BH Care
North Haven, 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	2,427	2,334	4%
	Admits	542	649	-16% ▼
	Discharges	796	726	10%
	Service Hours	14,883	15,587	-5%
	Bed Days	8,132	7,428	9%
	S.Rehab/PHP/IOP	1,734	315	450%

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

Consumer Satisfaction Survey (Based on 146 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Quality and Appropriateness		90%	80%	93%
✓ Respect		88%	80%	91%
✓ General Satisfaction		88%	80%	92%
✓ Overall		86%	80%	91%
✓ Participation in Treatment		86%	80%	92%
✓ Access		83%	80%	88%
● Outcome		77%	80%	83%
● Recovery		69%	80%	79%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Outpatient	2,039	62.7%
	Community Support	295	9.1%
	Social Rehabilitation	162	5.0%
	Case Management	161	5.0%
	Employment Services	157	4.8%
	Residential Services	52	1.6%
Forensic MH			
	Forensics Community-based	215	6.6%
Addiction			
	Outpatient	92	2.8%
	Medication Assisted Treatment	19	0.6%
	Employment Services	13	0.4%
Other			
	Other	46	1.4%

Client Demographics

Age	#	%	State Avg
18-25	291	12%	9%
26-34	387	16%	21%
35-44	421	17%	23%
45-54	432	18%	19%
55-64	566	23%	19%
65+	330	14%	9%

Gender	#	%	State Avg
Female	1,280	53% ▲	41%
Male	1,146	47% ▼	59%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	2,128	88% ▲	68%
Hispanic-Other	134	6%	8%
Hisp-Puerto Rican	97	4%	11%
Unknown	59	2%	11%
Hispanic-Mexican	9	0%	1%
Hispanic-Cuban			0%

Race	#	%	State Avg
White/Caucasian	1,953	80% ▲	62%
Black/African American	247	10%	17%
Other	115	5%	13%
Unknown	91	4%	6%
Asian	17	1%	1%
Am. Indian/Native Alaskan	4	0%	0%
Multiple Races			1%
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.

Bettor Choice Shorline
BH Care
Addiction - Outpatient - Gambling Outpatient

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		
Admits	5	-	
Discharges	1	-	
Service Hours	20	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	93%	95%
✓ Valid TEDS Data	33%	38%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	76%

Co-occurring	Actual	State Avg
MH Screen Complete	60%	96%
SA Screen Complete	60%	97%

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			■				17%
Discharges						■	17%
Services				■	■	■	50%

■ 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%	75%	65%	25% ▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		4	100%	90%	87%	10%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days		4	80%	75%	78%	5%

▲ > 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.

Bettor Choice Valley
BH Care
Addiction - Outpatient - Gambling Outpatient

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		
Admits	4	-	
Discharges	-	-	
Service Hours	2	-	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	95%
Valid TEDS Data	0%	38%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	76%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	96%
✓ SA Screen Complete	100%	97%

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	50%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions			■		■	■	50%
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	75%	65%	N/A

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		2	50%	90%	87%	-40% ▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		1	25%	75%	78%	-50% ▼

▲ > 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.

BH Care Rental Assistance CT 0062
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

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	36	35	3%
Admits	2	4	-50% ▼
Discharges	2	-	
Service Hours	129	46	180% ▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		33	92%	85%	88%	7%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		34	100%	90%	96%	10%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	65%	96%

On-Time Periodic	Actual	State Avg
6 Month Updates	13%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions			■		■		33%
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 109 Active Supportive Housing – Scattered Site Programs

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

BHcare Voc Services DMHAS Valley
BH Care
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	83	81	2%	
Admits	18	20	-10%	
Discharges	17	20	-15%	▼
Service Hours	380	459	-17%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Employed		54	65%	35%	49%	30%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		61	92%	90%	94%	2%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	91%

On-Time Periodic	Actual	State Avg
6 Month Updates	58%	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.

BHH ADULT NAE
BH Care
Mental Health - Outpatient - Standard Outpatient

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	198	235	-16%	▼
Admits	18	36	-50%	▼
Discharges	47	76	-38%	▼
Service Hours	148	71	108%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	87%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	1%	55%

Co-occurring	Actual	State Avg
MH Screen Complete	78%	89%
SA Screen Complete	72%	89%

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	86%	98%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		7	15%	50%	42%	-35% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Social Support		116	59%	60%	59%	-1%
● Employed		27	14%	30%	23%	-16% ▼
● Stable Living Situation		117	59%	95%	69%	-36% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		85	56%	90%	80%	-34% ▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		1	6%	75%	77%	-69% ▼

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

BHH CHILDREN Program
BH Care
Mental Health - Case Management - Outreach & Engagement

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	1	1	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%	93%	-50%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 47 Active Outreach & Engagement Programs

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

BOS - 134
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

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	16	16	0%
Admits	-	-	
Discharges	2	-	
Service Hours	63	70	-10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		16	100%	85%	88%	15% ▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		13	93%	90%	96%	3%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	95%	96%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	43%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges					■		17%
Services	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 109 Active Supportive Housing – Scattered Site Programs

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

BOS 193 Units Valley/Shoreline
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

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	1	-	
Discharges	2	-	
Service Hours	51	108	-53%

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		18	95%	85%	88%	10%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Clients Receiving Services		14	82%	90%	96%	-8%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	75%	96%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	29%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 109 Active Supportive Housing – Scattered Site Programs

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

Coach 2.0
BH Care
Mental Health - Case Management - Standard Case Management

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		
Admits	4	-	
Discharges	-	-	
Service Hours	9	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	60%	94%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	55%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							17%
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%	64%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		2	50%	60%	69%	-10%
Employed		0	0%	20%	15%	-20%
Stable Living Situation		0	0%	80%	72%	-80%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		4	100%	90%	80%	10%

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 30 Active Standard Case Management Programs

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

Harbor House Group Residence
BH Care
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	9	7	29%	▲
Admits	-	-		
Discharges	-	-		
Bed Days	1,656	1,288	29%	▲

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	89%	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		9	100%	60%	82%	40%	▲
✓ Stable Living Situation		9	100%	90%	97%	10%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Avg Utilization Rate		8	1,834 days	0.4	113%	90%	93%	22%	▲

< 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.

HARP Supervised Apts
BH Care
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	25	23	9%	
Admits	2	1	100%	▲
Discharges	3	1	200%	▲
Service Hours	250	263	-5%	
Bed Days	4,214	4,169	1%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	77%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	86%	93%

Co-occurring	Actual	State Avg
MH Screen Complete	50%	98%
SA Screen Complete	50%	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	■		■	■			50%
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		2	67%	60%	75%	7%

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 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		22	85%	60%	86%	25%	▲
✓ Stable Living Situation		25	96%	95%	96%	1%	
● 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	■■■■■■	21	2,109 days	0.4	109%	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.

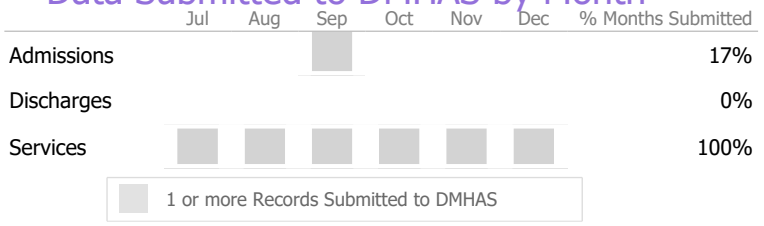
Integrated Behavioral Health - Shoreline
BH Care
Other - Other - Integrated Primary Care

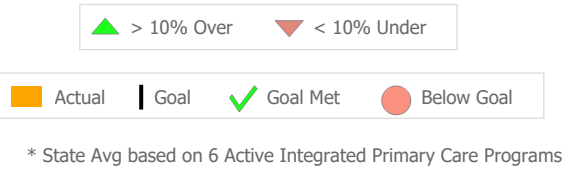
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	40	39	3%
Admits	1	1	0%
Discharges	-	1	-100%
Service Hours	1		

Data Submitted to DMHAS by Month





* State Avg based on 6 Active Integrated Primary Care Programs

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

Integrated Behavioral Health - Valley
BH Care
Other - Other - Integrated Primary Care

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	6	7	-14%	▼
Admits	-	-		
Discharges	-	1	-100%	▼
Service Hours	-	-		

Data Submission Quality

Data Entry	Actual	State Avg

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	73%
SA Screen Complete	N/A	83%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 6 Active Integrated Primary Care Programs

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

Options SR
BH Care
Mental Health - Social Rehabilitation - Social Rehabilitation

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	66	67	-1%	
Admits	5	-		
Discharges	18	7	157%	▲
Service Hours	2	-		
Social Rehab/PHP/IOP Days	738	157	370%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		33	69%	90%	70%	-21%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■	■			67%
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 34 Active Social Rehabilitation Programs

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

Options Vocational Program
BH Care
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	77	73	5%	
Admits	18	15	20%	▲
Discharges	30	14	114%	▲
Service Hours	81	210	-62%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Employed		35	44%	35%	49%	9%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		35	71%	90%	94%	-19%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	62%	91%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	56%	89%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■				50%
Discharges	■	■	■	■	■		83%
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.

Shoreline Crisis-Jail Div 304-341
BH Care
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

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

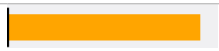
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	155	124	25%	▲
Admits	77	55	40%	▲
Discharges	96	37	159%	▲
Service Hours	342	127	169%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		56	86%	90%	67%	-4%

Jail Diversion

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Follow-up Service within 48 hours		23	92%	0%	54%	92%	▲

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 19 Active Court Liaison-Jail Diversion Programs

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

Shoreline E.Haven OP 368-210
BH Care
Mental Health - Outpatient - Standard Outpatient

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	0	86		▼
Admits	-	9	-100%	▼
Discharges	-	5	-100%	▼
Service Hours	-	566	-100%	▼

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	55%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	89%
SA Screen Complete	N/A	89%

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	50%	42%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		N/A	N/A	30%	23%	-30%	▼
Social Support		N/A	N/A	60%	59%	-60%	▼
Stable Living Situation		N/A	N/A	95%	69%	-95%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		N/A	N/A	90%	80%	N/A	▼

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

Shoreline HHS CSP/RP 373X
BH Care
Mental Health - Community Support - CSP

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	122	139	-12%	▼
Admits	17	6	183%	▲
Discharges	30	61	-51%	▼
Service Hours	563	546	3%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	89%	83%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	14%	83%

Co-occurring	Actual	State Avg
MH Screen Complete	89%	96%
SA Screen Complete	89%	95%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		19	63%	65%	57%	-2%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		109	89%	60%	80%	29%	▲
✓ Stable Living Situation		115	94%	80%	86%	14%	▲
● Employed		13	11%	20%	14%	-9%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		86	93%	90%	98%	3%

▲ > 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.

Shoreline N Haven OP 370-210
BH Care
Mental Health - Outpatient - Standard Outpatient

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	98	93	5%	
Admits	10	7	43%	▲
Discharges	9	7	29%	▲
Service Hours	679	829	-18%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	87%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	61%	55%

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

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■		■	■	■	83%
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		8	89%	50%	42%	39%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		96	98%	60%	59%	38%	▲
✓ Employed		35	36%	30%	23%	6%	
✓ Stable Living Situation		96	98%	95%	69%	3%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		89	100%	90%	80%	10%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ 2 or more Services within 30 days		9	90%	75%	77%	15%	▲

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

Shoreline Pilots Support Hsng 304-551
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

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	14	-50%	▼
Admits	1	-		
Discharges	1	8	-88%	▼
Service Hours	5	57	-92%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		6	86%	85%	88%	1%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Clients Receiving Services		5	83%	90%	96%	-7%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	80%	96%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	33%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■						17%
Discharges					■		17%
Services	■	■	■		■	■	83%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 109 Active Supportive Housing – Scattered Site Programs

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

Shoreline SA Clinic 304725
BH Care
Addiction - Outpatient - Standard Outpatient

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	83	75	11%	▲
Admits	28	35	-20%	▼
Discharges	38	34	12%	▲
Service Hours	371	462	-20%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	84%	87%
✓ Valid TEDS Data	88%	87%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	47%	18%

Co-occurring	Actual	State Avg
MH Screen Complete	50%	95%
SA Screen Complete	50%	95%

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	■	■	■		■	■	83%
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		20	53%	50%	50%	3%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		51	61%	55%	39%	6%
● Employed		36	43%	50%	30%	-7%
● Stable Living Situation		69	82%	95%	72%	-13% ▼
● Not Arrested		52	62%	75%	74%	-13% ▼
● Self Help		22	26%	60%	14%	-34% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		38	83%	90%	55%	-7%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days		22	79%	75%	63%	4%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 107 Active Standard Outpatient Programs

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

Shoreline Sycamore Way -OP Clin 304-211
BH Care
Mental Health - Outpatient - Standard Outpatient

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	903	870	4%	
Admits	127	231	-45%	▼
Discharges	156	210	-26%	▼
Service Hours	4,120	4,155	-1%	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	86%	87%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	61%	55%

Co-occurring	Actual	State Avg
MH Screen Complete	71%	89%
SA Screen Complete	69%	89%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		72	46%	50%	42%	-4%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		607	67%	60%	59%	7%
● Employed		220	24%	30%	23%	-6%
● Stable Living Situation		780	86%	95%	69%	-9%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		699	92%	90%	80%	2%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		74	60%	75%	77%	-15% ▼

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

SOR - Employment
BH Care
Addiction - 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	13	18	-28%	▼
Admits	6	3	100%	▲
Discharges	5	11	-55%	▼
Service Hours	21	9	140%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		8	62%	35%	34%	27%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Clients Receiving Services		7	88%	90%	83%	-2%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	65%	84%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	0%	70%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■				50%
Discharges		■		■	■	■	67%
Services	■	■	■	■			67%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 10 Active Employment Services Programs

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

SOR E-MAT
BH Care
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

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	18	12	50%	▲
Admits	1	3	-67%	▼
Discharges	5	4	25%	▲
Service Hours	146	98	49%	▲

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	81%	91%
Valid TEDS Data	76%	92%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	92%	24%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	75%
✓ SA Screen Complete	100%	93%

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			■				17%
Discharges	■	■		■		■	67%
Services	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully	2	40%	50%	48%	-10% ▼

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use	13	72%	55%	41%	17% ▲
✓ Not Arrested	15	83%	75%	62%	8%
✓ Stable Living Situation	18	100%	95%	59%	5%
● Employed	6	33%	50%	20%	-17% ▼
● Self Help	2	11%	60%	14%	-49% ▼

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services	13	100%	90%	37%	10%

▲ > 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.

SOR-MAT-Naltrexone
BH Care
Addiction - Medication Assisted Treatment - Naltrexone

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	1	4	-75%	▼
Admits	-	1	-100%	▼
Discharges	-	1	-100%	▼
Service Hours	1	11	-91%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	95%
Valid TEDS Data	N/A	100%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	5%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	87%
SA Screen Complete	N/A	96%

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services	■			■		■	50%

■ 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%	50%	-50%	▼
Abstinence/Reduced Drug Use		0	0%	55%	66%	-55%	▼
Self Help		0	0%	60%	39%	-60%	▼
Not Arrested		0	0%	75%	89%	-75%	▼
Stable Living Situation		0	0%	95%	84%	-95%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		1	100%	90%	84%	10%

▲ > 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.

Valley ABI Residence311165
BH Care
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	3	3	0%
Admits	-	-	
Discharges	-	-	
Bed Days	552	552	0%

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
● 6 Month Updates	67%	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	100%	60%	82%	40% ▲
✓ Stable Living Situation		3	100%	90%	97%	10%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		3	4,227 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.

Valley CSP/RP 311350
BH Care
Mental Health - Community Support - CSP

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	173	215	-20%	▼
Admits	12	24	-50%	▼
Discharges	28	43	-35%	▼
Service Hours	1,280	1,455	-12%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	97%	83%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	81%	83%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	96%
✓ SA Screen Complete	100%	95%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■			■	■	67%
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		24	86%	65%	57%	21%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		163	94%	60%	80%	34%	▲
✓ Stable Living Situation		161	93%	80%	86%	13%	▲
● Employed		25	14%	20%	14%	-6%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		142	97%	90%	98%	7%

▲ > 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.

Valley Howe Ave. Res. Apts.311-250X
BH Care
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	5	0%
Admits	-	-	
Discharges	-	1	-100% ▼
Bed Days	920	799	15% ▲

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
● 6 Month Updates	20%	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	80%	60%	86%	20% ▲
✓ 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	2,230 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.

Valley Jail Diversion 311-341
BH Care
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

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	60	35	71%	▲
Admits	19	4	375%	▲
Discharges	11	-		
Service Hours	39	20	90%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		26	53%	90%	67%	-37%	▼

Jail Diversion

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up Service within 48 hours		0	0%	0%	54%	0%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							83%
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 19 Active Court Liaison-Jail Diversion Programs

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

Valley Next Steps Dev. 2
BH Care
Mental Health - Case Management - Supportive Housing – Development

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	22	-45%	▼
Admits	1	-		
Discharges	-	12	-100%	▼
Service Hours	40	112	-65%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		9	75%	85%	94%	-10%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		11	92%	90%	95%	2%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	75%	98%

On-Time Periodic	Actual	State Avg
6 Month Updates	27%	86%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		■					17%
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 65 Active Supportive Housing – Development Programs

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

Valley OP Clinic 311210
BH Care
Mental Health - Outpatient - Standard Outpatient

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	950	871	9%	
Admits	137	172	-20%	▼
Discharges	249	138	80%	▲
Service Hours	5,251	4,615	14%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	97%	87%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	60%	55%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	98%	89%
✓ SA Screen Complete	98%	89%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		126	51%	50%	42%	1%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		796	83%	60%	59%	23%	▲
✓ Employed		284	30%	30%	23%	0%	
● Stable Living Situation		816	85%	95%	69%	-10%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		685	96%	90%	80%	6%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days		110	81%	75%	77%	6%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

Valley Pilots Support.Housing311-551
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

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	21	-67%	▼
Admits	-	2	-100%	▼
Discharges	-	14	-100%	▼
Service Hours	8	79	-90%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Stable Living Situation		5	71%	85%	88%	-14%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		5	71%	90%	96%	-19%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	80%	96%

On-Time Periodic	Actual	State Avg
6 Month Updates	43%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 109 Active Supportive Housing – Scattered Site Programs

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

Valley Social Rehabilitation 311-280
BH Care
Mental Health - Social Rehabilitation - Social Rehabilitation

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	96	107	-10%	▼
Admits	10	4	150%	▲
Discharges	22	4	450%	▲
Service Hours	-	-		
Social Rehab/PHP/IOP Days	996	158	530%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		60	81%	90%	70%	-9%

Data Submitted to DMHAS by Month

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

Valley Young Adults 311-220Y
BH Care
Mental Health - Case Management - Standard Case Management

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	35	38	-8%	
Admits	6	11	-45%	▼
Discharges	16	9	78%	▲
Service Hours	570	776	-26%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	94%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	55%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		9	56%	50%	64%	6%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		35	97%	60%	69%	37%	▲
✓ Stable Living Situation		32	89%	80%	72%	9%	
✓ Employed		8	22%	20%	15%	2%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		19	95%	90%	80%	5%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		■		■	■	■	67%
Discharges		■	■	■	■	■	83%
Services	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 30 Active Standard Case Management Programs

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

Woodbridge House YAS
BH Care
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	10	7	43%	▲
Admits	6	3	100%	▲
Discharges	4	3	33%	▲
Bed Days	790	620	27%	▲

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	50%	98%
SA Screen Complete	50%	88%

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	90%	99%

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		3	75%	60%	75%	15%	▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		3	100%	90%	81%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		9	90%	60%	86%	30%	▲
● Stable Living Situation		8	80%	95%	96%	-15%	▼
● Employed		1	10%	25%	13%	-15%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		5	231 days	0.4	86%	90%	94%	-4%

< 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.

Young Adults Shoreline - 556
BH Care
Mental Health - Case Management - Standard Case Management

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	24	23	4%	
Admits	6	2	200%	▲
Discharges	4	4	0%	
Service Hours	313	443	-29%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	94%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	93%	55%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		3	75%	50%	64%	25%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		21	88%	60%	69%	28%	▲
✓ Employed		9	38%	20%	15%	18%	▲
✓ Stable Living Situation		22	92%	80%	72%	12%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		17	85%	90%	80%	-5%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■			■	■	■	67%
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 30 Active Standard Case Management Programs

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