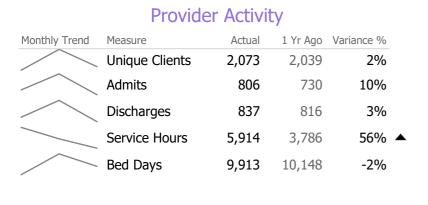
Rushford Center

Middletown, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

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



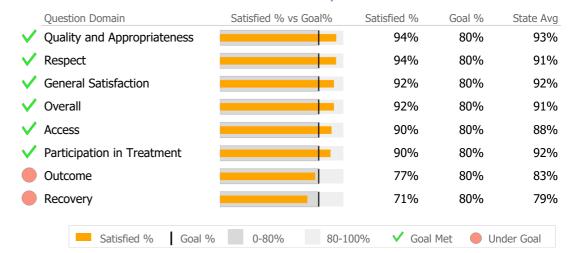
▲ > 10% Over 1 Yr Ago

 \checkmark > 10% Under 1Yr Ago

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Healt	h		
	Outpatient	939	36.8%
	Community Support	352	13.8%
	Social Rehabilitation	86	3.4%
	Employment Services	72	2.8%
	Case Management	66	2.6%
	Crisis Services	62	2.4%
	Residential Services	24	0.9%
	ACT	11	0.4%
Addiction			
	Outpatient	452	17.7%
	Residential Services	435	17.1%
Forensic MH			
Fore	nsics Community-based	44	1.7%
	Residential Services	6	0.2%

Consumer Satisfaction Survey (Based on 156 FY21 Surveys)



Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	126	6%	9%	Male 🗾	1,221	59%	58%
26-34	414	20%	20%	Female	851	41%	42%
35-44	447	22%	23%	Transgender			0%
45-54	423	20%	19%				
55-64	495	24%	20%				
65+	168	8%	9%	Race	#	%	State Avg
				White/Caucasian	1,364	66%	63%
Ethnicity	#	%	State Avg	Other 📕	361	17%	13%
Non-Hispanic	1,490	72%	69%	Black/African American	239	12%	17%
Hispanic-Other	397	19%	▲ 8%	Unknown	87	4%	5%
Unknown	112	5%	11%	Asian	14	1%	1%
Hisp-Puerto Rican	71	3%	12%	Am. Indian/Native Alaskan	4	0%	1%
· ·				Multiple Races	4	0%	1%
Hispanic-Mexican	3	0%	0%	Hawaiian/Other Pacific Islander			0%
Hispanic-Cuban			0%				
	Unique C	lients	State Avg	▲ > 10% Over State Avg	> 10% L	Jnder St	ate Avg

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

ABI SA Counselor Outpatient Program Rushford Center Addiction - Outpatient - Standard Outpatient

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	36	40	-10%
Admits	-	-	
Discharges	3	3	0%
Service Hours	5	-	

Data Submission Quality

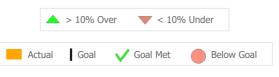
Data Entry	Actual	State Avg
Valid NOMS Data	1009	% 87%
Valid TEDS Data	999	% 88%
On-Time Periodic	Actu	al State Avg
V 6 Month Updates	1000	% 25%
Co-occurring	Actu	al State Avg
MH Screen Complete	N/	A 94%
SA Screen Complete	N/	'A 94%
Diagnosis	Actu	al State Avg
Valid Axis I Diagnosis	1009	% 99%

Data Submitted to DMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		2	67%	50%	50%	17%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		34	94%	55%	37%	39%	
/ Self Help		34	94%	60%	13%	34%	
Not Arrested		36	100%	75%	69%	25%	
Stable Living Situation		36	100%	95%	67%	5%	
Employed		2	6%	50%	25%	-44%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		1	3%	90%	50%	-87%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		0	0%	75%	62%	-75%	-



* State Avg based on 106 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	653	719	-9%	
Admits	107	75	43%	
Discharges	98	130	-25%	•
Service Hours	3,049	1,003		

Data Submission Quality

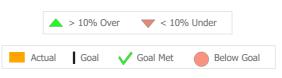
	Data Entry	Actual	State Avg
	Valid NOMS Data	63%	86%
	On-Time Periodic	Actua	State Avg
\checkmark	6 Month Updates	56%	54%
	Co-occurring	Actua	
	MH Screen Complete	10%	o 89%
	SA Screen Complete	10%	89%
	Diagnosis	Actua	State Avg
\checkmark	Valid Axis I Diagnosis	100%	98%

Data Submitted to DMHAS by Month

Jul	Aug	Sep	% Months Submitted
			100%
			100%
			100%
1 or mo	ore Recor	ds Subr	
			Jul Aug Sep

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		12	12%	50%	40%	-38%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		338	51%	60%	57%	-9%	
Employed	— 1	93	14%	30%	21%	-16%	
Stable Living Situation	I	202	30%	95%	66%	-65%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		557	97%	90%	74%	7%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		88	83%	75%	79%	8%	

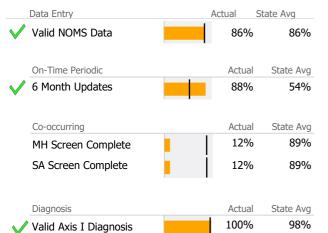


* State Avg based on 74 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	208	217	-4%
Admits	16	8	100% 🔺
Discharges	8	15	-47% 🔻
Service Hours	492	527	-7%

Data Submission Quality

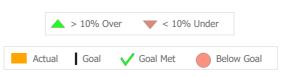


Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		4	50%	50%	40%	0%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/ Social Support		174	84%	60%	57%	24%
Employed	– 1 .	30	14%	30%	21%	-16%
Stable Living Situation	·	116	56%	95%	66%	-39%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		198	99%	90%	74%	9%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		9	56%	75%	79%	-19%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted		
Admissions				67%		
Discharges				100%		
Services				67%		
	1 or more Records Submitted to DMHAS					



* State Avg based on 74 Active Standard Outpatient Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Forensic MH - Residential Services - MH Intensive Res. Rehabilitation

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	7	-14% 🔻
Admits	2	2	0%
Discharges	2	2	0%
Bed Days	332	393	-16% 🔻

Data Submission Quality

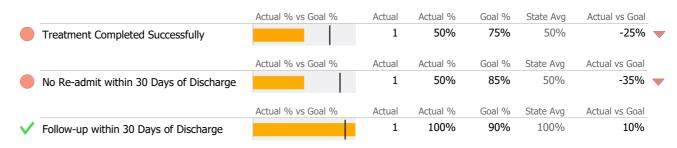
Data Entry	Actual	State Avg
🗸 Valid NOMS Data	56%	56%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	100%
•		
Co-occurring	Actual	State Avg
V MH Screen Complete	0%	0%
V SA Screen Complete	0%	0%

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

Data Submitted to DMHAS by Month

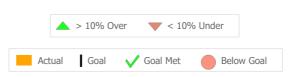
		JUI	Aug	Sep	% Months Submitted			
Admissions	5				33%			
Discharges	;				33%			
	1 or more Records Submitted to DMHAS							

Discharge Outcomes



Bed Utilization





* State Avg based on 1 Active MH Intensive Res. Rehabilitation Programs

Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services

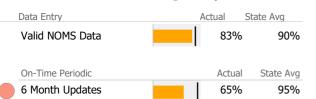
Program Quality Dashboard

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	72	78	-8%	
Admits	8	5	60%	
Discharges	19	26	-27%	▼
Service Hours	116	15		

Data Submission Quality

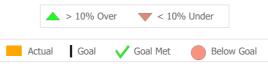


Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted			
dmissions				100%			
ischarges				100%			
ervices				67%			
ervices	1 or more Records Submitted to DMHAS						

Recovery

	/							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Employed		39	53%	35%	47%	18%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		44	81%	90%	91%	-9%	



* State Avg based on 39 Active Employment Services Programs

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

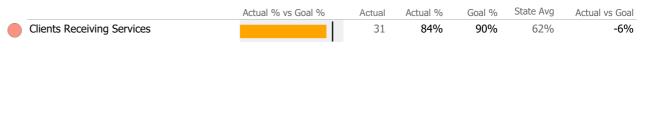
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	44	20	120%	
Admits	21	2	950%	
Discharges	11	7	57%	
Service Hours	29	8		

Service Utilization



Jail Diversion

50%	7	7

Data Submitted to DMHAS by Month Jul Aug Sep % Months Submitted Admissions 100% Discharges 100% Services 100% 1 or more Records Submitted to DMHAS

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	20	23	-13% 🔻
Admits	16	21	-24% 🔻
Discharges	18	20	-10%
Bed Days	396	337	18% 🔺

Discharge Outcomes



Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization F	Rate		10	34 days	0.5	43%	90%	51%	-47%	
	< 90%	90-110%		>110%						

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted				
Admissions				100%				
Discharges				100%				
	1 or more Records Submitted to DMHAS							

	> 10% 0	ver 🔻 < 10%	6 Under
Actual	Goal	🗸 Goal Met	Below Goal

* State Avg based on 10 Active Respite Bed Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	86	90	-4%
Admits	2	2	0%
Discharges	16	2	700% 🔺
Service Hours	273	223	22% 🔺
Social Rehab/PHP/IOP Days	0	2	-100% 🔻

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		56	80%	90%	61%	-10%

Data Submitted to DMHAS by Month

		5 011	710.9		70 11011010 04011110004		
Admissions	5				67%		
Discharges	6				100%		
Services					67%		
	1	1 or more Records Submitted to DMHAS					

		> 10% Ove	er	▼	< 10%	Unde	r		
Act	tual	Goal	\checkmark	Goal I	Met		Belov	w Goal	

* State Avg based on 34 Active Social Rehabilitation Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	17	17	0%
Admits	3	14	-79% 🔻
Discharges	9	8	13% 🔺
Service Hours	6	46	-86% 🔻

Service Engagement



Data Submitted to DMHAS by Month



		> 10% Ove	er	▼ < 10%	Unde	er
A	ctual	Goal	\checkmark	Goal Met		Below Goal

* State Avg based on 43 Active Outreach & Engagement Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	184	189	-3%
Admits	13	9	44% 🔺
Discharges	17	14	21% 🔺
Service Hours	596	248	140% 🔺

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		60%	86%
On-Time Periodic		Actual	State Avg
6 Month Updates		35%	54%
Co-occurring		Actual	State Avg
MH Screen Complete		0%	89%
SA Screen Complete		0%	89%
	•		
Diagnosis		Actual	State Avg

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		0	0%	50%	40%	-50%	
		•						
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Social Support		74	39%	60%	57%	-21%	
	Employed		7	4%	30%	21%	-26%	
	Stable Living Situation		5	3%	95%	66%	-92%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		114	66%	90%	74%	-24%	
	Service Engagement	·						
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	2 or more Services within 30 days		10	77%	75%	79%	2%	

Data Submitted to DMHAS by Month

100%

98%

	Jul	Aug	Sep	% Months Submitted			
Admissions				100%			
Discharges				100%			
Services				67%			
	1 or more Records Submitted to DMHAS						

Valid Axis I Diagnosis



* State Avg based on 74 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	19	19	0%
Admits	1	-	
Discharges	-	2	-100% 🔻
Bed Days	1,709	1,628	5%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	75%
On-Time Periodic	Actua	State Avg
V 6 Month Updates	100%	93%
Co-occurring	Actua	State Avg
MH Screen Complete	100%	98%
V SA Screen Complete	100%	87%
Diagnosis	Actua	State Avg
A Valid Avia I Disensaia	100%	000%

Discharge Outcomes

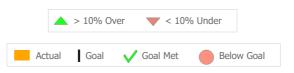
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		N/A	N/A	60%	66%	N/A	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		N/A	N/A	90%	82%	N/A	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		19	100%	60%	84%	40%	
\checkmark	Employed		8	42%	25%	11%	17%	
\checkmark	Stable Living Situation		19	100%	95%	96%	5%	
	Bed Utilization							
	12 Months Trend	Beds Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
	Avg Utilization Rate	21 1,701 days	1.1	88%	90%	94%	-2%	



Diagnosis		Actual	State Avg	
Valid Axis I Dia	agnosis	100%	99%	

Data Submitted to DMHAS by Month

	Jui	Aug	Seb	70 MONTHS Submitted
Admissions				33%
Discharges				0%
	1 or mo	re Reco	rds Subn	nitted to DMHAS



* State Avg based on 80 Active Supervised Apartments Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	5	5	0%
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Data Submission Quality

Data Entry	/	Actual	State Avg
Valid NOMS Data		N/A	87%
Valid TEDS Data		N/A	88%
On-Time Periodic		Actua	State Avg
6 Month Updates		0%	25%
Co-occurring		Actua	I State Avg
MH Screen Complete		N/A	94%
SA Screen Complete	Ì	N/A	94%
F			

Data Submitted to DMHAS by Month

100%

99%

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
Services				0%

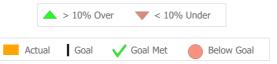
Valid Axis I Diagnosis

1 or more Records Submitted to DMHAS

Discharge Outcomes

(

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	50%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		0	0%	50%	25%	-50%	
Abstinence/Reduced Drug Use	i i	0	0%	55%	37%	-55%	
Self Help	I	0	0%	60%	13%	-60%	
Not Arrested	· · · ·	0	0%	75%	69%	-75%	
Stable Living Situation	·	0	0%	95%	67%	-95%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	50%	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%	62%	-75%	



* State Avg based on 106 Active Standard Outpatient Programs

Program Activity

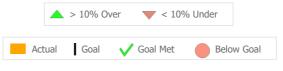
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	45	32	41%	
Admits	53	38	39%	
Discharges	55	36	53%	
Service Hours	61	7		

Crisis

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
 Evaluation within 1.5 hours of Request 		56	100%	75%	70%	25% 🔺	
 Community Location Evaluation 		51	91%	80%	70%	11% 🔺	
✓ Follow-up Service within 48 hours		14	100%	90%	66%	10%	

Data Submitted to DMHAS by Month





* State Avg based on 26 Active Mobile Crisis Team Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	286	239	20%	
Admits	22	10	120%	
Discharges	7	4	75%	
Service Hours	286	236	21%	

Data Submission Quality

Data Entry	Actual S	tate Avg
Valid NOMS Data	59%	87%
Valid TEDS Data	69%	88%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	25%
Co-occurring	Actual	State Avg
MH Screen Complete	55%	94%
SA Screen Complete	55%	94%
Diagnocia	Actual	State Ava

	Diagnosis	Actual	State Avg
\checkmark	Valid Axis I Diagnosis	100%	99%

Data Submitted to DMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		4	57%	50%	50%	7%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		10	3%	50%	25%	-47%	▼
Abstinence/Reduced Drug Use	• ·	23	8%	55%	37%	-47%	
Self Help	i i	7	2%	60%	13%	-58%	
Not Arrested	• · · · ·	28	10%	75%	69%	-65%	
Stable Living Situation	· · · ·	23	8%	95%	67%	-87%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		50	18%	90%	50%	-72%	▼
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		17	77%	75%	62%	2%	



* State Avg based on 106 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	5	5	0%
Admits	-	-	
Discharges	-	-	
Bed Days	460	460	0%

Data Submission Quality

	Data Entry	Actual	State Avg
	Valid NOMS Data	90%	98%
	On-Time Periodic	Actua	State Avg
\checkmark	6 Month Updates	100%	
	Co-occurring	Actua	State Avg
	MH Screen Complete	N/A	97%
	SA Screen Complete	N/A	97%
	Diagnosis	Actua	State Avg

Data Submitted to DMHAS by Month

100%

99%

		Jul	Aug	Sep	% Months Submitted
Admission	s				0%
Discharge	S				0%
		1 or mo	re Recor	ds Subr	nitted to DMHAS

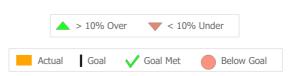
Valid Axis I Diagnosis

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	75%	60%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	92%	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%	67%	N/A

Bed Utilization

			12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Avg Utilization F	Rate		5	1,705 days	1.0	100%	90%	91%	10%
		< 90	% 90-110%		>110%					



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

Pilots Program 303-551

Rushford Center

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Mental Health - Case Management - Supportive Housing - Scattered Site

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16	17	-6%
Admits	-	-	
Discharges	1	-	
Service Hours	13	17	-24%

Recovery

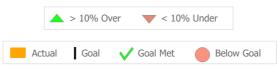
· · · · · · · · · · · · · · · · · · ·							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Stable Living Situation		0	0%	85%	88%	-85%	▼
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		7	47%	90%	90%	-43%	

Data Submission Quality



Data Submitted to DMHAS by Month

	Ju	ul Aug	g Sep	p % Months Submitted
Admissions				0%
Discharges				33%
Services				100%



* State Avg based on 108 Active Supportive Housing - Scattered Site Programs

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

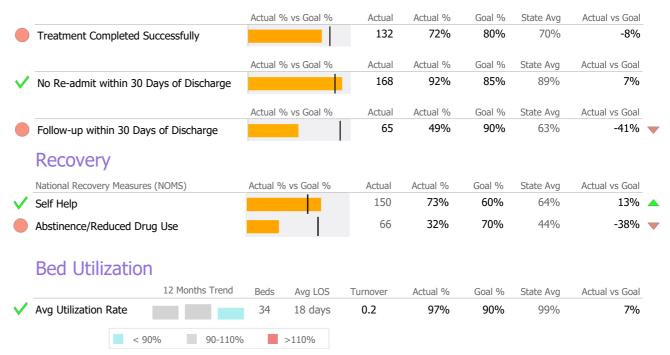
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	199	221	-10%
Admits	166	182	-9%
Discharges	183	183	0%
Bed Days	3,037	3,336	-9%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	79	% 86%
Valid TEDS Data	100	% 96%
On-Time Periodic	Actu	ual State Avg
6 Month Updates	N,	/A 0%
Co-occurring	Actu	ual State Avg
MH Screen Complete	51	% 94%
SA Screen Complete	42	% 94%
Diagnosis	Actu	ual State Avg
Valid Axis I Diagnosis	100	<u> </u>

Discharge Outcomes



Data Submitted to DMHAS by Month



	> 10% 0\	ver 🔻 < 100	% Under	
Actual	Goal	V Goal Met	Belov	w Goal

* State Avg based on 7 Active SA Intensive Res. Rehabilitation 3.7 Programs

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	292	286	2%
Admits	319	298	7%
Discharges	315	300	5%
Bed Days	1,166	1,200	-3%

Data Submission Quality

	Data Entry	Actual	State Avg
	Valid NOMS Data	79%	83%
\checkmark	Valid TEDS Data	99%	98%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	N/A	N/A
	Co-occurring	Actual	State Avg
	MH Screen Complete	59%	97%
	SA Screen Complete	58%	96%
	Diagnosis	Actual	State Avg

Data Submitted to DMHAS by Month

100%

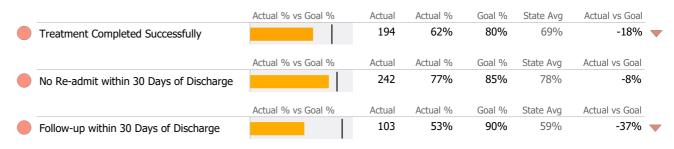
100%



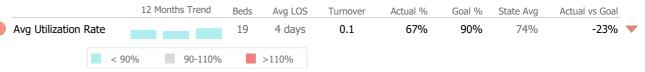
Valid Axis I Diagnosis

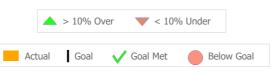
 \checkmark

Discharge Outcomes



Bed Utilization





* State Avg based on 7 Active Medically Monitored Detox 3.7D Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	352	388	-9%
Admits	4	20	-80% 🔻
Discharges	45	28	61% 🔺
Service Hours	810	1,248	-35% 🔻

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	54	1% 82%
On-Time Periodic	Act	tual State Avg
6 Month Updates	16	5% 86%
Co-occurring	Act	tual State Avg
MH Screen Complete		96%
SA Screen Complete		96%
Diagnosis	Act	tual State Avg

Data Submitted to DMHAS by Month

100%

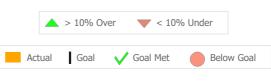
98%

	Jul	Aug	Sep	% Months Submitted			
Admissions				100%			
Discharges				100%			
Services				100%			
1 or more Records Submitted to DMHAS							

Valid Axis I Diagnosis

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		7	16%	65%	56%	-49%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		162	46%	60%	79%	-14%	
Employed		15	4%	20%	13%	-16%	
Stable Living Situation		16	5%	80%	86%	-75%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		246	80%	90%	95%	-10%	



* State Avg based on 36 Active CSP Programs

Shelter Plus Care 303-292

Rushford Center

Mental Health - Case Management - Supportive Housing - Scattered Site

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	34	34	0%	
Admits	-	2	-100%	-
Discharges	-	1	-100%	-
Service Hours	57	51	13%	

Data Submission Quality

Data Entry	Α	ctual S	tate Avg
Valid NOMS Data		80%	96%
On-Time Periodic		Actual	State Avg
6 Month Updates		44%	81%

Data Submitted to DMHAS by Month

Jul	Aug	Sep	% Months Submitted				
			0%				
			0%				
			67%				
1 or more Records Submitted to DMHAS							

Recovery

,							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Stable Living Situation		0	0%	85%	88%	-85%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		22	65%	90%	90%	-25%	

	>	10% Ove	er	▼ <	< 10%	Unde	r	
Act	tual	Goal	\checkmark	Goal M	let		Belo	w Goal

* State Avg based on 108 Active Supportive Housing – Scattered Site Programs

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

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

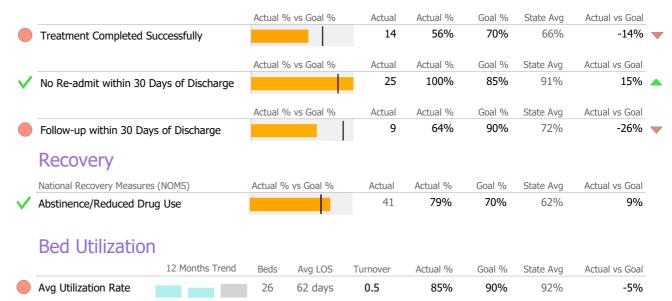
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	52	49	6%
Admits	37	27	37% 🔺
Discharges	25	27	-7%
Bed Days	2,029	2,214	-8%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	83%	84%
Valid TEDS Data	100%	96%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	6%
Co-occurring	 Actual	State Avg
MH Screen Complete	81%	94%
SA Screen Complete	81%	90%
Diagnosis	Actual	State Avg

Discharge Outcomes





Data Submitted to DMHAS by Month

100%

99%



Valid Axis I Diagnosis

	^ >	• 10% Ove	er	▼ <	: 10% l	Jnde	r	
Act	ual	Goal	\checkmark	Goal M	et		Below	Goal

* State Avg based on 25 Active Intermediate/Long Term Res.Tx 3.5 Programs

Addiction - Case Management - Standard Case Management

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

Program Activity

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

Data Submission Quality

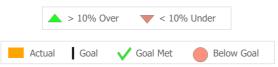
Data Entry	Ac	tual St	ate Avg
Valid NOMS Data		N/A	95%
On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	61%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
	1 or mo	ore Recor	ds Subr	nitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	74%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		N/A	N/A	20%	27%	-20% 🔻
Self Help		N/A	N/A	60%	55%	-60% 🔻
Stable Living Situation		N/A	N/A	80%	82%	-80% 🔻
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		N/A	N/A	90%	76%	N/A 🔷



* State Avg based on 11 Active Standard Case Management Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	128	112	14%	
Admits	13	13	0%	
Discharges	4	6	-33%	▼
Service Hours	121	157	-23%	▼

Data Submission Quality

Data Entry	Actual S	tate Avg
Valid NOMS Data	81%	87%
Valid TEDS Data	82%	88%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	25%
Co-occurring	Actual	State Avg
MH Screen Complete	77%	94%
SA Screen Complete	77%	94%
Diagnosis	Actual	State Ave

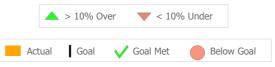
Diagnosis		ACT	uai	State Avg
Valid Axis I Diagn	osis	99	%	99%

Data Submitted to DMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Treatment Completed Successfully		1	25%	50%	50%	-25%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		14	11%	50%	25%	-39%	
Abstinence/Reduced Drug Use		18	14%	55%	37%	-41%	
Not Arrested		26	20%	75%	69%	-55%	
Self Help		6	5%	60%	13%	-55%	
Stable Living Situation	· · ·	23	18%	95%	67%	-77%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		34	27%	90%	50%	-63%	,
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		10	77%	75%	62%	2%	-



* State Avg based on 106 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	11	9	22%	
Admits	3	2	50%	
Discharges	1	2	-50%	▼
Bed Days	784	580	35%	

Data Submission Quality

	Data Entry	Actual	State Avg
	Valid NOMS Data	25%	83%
	On-Time Periodic	Actual	State Avg
\checkmark	6 Month Updates	100%	90%
	Co-occurring	Actual	State Avg
	MH Screen Complete	0%	96%
	SA Screen Complete	0%	93%
	Diagnosis	Actual	State Avg
. /	Valid Axis I Diagnosis	100%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted		
Admissions				100%		
Discharges				33%		
1 or more Records Submitted to DMHAS						

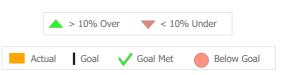
Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		0	0%	65%	41%	-65%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		1	100%	85%	95%	15%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	46%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		2	18%	15%	15%	3%

		notatin /o ro ooan /o	710001011	/ tocoron / o	00001 70	o cato / tr g	nocaan to oban
•	Employed		2	18%	15%	15%	3%
)	Social Support		5	45%	60%	79%	-15% 🔻
)	Stable Living Situation		5	45%	60%	92%	-15% 🔻

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization	Rate		10	283 days	0.9	85%	90%	85%	-5%
	< 90	90-110%		>110%					



* State Avg based on 23 Active Assertive Community Treatment Programs