Satisfied %

95%

92%

(Based on 205 FY21 Surveys)

Goal %

80%

80%

State Ava

92%

93%

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Satisfied % vs Goal%

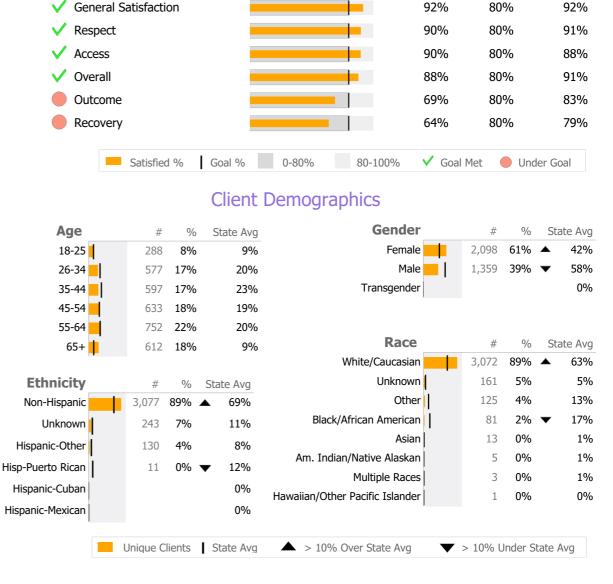
Consumer Satisfaction Survey

Ouestion Domain

Participation in Treatment

Quality and Appropriateness

Provider Activity Monthly Trend Actual 1 Yr Ago Variance % Measure **Unique Clients** 3,461 13% 🔺 3,057 Admits 140 160 **-13%** ▼ 17 120 -86% ▼ Discharges 35% ▲ Service Hours 1,897 1,407 ▲ > 10% Over 1 Yr Ago > 10% Under 1Yr Ago Clients by Level of Care Program Type Level of Care Type % **Mental Health** Outpatient 3,229 92.3% Case Management 190 5.4% **Addiction** Case Management 78 2.2%



Addiction Case Management - Torrington

Charlotte Hungerford Hospital

Addiction - Case Management - Standard Case Management

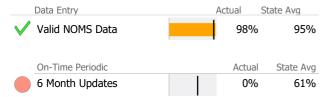
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

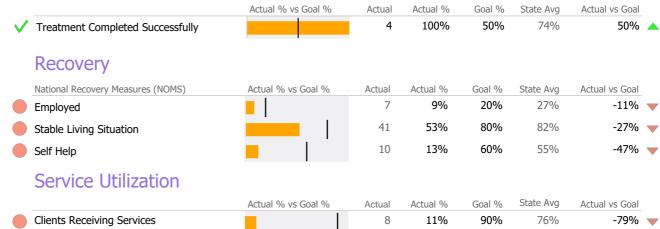
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	78	173	-55%	lacktriangle
Admits	12	21	-43%	•
Discharges	4	106	-96%	•
Service Hours	7	13	-43%	•

Data Submission Quality

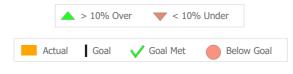


Discharge Outcomes



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				67%
Services				33%
	1 or	more Reco	ords Sub	omitted to DMHAS



^{*} State Avg based on 11 Active Standard Case Management Programs

MH Svs to the Homeless 503294

Charlotte Hungerford Hospital

Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

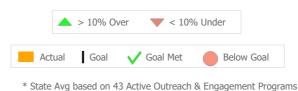
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	190	190	0%
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Service Engagement

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
at least 1 Service within 180 days		0	0%	50%	84%	-50%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitte	ed
Admissions				00	%
Discharges				00	%
Services				00	%
	1 or mo	ore Recor	ds Subr	nitted to DMHAS	



Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3,229	2,747	18%	•
Admits	128	139	-8%	
Discharges	13	14	-7%	
Service Hours	1,890	1,394	36%	•

Data Submission Quality

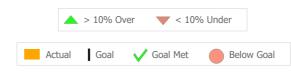
Data Entry	Actual	State Avg
Valid NOMS Data	65%	86%
On-Time Periodic	Actua	State Avg
6 Month Updates	21%	54%
Co-occurring	Actua	l State Avg
MH Screen Complete	9%	89%
SA Screen Complete	38%	89%
Diagnosis	Actua	l State Avg
✓ Valid Axis I Diagnosis	100%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%
	1 or mo	re Recor	ds Subn	nitted to DMHAS

Discharge Outcomes





^{*} State Avg based on 74 Active Standard Outpatient Programs