Ability Beyond
Bethel, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	268	252	6%
	Admits	78	50	56% ▲
	Discharges	89	54	65% ▲
	Service Hours	1,098	1,234	-11% ▼
	Bed Days	12,281	13,168	-7%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Employment Services	202	72.1%
	Residential Services	78	27.9%

Consumer Satisfaction Survey

(Based on 118 FY21 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Overall		93%	80%	91%
✓	Quality and Appropriateness		92%	80%	93%
✓	Access		92%	80%	88%
✓	Participation in Treatment		90%	80%	92%
✓	Outcome		87%	80%	83%
✓	Respect		86%	80%	91%
✓	General Satisfaction		84%	80%	92%
●	Recovery		78%	80%	79%

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

Client Demographics

Age	#	%	State Avg
18-25	49	18%	9%
26-34	69	26%	21%
35-44	43	16%	23%
45-54	46	17%	19%
55-64	47	18%	19%
65+	14	5%	9%

Gender	#	%	State Avg
Male	156	58%	59%
Female	112	42%	41%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	231	86% ▲	68%
Hispanic-Other	24	9%	8%
Hisp-Puerto Rican	5	2%	11%
Unknown	5	2%	11%
Hispanic-Cuban	2	1%	0%
Hispanic-Mexican	1	0%	1%

Race	#	%	State Avg
White/Caucasian	182	68%	62%
Black/African American	43	16%	17%
Other	33	12%	13%
Asian	6	2%	1%
Am. Indian/Native Alaskan	2	1%	0%
Multiple Races	2	1%	1%
Hawaiian/Other Pacific Islander			0%
Unknown			6%

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.

Beecher House ABI/TBI - 165
Ability Beyond
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	5	-20% ▼
Admits	-	-	
Discharges	-	1	-100% ▼
Bed Days	736	874	-16% ▼

Data Submission Quality

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

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	86%
SA Screen Complete	N/A	96%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							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	80%	73%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	92%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	70%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		4	100%	60%	82%	40% ▲
✓ Stable Living Situation		4	100%	90%	97%	10%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		5	2,234 days	0.6	80%	90%	93%	-10%

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

▲ > 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.

Corbin YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3	2	50%	▲
Admits	-	-		
Discharges	-	-		
Bed Days	552	368	50%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	98%
SA Screen Complete	N/A	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							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	60%	75%	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%	81%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		2	67%	60%	86%	7%
✓ Stable Living Situation		3	100%	95%	96%	5%
● Employed		0	0%	25%	13%	-25% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		3	1,022 days	0.5	100%	90%	94%	10%

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

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Employment Svs (YAS)
Ability Beyond
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	4	75%	▲
Admits	3	-		
Discharges	4	-		
Service Hours	64	96	-33%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		2	29%	35%	49%	-6%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		3	100%	90%	94%	10%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	91%

On-Time Periodic	Actual	State Avg
6 Month Updates	100%	89%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		■				■	33%
Discharges			■		■	■	50%
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.

Employment Svs Reg 1 - 271 (Norwalk)
Ability Beyond
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	72	78	-8%	
Admits	15	19	-21%	▼
Discharges	30	22	36%	▲
Service Hours	347	330	5%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		45	62%	35%	49%	27%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		43	100%	90%	94%	10%

Data Submission Quality

	Data Entry	Actual	State Avg
✓	Valid NOMS Data	100%	91%

	On-Time Periodic	Actual	State Avg
✓	6 Month Updates	100%	89%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■	■	■		83%
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 39 Active Employment Services Programs

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

Employment Svs Reg 5 - 270 (Danbury)
Ability Beyond
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	124	108	15%	▲
Admits	50	24	108%	▲
Discharges	41	27	52%	▲
Service Hours	686	808	-15%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		74	58%	35%	49%	23%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		86	99%	90%	94%	9%

Data Submission Quality

	Data Entry	Actual	State Avg
✓	Valid NOMS Data	100%	91%

	On-Time Periodic	Actual	State Avg
✓	6 Month Updates	100%	89%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 39 Active Employment Services Programs

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

Program Activity

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 5 Active Fiduciary Programs

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

Grand YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3	3	0%
Admits	-	-	
Discharges	1	-	
Bed Days	407	552	-26% ▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	98%
SA Screen Complete	N/A	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges		■					17%

■ 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%	60%	75%	40% ▲
● Follow-up within 30 Days of Discharge		0	0%	90%	81%	-90% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		3	100%	60%	86%	40% ▲
✓ Stable Living Situation		3	100%	95%	96%	5%
● Employed		0	0%	25%	13%	-25% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		3	628 days	0.6	74%	90%	94%	-16% ▼

■ < 90% ■ 90-110% ■ >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Kelly YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	-	-	
Discharges	-	-	
Bed Days	736	736	0%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	98%
SA Screen Complete	N/A	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							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	60%	75%	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%	81%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		4	100%	60%	86%	40% ▲
✓ Stable Living Situation		4	100%	95%	96%	5%
● Employed		0	0%	25%	13%	-25% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		4	1,269 days	0.5	100%	90%	94%	10%

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

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Nicholas YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	9	9	0%
Admits	2	-	
Discharges	-	-	
Bed Days	1,576	1,656	-5%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

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

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	98%
✓ SA Screen Complete	100%	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							33%
Discharges							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	60%	75%	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%	81%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		9	100%	60%	86%	40% ▲
✓ Stable Living Situation		9	100%	95%	96%	5%
● Employed		0	0%	25%	13%	-25% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		9	1,029 days	0.5	95%	90%	94%	5%

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Sheffield 1 YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	6	-17%	▼
Admits	-	2	-100%	▼
Discharges	-	-		
Bed Days	920	994	-7%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	98%
SA Screen Complete	N/A	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							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	60%	75%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	81%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		5	100%	60%	86%	40%	▲
✓ Stable Living Situation		5	100%	95%	96%	5%	
● Employed		0	0%	25%	13%	-25%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		7	1,116 days	0.7	71%	90%	94%	-19% ▼

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Sheffield 2 YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	4	25%	▲
Admits	-	-		
Discharges	-	-		
Bed Days	920	736	25%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	98%
SA Screen Complete	N/A	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							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	60%	75%	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%	81%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		5	100%	60%	86%	40%	▲
✓ Stable Living Situation		5	100%	95%	96%	5%	
● Employed		0	0%	25%	13%	-25%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	435 days	0.5	100%	90%	94%	10%

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Starr YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	7	0%	
Admits	2	1	100%	▲
Discharges	2	1	100%	▲
Bed Days	824	1,080	-24%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

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

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	98%
✓ SA Screen Complete	100%	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		■				■	33%
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		2	100%	60%	75%	40%	▲
✓ Follow-up within 30 Days of Discharge		2	100%	90%	81%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		7	100%	60%	86%	40%	▲
✓ Stable Living Situation		7	100%	95%	96%	5%	
● Employed		1	14%	25%	13%	-11%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		6	904 days	0.5	75%	90%	94%	-15%	▼

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Supervised Res Recovery Program 250
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	10	20%	▲
Admits	2	1	100%	▲
Discharges	2	-		
Bed Days	1,820	1,835	-1%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

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

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	98%
✓ SA Screen Complete	100%	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							33%
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%	60%	75%	-60%	▼

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	81%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		11	92%	60%	86%	32%	▲
✓ Employed		3	25%	25%	13%	0%	
Stable Living Situation		11	92%	95%	96%	-3%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		10	725 days	0.5	99%	90%	94%	9%

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

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Supervised Res Support Program 251
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	19	18	6%	
Admits	4	2	100%	▲
Discharges	7	2	250%	▲
Bed Days	2,410	2,895	-17%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

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

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	98%
✓ SA Screen Complete	100%	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		■	■	■		■	67%
Discharges	■	■	■	■		■	83%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		5	71%	60%	75%	11%	▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		5	100%	90%	81%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		18	95%	60%	86%	35%	▲
✓ Employed		6	32%	25%	13%	7%	
✓ 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	■ ■ ■ ■ ■ ■	16	717 days	0.5	82%	90%	94%	-8%

■ < 90% ■ 90-110% ■ >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Unionville House ABI/TBI - 166
Ability Beyond
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	5	-20%	▼
Admits	-	1	-100%	▼
Discharges	-	1	-100%	▼
Bed Days	736	706	4%	

Data Submission Quality

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

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	86%
SA Screen Complete	N/A	96%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							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	80%	73%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	92%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	70%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		3	75%	60%	82%	15% ▲
✓ Stable Living Situation		4	100%	90%	97%	10%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		4	1,912 days	0.5	100%	90%	93%	10%

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

▲ > 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.

Woodland House ABI/TBI - 167
Ability Beyond
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	-	-	
Discharges	2	-	
Bed Days	644	736	-13% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	95%	99%

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	86%
SA Screen Complete	N/A	96%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							17%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		2	100%	80%	73%	20% ▲
✓ No Re-admit within 30 Days of Discharge		2	100%	85%	92%	15% ▲
● Follow-up within 30 Days of Discharge		1	50%	90%	70%	-40% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		4	100%	90%	97%	10%
● Social Support		2	50%	60%	82%	-10%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		4	2,163 days	0.5	88%	90%	93%	-2%

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

▲ > 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.