Wheeler Clinic
Plainville, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - September 2021   (Data as of Feb 01, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	5,770	4,234	36%	▲
	Admits	1,531	1,057	45%	▲
	Discharges	1,119	769	46%	▲
	Service Hours	4,465	3,650	22%	▲

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	3,628	60.2%
	Medication Assisted Treatment	609	10.1%
	Intake	346	5.7%
	Case Management	46	0.8%
	Consultation	44	0.7%
	IOP	10	0.2%
Forensic SA			
	Forensics Community-based	1,312	21.8%
	Case Management	27	0.4%

Consumer Satisfaction Survey   (Based on 347 FY21 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Quality and Appropriateness		95%	80%	93%
✓	Respect		94%	80%	91%
✓	Participation in Treatment		94%	80%	92%
✓	General Satisfaction		94%	80%	92%
✓	Overall		92%	80%	91%
✓	Access		89%	80%	88%
🔴	Outcome		77%	80%	83%
🔴	Recovery		74%	80%	79%

Legend: ▮ Satisfied %   │ Goal %   ▮ 0-80%   ▮ 80-100%   ✓ Goal Met   🔴 Under Goal

Client Demographics

Age

	#	%	State Avg
18-25	919	16%	9%
26-34	1,582	27%	20%
35-44	1,316	23%	23%
45-54	888	15%	19%
55-64	751	13%	20%
65+	308	5%	9%

Gender

	#	%	State Avg
Male	3,336	58%	58%
Female	2,428	42%	42%
Transgender			0%

Ethnicity

	#	%		State Avg
Unknown	3,324	58%	▲	11%
Non-Hispanic	1,688	29%	▼	69%
Hisp-Puerto Rican	607	11%		12%
Hispanic-Other	120	2%		8%
Hispanic-Mexican	25	0%		0%
Hispanic-Cuban	6	0%		0%

Race

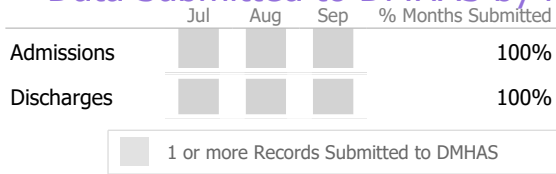|	#	%	State Avg
White/Caucasian	3,493	61%	63%
Black/African American	894	15%	17%
Other	781	14%	13%
Unknown	349	6%	5%
Multiple Races	120	2%	1%
Asian	74	1%	1%
Am. Indian/Native Alaskan	45	1%	1%
Hawaiian/Other Pacific Islander	14	0%	0%

Legend: ▮ 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.

Access Line
Wheeler Clinic
Addiction - Intake - Central Intake

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	346	317	9%	
Admits	396	356	11%	▲
Discharges	396	356	11%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%

1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

Actual	Goal	✓ Goal Met	● Below Goal

* State Avg based on 1 Active Central Intake Programs

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

Bettor Choice 620740
Wheeler Clinic
Addiction - Outpatient - Gambling Outpatient

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	48	25	92%	▲
Admits	9	4	125%	▲
Discharges	7	2	250%	▲
Service Hours	107	66	62%	▲

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		3	43%	75%	59%	-32%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		25	60%	90%	89%	-30%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		6	67%	75%	86%	-8%

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		74%	95%
✓ Valid TEDS Data		66%	38%

On-Time Periodic		Actual	State Avg
● 6 Month Updates		17%	79%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	97%
✓ SA Screen Complete		100%	97%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		96%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 7 Active Gambling Outpatient Programs

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

Coach 2.0
Wheeler Clinic
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	15		
Admits	15	-	
Discharges	-	-	
Service Hours	23	-	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		92%	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				33%
Discharges				0%
Services				0%

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%	74%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		14	93%	80%	82%	13% ▲
✓ Employed		4	27%	20%	27%	7%
✓ Self Help		9	60%	60%	55%	0%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		15	100%	90%	76%	10%

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   ● Below Goal

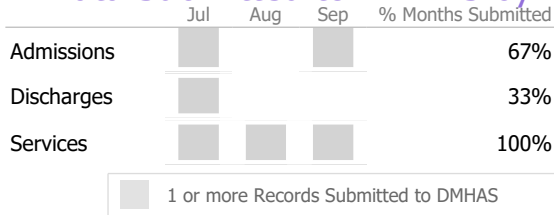* State Avg based on 11 Active Standard Case Management Programs

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

Latino Outreach 620296
Wheeler Clinic
Addiction - 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	31	30	3%
Admits	3	3	0%
Discharges	3	3	0%
Service Hours	73	122	-40% ▼

Service Engagement

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ at least 1 Service within 180 days		3	100%	50%	80%	50% ▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions	▢		▢	67%
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 22 Active Outreach & Engagement Programs

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

Lifeline For Wmn and Chld62030
Wheeler Clinic
Addiction - IOP - Standard IOP

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	10	11	-9%
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	
Social Rehab/PHP/IOP Days	0	0	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	85%
Valid TEDS Data		N/A	87%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	4%

Co-occurring		Actual	State Avg
MH Screen Complete		N/A	87%
SA Screen Complete		N/A	87%

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

Data Submitted to DMHAS by Month

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

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%	62%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	64%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		0	0%	50%	23%	-50% ▼
Abstinence/Reduced Drug Use		0	0%	55%	39%	-55% ▼
Self Help		0	0%	60%	11%	-60% ▼
Not Arrested		0	0%	75%	68%	-75% ▼
Stable Living Situation		0	0%	95%	74%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		0	0%	90%	45%	N/A ▼

▲ > 10% Over   ▼ < 10% Under

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

* State Avg based on 55 Active Standard IOP Programs

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

Lifeline for Women and Children - OP
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

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	60	65	-8%	
Admits	10	5	100%	▲
Discharges	7	11	-36%	▼
Service Hours	104	20		

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		73%	87%
✓ Valid TEDS Data		92%	88%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		44%	25%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	94%
✓ SA Screen Complete		100%	94%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				67%
Services				100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		1	14%	50%	50%	-36%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		45	75%	75%	69%	0%	
🔴	Abstinence/Reduced Drug Use		20	33%	55%	37%	-22%	▼
🔴	Stable Living Situation		42	70%	95%	67%	-25%	▼
🔴	Employed		14	23%	50%	25%	-27%	▼
🔴	Self Help		6	10%	60%	13%	-50%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		32	60%	90%	50%	-30%	▼

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		5	50%	75%	62%	-25%	▼

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 106 Active Standard Outpatient Programs

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

MAT - Naltrexone - Plainville
Wheeler Clinic
Addiction - Medication Assisted Treatment - Naltrexone

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	0		
Admits	-	-	
Discharges	-	-	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	62%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		N/A	N/A	55%	69%	-55% ▼
Employed		N/A	N/A	50%	46%	-50% ▼
Not Arrested		N/A	N/A	75%	85%	-75% ▼
Self Help		N/A	N/A	60%	40%	-60% ▼
Stable Living Situation		N/A	N/A	95%	83%	-95% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	93%
Valid TEDS Data	N/A	100%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	10%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	77%
SA Screen Complete	N/A	92%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 6 Active Naltrexone Programs

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

MATx OP
Wheeler Clinic
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

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	609	444	37%	▲
Admits	41	43	-5%	
Discharges	-	-		
Service Hours	-	-		

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	62%	92%
✓	Valid TEDS Data	100%	94%

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	0%	23%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	76%
✓	SA Screen Complete	100%	92%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				0%
Services				0%

    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%	54%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Abstinence/Reduced Drug Use		98	16%	55%	40%	-39%	▼
🔴 Not Arrested		208	34%	75%	58%	-41%	▼
🔴 Employed		6	1%	50%	19%	-49%	▼
🔴 Self Help		49	8%	60%	13%	-52%	▼
🔴 Stable Living Situation		172	28%	95%	56%	-67%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		0	0%	90%	39%	N/A	▼

▲ > 10% Over	▼ < 10% Under	

🟧 Actual	❘ Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 20 Active Buprenorphine Maintenance Programs

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

NHDTP
Wheeler Clinic
Addiction - Consultation - Consultation

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	44	53	-17%	▼
Admits	-	12	-100%	▼
Discharges	-	11	-100%	▼
Service Hours	-	-		

Data Submitted to DMHAS by Month

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

	1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

	Actual		Goal	✔ Goal Met	● Below Goal

* State Avg based on 1 Active Consultation Programs

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

Parents Recovering from Opioid Use Disorder (PROUD
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - September 2021   (Data as of Feb 01, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	24		
Admits	11	-	
Discharges	6	-	
Service Hours	-	-	

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		99%	87%
✓ Valid TEDS Data		96%	88%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	25%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	94%
✓ SA Screen Complete		100%	94%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				67%
Discharges				67%
Services				0%

1 or more Records Submitted to DMHAS

Discharge Outcomes

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

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Not Arrested		24	100%	75%	69%	25% ▲
✓ Abstinence/Reduced Drug Use		17	71%	55%	37%	16% ▲
🔴 Stable Living Situation		20	83%	95%	67%	-12% ▼
🔴 Employed		7	29%	50%	25%	-21% ▼
🔴 Self Help		4	17%	60%	13%	-43% ▼

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% ▼

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 106 Active Standard Outpatient Programs

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

Post-Release Transitional Forensic Case Management
Wheeler Clinic
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	15	-53%	▼
Admits	-	2	-100%	▼
Discharges	1	8	-88%	▼
Service Hours	3	38	-92%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		0%	11%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges	▢			33%
Services	▢	▢		67%

▢ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		1	100%	50%	69%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		5	71%	60%	74%	11%	▲
🔴 Employed		1	14%	20%	25%	-6%	
🔴 Stable Living Situation		5	71%	80%	52%	-9%	
🔴 Self Help		3	43%	60%	60%	-17%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		1	17%	90%	60%	-73%	▼

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 8 Active Standard Case Management Programs

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

Pre-Release Transitional Forensic Case Management
Wheeler Clinic
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	20	24	-17%	▼
Admits	-	2	-100%	▼
Discharges	1	2	-50%	▼
Service Hours	-	4	-100%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		0%	11%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges	▪			33%
Services	▪	▪		67%

▫ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		1	100%	50%	69%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Employed		0	0%	20%	25%	-20%	▼
🔴 Social Support		1	5%	60%	74%	-55%	▼
🔴 Self Help		0	0%	60%	60%	-60%	▼
🔴 Stable Living Situation		0	0%	80%	52%	-80%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		0	0%	90%	60%	N/A	▼

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 8 Active Standard Case Management Programs

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

PTIP - 2024 E. Main St. 620713
Wheeler Clinic
Forensic SA - Forensics Community-based - Pre-trial Intervention 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	378	220	72%	▲
Admits	133	13	923%	▲
Discharges	133	7	1800%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%

1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

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

* State Avg based on 16 Active Pre-trial Intervention Programs Programs

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

PTIP-75 N. Mountain Rd. 620707
Wheeler Clinic
Forensic SA - Forensics Community-based - Pre-trial Intervention 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	935	631	48%	▲
Admits	297	14	2021%	▲
Discharges	220	3	7233%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%

1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

Actual	Goal	✓ Goal Met	● Below Goal

* State Avg based on 16 Active Pre-trial Intervention Programs Programs

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

SA OP Hartford 620203
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

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	2,120	1,462	45%	▲
Admits	319	389	-18%	▼
Discharges	166	158	5%	
Service Hours	2,240	2,072	8%	

Data Submission Quality

Data Entry	Actual % vs Goal	Actual	State Avg
Valid NOMS Data		68%	87%
✓ Valid TEDS Data		86%	88%

On-Time Periodic	Actual % vs Goal	Actual	State Avg
🔴 6 Month Updates		16%	25%

Co-occurring	Actual % vs Goal	Actual	State Avg
✓ MH Screen Complete		100%	94%
✓ SA Screen Complete		100%	94%

Diagnosis	Actual % vs Goal	Actual	State Avg
✓ Valid Axis I Diagnosis		99%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		61	37%	50%	50%	-13%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Not Arrested		1,572	74%	75%	69%	-1%	
🔴 Abstinence/Reduced Drug Use		653	31%	55%	37%	-24%	▼
🔴 Stable Living Situation		1,373	65%	95%	67%	-30%	▼
🔴 Employed		260	12%	50%	25%	-38%	▼
🔴 Self Help		261	12%	60%	13%	-48%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		905	46%	90%	50%	-44%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 2 or more Services within 30 days		210	66%	75%	62%	-9%	

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 106 Active Standard Outpatient Programs

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

SA OP Plainville 620200
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

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	1,430	1,127	27%	▲
Admits	297	211	41%	▲
Discharges	179	151	19%	▲
Service Hours	1,914	1,328	44%	▲

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		67%	87%
✓ Valid TEDS Data		86%	88%

On-Time Periodic		Actual	State Avg
● 6 Month Updates		19%	25%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	94%
✓ SA Screen Complete		100%	94%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		99%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		75	42%	50%	50%	-8%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Not Arrested		997	70%	75%	69%	-5%	
● Abstinence/Reduced Drug Use		397	28%	55%	37%	-27%	▼
● Stable Living Situation		952	67%	95%	67%	-28%	▼
● Employed		227	16%	50%	25%	-34%	▼
● Self Help		95	7%	60%	13%	-53%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		653	52%	90%	50%	-38%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		200	67%	75%	62%	-8%	

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 106 Active Standard Outpatient Programs

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