% Discharges ✓ Goal Met Actual Goal Below Goal Services 0% \* State Avg based on 21 Active Buprenorphine Maintenance Programs 1 or more Records Submitted to DMHAS

Addiction - Consultation - Consultation

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	55	67	-18%	•
Admits	14	54	-74%	•
Discharges	11	35	-69%	•
Service Hours	_	-		





#### **Parents Recovering from Opioid Use Disorder (PROUD**

Wheeler Clinic

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 Discharge Outcomes** Actual % State Avg Actual vs Goal Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % **Unique Clients** N/A N/A 50% 51% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours N/A N/A 55% 48% -55% -Abstinence/Reduced Drug Use 50% 31% -50% N/A **Employed** N/A **Data Submission Quality** Not Arrested N/A N/A 75% 76% -75% Data Entry Actual State Avg 18% -60% -N/A N/A 60% Self Help Valid NOMS Data 85% N/A -95% -N/A N/A 95% 76% Stable Living Situation Valid TEDS Data N/A 85% Service Utilization On-Time Periodic Actual State Avg State Avg Actual % vs Goal % Actual % Goal % Actual vs Goal Actual 6 Month Updates N/A 21% Clients Receiving Services N/A N/A 90% 69% N/A 🔻 Co-occurring Actual State Avg N/A 91% MH Screen Complete SA Screen Complete N/A 97% Data Submitted to DMHAS by Month Oct Nov Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 0% Discharges 0% Actual Goal Goal Met Below Goal 1 or more Records Submitted to DMHAS \* State Avg based on 109 Active Standard Outpatient Programs

### **Post-Release Transitional Forensic Case Management**

Wheeler Clinic

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)

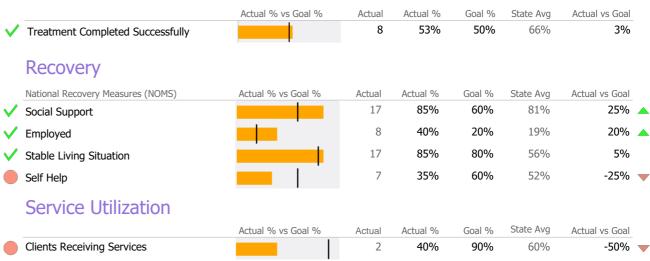
# Program Activity Discha

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	20	14	43%	•
Admits	7	8	-13%	•
Discharges	15	5	200%	•
Service Hours	91	53	72%	•

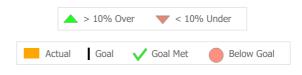
# **Data Submission Quality**

Data Entry	Actual	State Avg
✓ Valid NOMS Data	999	% 99%
On-Time Periodic	Actu	al State Avg
6 Month Updates	00	% 4%

## Discharge Outcomes







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

#### **Pre-Release Transitional Forensic Case Management**

Wheeler Clinic

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)

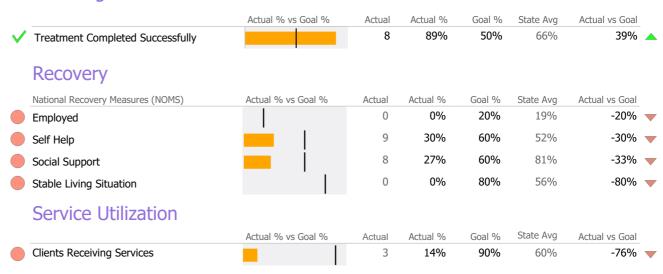
# **Program Activity**

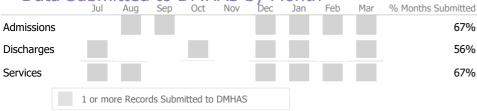
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	30	51	-41%	lacktriangle
Admits	8	28	-71%	•
Discharges	9	22	-59%	•
Service Hours	17	48	-64%	•

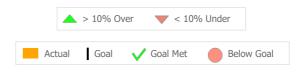
### **Data Submission Quality**

Data Entry	Actual S	State Avg
Valid NOMS Data	98%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	4%

#### Discharge Outcomes







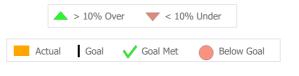
<sup>\*</sup> State Avg based on 8 Active Standard Case Management Programs

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

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	317	667	-52%	•
Admits	124	380	-67%	•
Discharges	111	417	-73%	•

Data	Jul	Aug	Sep	Oct		Dec	Jan	Feb	Mar	% Months Submitted
Admissions										89%
Discharges										89%
	1 or mo	re Record	ds Sub	mitted t	to DMHA	S				



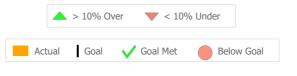
<sup>\*</sup> State Avg based on 16 Active Pre-trial Intervention Programs Programs

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

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	713	1,170	-39%	lacktriangledown
Admits	109	487	-78%	•
Discharges	114	488	-77%	$\blacksquare$

Data	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										89%
Discharges										89%
	1 or mo	re Record	ds Sub	mitted t	o DMHA	S				



<sup>\*</sup> State Avg based on 16 Active Pre-trial Intervention Programs Programs

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 2,142 1,818 18% 394 65% 50% 51% 15% 🔺 Treatment Completed Successfully 1,097 21% 🔺 Admits 903 Recovery Discharges 610 846 -28% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 6,108 6,609 -8% 1,701 79% 75% 76% 4% Not Arrested 39% 55% 48% 841 -16% Abstinence/Reduced Drug Use **Data Submission Quality** 71% Stable Living Situation 1,522 95% 76% -24% Data Entry Actual State Avg -33% -361 17% 50% 31% **Employed** Valid NOMS Data 61% 85% 398 19% 60% 18% -41% Self Help Valid TEDS Data 79% 85% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 23% 21% Clients Receiving Services 1,136 74% 90% 69% -16% Service Engagement Co-occurring Actual State Avg 100% 91% MH Screen Complete Outpatient Actual vs Goal Actual % vs Goal % Actual Actual % Goal % State Ava SA Screen Complete 100% 97% 541 49% 75% 62% -26% 2 or more Services within 30 days Diagnosis Actual State Avg 99% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% 100% Discharges Actual Goal ✓ Goal Met Below Goal Services 78% \* State Avg based on 109 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 1,601 1,457 10% 258 43% 50% 51% -7% Treatment Completed Successfully 695 Admits 717 -3% Recovery 598 Discharges 576 4% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 4,591 4,517 2% 1,104 69% 75% 76% -6% Not Arrested 36% 55% 48% -19% 574 Abstinence/Reduced Drug Use **Data Submission Quality Employed** 366 23% 50% 31% -27% Data Entry Actual State Avg 65% 95% 1,043 76% -30% Stable Living Situation Valid NOMS Data 60% 85% 174 11% 60% 18% -49% Self Help Valid TEDS Data 73% 85% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 21% 21% Clients Receiving Services 621 62% 90% 69% -28% Service Engagement Co-occurring Actual State Avg 100% 91% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 100% 97% 428 62% 75% 62% -13% 2 or more Services within 30 days Diagnosis Actual State Avg 99% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% 100% Discharges Actual Goal ✓ Goal Met Below Goal Services 78% \* State Avg based on 109 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

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

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	57	75	-24%	•
Admits	3	58	-95%	•
Discharges	57	17	235%	•
Service Hours	_	_		

1 or more Records Submitted to DMHAS

#### Service Engagement

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
at least 1 Service within 180 days		1	33%	50%	73%	-17%

Data Submitted to DMHAS by Month

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

Admissions

Discharges

Services

DMHAS by Month

22%

00%



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