**Mental Health Connecticut**
West Hartford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 29, 2021)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 785 | 882 | -11% | ▼ |
| | Admits | 173 | 230 | -25% | ▼ |
| | Discharges | 213 | 296 | -28% | ▼ |
| | Service Hours | 13,376 | 21,120 | -37% | ▼ |
| | Bed Days | 99,300 | 99,313 | 0% | |
| | S.Rehab/PHP/IOP | 8,008 | 9,366 | -14% | ▼ |

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

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Residential Services | 338 | 38.9% |
| | Social Rehabilitation | 222 | 25.5% |
| | Employment Services | 100 | 11.5% |
| | Case Management | 95 | 10.9% |
| | Recovery Support | 46 | 5.3% |
| | Community Support | 38 | 4.4% |
| | Education Support | 31 | 3.6% |

## Consumer Satisfaction Survey   (Based on 343 FY20 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Overall | | 96% | 80% | 91% |
| ✓ | Quality and Appropriateness | | 96% | 80% | 93% |
| ✓ | Participation in Treatment | | 95% | 80% | 92% |
| ✓ | General Satisfaction | | 94% | 80% | 92% |
| ✓ | Respect | | 94% | 80% | 91% |
| ✓ | Access | | 94% | 80% | 88% |
| ✓ | Outcome | | 85% | 80% | 83% |
| ✓ | Recovery | | 81% | 80% | 79% |

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

## Client Demographics

### Age

| Age | # | % | State Avg |
|---|---|---|---|
| 18-25 | 36 | 5% | 10% |
| 26-34 | 111 | 14% | 22% |
| 35-44 | 134 | 17% | 23% |
| 45-54 | 164 | 21% | 19% |
| 55-64 | 241 | 31% ▲ | 18% |
| 65+ | 99 | 13% | 7% |

### Gender

| Gender | # | % | State Avg |
|---|---|---|---|
| Male | 459 | 58% | 59% |
| Female | 326 | 42% | 41% |
| Transgender | | | 0% |

### Ethnicity

| Ethnicity | # | % | State Avg |
|---|---|---|---|
| Non-Hispanic | 625 | 80% ▲ | 68% |
| Hispanic-Other | 72 | 9% | 8% |
| Hisp-Puerto Rican | 43 | 5% | 11% |
| Unknown | 43 | 5% | 12% |
| Hispanic-Cuban | 1 | 0% | 0% |
| Hispanic-Mexican | 1 | 0% | 0% |

### Race

| Race | # | % | State Avg |
|---|---|---|---|
| White/Caucasian | 497 | 63% | 61% |
| Black/African American | 174 | 22% | 17% |
| Other | 69 | 9% | 13% |
| Unknown | 35 | 4% | 6% |
| Multiple Races | 5 | 1% | 1% |
| Asian | 3 | 0% | 1% |
| Am. Indian/Native Alaskan | 2 | 0% | 0% |
| Hawaiian/Other Pacific Islander | | | 0% |

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

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

**22 Depindeo Ave 24HR-SupvApt 251**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 6 | 7 | -14% | ▼ |
| Admits | 2 | 2 | 0% | |
| Discharges | 2 | 3 | -33% | ▼ |
| Bed Days | 1,151 | 1,418 | -19% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 89% | 76% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 88% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 70% | 91% |
| SA Screen Complete | | 50% | 77% |

| 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 | | 2 | 100% | 60% | 79% | 40% | ▲ |
| ● | Follow-up within 30 Days of Discharge | | 0 | 0% | 90% | 79% | -90% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 6 | 100% | 95% | 94% | 5% | |
| ● | Social Support | | 3 | 50% | 60% | 84% | -10% | |
| ● | Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 5 | 1,020 days | 0.3 | 63% | 90% | 94% | -27% | ▼ |

| ▨ < 90% | ▨ 90-110% | ▨ >110% |
|---|---|---|
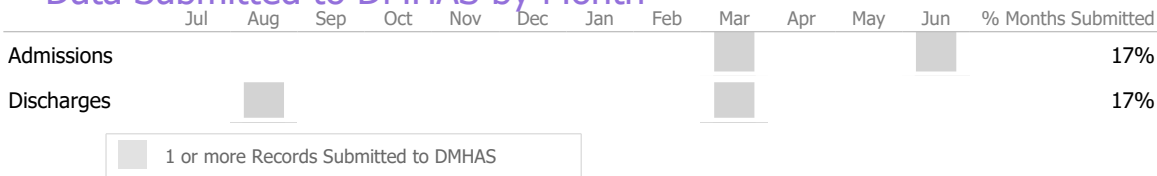
## Data Submitted to DMHAS by Month

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

▨ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▨ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

**22 Depindeo Ave SupvAptDisch 250**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 3 | 67% | ▲ |
| Admits | 2 | 1 | 100% | ▲ |
| Discharges | 2 | - | | |
| Bed Days | 1,008 | 976 | 3% | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 2 | 100% | 60% | 79% | 40% | ▲ |
| ✔ Follow-up within 30 Days of Discharge | | 2 | 100% | 90% | 79% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 4 | 80% | 60% | 84% | 20% | ▲ |
| ✔ Stable Living Situation | | 5 | 100% | 95% | 94% | 5% | |
| 🔴 Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 76% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 88% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 70% | 91% |
| SA Screen Complete | | 30% | 77% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| ✔ Avg Utilization Rate | | 2 | 2,008 days | 0.2 | 138% | 90% | 94% | 48% | ▲ |

■ < 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 | | | | ■ | ■ | | | | | | | | 17% |
| Discharges | | ■ | | | ■ | | | | | | | | 17% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual   | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

**2nd Init-Supv Apts 514-253Y**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 17 | 14 | 21% | ▲ |
| Admits | 5 | 4 | 25% | ▲ |
| Discharges | 8 | 2 | 300% | ▲ |
| Bed Days | 3,998 | 4,015 | 0% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 8 | 100% | 60% | 79% | 40% | ▲ |
| ● | Follow-up within 30 Days of Discharge | | 7 | 88% | 90% | 79% | -2% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 14 | 82% | 60% | 84% | 22% | ▲ |
| ✔ | Stable Living Situation | | 17 | 100% | 95% | 94% | 5% | |
| ● | Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 96% | 76% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ | 6 Month Updates | 100% | 88% |

| Co-occurring | Actual | State Avg |
|---|---|---|
| MH Screen Complete | 60% | 91% |
| SA Screen Complete | 44% | 77% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid Axis I Diagnosis | 100% | 99% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 13 | 1,549 days | 0.3 | 84% | 90% | 94% | -6% |

| ▨ < 90% | ▨ 90-110% | ▨ >110% |
|---|---|---|
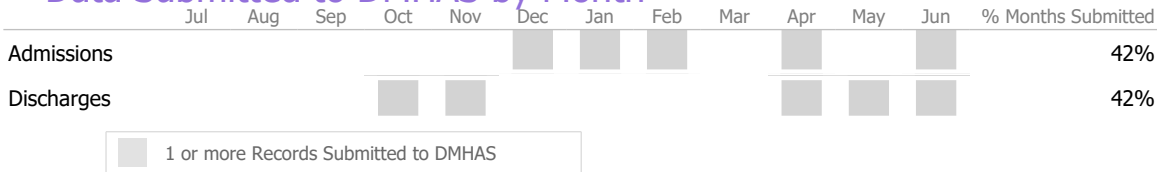
## Data Submitted to DMHAS by Month

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

▨ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▨ Actual   | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

**30 Peck Rd ResSup 514-261**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 40 | 42 | -5% | |
| Admits | 12 | 9 | 33% | ▲ |
| Discharges | 7 | 14 | -50% | ▼ |
| Service Hours | 599 | 1,544 | -61% | ▼ |
| Bed Days | 11,018 | 10,147 | 9% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 96% | 91% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 7 | 100% | 50% | 77% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 31 | 78% | 60% | 82% | 18% | ▲ |
| ✔ | Stable Living Situation | | 38 | 95% | 85% | 96% | 10% | |
| ● | Employed | | 3 | 8% | 25% | 11% | -17% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 33 | 100% | 90% | 99% | 10% | |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 40 | 2,335 days | 0.3 | 75% | 90% | 81% | -15% | ▼ |

■ < 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 | | | | ▢ | | ▢ | | | ▢ | ▢ | | ▢ | 42% |
| Discharges | | ▢ | | | ▢ | | ▢ | | ▢ | ▢ | ▢ | | 50% |
| Services | | ▢ | | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | 92% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 25 Active Residential Support Programs

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

**345 Main St., Supp Apt 514-260**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 63 | 59 | 7% | |
| Admits | 14 | 11 | 27% | ▲ |
| Discharges | 18 | 10 | 80% | ▲ |
| Service Hours | 1,604 | 1,809 | -11% | ▼ |
| Bed Days | 16,822 | 17,699 | -5% | |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 91% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 97% | 89% |
| ✓ | SA Screen Complete | 97% | 92% |

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

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 18 | 100% | 50% | 77% | 50% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 60 | 95% | 60% | 82% | 35% | ▲ |
| ✓ | Stable Living Situation | | 63 | 100% | 85% | 96% | 15% | ▲ |
| ● | Employed | | 7 | 11% | 25% | 11% | -14% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 45 | 100% | 90% | 99% | 10% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 60 | 2,264 days | 0.3 | 77% | 90% | 81% | -13% | ▼ |

| < 90% | 90-110% | >110% |
|---|---|---|
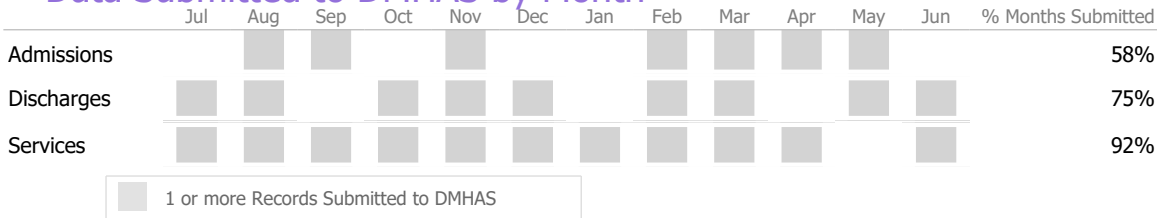
## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ■ | ■ | | ■ | | | ■ | ■ | ■ | ■ | | 58% |
| Discharges | ■ | ■ | | ■ | ■ | ■ | | ■ | ■ | | ■ | ■ | 75% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | | ■ | 92% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 25 Active Residential Support Programs

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

**345 Main St., Supv Apt 514-252**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 25 | 24 | 4% |
| Admits | 6 | 7 | -14% ▼ |
| Discharges | 5 | 5 | 0% |
| Bed Days | 7,689 | 6,983 | 10% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 5 | 100% | 60% | 79% | 40% | ▲ |
| ✓ | Follow-up within 30 Days of Discharge | | 5 | 100% | 90% | 79% | 10% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 25 | 96% | 60% | 84% | 36% | ▲ |
| ✓ | Stable Living Situation | | 25 | 96% | 95% | 94% | 1% | |
| 🔴 | Employed | | 1 | 4% | 25% | 12% | -21% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 100% | 76% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 88% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 94% | 91% |
| ✓ | SA Screen Complete | 94% | 77% |

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

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 20 | 1,101 days | 0.2 | 105% | 90% | 94% | 15% | ▲ |
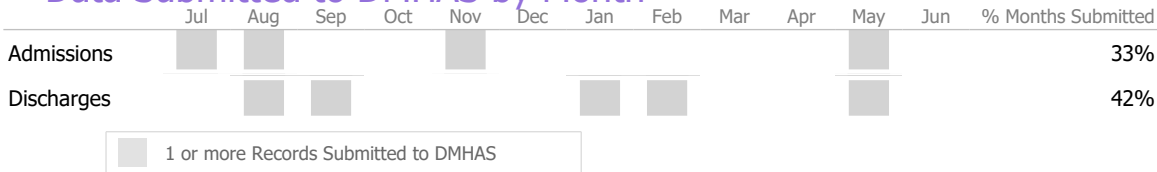
■ < 90%    ■ 90-110%    ■ >110%

## Data Submitted to DMHAS by Month

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

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

**4270 Main St. SupRes 114-252**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 56 | 61 | -8% |
| Admits | 7 | 15 | -53% ▼ |
| Discharges | 7 | 12 | -42% ▼ |
| Service Hours | 1,949 | 3,585 | -46% ▼ |
| Bed Days | 18,574 | 17,267 | 8% |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 91% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 7 | 100% | 50% | 77% | 50% ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 52 | 93% | 60% | 82% | 33% ▲ |
| ✓ Stable Living Situation | | 53 | 95% | 85% | 96% | 10% |
| ● Employed | | 3 | 5% | 25% | 11% | -20% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 49 | 100% | 90% | 99% | 10% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 61 | 2,680 days | 0.3 | 83% | 90% | 81% | -7% |

■ < 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 | | ■ | ■ | | | | | | ■ | | | | 25% |
| 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 25 Active Residential Support Programs

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

**Bridgeport Residential Supervised - 252**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 20 | 20 | 0% | |
| Admits | 3 | 4 | -25% | ▼ |
| Discharges | 3 | 3 | 0% | |
| Bed Days | 5,791 | 5,963 | -3% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 3 | 100% | 60% | 79% | 40% | ▲ |
| ✔ | Follow-up within 30 Days of Discharge | | 3 | 100% | 90% | 79% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 15 | 75% | 60% | 84% | 15% | ▲ |
| ✔ | Stable Living Situation | | 20 | 100% | 95% | 94% | 5% | |
| ● | Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 96% | 76% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ | 6 Month Updates | 100% | 88% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| | MH Screen Complete | 67% | 91% |
| | SA Screen Complete | 50% | 77% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid Axis I Diagnosis | 100% | 99% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ✔ | Avg Utilization Rate | | 17 | 1,126 days | 0.3 | 93% | 90% | 94% | 3% |

| | < 90% | | 90-110% | | >110% |
|---|---|---|---|---|---|
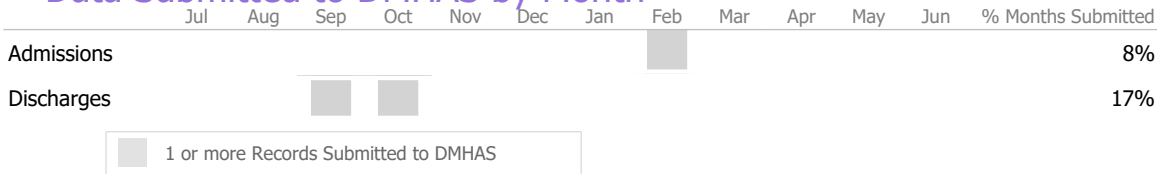
## Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

**Bridgeport Supervised Apts 114-250**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 6 | -17% | ▼ |
| Admits | 1 | 2 | -50% | ▼ |
| Discharges | - | 2 | -100% | ▼ |
| Bed Days | 1,803 | 1,604 | 12% | ▲ |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 79% | N/A |

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 79% | N/A |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 76% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 88% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 73% | 91% |
| SA Screen Complete | | 36% | 77% |

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

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 4 | 80% | 60% | 84% | 20% | ▲ |
| ✓ Stable Living Situation | | 5 | 100% | 95% | 94% | 5% | |
| 🔴 Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 5 | 1,118 days | 0.3 | 99% | 90% | 94% | 9% |

| ▨ < 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 | | | | | | | | | | | | | 0% |

▨ 1 or more Records Submitted to DMHAS

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

| ▨ Actual | ❘ Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|

* State Avg based on 79 Active Supervised Apartments Programs

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

**CAC22 Respite Support 514-250R**
Mental Health Connecticut
Mental Health - Residential Services - Transitional

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 10 | 19 | -47% | ▼ |
| Admits | 7 | 12 | -42% | ▼ |
| Discharges | 5 | 16 | -69% | ▼ |
| Bed Days | 1,430 | 2,219 | -36% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 5 | 100% | 95% | 86% | 5% | |
| ✓ | No Re-admit within 30 Days of Discharge | | 5 | 100% | 85% | 100% | 15% | ▲ |
| ✓ | Follow-up within 30 Days of Discharge | | 5 | 100% | 90% | 88% | 10% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 72% | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 88% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 100% |
| SA Screen Complete | | 89% | 95% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 96% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 8 | 253 days | 0.3 | 49% | 90% | 65% | -41% | ▼ |

| ☐ < 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 | | ☐ | ☐ | ☐ | | ☐ | | ☐ | | | | ☐ | 50% |
| Discharges | | | ☐ | ☐ | | | | | | ☐ | | ☐ | 33% |

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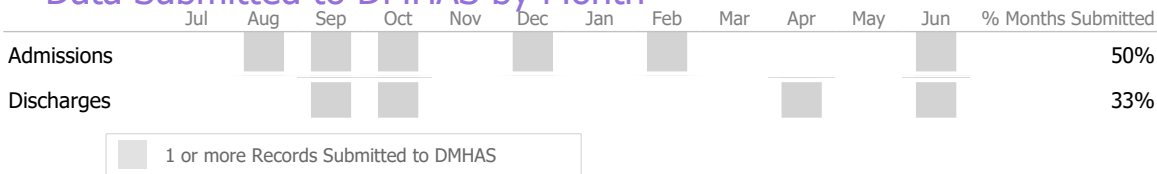
▲ > 10% Over    ▼ < 10% Under

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

* State Avg based on 8 Active Transitional Programs

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

**Coach 2.0**
Mental Health Connecticut
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 65% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Employed | | N/A | N/A | 20% | 12% | -20% ▼ |
| ● Social Support | | N/A | N/A | 60% | 72% | -60% ▼ |
| ● Stable Living Situation | | N/A | N/A | 80% | 82% | -80% ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 95% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 59% |

## 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 27 Active Standard Case Management Programs

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

**DHOH Employment Supports**
Mental Health Connecticut
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 9 | -11% | ▼ |
| Admits | - | - | | |
| Discharges | 1 | 1 | 0% | |
| Service Hours | 157 | 624 | -75% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 8 | 100% | 35% | 43% | 65% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 7 | 100% | 90% | 98% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 93% |

## 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 | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

☐ 1 or more Records Submitted to DMHAS

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

| ▬ Actual | ▏ Goal | ✓ Goal Met | ⬤ Below Goal |
|---|---|---|---|

* State Avg based on 39 Active Employment Services Programs

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

**Employ Svs DHOH - R4 614270**
Mental Health Connecticut
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)
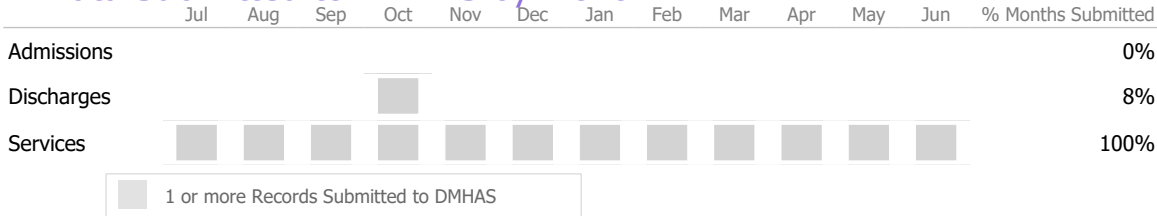
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 27 | 26 | 4% | |
| Admits | 3 | 4 | -25% | ▼ |
| Discharges | 5 | 2 | 150% | ▲ |
| Service Hours | 751 | 1,020 | -26% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 14 | 52% | 35% | 43% | 17% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 22 | 100% | 90% | 98% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 93% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | | | ▪ | | | | | | | | | 17% |
| 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 39 Active Employment Services Programs

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

**Forensic Supportive Housing - 811556**
Mental Health Connecticut
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)
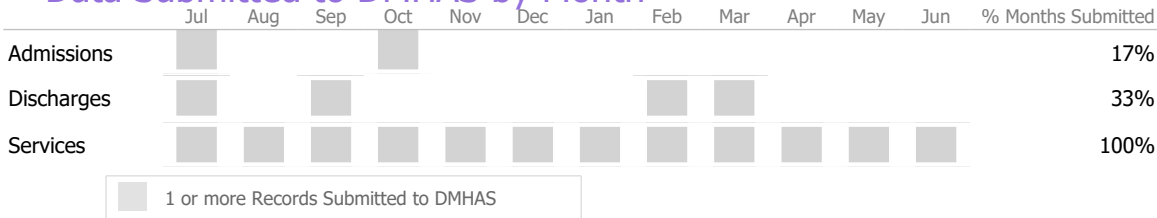
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 9 | -11% | ▼ |
| Admits | - | 2 | -100% | ▼ |
| Discharges | - | 1 | -100% | ▼ |
| Service Hours | 325 | 551 | -41% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 8 | 100% | 85% | 89% | 15% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 8 | 100% | 90% | 97% | 10% |

## Data Submission Quality

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

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

## 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 106 Active Supportive Housing – Scattered Site Programs

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

**Hayden Hill**
Mental Health Connecticut
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 29, 2021)
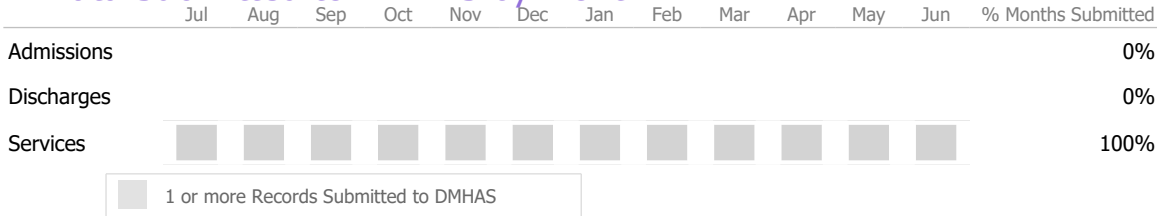
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 4 | 25% | ▲ |
| Admits | 1 | - | | |
| Discharges | 1 | - | | |
| Bed Days | 1,397 | 1,464 | -5% | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 1 | 100% | 75% | 70% | 25% | ▲ |
| ✓ No Re-admit within 30 Days of Discharge | | 1 | 100% | 85% | 77% | 15% | ▲ |
| ✓ Follow-up within 30 Days of Discharge | | 1 | 100% | 90% | 77% | 10% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 97% |

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

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 0% | 86% |
| SA Screen Complete | | 0% | 87% |

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

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 4 | 1,812 days | 0.2 | 96% | 90% | 91% | 6% |

■ < 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 | | | | ▪ | | | | | | | | | 8% |

■ 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.

**Hope House YAS**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 10 | -20% | ▼ |
| Admits | 4 | 4 | 0% | |
| Discharges | 3 | 6 | -50% | ▼ |
| Bed Days | 1,785 | 2,115 | -16% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 3 | 100% | 60% | 79% | 40% | ▲ |
| ✓ | Follow-up within 30 Days of Discharge | | 3 | 100% | 90% | 79% | 10% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Stable Living Situation | | 7 | 88% | 95% | 94% | -7% | |
| 🔴 | Social Support | | 3 | 38% | 60% | 84% | -22% | ▼ |
| 🔴 | Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 92% | 76% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 88% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 100% | 91% |
| ✓ | SA Screen Complete | 100% | 77% |

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

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 7 | 451 days | 0.3 | 70% | 90% | 94% | -20% | ▼ |

Legend: ☐ < 90%   ☐ 90-110%   ☐ >110%

## Data Submitted to DMHAS by Month
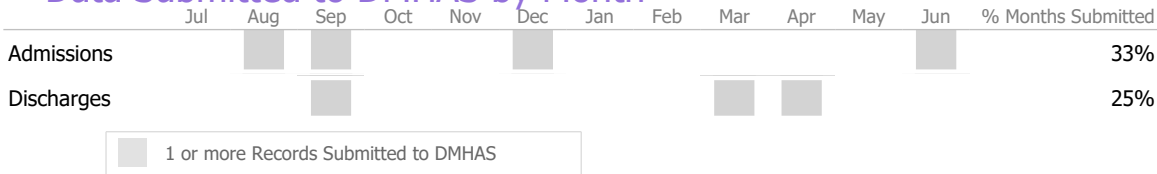
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▪ | ▪ | | | ▪ | | | | | | ▪ | 33% |
| Discharges | | | ▪ | | | | | | ▪ | ▪ | | | 25% |

☐ 1 or more Records Submitted to DMHAS

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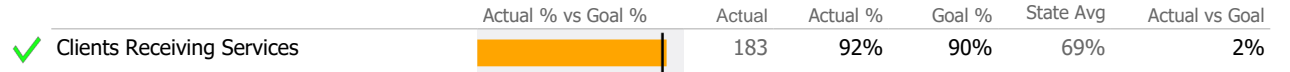
☐ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

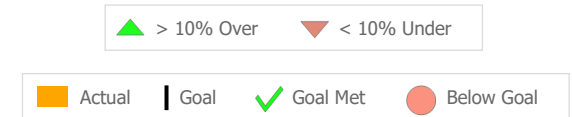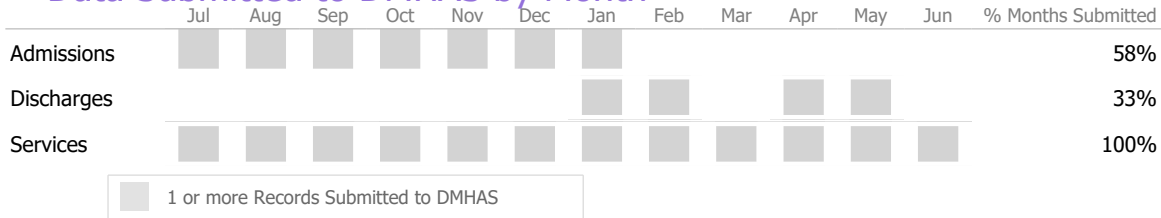Variances in data may be indicative of operational adjustments related to the pandemic.

**Independence Center 21 Church Street Wtbry 514-281**
Mental Health Connecticut

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 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 222 | 297 | -25% | ▼ |
| Admits | 11 | 19 | -42% | ▼ |
| Discharges | 23 | 87 | -74% | ▼ |
| Service Hours | - | | -100% | ▼ |
| Social Rehab/PHP/IOP Days | 8,008 | 9,366 | -14% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 183 | 92% | 90% | 69% | 2% |

## 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 | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 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.

**Madison Place**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 9 | 3 | 200% | ▲ |
| Admits | 6 | 3 | 100% | ▲ |
| Discharges | 6 | - | | |
| Service Hours | 678 | 26 | | |
| Bed Days | 1,722 | 16 | 10663% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 6 | 100% | 60% | 79% | 40% | ▲ |
| ● | Follow-up within 30 Days of Discharge | | 3 | 50% | 90% | 79% | -40% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 8 | 89% | 60% | 84% | 29% | ▲ |
| ✓ | Stable Living Situation | | 9 | 100% | 95% | 94% | 5% | |
| ● | Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 98% | 76% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 88% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 0% | 91% |
| SA Screen Complete | | 0% | 77% |

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

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 6 | 248 days | 0.2 | 79% | 90% | 94% | -11% | ▼ |

■ < 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 | | ▪ | | ▪ | | | | | ▪ | | | ▪ | 33% |
| Discharges | | | | | | | ▪ | | ▪ | ▪ | ▪ | | 33% |
| Services | | ▪ | | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 92% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 79 Active Supervised Apartments Programs

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

**Main St CVH Trans Res 114-255**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 3 | 3 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 439 | 701 | -37% ▼ |
| Bed Days | 1,095 | 1,098 | 0% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 77% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 3 | 100% | 85% | 96% | 15% ▲ |
| ✓ Social Support | | 2 | 67% | 60% | 82% | 7% |
| 🔴 Employed | | 0 | 0% | 25% | 11% | -25% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 3 | 100% | 90% | 99% | 10% |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 91% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 89% |
| ✓ SA Screen Complete | | 100% | 92% |

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

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 3 | 2,486 days | 0.3 | 100% | 90% | 81% | 10% |

| 🟦 < 90% | ⬜ 90-110% | 🟥 >110% |
|---|---|---|

## Data Submitted to DMHAS by Month
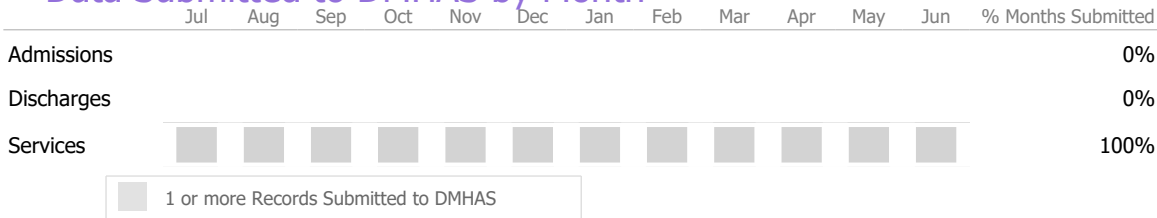
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | ⬜ | ⬜ | ⬜ | ⬜ | ⬜ | ⬜ | ⬜ | ⬜ | ⬜ | ⬜ | ⬜ | ⬜ | 100% |

⬜ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual   | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 25 Active Residential Support Programs

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

**MHAC Coaching Program 321**
Mental Health Connecticut
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 4 | 25% | ▲ |
| Admits | 1 | 4 | -75% | ▼ |
| Discharges | - | - | | |
| Service Hours | 286 | 91 | | |

## 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 | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | 92% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual  | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 10 Active Specialing Programs

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

**MHC/CSP Stamford 114-256**
Mental Health Connecticut
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 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 38 | 32 | 19% | ▲ |
| Admits | 13 | 16 | -19% | ▼ |
| Discharges | 19 | 7 | 171% | ▲ |
| Service Hours | 220 | 524 | -58% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 96% | 81% |

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

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| | MH Screen Complete | 69% | 87% |
| | SA Screen Complete | 42% | 77% |

| 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 | | 19 | 100% | 65% | 56% | 35% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 31 | 82% | 60% | 81% | 22% | ▲ |
| ✔ | Stable Living Situation | | 32 | 84% | 80% | 88% | 4% | |
| ✔ | Employed | | 8 | 21% | 20% | 13% | 1% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 20 | 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 | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | | | 83% |
| Discharges | ▪ | | | ▪ | ▪ | | ▪ | | | ▪ | | | 58% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

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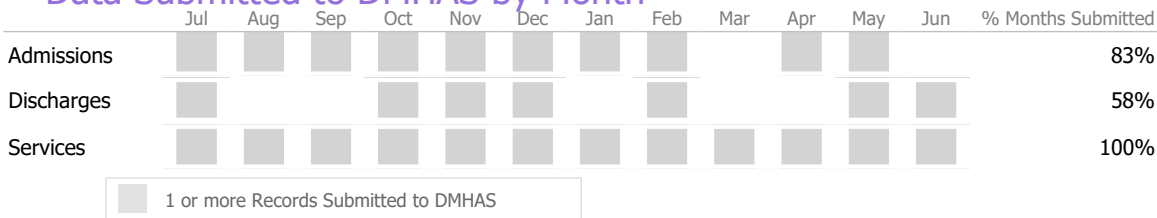
▲ > 10% Over    ▼ < 10% Under

▮ 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.

**Next Steps SupportiveHsg514551**
Mental Health Connecticut
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 17 | 19 | -11% | ▼ |
| Admits | 1 | 2 | -50% | ▼ |
| Discharges | 4 | 3 | 33% | ▲ |
| Service Hours | 188 | 386 | -51% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 16 | 94% | 85% | 89% | 9% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 13 | 100% | 90% | 97% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 99% | 96% |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | ▪ | | | | | 8% |
| 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 106 Active Supportive Housing – Scattered Site Programs

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

**NHDTP**
Mental Health Connecticut
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)
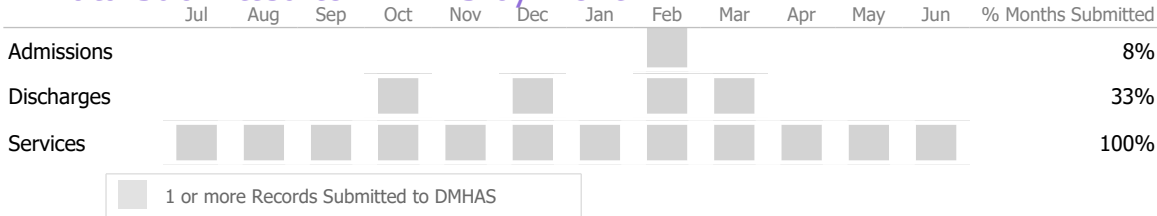
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 70 | 85 | -18% | ▼ |
| Admits | 19 | 28 | -32% | ▼ |
| Discharges | 24 | 33 | -27% | ▼ |
| Service Hours | 70 | 84 | -16% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 24 | 100% | 50% | 65% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Employed | | 0 | 0% | 20% | 12% | -20% | ▼ |
| ● | Stable Living Situation | | 22 | 31% | 80% | 82% | -49% | ▼ |
| ● | Social Support | | 0 | 0% | 60% | 72% | -60% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 58% | 95% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ● 6 Month Updates | | 0% | 59% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Clients Receiving Services | | 1 | 2% | 90% | 72% | -88% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | | 83% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | 92% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | 92% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual  | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 27 Active Standard Case Management Programs

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

**Res Supp Apts-1st Init114-252X**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 10 | 7 | 43% | ▲ |
| Admits | 4 | 1 | 300% | ▲ |
| Discharges | 5 | 1 | 400% | ▲ |
| Service Hours | 1,076 | 1,365 | -21% | ▼ |
| Bed Days | 1,799 | 2,146 | -16% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs State Avg | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 95% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 91% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 40% | 89% |
| SA Screen Complete | | 40% | 92% |

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

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 5 | 100% | 50% | 77% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 8 | 80% | 60% | 82% | 20% | ▲ |
| ✓ | Stable Living Situation | | 9 | 90% | 85% | 96% | 5% | |
| ● | Employed | | 0 | 0% | 25% | 11% | -25% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 5 | 100% | 90% | 99% | 10% | |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 6 | 3,421 days | 0.2 | 82% | 90% | 81% | -8% |
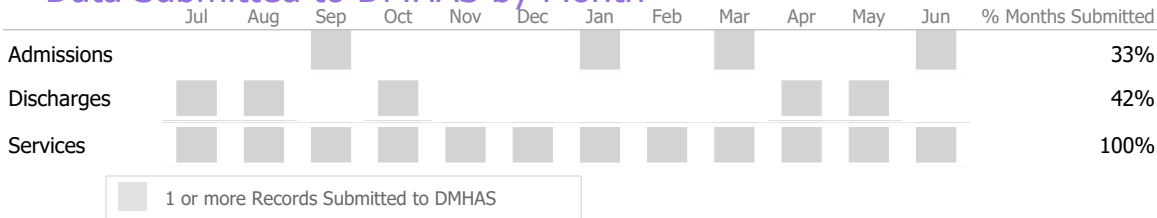
■ < 90%    ■ 90-110%    ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▪ | | | | ▪ | | ▪ | | | ▪ | 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 25 Active Residential Support Programs

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

**Robinson House Grp Home 614320**
Mental Health Connecticut
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 10 | 12 | -17% | ▼ |
| Admits | 3 | 5 | -40% | ▼ |
| Discharges | 2 | 6 | -67% | ▼ |
| Bed Days | 2,867 | 2,783 | 3% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 2 | 100% | 80% | 86% | 20% | ▲ |
| ✔ | No Re-admit within 30 Days of Discharge | | 2 | 100% | 85% | 94% | 15% | ▲ |
| ✔ | Follow-up within 30 Days of Discharge | | 2 | 100% | 90% | 90% | 10% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 99% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ | 6 Month Updates | 100% | 83% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| | MH Screen Complete | 33% | 82% |
| ✔ | SA Screen Complete | 95% | 93% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid Axis I Diagnosis | 100% | 99% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 9 | 90% | 60% | 83% | 30% | ▲ |
| ✔ | Stable Living Situation | | 10 | 100% | 90% | 97% | 10% | |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ✔ | Avg Utilization Rate | | 8 | 1,322 days | 0.2 | 98% | 90% | 90% | 8% |

■ < 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 | ■ | | ■ | ■ | ■ | | | | | | | | 25% |
| Discharges | | ■ | | ■ | | | | | | | | | 17% |

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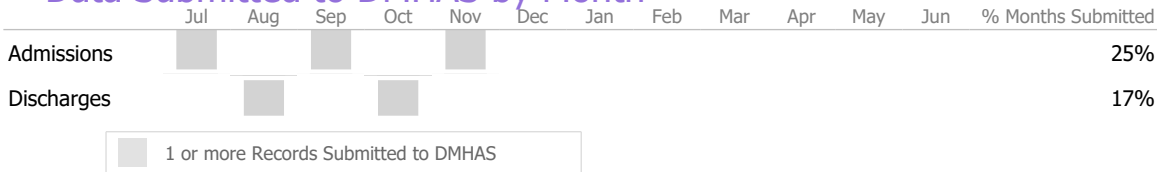
▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 24 Active Group Home Programs

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

**Robinson House Res Supp 614999**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 12 | 15 | -20% | ▼ |
| Admits | - | 7 | -100% | ▼ |
| Discharges | 1 | 6 | -83% | ▼ |
| Service Hours | 778 | 1,103 | -30% | ▼ |
| Bed Days | 4,167 | 4,120 | 1% | |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 91% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| | MH Screen Complete | 0% | 89% |
| | SA Screen Complete | 78% | 92% |

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

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 1 | 100% | 50% | 77% | 50% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Employed | | 7 | 58% | 25% | 11% | 33% | ▲ |
| ✓ | Social Support | | 11 | 92% | 60% | 82% | 32% | ▲ |
| ✓ | Stable Living Situation | | 12 | 100% | 85% | 96% | 15% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 11 | 100% | 90% | 99% | 10% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 12 | 2,543 days | 0.3 | 95% | 90% | 81% | 5% |

| | < 90% | | 90-110% | | >110% |
|---|---|---|---|---|---|
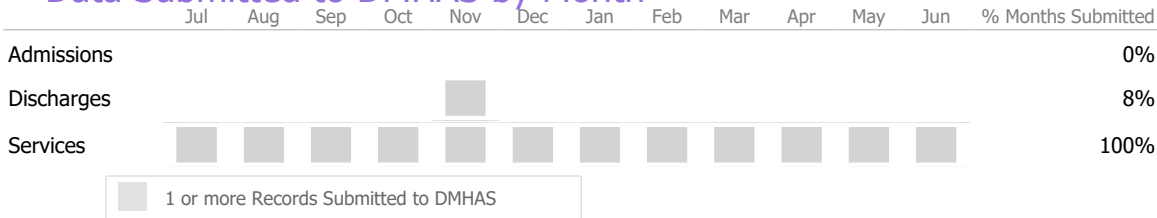
## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | | | ▪ | | | | | | | | 8% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

| 1 or more Records Submitted to DMHAS |
|---|

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

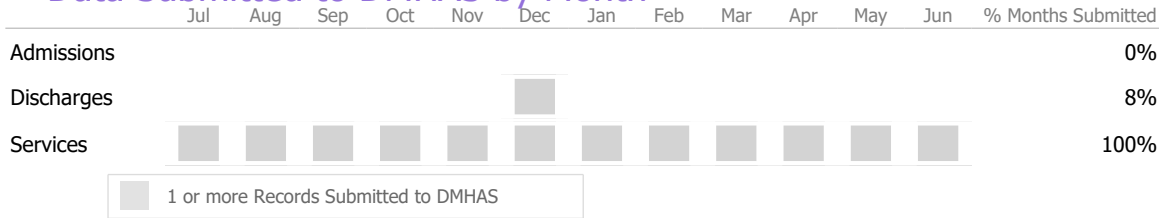| ▮ Actual | │ Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on 25 Active Residential Support Programs

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

**Specialing, 514-285**
Mental Health Connecticut
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 6 | 9 | -33% | ▼ |
| Admits | - | 2 | -100% | ▼ |
| Discharges | 1 | 3 | -67% | ▼ |
| Service Hours | 232 | 431 | -46% | ▼ |

## 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 | ▮ | ▮ | ▮ | ▮ | ▮ | ▮ | ▮ | ▮ | ▮ | ▮ | ▮ | ▮ | 100% |

▮ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 10 Active Specialing Programs

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

**Supported Educ - Reg 5 514271**
Mental Health Connecticut
Mental Health - Education Support - Education Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 31 | 29 | 7% |
| Admits | 15 | 16 | -6% |
| Discharges | 14 | 13 | 8% |
| Service Hours | 257 | 354 | -27% ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Enrolled in Educational  Program | | 31 | 97% | 35% | 73% | 62% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 18 | 100% | 90% | 96% | 10% |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 73% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | 75% |
| Discharges | | ▢ | ▢ | ▢ | | ▢ | | | ▢ | | ▢ | ▢ | 67% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

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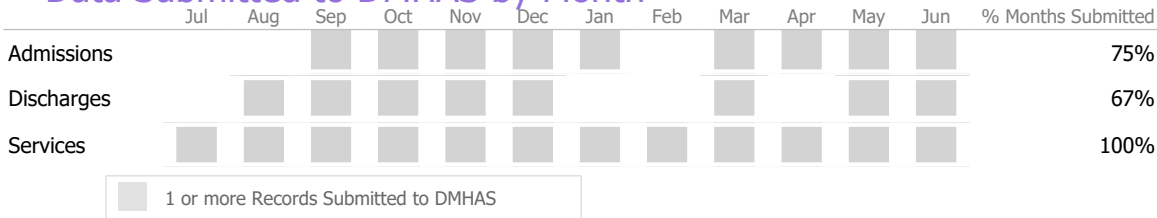
▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 5 Active Education Support Programs

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

**TRP Special Supports**
Mental Health Connecticut
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 35 | 52 | -33% | ▼ |
| Admits | 5 | 13 | -62% | ▼ |
| Discharges | 9 | 23 | -61% | ▼ |
| Service Hours | 2,578 | 4,402 | -41% | ▼ |

## Data Submitted to DMHAS by Month
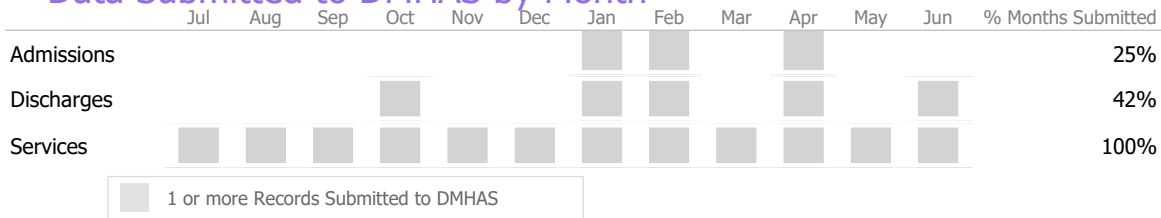
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | ▪ | ▪ | | ▪ | | | 25% |
| Discharges | | | | ▪ | | | ▪ | ▪ | | ▪ | | ▪ | 42% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 10 Active Specialing Programs

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

**W. Main St. Wtby VocRe 514-270**
Mental Health Connecticut
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 65 | 68 | -4% | |
| Admits | 19 | 27 | -30% | ▼ |
| Discharges | 26 | 22 | 18% | ▲ |
| Service Hours | 503 | 1,036 | -51% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Employed | | 22 | 34% | 35% | 43% | -1% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 39 | 100% | 90% | 98% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 93% |

## 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 39 Active Employment Services Programs

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

**West Main St. ResSup 514-262**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)
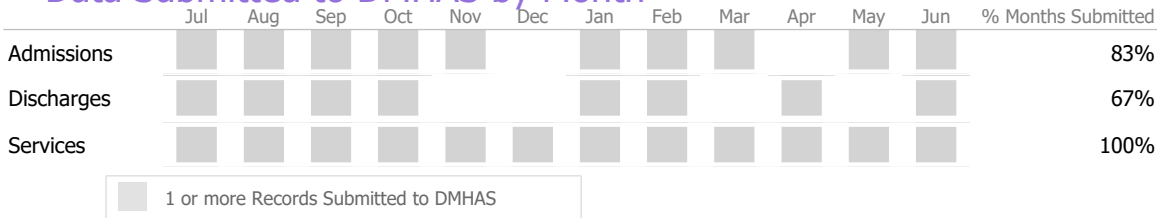
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 40 | 46 | -13% | ▼ |
| Admits | 7 | 8 | -13% | ▼ |
| Discharges | 8 | 13 | -38% | ▼ |
| Service Hours | 685 | 1,486 | -54% | ▼ |
| Bed Days | 11,619 | 13,801 | -16% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 8 | 100% | 50% | 77% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 33 | 82% | 60% | 82% | 22% | ▲ |
| ✓ | Stable Living Situation | | 40 | 100% | 85% | 96% | 15% | ▲ |
| 🔴 | Employed | | 6 | 15% | 25% | 11% | -10% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 31 | 97% | 90% | 99% | 7% | |

## Data Submission Quality

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

| | On-Time Periodic | | Actual | State Avg |
|---|---|---|---|---|
| ✓ | 6 Month Updates | | 96% | 91% |

| | Co-occurring | | Actual | State Avg |
|---|---|---|---|---|
| ✓ | MH Screen Complete | | 100% | 89% |
| ✓ | SA Screen Complete | | 100% | 92% |

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

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 45 | 2,387 days | 0.3 | 71% | 90% | 81% | -19% | ▼ |

| ▢ < 90% | ▢ 90-110% | 🔴 >110% |
|---|---|---|
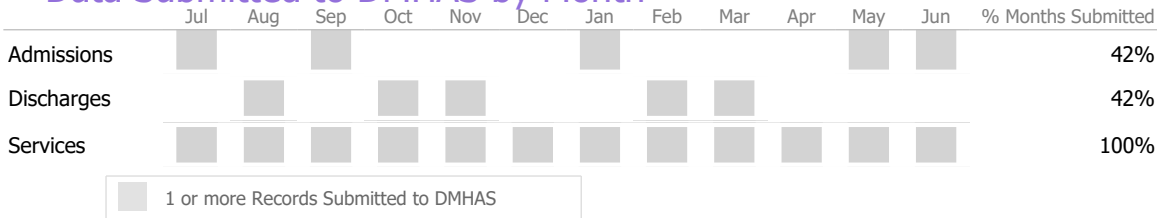
## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | | ▢ | | | | | | | | ▢ | ▢ | 42% |
| 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 25 Active Residential Support Programs

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

**West Main St. SupRes 514-251**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021  (Data as of Sep 29, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 12 | 12 | 0% | |
| Admits | 2 | 2 | 0% | |
| Discharges | 4 | 2 | 100% | ▲ |
| Bed Days | 3,565 | 3,479 | 2% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 100% | 76% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 88% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 100% | 91% |
| ✓ | SA Screen Complete | 100% | 77% |

| 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 | | 4 | 100% | 60% | 79% | 40% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 3 | 75% | 90% | 79% | -15% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 11 | 92% | 60% | 84% | 32% | ▲ |
| ✓ | Stable Living Situation | | 12 | 100% | 95% | 94% | 5% | |
| 🔴 | Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 10 | 1,547 days | 0.2 | 98% | 90% | 94% | 8% |

█ < 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 | | | | | | | | ▪ | ▪ | | | | 17% |
| Discharges | | | | | | | ▪ | ▪ | | | | ▪ | 25% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

█ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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