**Connecticut Mental Health Center**
New Haven, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 2021)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 2,628 | 3,357 | -22% | ▼ |
| | Admits | 1,677 | 2,266 | -26% | ▼ |
| | Discharges | 1,601 | 2,914 | -45% | ▼ |
| | Service Hours | 23,052 | 34,136 | -32% | ▼ |
| | Bed Days | 9,893 | 12,987 | -24% | ▼ |

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

## Consumer Satisfaction Survey   (Based on 99 FY20 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Overall | | 95% | 80% | 91% |
| ✓ | Participation in Treatment | | 92% | 80% | 92% |
| ✓ | General Satisfaction | | 91% | 80% | 92% |
| ✓ | Access | | 91% | 80% | 88% |
| ✓ | Respect | | 90% | 80% | 91% |
| ✓ | Quality and Appropriateness | | 86% | 80% | 93% |
| ✓ | Outcome | | 81% | 80% | 83% |
| ● | Recovery | | 79% | 80% | 79% |

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

## Clients by Level of Care

| Program Type / Level of Care Type | | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Outpatient | 1,812 | 46.1% |
| | Intake | 638 | 16.2% |
| | Prevention | 320 | 8.1% |
| | Social Rehabilitation | 216 | 5.5% |
| | Other | 206 | 5.2% |
| | Crisis Services | 135 | 3.4% |
| | Inpatient Services | 53 | 1.3% |
| | ACT | 43 | 1.1% |
| | Community Support | 38 | 1.0% |
| | Residential Services | 9 | 0.2% |
| **Forensic MH** | | | |
| | Forensics Community-based | 174 | 4.4% |
| | Outpatient | 88 | 2.2% |
| **Addiction** | | | |
| | Outpatient | 198 | 5.0% |

## Client Demographics

| Age | # | % | State Avg |
|---|---|---|---|
| 18-25 | 312 | 12% | 10% |
| 26-34 | 452 | 18% | 22% |
| 35-44 | 535 | 21% | 23% |
| 45-54 | 450 | 18% | 19% |
| 55-64 | 519 | 20% | 18% |
| 65+ | 264 | 10% | 7% |

| Gender | # | % | State Avg |
|---|---|---|---|
| Male | 1,530 | 58% | 59% |
| Female | 1,086 | 41% | 41% |
| Transgender | 12 | 0% | 0% |

| Ethnicity | # | % | State Avg |
|---|---|---|---|
| Non-Hispanic | 1,674 | 64% | 68% |
| Hisp-Puerto Rican | 400 | 15% | 11% |
| Hispanic-Other | 287 | 11% | 8% |
| Unknown | 203 | 8% | 12% |
| Hispanic-Mexican | 62 | 2% | 0% |
| Hispanic-Cuban | 2 | 0% | 0% |

| Race | # | % | | State Avg |
|---|---|---|---|---|
| Black/African American | 894 | 35% | ▲ | 17% |
| White/Caucasian | 877 | 34% | ▼ | 61% |
| Other | 635 | 25% | ▲ | 13% |
| Multiple Races | 45 | 2% | | 1% |
| Unknown | 44 | 2% | | 6% |
| Asian | 36 | 1% | | 1% |
| Am. Indian/Native Alaskan | 12 | 0% | | 0% |
| Hawaiian/Other Pacific Islander | 2 | 0% | | 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 Pre Admit**
Connecticut Mental Health Center
Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 9 | -44% | ▼ |
| Admits | - | 8 | -100% | ▼ |
| Discharges | 3 | 5 | -40% | ▼ |
| Service Hours | 1 | 38 | -96% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | ▪ | | ▪ | | | | | | | | 17% |
| Services | ▪ | | | | | ▪ | | | | | | | 17% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 15 Active Other Programs

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

**BHH ADULT NAE**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 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 | 86% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| 6 Month Updates | N/A | 54% |

| Co-occurring | Actual | State Avg |
|---|---|---|
| MH Screen Complete | N/A | 80% |
| SA Screen Complete | N/A | 81% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Employed | | N/A | N/A | 30% | 24% | -30% ▼ |
| Social Support | | N/A | N/A | 60% | 62% | -60% ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 75% | -95% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Clients Receiving Services | | N/A | N/A | 90% | 85% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 88 Active Standard Outpatient Programs

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

**CMHC Hospital Liaison**
Connecticut Mental Health Center
Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 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 | Apr | May | Jun | % 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 15 Active Other Programs

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

**CMHC UM Screening**
Connecticut Mental Health Center
Mental Health - Intake - UM Screening

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 0 Active UM Screening Programs

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

**Community Forensics Pre-Admit**
Connecticut Mental Health Center
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 19 | 26 | -27% | ▼ |
| Admits | 10 | 11 | -9% | |
| Discharges | 6 | 17 | -65% | ▼ |
| Service Hours | 2 | 7 | -77% | ▼ |

## Data Submitted to DMHAS by Month
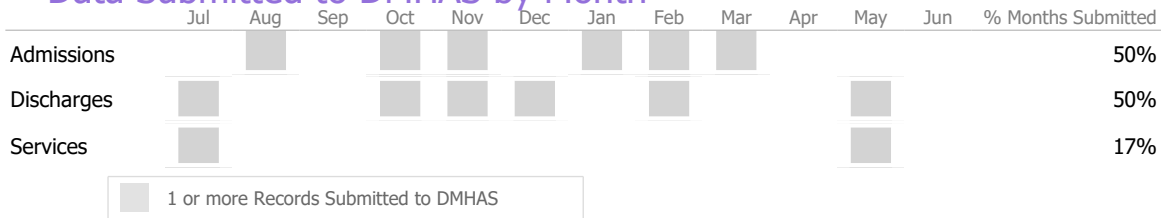
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▢ | | ▢ | ▢ | | ▢ | ▢ | ▢ | | | | 50% |
| Discharges | ▢ | | | ▢ | ▢ | ▢ | | ▢ | | | ▢ | | 50% |
| Services | ▢ | | | | | | | | | | ▢ | | 17% |

▢ 1 or more Records Submitted to DMHAS

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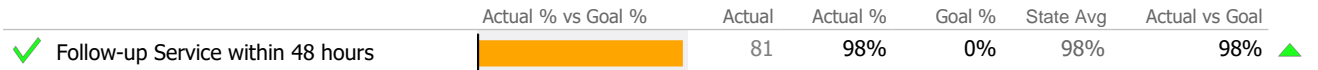
■ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 17 Active Central Intake Programs

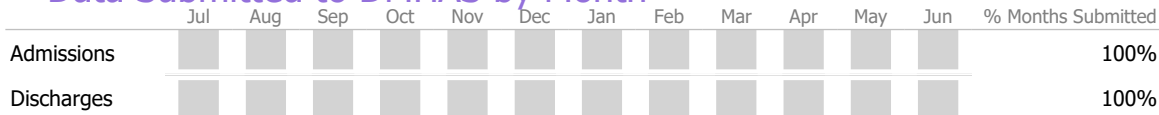Variances in data may be indicative of operational adjustments related to the pandemic.

**FORDD Mens Forensic Drug Diversion**
Connecticut Mental Health Center
Mental Health - Outpatient - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 113 | 204 | -45% | ▼ |
| Admits | 86 | 149 | -42% | ▼ |
| Discharges | 80 | 182 | -56% | ▼ |

## Jail Diversion

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Follow-up Service within 48 hours | ▮▬▬▬▬ | 81 | 98% | 0% | 98% | 98% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Discharges | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

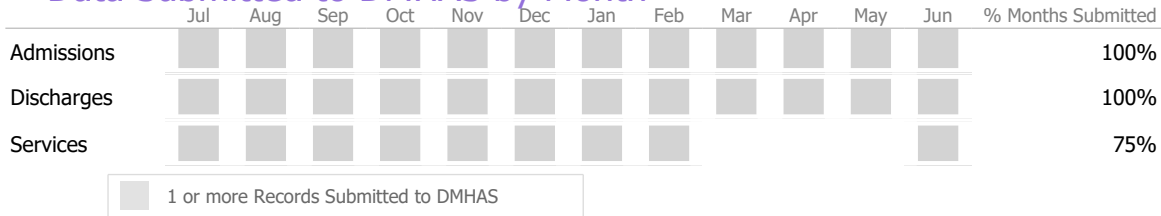▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

▮ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 2 Active Court Liaison-Jail Diversion Programs

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

**FORDD Pre-Admission**
Connecticut Mental Health Center
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 39 | 40 | -3% |
| Admits | 38 | 41 | -7% |
| Discharges | 39 | 41 | -5% |
| Service Hours | 15 | 25 | -41% ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | | | ▢ | 75% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ⬤ Below Goal

* State Avg based on 17 Active Central Intake Programs

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

**FORDD Womens Forensic Drug Diversion**
Connecticut Mental Health Center
Mental Health - Outpatient - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---------|--------|----------|-----------|---|
| Unique Clients | 58 | 87 | -33% | ▼ |
| Admits | 40 | 70 | -43% | ▼ |
| Discharges | 49 | 73 | -33% | ▼ |

## Jail Diversion

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Follow-up Service within 48 hours | [orange bar] | 38 | 97% | 0% | 98% | 97% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 2 Active Court Liaison-Jail Diversion Programs

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

**HISP Clinic Dual Dx**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 106 | 103 | 3% | |
| Admits | 24 | 19 | 26% | ▲ |
| Discharges | 21 | 20 | 5% | |
| Service Hours | 1,314 | 3,125 | -58% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 96% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 74% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 80% |
| ✔ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 2 | 10% | 50% | 36% | -40% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 65 | 61% | 60% | 62% | 1% | |
| 🔴 Stable Living Situation | | 91 | 85% | 95% | 75% | -10% | |
| 🔴 Employed | | 14 | 13% | 30% | 24% | -17% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 87 | 100% | 90% | 85% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 21 | 91% | 75% | 75% | 16% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Discharges | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 92% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual   | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**HISP Clinic OP clin**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 240 | 231 | 4% | |
| Admits | 34 | 41 | -17% | ▼ |
| Discharges | 33 | 26 | 27% | ▲ |
| Service Hours | 2,895 | 4,675 | -38% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 97% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 72% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

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

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 6 | 18% | 50% | 36% | -32% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 157 | 65% | 60% | 62% | 5% |
| 🔴 Stable Living Situation | | 214 | 89% | 95% | 75% | -6% |
| 🔴 Employed | | 52 | 22% | 30% | 24% | -8% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 206 | 99% | 90% | 85% | 9% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 28 | 82% | 75% | 75% | 7% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | 92% |
| Discharges | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 92% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

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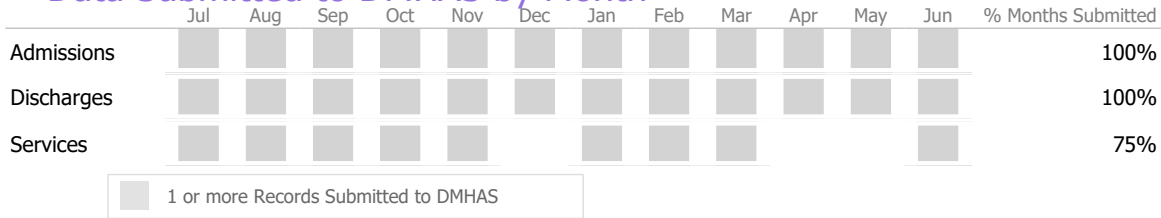
Actual     | Goal     ✓ Goal Met     🔴 Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**Hispanic Pre-Admission**
Connecticut Mental Health Center
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 58 | 61 | -5% |
| Admits | 58 | 61 | -5% |
| Discharges | 59 | 60 | -2% |
| Service Hours | 24 | 59 | -59% ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | | | ▢ | 75% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

■ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 17 Active Central Intake Programs

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

**Park St AIP**
Connecticut Mental Health Center
Mental Health - Inpatient Services - Acute Psychiatric

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 31 | 36 | -14% | ▼ |
| Admits | 18 | 19 | -5% | |
| Discharges | 15 | 20 | -25% | ▼ |
| Transfers - Out | 3 | 8 | -63% | ▼ |
| Bed Days | 5,604 | 6,788 | -17% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 14 | 78% | 95% | 80% | -17% | ▼ |
| ✔ | No Re-admit within 30 Days of Discharge | | 14 | 93% | 85% | 86% | 8% | |
| 🔴 | Follow-up within 30 Days of Discharge | | 11 | 79% | 90% | 78% | -11% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 73% | 85% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 22% | 12% |

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

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 97% | 99% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 20 | 529 days | 0.3 | 77% | 90% | 86% | -13% | ▼ |

■ < 90%    ■ 90-110%    ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 92% |
| Discharges | | | | | | | | | | | | | 75% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 11 Active Acute Psychiatric Programs

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

**Park St AIP Research**
Connecticut Mental Health Center
Mental Health - Inpatient Services - Acute Psychiatric

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 54 | -85% | ▼ |
| Admits | 8 | 58 | -86% | ▼ |
| Discharges | 9 | 63 | -86% | ▼ |
| Transfers - In | 2 | 6 | -67% | ▼ |
| Transfers - Out | 1 | 1 | 0% | |
| Bed Days | 47 | 254 | -81% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 4 | 40% | 95% | 80% | -55% | ▼ |
| ● | No Re-admit within 30 Days of Discharge | | 7 | 78% | 85% | 86% | -7% | |
| ● | Follow-up within 30 Days of Discharge | | 1 | 25% | 90% | 78% | -65% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 12 | 6 days | 1.5 | 1% | 90% | 86% | -89% |

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

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 59% | 85% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 12% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 75% | 88% |
| ✓ SA Screen Complete | | 100% | 100% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 88% | 99% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | ▢ | | | ▢ | ▢ | | ▢ | ▢ | 42% |
| Discharges | | | | | ▢ | | | ▢ | ▢ | | | ▢ | 33% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▢ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 11 Active Acute Psychiatric Programs

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

**Park Street ACT Team**
Connecticut Mental Health Center
Mental Health - ACT - Assertive Community Treatment

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 43 | 48 | -10% | ▼ |
| Admits | 1 | 3 | -67% | ▼ |
| Discharges | 4 | 7 | -43% | ▼ |
| Service Hours | 1,031 | 1,931 | -47% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 2 | 50% | 65% | 46% | -15% | ▼ |
| ✓ | No Re-admit within 30 Days of Discharge | | 2 | 100% | 85% | 93% | 15% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 1 | 50% | 90% | 56% | -40% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 83% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 95% | 87% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 93% |
| ✓ SA Screen Complete | | 100% | 92% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 91% | 98% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 37 | 86% | 60% | 92% | 26% | ▲ |
| ✓ | Social Support | | 28 | 65% | 60% | 79% | 5% | |
| 🔴 | Employed | | 2 | 5% | 15% | 16% | -10% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 39 | 100% | 90% | 99% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ■ | | | | | | | | | | 8% |
| Discharges | | | | | ■ | | ■ | | | ■ | | | 25% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

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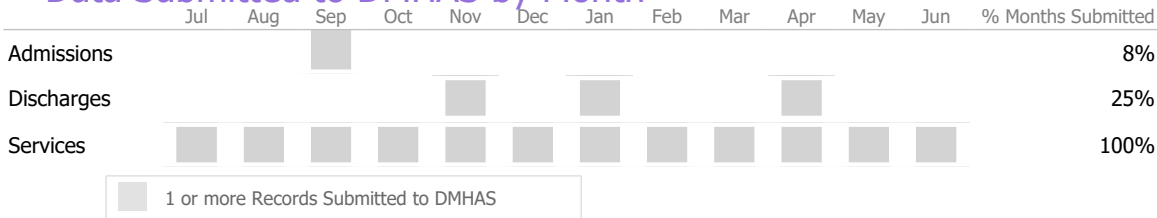
▲ > 10% Over    ▼ < 10% Under

■ 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.

**Park Street AIP 3rd Floor Clinical**
Connecticut Mental Health Center
Mental Health - Inpatient Services - Acute Psychiatric

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 19 | 28 | -32% | ▼ |
| Admits | 11 | 19 | -42% | ▼ |
| Discharges | 16 | 11 | 45% | ▲ |
| Transfers - In | 4 | 8 | -50% | ▼ |
| Transfers - Out | 2 | 9 | -78% | ▼ |
| Bed Days | 2,991 | 1,917 | 56% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 52% | 85% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ● 6 Month Updates | | 0% | 12% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 50% | 88% |
| ✓ SA Screen Complete | | 100% | 100% |

| 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 | | 7 | 39% | 95% | 80% | -56% | ▼ |
| ● No Re-admit within 30 Days of Discharge | | 11 | 69% | 85% | 86% | -16% | ▼ |
| ● Follow-up within 30 Days of Discharge | | 5 | 71% | 90% | 78% | -19% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 12 | 254 days | 0.3 | 68% | 90% | 86% | -22% | ▼ |
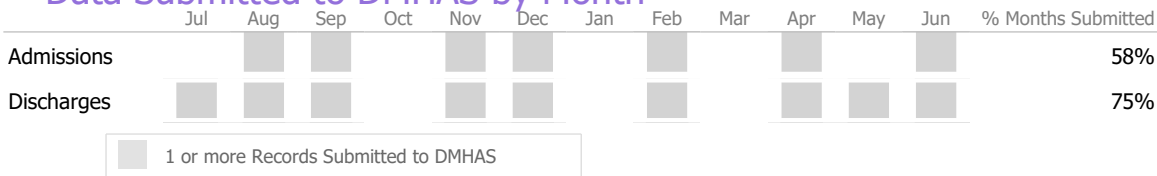
■ < 90%  ■ 90-110%  ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ■ | ■ | | ■ | ■ | | ■ | | ■ | | | 58% |
| Discharges | ■ | ■ | ■ | | ■ | | | ■ | | ■ | ■ | ■ | 75% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over  ▼ < 10% Under

■ Actual  | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 11 Active Acute Psychiatric Programs

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

**Park Street Community Forensics Svc**
Connecticut Mental Health Center
Forensic MH - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 88 | 101 | -13% | ▼ |
| Admits | 19 | 31 | -39% | ▼ |
| Discharges | 26 | 32 | -19% | ▼ |
| Service Hours | 1,678 | 2,389 | -30% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 91% | 88% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| 🔴 6 Month Updates | | 79% | 87% |

| Co-occurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 76% |
| ✔ SA Screen Complete | | 100% | 76% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 94% | 97% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 6 | 23% | 50% | 47% | -27% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Self Help | | 85 | 97% | 60% | 30% | 37% | ▲ |
| 🔴 Social Support | | 42 | 48% | 60% | 68% | -12% | ▼ |
| 🔴 Employed | | 5 | 6% | 30% | 18% | -24% | ▼ |
| 🔴 Stable Living Situation | | 57 | 65% | 95% | 83% | -30% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 62 | 100% | 90% | 98% | 10% | |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 18 | 95% | 75% | 91% | 20% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | | 83% |
| Discharges | ▢ | | | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | | | 67% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

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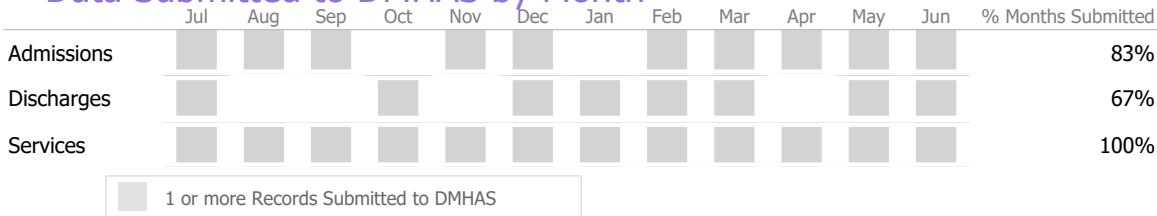
▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 3 Active Standard Outpatient Programs

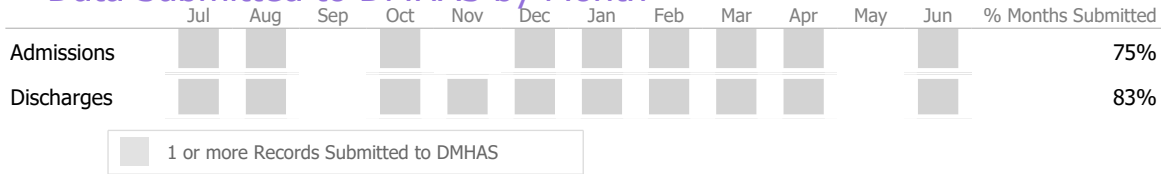Variances in data may be indicative of operational adjustments related to the pandemic.

**Park Street Crisis Intervention Team**
Connecticut Mental Health Center
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 25 | 49 | -49% | ▼ |
| Admits | 24 | 51 | -53% | ▼ |
| Discharges | 26 | 49 | -47% | ▼ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Evaluation within 1.5 hours of Request | | 20 | 87% | 75% | 78% | 12% | ▲ |
| ✓ | Community Location Evaluation | | 23 | 100% | 80% | 75% | 20% | ▲ |
| 🔴 | Follow-up Service within 48 hours | | 3 | 50% | 90% | 70% | -40% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | 75% |
| Discharges | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | | 83% |

▢ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| 🟧 Actual | | Goal | ✓ Goal Met | 🔴 Below Goal |

\* State Avg based on 26 Active Mobile Crisis Team Programs

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

**Park Street CSP Team**
Connecticut Mental Health Center
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 38 | 63 | -40% | ▼ |
| Admits | 7 | 5 | 40% | ▲ |
| Discharges | 9 | 32 | -72% | ▼ |
| Service Hours | 866 | 1,287 | -33% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 97% | 81% |

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

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 87% |
| ✔ SA Screen Complete | | 100% | 77% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 55% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 9 | 100% | 65% | 56% | 35% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Stable Living Situation | | 32 | 84% | 80% | 88% | 4% | |
| ● | Social Support | | 22 | 58% | 60% | 81% | -2% | |
| ● | Employed | | 0 | 0% | 20% | 13% | -20% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 29 | 100% | 90% | 98% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▪ | ▪ | | ▪ | ▪ | | ▪ | | | | | 42% |
| Discharges | ▪ | ▪ | | | | | ▪ | ▪ | | | | | 33% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

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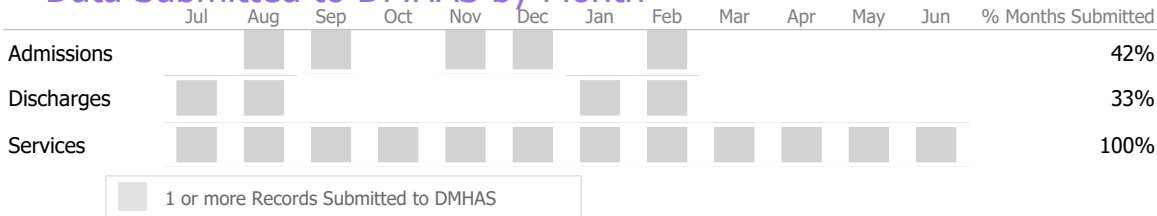
▲ > 10% Over     ▼ < 10% Under

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.

**Park Street Intake/G**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 135 | 163 | -17% | ▼ |
| Admits | 73 | 107 | -32% | ▼ |
| Discharges | 77 | 105 | -27% | ▼ |
| Service Hours | 978 | 1,234 | -21% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 83% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates (Below Goal) | | 22% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete ✓ | | 96% | 80% |
| SA Screen Complete ✓ | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 93% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 23 | 30% | 50% | 36% | -20% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Social Support | | 62 | 45% | 60% | 62% | -15% | ▼ |
| ● Employed | | 21 | 15% | 30% | 24% | -15% | ▼ |
| ● Stable Living Situation | | 97 | 70% | 95% | 75% | -25% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 58 | 95% | 90% | 85% | 5% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 69 | 95% | 75% | 75% | 20% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 88 Active Standard Outpatient Programs
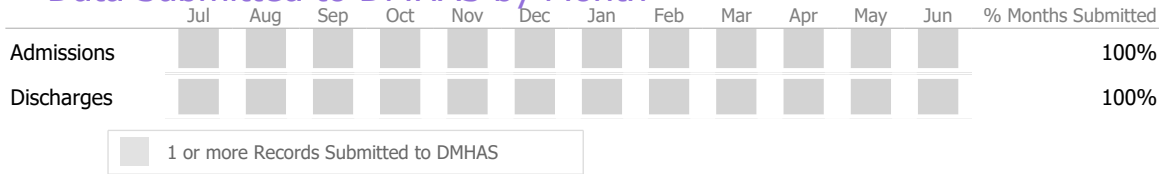
Variances in data may be indicative of operational adjustments related to the pandemic.

**Park Street Jail Diversion**
Connecticut Mental Health Center
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 174 | 155 | 12% | ▲ |
| Admits | 145 | 129 | 12% | ▲ |
| Discharges | 120 | 129 | -7% | |

## Jail Diversion
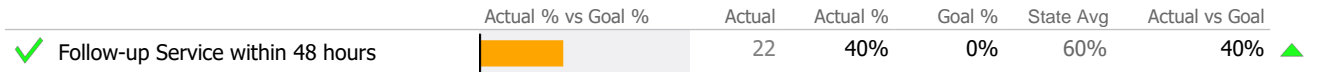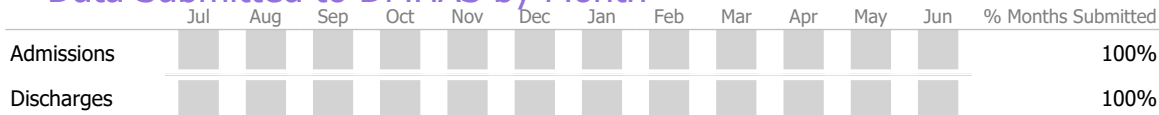
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Follow-up Service within 48 hours | | 22 | 40% | 0% | 60% | 40% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 19 Active Court Liaison-Jail Diversion Programs

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

**Park Street Mobile Crisis**
Connecticut Mental Health Center
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 113 | 68 | 66% | ▲ |
| Admits | 125 | 79 | 58% | ▲ |
| Discharges | 120 | 81 | 48% | ▲ |

## Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Evaluation within 1.5 hours of Request | | 84 | 92% | 75% | 78% | 17% | ▲ |
| ✓ Community Location Evaluation | | 88 | 97% | 80% | 75% | 17% | ▲ |
| ● Follow-up Service within 48 hours | | 24 | 67% | 90% | 70% | -23% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 Mobile Crisis Team Programs

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

**Park Street OP Clin/C**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 193 | 245 | -21% | ▼ |
| Admits | 13 | 7 | 86% | ▲ |
| Discharges | 30 | 66 | -55% | ▼ |
| Service Hours | 1,285 | 1,618 | -21% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 94% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 83% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 88% | 80% |
| ✓ | SA Screen Complete | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| | Valid Axis I Diagnosis | 81% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 8 | 27% | 50% | 36% | -23% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Social Support | | 109 | 56% | 60% | 62% | -4% | |
| ● | Stable Living Situation | | 170 | 88% | 95% | 75% | -7% | |
| ● | Employed | | 14 | 7% | 30% | 24% | -23% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 162 | 99% | 90% | 85% | 9% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | 2 or more Services within 30 days | | 7 | 54% | 75% | 75% | -21% | ▼ |

## Data Submitted to DMHAS by Month
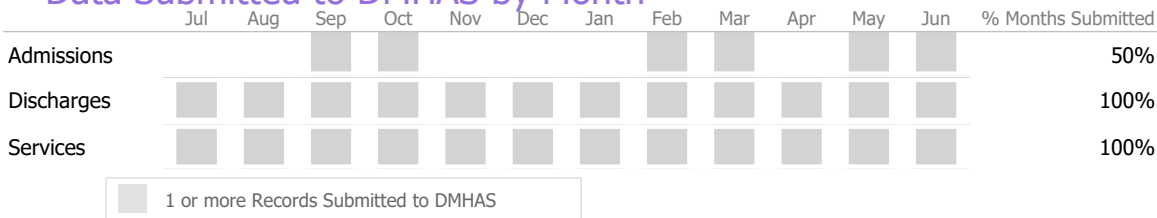
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ■ | ■ | | | | ■ | | | ■ | | 50% |
| Discharges | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**Park Street OP Clin/D**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 266 | 291 | -9% | |
| Admits | 7 | 42 | -83% | ▼ |
| Discharges | 31 | 32 | -3% | |
| Service Hours | 1,763 | 2,439 | -28% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 96% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 64% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 100% | 80% |
| ✓ | SA Screen Complete | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| | Valid Axis I Diagnosis | 74% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 15 | 48% | 50% | 36% | -2% |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 171 | 64% | 60% | 62% | 4% |
| ● | Stable Living Situation | | 228 | 86% | 95% | 75% | -9% |
| ● | Employed | | 23 | 9% | 30% | 24% | -21% ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 233 | 99% | 90% | 85% | 9% |

## Service Engagement

| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ● | 2 or more Services within 30 days | | 5 | 71% | 75% | 75% | -4% |

## Data Submitted to DMHAS by Month
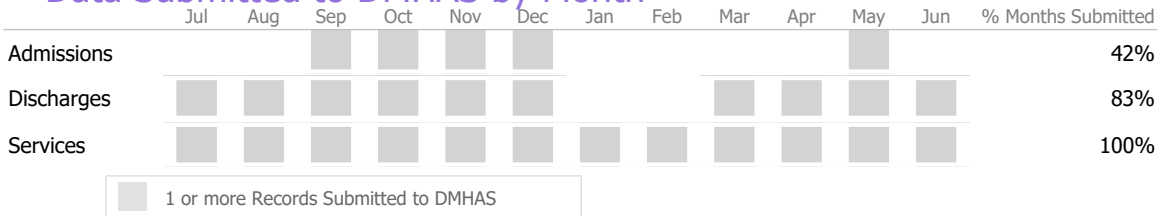
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▪ | ▪ | ▪ | | | | | | ▪ | | 42% |
| Discharges | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | | ▪ | ▪ | ▪ | ▪ | 83% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

\* State Avg based on 88 Active Standard Outpatient Programs

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

**Park Street OP Clin/E**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 311 | 329 | -5% | |
| Admits | 10 | 22 | -55% | ▼ |
| Discharges | 28 | 29 | -3% | |
| Service Hours | 2,161 | 2,918 | -26% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 96% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 83% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 80% |
| ✔ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 88% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 2 | 7% | 50% | 36% | -43% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 199 | 64% | 60% | 62% | 4% | |
| 🔴 | Stable Living Situation | | 276 | 88% | 95% | 75% | -7% | |
| 🔴 | Employed | | 24 | 8% | 30% | 24% | -22% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 284 | 100% | 90% | 85% | 10% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | 2 or more Services within 30 days | | 7 | 70% | 75% | 75% | -5% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▦ | ▦ | | ▦ | | | ▦ | ▦ | | ▦ | | ▦ | 58% |
| Discharges | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | | ▦ | | 92% |
| Services | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | ▦ | 100% |

▦ 1 or more Records Submitted to DMHAS

Legend:
▲ > 10% Over    ▼ < 10% Under
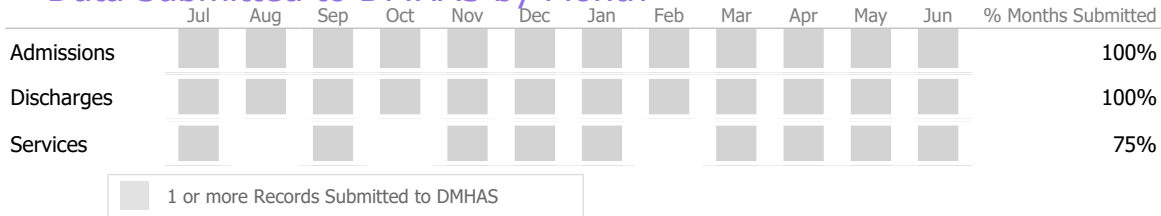
🟧 Actual    | Goal    ✔ Goal Met    🔴 Below Goal

*State Avg based on 88 Active Standard Outpatient Programs*

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

**Park Street Pre-Admission**
Connecticut Mental Health Center
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 354 | 515 | -31% | ▼ |
| Admits | 354 | 539 | -34% | ▼ |
| Discharges | 345 | 532 | -35% | ▼ |
| Service Hours | 19 | 34 | -45% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | | ▢ | | ▢ | ▢ | | | ▢ | ▢ | ▢ | ▢ | 75% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 17 Active Central Intake Programs

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

**Park Street STEP**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 101 | 98 | 3% | |
| Admits | 42 | 37 | 14% | ▲ |
| Discharges | 37 | 35 | 6% | |
| Service Hours | 752 | 1,308 | -42% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 93% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 86% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 88% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 3 | 8% | 50% | 36% | -42% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 85 | 79% | 60% | 62% | 19% | ▲ |
| ✓ Employed | | 42 | 39% | 30% | 24% | 9% | |
| ✓ Stable Living Situation | | 102 | 95% | 95% | 75% | 0% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 70 | 100% | 90% | 85% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 40 | 95% | 75% | 75% | 20% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 92% |
| Discharges | | | | | | | | | | | | | 92% |
| Services | | | | | | | | | | | | | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

▢ Actual      | Goal      ✓ Goal Met      🔴 Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**Park Street Transitional Living**
Connecticut Mental Health Center
Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 9 | 21 | -57% | ▼ |
| Admits | 1 | 12 | -92% | ▼ |
| Discharges | 8 | 13 | -38% | ▼ |
| Bed Days | 1,251 | 3,344 | -63% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 2 | 25% | 75% | 70% | -50% | ▼ |
| ● | No Re-admit within 30 Days of Discharge | | 4 | 50% | 85% | 77% | -35% | ▼ |
| ● | Follow-up within 30 Days of Discharge | | 1 | 50% | 90% | 77% | -40% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 79% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 87% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 86% |
| ✓ SA Screen Complete | | 100% | 87% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 89% | 100% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 10 | 423 days | 0.6 | 34% | 90% | 91% | -56% | ▼ |

■ < 90%   ■ 90-110%   ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▪ | | | | | | | | | | 8% |
| Discharges | | | ▪ | | ▪ | ▪ | | | | | | | 25% |

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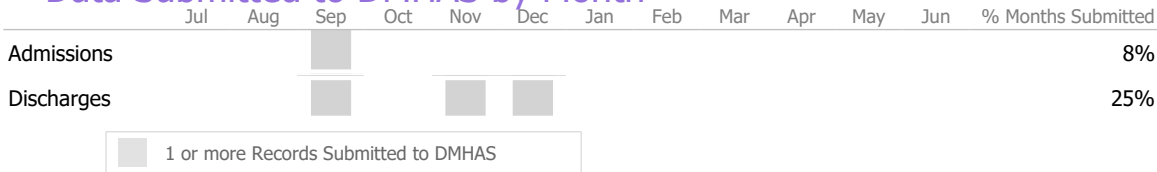
▲ > 10% Over    ▼ < 10% Under

■ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 29 Active MH Intensive Res. Rehabilitation Programs

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

**Park Street Wellness Center**
Connecticut Mental Health Center
Mental Health - Prevention - Prevention

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 320 | 353 | -9% | |
| Admits | - | - | | |
| Discharges | 19 | 33 | -42% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 83% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under
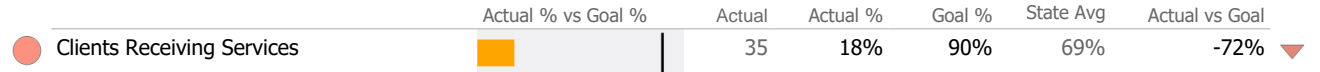
■ Actual    | Goal    ✓ Goal Met    ● Below Goal
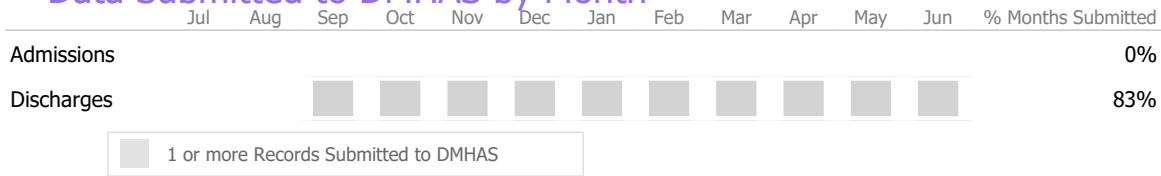
* State Avg based on 1 Active Prevention Programs

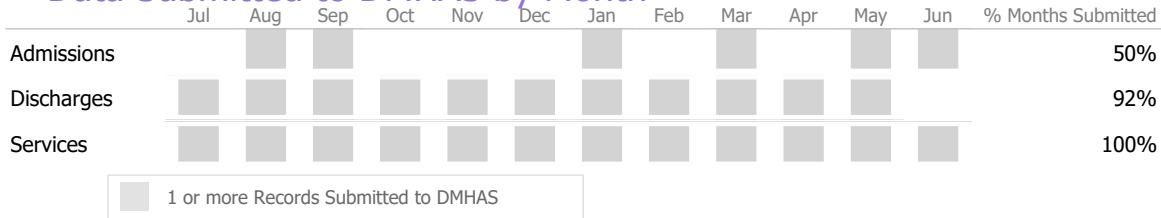Variances in data may be indicative of operational adjustments related to the pandemic.

**Park Street/Rehabilitation Services**
Connecticut Mental Health Center
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 216 | 233 | -7% | |
| Admits | 9 | 32 | -72% | ▼ |
| Discharges | 25 | 26 | -4% | |
| Service Hours | 388 | 1,685 | -77% | ▼ |
| Social Rehab/PHP/IOP Days | 0 | 5 | -100% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 35 | 18% | 90% | 69% | -72% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▪ | ▪ | | | | ▪ | | | | ▪ | | 50% |
| Discharges | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | 92% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | 100% |

▪ 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.

**PRIME Clinic**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 51 | 28 | 82% | ▲ |
| Admits | 25 | 16 | 56% | ▲ |
| Discharges | 6 | 2 | 200% | ▲ |
| Service Hours | 884 | 466 | 90% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 95% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 🔴 6 Month Updates | | 39% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 96% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 47% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 1 | 17% | 50% | 36% | -33% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 32 | 63% | 60% | 62% | 3% | |
| 🔴 Stable Living Situation | | 46 | 90% | 95% | 75% | -5% | |
| 🔴 Employed | | 5 | 10% | 30% | 24% | -20% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 41 | 91% | 90% | 85% | 1% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 22 | 88% | 75% | 75% | 13% | ▲ |

## Data Submitted to DMHAS by Month
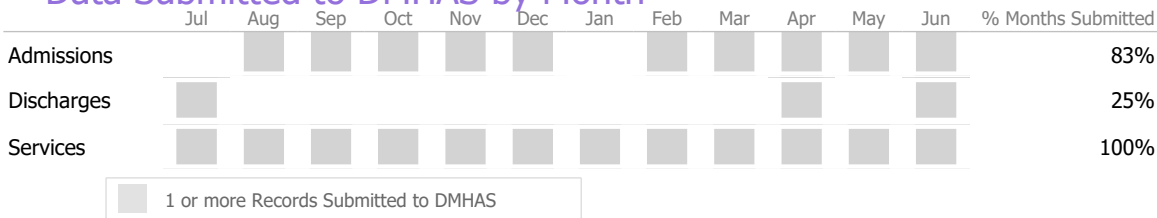
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | | ▪ | ▪ | ▪ | 83% |
| Discharges | ▪ | | | | | | | | | ▪ | | ▪ | 25% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**Research - The Belief Learning and memory Lab**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 0 | 2 | ▼ |
| Admits | - | - | |
| Discharges | - | 2 | -100% ▼ |
| Service Hours | - | - | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Employed | | N/A | N/A | 30% | 24% | -30% ▼ |
| 🔴 Social Support | | N/A | N/A | 60% | 62% | -60% ▼ |
| 🔴 Stable Living Situation | | N/A | N/A | 95% | 75% | -95% ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 80% |
| SA Screen Complete | | N/A | 81% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | N/A | N/A | 90% | 85% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 88 Active Standard Outpatient Programs

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

**Research CNRU OCD**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 86 | -91% | ▼ |
| Admits | 7 | 10 | -30% | ▼ |
| Discharges | 1 | 85 | -99% | ▼ |
| Service Hours | 22 | 14 | 57% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 98% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ● 6 Month Updates | | 0% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 13% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 0 | 0% | 50% | 36% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 5 | 62% | 30% | 24% | 32% | ▲ |
| ● Stable Living Situation | | 7 | 88% | 95% | 75% | -7% | |
| ● Social Support | | 0 | 0% | 60% | 62% | -60% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Clients Receiving Services | | 2 | 29% | 90% | 85% | -61% | ▼ |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | 1 | 14% | 75% | 75% | -61% | ▼ |

## Data Submitted to DMHAS by Month
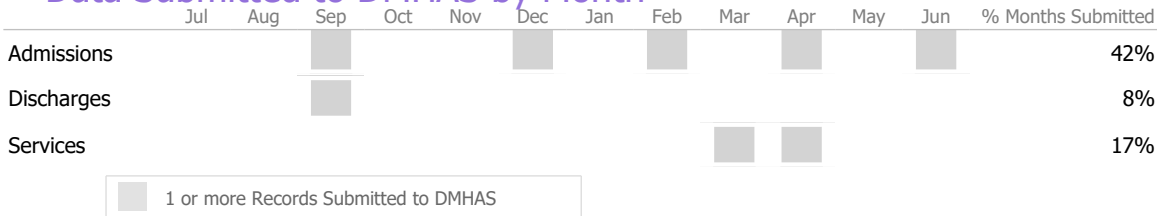
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▪ | | | ▪ | | ▪ | | ▪ | | ▪ | 42% |
| Discharges | | | ▪ | | | | | | | | | | 8% |
| Services | | | | | | | | | ▪ | ▪ | | | 17% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| Actual | | Goal | ✓ Goal Met | ● Below Goal |

* State Avg based on 88 Active Standard Outpatient Programs

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

**Research CNRU OP 1**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 1 | 13 | -92% | ▼ |
| Admits | 1 | 5 | -80% | ▼ |
| Discharges | 1 | 13 | -92% | ▼ |
| Service Hours | - | - | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 90% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| | 6 Month Updates | N/A | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 100% | 80% |
| ✓ | SA Screen Complete | 100% | 81% |

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

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 0 | 0% | 50% | 36% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 1 | 100% | 95% | 75% | 5% | |
| 🔴 | Employed | | 0 | 0% | 30% | 24% | -30% | ▼ |
| 🔴 | Social Support | | 0 | 0% | 60% | 62% | -60% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Clients Receiving Services | | N/A | N/A | 90% | 85% | 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% | 75% | -75% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ■ | | | | | | | | | | | | 8% |
| Discharges | | | | | | | | ■ | | | | | 8% |
| Services | | | | | | | | | | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**Research CNRU OP Brain Imaging Clinic**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 0 | 19 | | ▼ |
| Admits | - | - | | |
| Discharges | - | 19 | -100% | ▼ |
| Service Hours | - | - | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 80% |
| SA Screen Complete | | N/A | 81% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Employed | | N/A | N/A | 30% | 24% | -30% ▼ |
| ● Social Support | | N/A | N/A | 60% | 62% | -60% ▼ |
| ● Stable Living Situation | | N/A | N/A | 95% | 75% | -95% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | N/A | N/A | 90% | 85% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 88 Active Standard Outpatient Programs

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

**Research CNRU OP COCAINE CLINIC**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 13 | 111 | -88% | ▼ |
| Admits | 13 | 42 | -69% | ▼ |
| Discharges | 6 | 112 | -95% | ▼ |
| Service Hours | - | - | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 67% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 92% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 2 | 33% | 50% | 36% | -17% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 5 | 38% | 30% | 24% | 8% | |
| 🔴 Stable Living Situation | | 6 | 46% | 95% | 75% | -49% | ▼ |
| 🔴 Social Support | | 1 | 8% | 60% | 62% | -52% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 0 | 0% | 90% | 85% | 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% | 75% | -75% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 58% |
| 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 88 Active Standard Outpatient Programs

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

**RESEARCH CNRU OP KETAMINE**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 0 | 11 | | ▼ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | - | 11 | -100% | ▼ |
| Service Hours | - | 6 | -100% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 86% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| 6 Month Updates | N/A | 54% |

| Co-occurring | Actual | State Avg |
|---|---|---|
| MH Screen Complete | N/A | 80% |
| SA Screen Complete | N/A | 81% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Employed | | N/A | N/A | 30% | 24% | -30% | ▼ |
| ● Social Support | | N/A | N/A | 60% | 62% | -60% | ▼ |
| ● Stable Living Situation | | N/A | N/A | 95% | 75% | -95% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | N/A | N/A | 90% | 85% | N/A | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 88 Active Standard Outpatient Programs

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

**Research CNRU SNRG**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 35 | 180 | -81% | ▼ |
| Admits | 34 | 31 | 10% | |
| Discharges | 5 | 179 | -97% | ▼ |
| Service Hours | - | 1 | -100% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 90% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 🔴 6 Month Updates | | 0% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 73% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 20% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 0 | 0% | 50% | 36% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 17 | 49% | 30% | 24% | 19% | ▲ |
| 🔴 Stable Living Situation | | 31 | 89% | 95% | 75% | -6% | |
| 🔴 Social Support | | 3 | 9% | 60% | 62% | -51% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 0 | 0% | 90% | 85% | 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% | 75% | -75% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | ▪ | 83% |
| Discharges | | | | ▪ | ▪ | ▪ | | ▪ | ▪ | | | | 42% |
| Services | | | | | | | | | | | | | 0% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▪ Actual   | Goal   ✓ Goal Met   🔴 Below Goal

\* State Avg based on 88 Active Standard Outpatient Programs

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

**RESEARCH CRNU OP NPC**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 2 | 67 | -97% | ▼ |
| Admits | 1 | 5 | -80% | ▼ |
| Discharges | 2 | 66 | -97% | ▼ |
| Service Hours | - | 3 | -100% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs State Avg | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 67% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 50% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 2 | 100% | 50% | 36% | 50% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Social Support | | 1 | 50% | 60% | 62% | -10% | |
| ● Employed | | 0 | 0% | 30% | 24% | -30% | ▼ |
| ● Stable Living Situation | | 1 | 50% | 95% | 75% | -45% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | N/A | N/A | 90% | 85% | 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% | 75% | -75% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | | | | | | | | | | | | 8% |
| Discharges | | | | ▪ | | | | | | ▪ | | | 17% |
| Services | | | | | | | | | | ▪ | | | 8% |

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**Research Ketamine BPD**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 1 | 11 | -91% | ▼ |
| Admits | 1 | 10 | -90% | ▼ |
| Discharges | - | 11 | -100% | ▼ |
| Service Hours | 5 | 214 | -98% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs State Avg | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 🔴 6 Month Updates | | 0% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 0% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 0% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 1 | 100% | 60% | 62% | 40% | ▲ |
| ✓ Stable Living Situation | | 1 | 100% | 95% | 75% | 5% | |
| 🔴 Employed | | 0 | 0% | 30% | 24% | -30% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 1 | 100% | 90% | 85% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 1 | 100% | 75% | 75% | 25% | ▲ |

## Data Submitted to DMHAS by Month
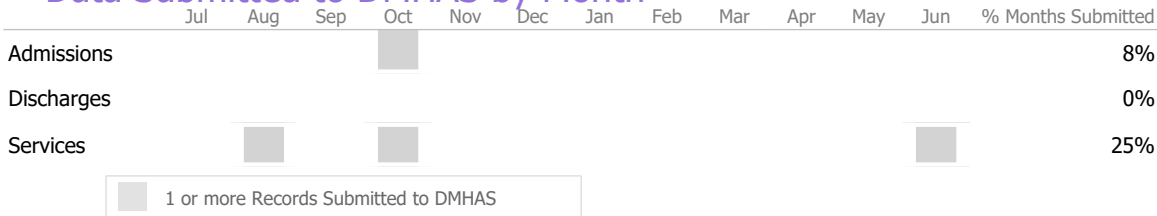
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | ▪ | | | | | | | | | 8% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | | ▪ | | ▪ | | | | | | | ▪ | | 25% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over  ▼ < 10% Under

🟧 Actual  | Goal  ✓ Goal Met  🔴 Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**Research Park St OP Screening**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 2 | 25 | -92% | ▼ |
| Admits | 2 | - | | |
| Discharges | 2 | 25 | -92% | ▼ |
| Service Hours | - | - | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 80% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 0% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 50% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 1 | 50% | 50% | 36% | 0% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Social Support | | 1 | 50% | 60% | 62% | -10% | |
| 🔴 | Employed | | 0 | 0% | 30% | 24% | -30% | ▼ |
| 🔴 | Stable Living Situation | | 1 | 50% | 95% | 75% | -45% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Clients Receiving Services | | N/A | N/A | 90% | 85% | 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% | 75% | -75% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ■ | | ■ | | | | | | | | 17% |
| Discharges | | | | ■ | | | | | | ■ | | | 17% |
| Services | | | | | | | | | | | | | 0% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**Research Park Street NCM-Autism**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 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 | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 80% |
| SA Screen Complete | | N/A | 81% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Employed | | N/A | N/A | 30% | 24% | -30% ▼ |
| Social Support | | N/A | N/A | 60% | 62% | -60% ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 75% | -95% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Clients Receiving Services | | N/A | N/A | 90% | 85% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 88 Active Standard Outpatient Programs

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

**Research Park Street Psychosis**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 0 | 118 | | ▼ |
| Admits | - | - | | |
| Discharges | - | 118 | -100% | ▼ |
| Service Hours | - | - | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 80% |
| SA Screen Complete | | N/A | 81% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| Employed | | N/A | N/A | 30% | 24% | -30% | ▼ |
| Social Support | | N/A | N/A | 60% | 62% | -60% | ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 75% | -95% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| Clients Receiving Services | | N/A | N/A | 90% | 85% | N/A | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 88 Active Standard Outpatient Programs

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

**Research Park Street Step - ED**
Connecticut Mental Health Center
Mental Health - Other - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 2021)

## Program Activity

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 0 Active Standard Outpatient Programs

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

**Research POWER**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 28 | 23 | 22% | ▲ |
| Admits | 25 | 15 | 67% | ▲ |
| Discharges | 13 | 20 | -35% | ▼ |
| Service Hours | - | - | | |

## Data Submission Quality

| Data Entry | Actual % vs | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 48% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ● 6 Month Updates | | 0% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 96% | 80% |
| ✔ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 54% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 0 | 0% | 50% | 36% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Employed | | 5 | 18% | 30% | 24% | -12% | ▼ |
| ● Social Support | | 0 | 0% | 60% | 62% | -60% | ▼ |
| ● Stable Living Situation | | 8 | 29% | 95% | 75% | -66% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 0 | 0% | 90% | 85% | 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% | 75% | -75% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | 92% |
| Discharges | | | | | ▪ | | ▪ | ▪ | | ▪ | | ▪ | 50% |
| Services | | | | | | | | | | | | | 0% |

▪ 1 or more Records Submitted to DMHAS

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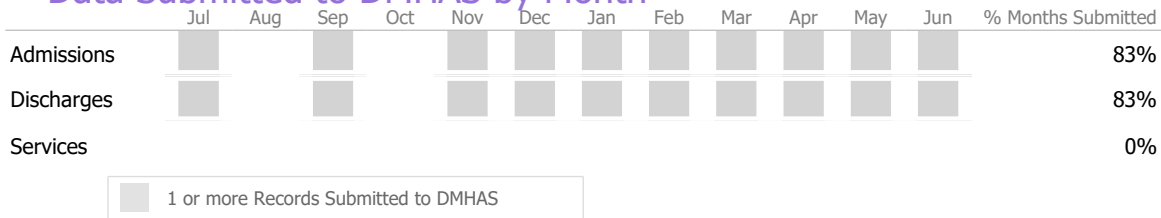
▪ Actual    | Goal    ✔ Goal Met    ● Below Goal

\* State Avg based on 88 Active Standard Outpatient Programs

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

**Research Pre-Admission**
Connecticut Mental Health Center
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 44 | 3 | 1367% | ▲ |
| Admits | 44 | 2 | 2100% | ▲ |
| Discharges | 44 | 3 | 1367% | ▲ |
| Service Hours | - | - | | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | 83% |
| Discharges | ▢ | | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | 83% |
| Services | | | | | | | | | | | | | 0% |

▢ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▢ Actual | | Goal | ✓ Goal Met | ⬤ Below Goal |

* State Avg based on 17 Active Central Intake Programs

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

**Research PRIME Clinic**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 4 | 45 | -91% | ▼ |
| Admits | 3 | 12 | -75% | ▼ |
| Discharges | - | 44 | -100% | ▼ |
| Service Hours | 6 | 83 | -92% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 97% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 🔴 6 Month Updates | | 0% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 25% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Employed | | 0 | 0% | 30% | 24% | -30% ▼ |
| 🔴 Social Support | | 1 | 25% | 60% | 62% | -35% ▼ |
| 🔴 Stable Living Situation | | 2 | 50% | 95% | 75% | -45% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 2 | 50% | 90% | 85% | -40% ▼ |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 1 | 33% | 75% | 75% | -42% ▼ |

## Data Submitted to DMHAS by Month
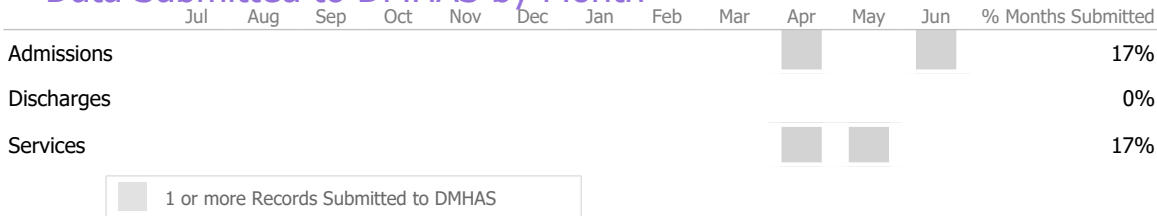
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | ▪ | ▪ | | 17% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | | | | | | | | | | ▪ | ▪ | | 17% |

▪ 1 or more Records Submitted to DMHAS

△ > 10% Over     ▽ < 10% Under

■ Actual     | Goal     ✓ Goal Met     🔴 Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**Research SATU SA Res 2**
Connecticut Mental Health Center
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 0 | 26 | | ▼ |
| Admits | - | - | | |
| Discharges | - | 26 | -100% | ▼ |
| Service Hours | - | - | | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 51% | 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% | 49% | -55% | ▼ |
| 🔴 Employed | | N/A | N/A | 50% | 32% | -50% | ▼ |
| 🔴 Not Arrested | | N/A | N/A | 75% | 79% | -75% | ▼ |
| 🔴 Self Help | | N/A | N/A | 60% | 18% | -60% | ▼ |
| 🔴 Stable Living Situation | | N/A | N/A | 95% | 78% | -95% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 86% |
| Valid TEDS Data | | N/A | 86% |

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

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 92% |
| SA Screen Complete | | N/A | 96% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | N/A | N/A | 90% | 72% | N/A | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 111 Active Standard Outpatient Programs

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

**Research York Street Depression Clinic**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 13 | 32 | -59% | ▼ |
| Admits | 12 | - | | |
| Discharges | - | 31 | -100% | ▼ |
| Service Hours | 40 | - | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 97% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 🔴 6 Month Updates | | 0% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 83% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 69% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 8 | 62% | 30% | 24% | 32% | ▲ |
| 🔴 Stable Living Situation | | 12 | 92% | 95% | 75% | -3% | |
| 🔴 Social Support | | 1 | 8% | 60% | 62% | -52% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 7 | 54% | 90% | 85% | -36% | ▼ |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 3 | 25% | 75% | 75% | -50% | ▼ |

## Data Submitted to DMHAS by Month
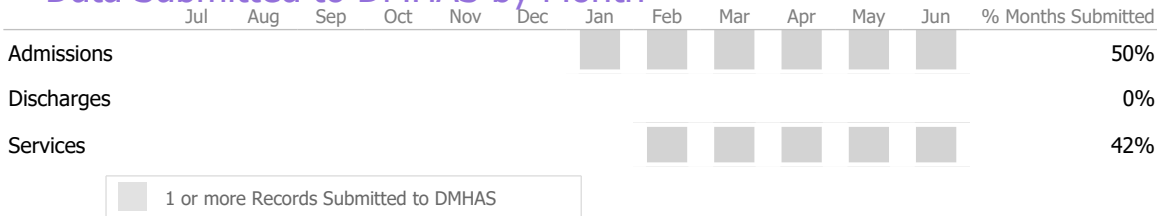
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | ▪ | ▪ | ▪ | ▪ | | ▪ | 50% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | | | | | | | | ▪ | ▪ | ▪ | ▪ | | 42% |

▪ 1 or more Records Submitted to DMHAS

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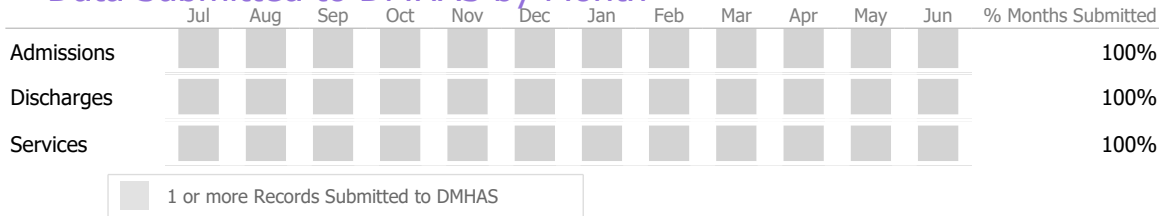
■ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**SATU - Pre-Admission**
Connecticut Mental Health Center
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 95 | 116 | -18% | ▼ |
| Admits | 96 | 120 | -20% | ▼ |
| Discharges | 96 | 119 | -19% | ▼ |
| Service Hours | 152 | 179 | -15% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 17 Active Central Intake Programs

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

**SATU Evaluations OP**
Connecticut Mental Health Center
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 1 | 2 | -50% | ▼ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | - | 1 | -100% | ▼ |
| Service Hours | 12 | 12 | 0% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 86% |
| ✓ Valid TEDS Data | | 100% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 🔴 6 Month Updates | | 0% | 26% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 92% |
| SA Screen Complete | | N/A | 96% |

| 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 | | N/A | N/A | 50% | 51% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 1 | 100% | 50% | 32% | 50% | ▲ |
| ✓ Abstinence/Reduced Drug Use | | 1 | 100% | 55% | 49% | 45% | ▲ |
| ✓ Self Help | | 1 | 100% | 60% | 18% | 40% | ▲ |
| ✓ Not Arrested | | 1 | 100% | 75% | 79% | 25% | ▲ |
| ✓ Stable Living Situation | | 1 | 100% | 95% | 78% | 5% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 1 | 100% | 90% | 72% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 0 | 0% | 75% | 61% | -75% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

🟧 Actual     | Goal     ✓ Goal Met     🔴 Below Goal

* State Avg based on 111 Active Standard Outpatient Programs

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

**SATU SA OP Clin/S**
Connecticut Mental Health Center
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)
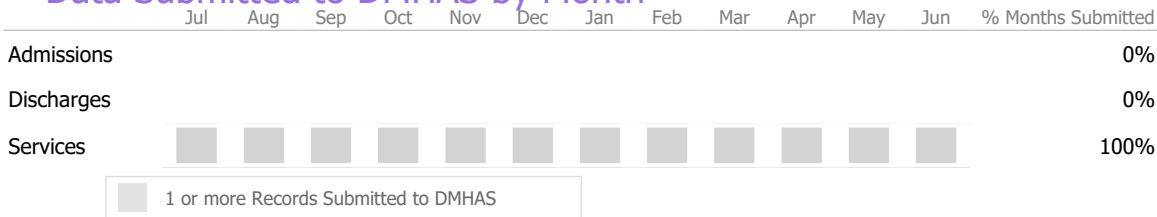
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 194 | 230 | -16% | ▼ |
| Admits | 97 | 129 | -25% | ▼ |
| Discharges | 80 | 134 | -40% | ▼ |
| Service Hours | 2,304 | 2,707 | -15% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 91% | 86% |
| ✓ | Valid TEDS Data | 98% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 87% | 26% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 99% | 92% |
| ✓ | SA Screen Complete | 100% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| | Valid Axis I Diagnosis | 98% | 99% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 26 | 32% | 50% | 51% | -18% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Self Help | | 194 | 98% | 60% | 18% | 38% | ▲ |
| ● | Abstinence/Reduced Drug Use | | 104 | 53% | 55% | 49% | -2% | |
| ● | Stable Living Situation | | 172 | 87% | 95% | 78% | -8% | |
| ● | Not Arrested | | 122 | 62% | 75% | 79% | -13% | ▼ |
| ● | Employed | | 67 | 34% | 50% | 32% | -16% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 116 | 97% | 90% | 72% | 7% | |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 96 | 100% | 75% | 61% | 25% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 111 Active Standard Outpatient Programs

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

**SATU/SA Drug Research**
Connecticut Mental Health Center
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 3 | 3 | 0% |
| Admits | - | - | |
| Discharges | 3 | - | |
| Service Hours | - | - | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 20% | 86% |
| Valid TEDS Data | | 67% | 86% |

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

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 92% |
| SA Screen Complete | | N/A | 96% |

| 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 | | 0 | 0% | 50% | 51% | -50% ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Self Help | | 3 | 100% | 60% | 18% | 40% ▲ |
| 🔴 Employed | | 0 | 0% | 50% | 32% | -50% ▼ |
| 🔴 Abstinence/Reduced Drug Use | | 0 | 0% | 55% | 49% | -55% ▼ |
| 🔴 Not Arrested | | 0 | 0% | 75% | 79% | -75% ▼ |
| 🔴 Stable Living Situation | | 0 | 0% | 95% | 78% | -95% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | N/A | N/A | 90% | 72% | 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% | 61% | -75% ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | | | | 8% |
| Services | | | | | | | | | | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 111 Active Standard Outpatient Programs

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

**Street Psychiatry Outpatient**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 14 | 23 | -39% | ▼ |
| Admits | 4 | 18 | -78% | ▼ |
| Discharges | 7 | 13 | -46% | ▼ |
| Service Hours | 73 | 110 | -34% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 82% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 80% |
| ✓ SA Screen Complete | | 100% | 81% |

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 0 | 0% | 50% | 36% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Employed | | 1 | 7% | 30% | 24% | -23% | ▼ |
| ● Social Support | | 4 | 29% | 60% | 62% | -31% | ▼ |
| ● Stable Living Situation | | 5 | 36% | 95% | 75% | -59% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 7 | 100% | 90% | 85% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | 1 | 25% | 75% | 75% | -50% | ▼ |

## Data Submitted to DMHAS by Month
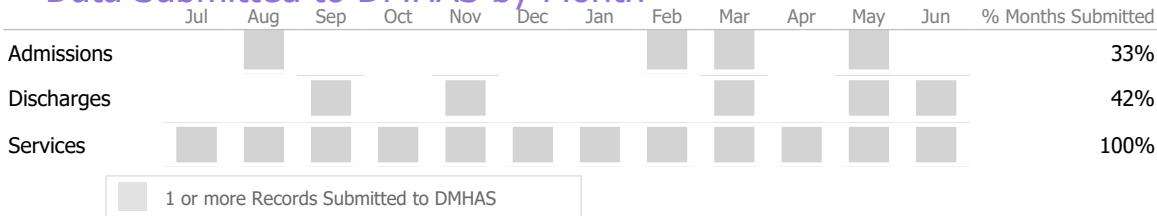
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▢ | | | | | | ▢ | ▢ | | | | 33% |
| Discharges | | | ▢ | | ▢ | | | | ▢ | | ▢ | ▢ | 42% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | 100% |

▢ 1 or more Records Submitted to DMHAS

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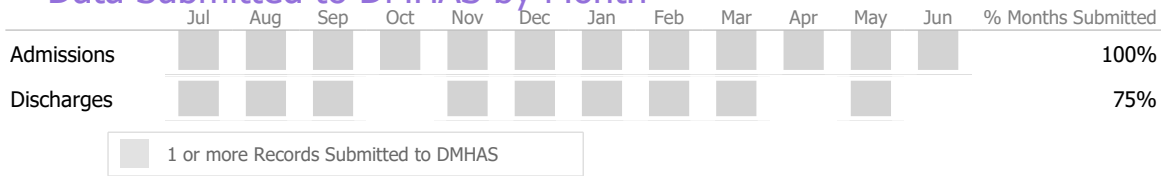
▮ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 88 Active Standard Outpatient Programs

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

**Street Psychiatry PreAdmission**
Connecticut Mental Health Center
Mental Health - Other - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---------|--------|----------|------------|---|
| Unique Clients | 201 | 154 | 31% | ▲ |
| Admits | 90 | 142 | -37% | ▼ |
| Discharges | 15 | 51 | -71% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Discharges | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | | 75% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

◼ Actual     | Goal     ✔ Goal Met     ● Below Goal

* State Avg based on 2 Active Outreach & Engagement Programs

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

**West Haven OP Child**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 55 | 65 | -15% | ▼ |
| Admits | 20 | 38 | -47% | ▼ |
| Discharges | 34 | 30 | 13% | ▲ |
| Service Hours | 1,087 | 1,038 | 5% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 84% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ● 6 Month Updates | | 0% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 17% | 80% |
| ✔ SA Screen Complete | | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 8 | 24% | 50% | 36% | -26% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 42 | 76% | 60% | 62% | 16% | ▲ |
| ● Stable Living Situation | | 43 | 78% | 95% | 75% | -17% | ▼ |
| ● Employed | | 4 | 7% | 30% | 24% | -23% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 21 | 95% | 90% | 85% | 5% | |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 20 | 100% | 75% | 75% | 25% | ▲ |

## Data Submitted to DMHAS by Month
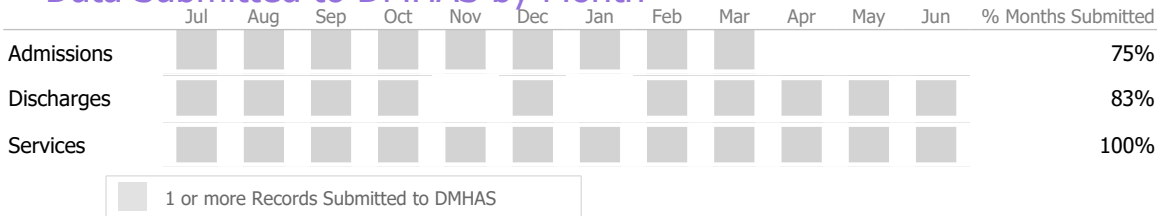
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 75% |
| Discharges | | | | | | | | | | | | | 83% |
| Services | | | | | | | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

☐ Actual   | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

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

**West Haven Pre-Admission**
Connecticut Mental Health Center
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 22 | 44 | -50% | ▼ |
| Admits | 19 | 44 | -57% | ▼ |
| Discharges | 22 | 41 | -46% | ▼ |
| Service Hours | - | 6 | -100% | ▼ |

## Data Submitted to DMHAS by Month
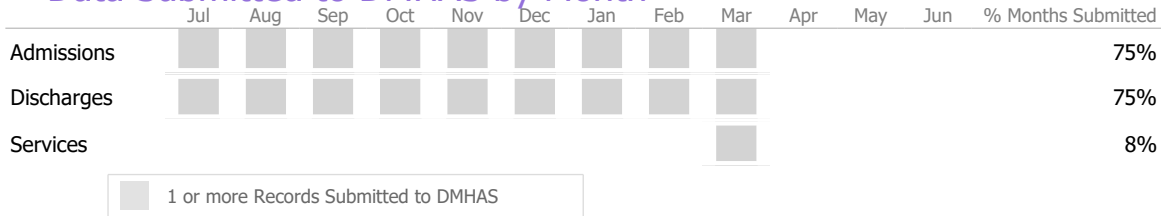
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | | | 75% |
| Discharges | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | | | 75% |
| Services | | | | | | | | | ▪ | | | | 8% |

☐ 1 or more Records Submitted to DMHAS

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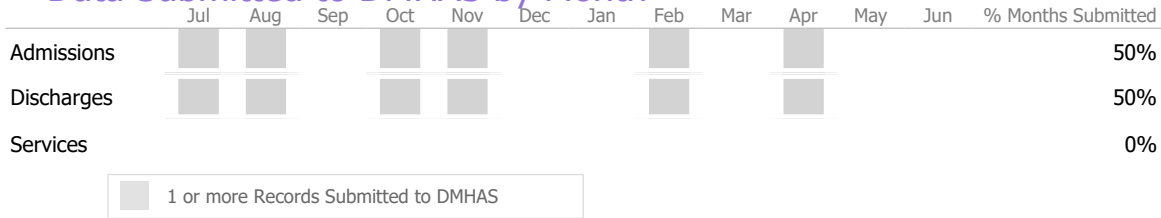
■ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 17 Active Central Intake Programs

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

**YAS Pre-Admission**
Connecticut Mental Health Center
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 11 | 12 | -8% |
| Admits | 11 | 12 | -8% |
| Discharges | 11 | 12 | -8% |
| Service Hours | - | - | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ■ | ■ | | ■ | ■ | | | ■ | | ■ | | | 50% |
| Discharges | ■ | ■ | | ■ | ■ | | | ■ | | ■ | | | 50% |
| Services | | | | | | | | | | | | | 0% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual  | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 17 Active Central Intake Programs

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

**Young Adult Services OP**
Connecticut Mental Health Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 20, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 92 | 99 | -7% | |
| Admits | 15 | 21 | -29% | ▼ |
| Discharges | 17 | 22 | -23% | ▼ |
| Service Hours | 3,297 | 4,530 | -27% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 94% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ● | 6 Month Updates | 50% | 54% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| | MH Screen Complete | 55% | 80% |
| ✓ | SA Screen Complete | 100% | 81% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| | Valid Axis I Diagnosis | 93% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 2 | 12% | 50% | 36% | -38% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Social Support | | 49 | 53% | 60% | 62% | -7% | |
| ● | Employed | | 19 | 21% | 30% | 24% | -9% | |
| ● | Stable Living Situation | | 71 | 77% | 95% | 75% | -18% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 75 | 100% | 90% | 85% | 10% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 12 | 80% | 75% | 75% | 5% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ■ | ■ | | ■ | ■ | | ■ | ■ | | ■ | | | 67% |
| Discharges | ■ | ■ | | | ■ | ■ | ■ | ■ | ■ | ■ | | | 83% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 88 Active Standard Outpatient Programs

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