Community Mental Health Affiliates
New Britain, 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	2,311	2,250	3%	
	Admits	1,064	954	12%	▲
	Discharges	1,169	855	37%	▲
	Service Hours	31,259	30,079	4%	
	Bed Days	11,779	11,908	-1%	
	S.Rehab/PHP/IOP	2,090			

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Outpatient	1,276	41.4%
	Crisis Services	284	9.2%
	Case Management	203	6.6%
	Social Rehabilitation	193	6.3%
	ACT	144	4.7%
	Community Support	134	4.3%
	Employment Services	82	2.7%
	Residential Services	75	2.4%
Forensic MH			
	Forensics Community-based	311	10.1%
	Outpatient	234	7.6%
	Case Management	2	0.1%
Addiction			
	Medication Assisted Treatment	90	2.9%
	Outpatient	41	1.3%
	Recovery Support	14	0.5%

Consumer Satisfaction Survey   (Based on 451 FY21 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Quality and Appropriateness		94%	80%	93%
✓	Participation in Treatment		93%	80%	92%
✓	Respect		92%	80%	91%
✓	General Satisfaction		91%	80%	92%
✓	Overall		90%	80%	91%
✓	Access		89%	80%	88%
🔴	Outcome		72%	80%	83%
🔴	Recovery		66%	80%	79%

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

Client Demographics

Age	#	%	State Avg
18-25	318	14%	9%
26-34	452	20%	21%
35-44	512	22%	23%
45-54	409	18%	19%
55-64	441	19%	19%
65+	169	7%	9%

Gender	#	%	State Avg
Male	1,174	51%	59%
Female	1,137	49%	41%
Transgender			0%

Ethnicity	#	%		State Avg
Non-Hispanic	1,191	52%	▼	68%
Hisp-Puerto Rican	697	30%	▲	11%
Unknown	293	13%		11%
Hispanic-Other	123	5%		8%
Hispanic-Mexican	6	0%		1%
Hispanic-Cuban	1	0%		0%

Race	#	%		State Avg
White/Caucasian	1,245	54%		62%
Other	612	26%	▲	13%
Black/African American	344	15%		17%
Unknown	87	4%		6%
Asian	11	0%		1%
Am. Indian/Native Alaskan	10	0%		0%
Hawaiian/Other Pacific Islander	2	0%		0%
Multiple Races				1%

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.

Adult OP - Torrington 603216
Community Mental Health Affiliates
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	176	178	-1%	
Admits	53	127	-58%	▼
Discharges	56	29	93%	▲
Service Hours	1,238	1,414	-12%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		99%	87%

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

Co-occurring		Actual	State Avg
✓ MH Screen Complete		91%	89%
✓ SA Screen Complete		90%	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		30	54%	50%	42%	4%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		161	90%	60%	59%	30%	▲
● Stable Living Situation		166	93%	95%	69%	-2%	
● Employed		45	25%	30%	23%	-5%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		121	99%	90%	80%	9%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days		45	85%	75%	77%	10%

Legend:
▲ > 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.

Adult Outpatient 603-214
Community Mental Health Affiliates
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	1,071	952	13%	▲
Admits	333	269	24%	▲
Discharges	339	230	47%	▲
Service Hours	8,392	7,903	6%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		97%	55%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		90%	89%
✓ SA Screen Complete		92%	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		111	33%	50%	42%	-17%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		922	85%	60%	59%	25%	▲
🔴 Stable Living Situation		993	91%	95%	69%	-4%	
🔴 Employed		221	20%	30%	23%	-10%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Clients Receiving Services		734	98%	90%	80%	8%	

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ 2 or more Services within 30 days		306	93%	75%	77%	18%	▲

▲ > 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.

Assertive Comm Tx Team 603292
Community Mental Health Affiliates
Mental Health - ACT - Assertive Community Treatment

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	76	75	1%	
Admits	12	8	50%	▲
Discharges	12	5	140%	▲
Service Hours	4,366	3,100	41%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		8	67%	65%	52%	2%	
✓	No Re-admit within 30 Days of Discharge		12	100%	85%	96%	15%	▲
●	Follow-up within 30 Days of Discharge		4	50%	90%	46%	-40%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	84%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	94%	89%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	95%
✓	SA Screen Complete	100%	93%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		76	100%	60%	79%	40%	▲
✓	Stable Living Situation		74	97%	60%	92%	37%	▲
●	Employed		5	7%	15%	16%	-8%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		64	100%	90%	99%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							83%
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 23 Active Assertive Community Treatment Programs

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

BHH ADULT NAE
Community Mental Health Affiliates
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	16	24	-33%	▼
Admits	12	5	140%	▲
Discharges	5	17	-71%	▼
Service Hours	22	144	-84%	▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		75%	55%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		93%	89%
✓ SA Screen Complete		93%	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							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	20%	50%	42%	-30%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		15	94%	60%	59%	34%	▲
●	Stable Living Situation		13	81%	95%	69%	-14%	▼
●	Employed		1	6%	30%	23%	-24%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Clients Receiving Services		9	82%	90%	80%	-8%

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	2 or more Services within 30 days		2	17%	75%	77%	-58%	▼

▲ > 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
Community Mental Health Affiliates
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	11	30	-63%	▼
Admits	-	4	-100%	▼
Discharges	4	16	-75%	▼
Service Hours	37	109	-66%	▼

Data Submission Quality

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

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		3	75%	50%	42%	25%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		11	100%	60%	59%	40%	▲
✔ Stable Living Situation		11	100%	95%	69%	5%	
● Employed		1	9%	30%	23%	-21%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		7	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		0	0%	75%	77%	-75%	▼

Data Submitted to DMHAS by Month
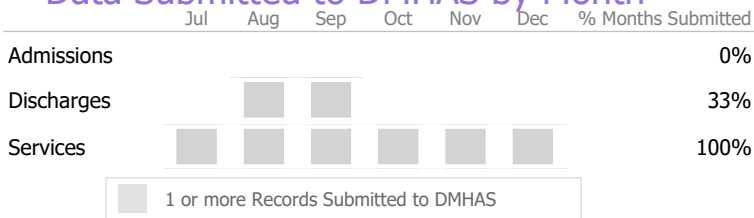
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges		▢	▢				33%
Services	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

Choices Comm Pgm-YAS 603373
Community Mental Health Affiliates
Mental Health - ACT - Assertive Community Treatment

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	71	74	-4%	
Admits	9	13	-31%	▼
Discharges	9	7	29%	▲
Service Hours	2,640	3,784	-30%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		6	67%	65%	52%	2%	
✓	No Re-admit within 30 Days of Discharge		9	100%	85%	96%	15%	▲
●	Follow-up within 30 Days of Discharge		1	17%	90%	46%	-73%	▼

Recovery

National Recovery Measures (NOMS)

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		70	97%	60%	79%	37%	▲
✓	Stable Living Situation		69	96%	60%	92%	36%	▲
●	Employed		8	11%	15%	16%	-4%	

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	84%

On-Time Periodic		Actual	State Avg
●	6 Month Updates	84%	89%

Co-occurring		Actual	State Avg
	MH Screen Complete	86%	95%
	SA Screen Complete	75%	93%

Diagnosis		Actual	State Avg
	Valid Axis I Diagnosis	97%	98%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		60	95%	90%	99%	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 23 Active Assertive Community Treatment Programs

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

Choices Res Pgm 1-YAS 603-241
Community Mental Health Affiliates
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	9	33%	▲
Admits	5	2	150%	▲
Discharges	5	2	150%	▲
Bed Days	1,498	1,454	3%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		75%	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	▢			▢		▢	50%

▢ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		4	80%	60%	75%	20%	▲
🔴 Follow-up within 30 Days of Discharge		3	75%	90%	81%	-15%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		12	92%	60%	86%	32%	▲
🔴 Stable Living Situation		12	92%	95%	96%	-3%	
🔴 Employed		1	8%	25%	13%	-17%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Avg Utilization Rate		12	588 days	0.6	68%	90%	94%	-22%	▼

☐ < 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.
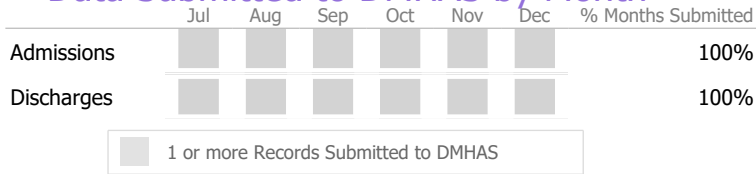
CMHA Mobile Crisis
Community Mental Health Affiliates
Mental Health - Crisis Services - Mobile Crisis Team

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	278	160	74%	▲
Admits	259	171	51%	▲
Discharges	246	165	49%	▲

Crisis

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Evaluation within 1.5 hours of Request		104	94%	75%	70%	19%	▲
✓	Community Location Evaluation		106	95%	80%	69%	15%	▲
✓	Follow-up Service within 48 hours		18	100%	90%	67%	10%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 26 Active Mobile Crisis Team Programs

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

Coach 2.0
Community Mental Health Affiliates
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	42		
Admits	43	-	
Discharges	22	-	
Service Hours	129	-	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Treatment Completed Successfully		3	14%	50%	64%	-36%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		33	77%	60%	69%	17%	▲
●	Employed		6	14%	20%	15%	-6%	
●	Stable Living Situation		12	28%	80%	72%	-52%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		83%	94%

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

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		20	95%	90%	80%	5%

Data Submitted to DMHAS by Month
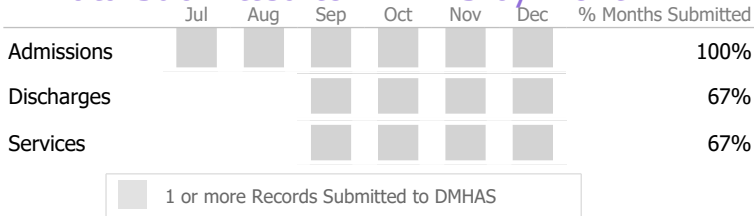
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	100%
Discharges			▪	▪	▪	▪	67%
Services			▪	▪	▪	▪	67%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 30 Active Standard Case Management Programs

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

CORP 2 - Post Release
Community Mental Health Affiliates
Forensic MH - 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	2	6	-67%	▼
Admits	-	-		
Discharges	1	3	-67%	▼
Service Hours	42	86	-51%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	90%

On-Time Periodic		Actual	State Avg
● 6 Month Updates		0%	78%

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

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	88%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		1	100%	50%	25%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		2	100%	60%	71%	40%	▲
✓ Stable Living Situation		2	100%	80%	88%	20%	▲
● Employed		0	0%	20%	6%	-20%	▼
● Self Help		0	0%	60%	82%	-60%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Clients Receiving Services		1	100%	90%	92%	10%	
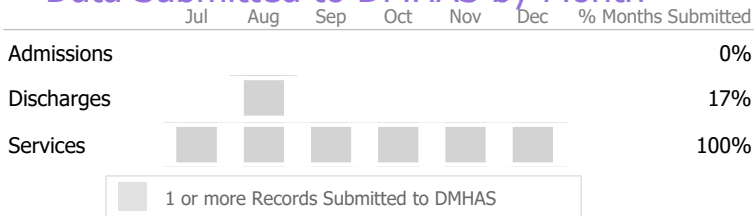
▲ > 10% Over   ▼ < 10% Under

█ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 3 Active Standard Case Management Programs

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

Crisis Services/ Respite Bed Program
Community Mental Health Affiliates
Mental Health - Crisis Services - Respite Bed

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	6	0%	
Admits	5	5	0%	
Discharges	4	5	-20%	▼
Bed Days	261	327	-20%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	No Re-admit within 30 Days of Discharge		4	100%	85%	92%	15%	▲
●	Follow-up within 30 Days of Discharge		3	75%	90%	76%	-15%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
●	Avg Utilization Rate		4	64 days	0.5	35%	90%	52%	-55%	▼

☐ < 90%	☐ 90-110%	☐ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		☐	☐		☐	☐	67%
Discharges			☐	☐			33%

☐ 1 or more Records Submitted to DMHAS
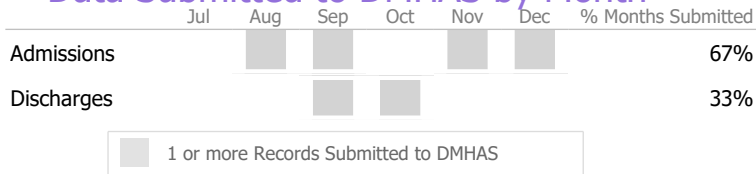
▲ > 10% Over	▼ < 10% Under

☐ Actual		Goal	✓ Goal Met	● Below Goal

* State Avg based on 10 Active Respite Bed Programs

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

CSP/Recovery Pathways 603290, New Britain
Community Mental Health Affiliates
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	134	139	-4%	
Admits	6	23	-74%	▼
Discharges	21	17	24%	▲
Service Hours	2,415	2,687	-10%	

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		98%	83%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	83%

Co-occurring		Actual	State Avg
MH Screen Complete		80%	96%
SA Screen Complete		80%	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							67%
Discharges							83%
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		14	67%	65%	57%	2%	

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		121	90%	60%	80%	30%	▲
✔	Stable Living Situation		129	96%	80%	86%	16%	▲
●	Employed		12	9%	20%	14%	-11%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Clients Receiving Services		113	100%	90%	98%	10%	

▲ > 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.

CT Stay Strong
Community Mental Health Affiliates
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	29	8	263%	▲
Admits	12	8	50%	▲
Discharges	4	-		
Service Hours	633	21		

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	87%

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	0%	55%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	94%	89%
✓	SA Screen Complete	94%	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		▩		▩	▩	▩	67%
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		3	75%	50%	42%	25%	▲

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		27	93%	60%	59%	33%	▲
✓	Stable Living Situation		29	100%	95%	69%	5%	
🔴	Employed		8	28%	30%	23%	-2%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Clients Receiving Services		22	88%	90%	80%	-2%

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	2 or more Services within 30 days		11	92%	75%	77%	17%	▲
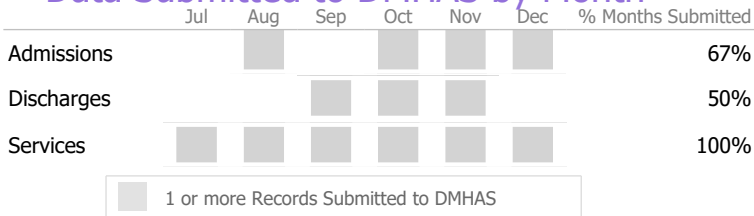
▲ > 10% Over   ▼ < 10% Under

▩ 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.

Ctr for Employment Dev 603-270
Community Mental Health Affiliates
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	82	106	-23%	▼
Admits	28	20	40%	▲
Discharges	45	40	13%	▲
Service Hours	1,164	1,453	-20%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Employed		33	40%	35%	49%	5%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		38	100%	90%	94%	10%

Data Submission Quality

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

Harvest House 603251
Community Mental Health Affiliates
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	8	8	0%
Admits	1	1	0%
Discharges	1	-	
Bed Days	1,358	1,446	-6%

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		100%	86%
✓ SA Screen Complete		100%	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				▇			17%
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%	80%	73%	20%	▲
✓	No Re-admit within 30 Days of Discharge		1	100%	85%	92%	15%	▲
🔴	Follow-up within 30 Days of Discharge		0	0%	90%	70%	-90%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		8	100%	60%	82%	40%	▲
✓	Stable Living Situation		8	100%	90%	97%	10%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		8	1,091 days	0.5	92%	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.

HOCC Polish SA Outpt. 680200
Community Mental Health Affiliates
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	6	6	0%
Admits	-	-	
Discharges	-	-	
Service Hours	49	32	54% ▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	100%	18%

Co-occurring		Actual	State Avg
	MH Screen Complete	N/A	95%
	SA Screen Complete	N/A	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							0%
Discharges							0%
Services							83%

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
✓	Not Arrested		6	100%	75%	74%	25% ▲
✓	Abstinence/Reduced Drug Use		4	67%	55%	39%	12% ▲
✓	Stable Living Situation		6	100%	95%	72%	5%
✓	Employed		3	50%	50%	30%	0%
🔴	Self Help		1	17%	60%	14%	-43% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		6	100%	90%	55%	10%

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	2 or more Services within 30 days		0	0%	75%	63%	-75% ▼

▲ > 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.

Intensive ACTT Res Sup 603-265
Community Mental Health Affiliates
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)
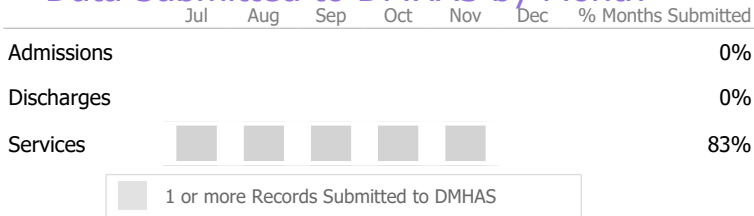
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	14	-14%	▼
Admits	-	2	-100%	▼
Discharges	1	2	-50%	▼
Bed Days	2,119	2,194	-3%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	91%	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							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		1	100%	90%	81%	10%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		12	100%	60%	86%	40%	▲
✓	Stable Living Situation		12	100%	95%	96%	5%	
🔴	Employed		2	17%	25%	13%	-8%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		12	982 days	0.5	96%	90%	94%	6%

	< 90%		90-110%		>110%

▲ > 10% Over   ▼ < 10% Under
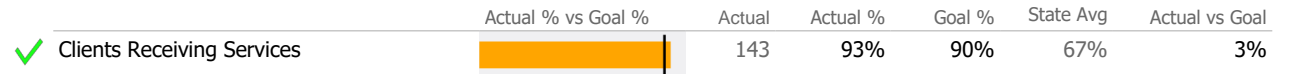
▢ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

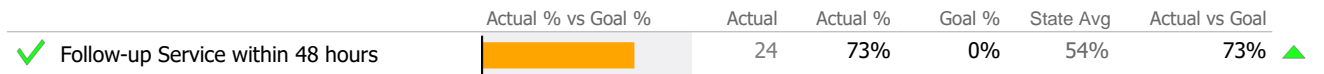Variances in data may be indicative of operational adjustments related to the pandemic.

Jail Diversion   603-341
Community Mental Health Affiliates
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	271	256	6%	
Admits	73	103	-29%	▼
Discharges	119	78	53%	▲
Service Hours	739	364	103%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		143	93%	90%	67%	3%

Jail Diversion

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Follow-up Service within 48 hours		24	73%	0%	54%	73% ▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	100%
Discharges	▢	▢	▢	▢	▢	▢	100%
Services	▢	▢	▢	▢	▢	▢	100%

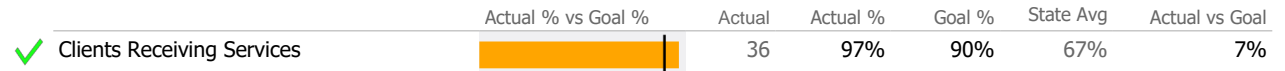▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

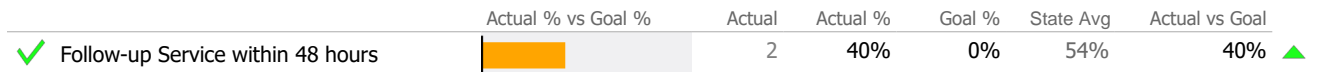* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

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

Jail Diversion-Women 603342
Community Mental Health Affiliates
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	59	83	-29%	▼
Admits	28	22	27%	▲
Discharges	23	33	-30%	▼
Service Hours	707	830	-15%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		36	97%	90%	67%	7%

Jail Diversion

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Follow-up Service within 48 hours		2	40%	0%	54%	40% ▲

▲ > 10% Over	▼ < 10% Under

■ Actual		Goal	✓ Goal Met	● Below Goal

* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

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

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

JD Forensic Counseling Svs
Community Mental Health Affiliates
Forensic MH - 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	234	262	-11%	▼
Admits	86	78	10%	
Discharges	96	86	12%	▲
Service Hours	2,780	3,067	-9%	

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	94%	93%

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	88%	91%

Co-occurring		Actual	State Avg
	MH Screen Complete	81%	84%
	SA Screen Complete	80%	83%

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		38	40%	50%	37%	-10%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		161	67%	60%	63%	7%	
🔴	Employed		67	28%	30%	21%	-2%	
🔴	Stable Living Situation		192	79%	95%	79%	-16%	▼
🔴	Self Help		1	0%	60%	35%	-60%	▼

Service Utilization

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

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	2 or more Services within 30 days		79	94%	75%	95%	19%	▲

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 3 Active Standard Outpatient Programs

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

Latino SA Outpatient 680201
Community Mental Health Affiliates
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	35	43	-19%	▼
Admits	3	7	-57%	▼
Discharges	6	7	-14%	▼
Service Hours	439	559	-21%	▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	100%	18%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	95%
✓	SA Screen Complete	100%	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		▪	▪	▪			50%
Discharges	▪	▪	▪	▪		▪	83%
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		5	83%	50%	50%	33%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		26	74%	55%	39%	19%	▲
✓	Not Arrested		32	91%	75%	74%	16%	▲
●	Stable Living Situation		32	91%	95%	72%	-4%	
●	Employed		0	0%	50%	30%	-50%	▼
●	Self Help		1	3%	60%	14%	-57%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		29	100%	90%	55%	10%

Service Engagement

	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	2 or more Services within 30 days		0	0%	75%	63%	-75%	▼

▲ > 10% Over   ▼ < 10% Under

▪ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 107 Active Standard Outpatient Programs

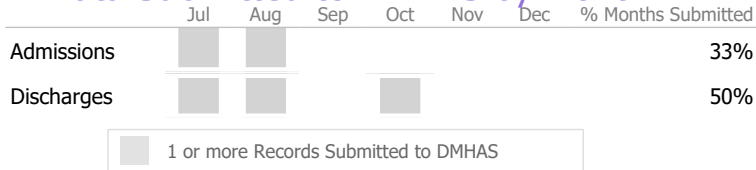Variances in data may be indicative of operational adjustments related to the pandemic.

Living Free 2
Community Mental Health Affiliates
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)
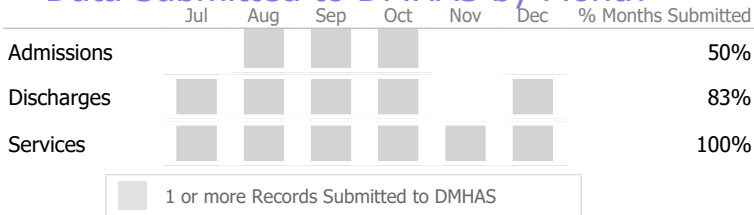
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	46	-61%	▼
Admits	2	15	-87%	▼
Discharges	18	26	-31%	▼

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		14	78%	50%	64%	28%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Employed		7	39%	20%	15%	19%	▲
✓ Social Support		13	72%	60%	69%	12%	▲
● Stable Living Situation		13	72%	80%	72%	-8%	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		91%	94%

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

Data Submitted to DMHAS by Month
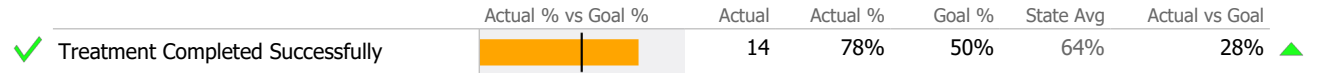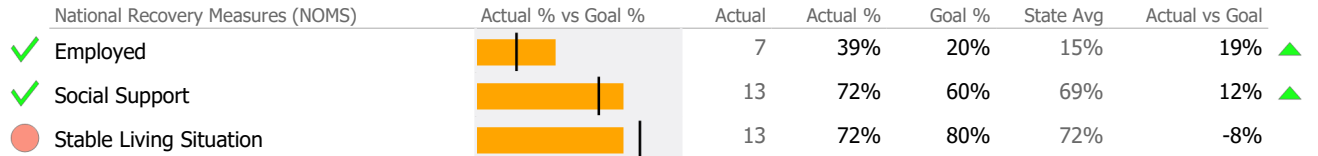
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							33%
Discharges							50%

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

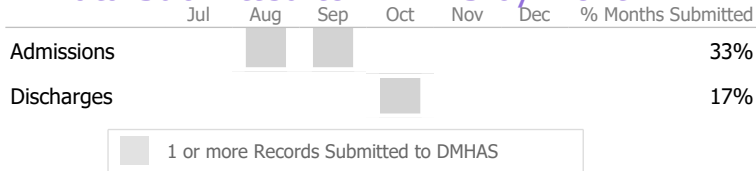Variances in data may be indicative of operational adjustments related to the pandemic.

Living Free In Reach
Community Mental Health Affiliates
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	19	63	-70%	▼
Admits	2	41	-95%	▼
Discharges	19	27	-30%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		70%	94%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		19	100%	50%	64%	50%	▲

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Employed		0	0%	20%	15%	-20%	▼
●	Social Support		5	26%	60%	69%	-34%	▼
●	Stable Living Situation		1	5%	80%	72%	-75%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							33%
Discharges							17%

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

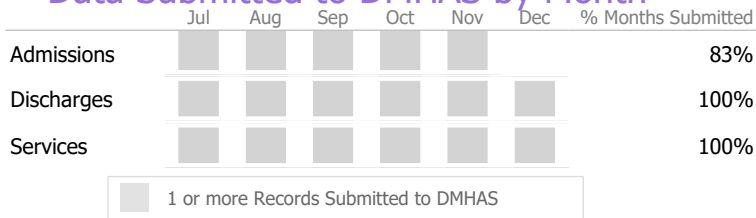Variances in data may be indicative of operational adjustments related to the pandemic.

MACTT-Modified Assertive Community Treatment Team
Community Mental Health Affiliates
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	58	71	-18%	▼
Admits	21	19	11%	▲
Discharges	28	26	8%	
Service Hours	596	705	-15%	▼

Service Engagement
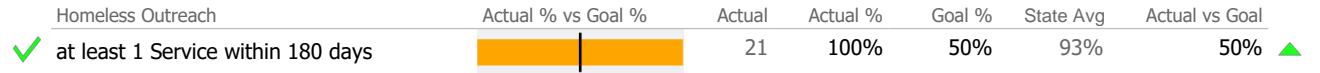
Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ at least 1 Service within 180 days		21	100%	50%	93%	50%	▲

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 47 Active Outreach & Engagement Programs

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

MAT - Naltrexone - New Britain
Community Mental Health Affiliates
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	0		
Admits	-	-	
Discharges	-	-	

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

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	N/A	5%

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

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 6 Active Naltrexone Programs

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

MATx OP
Community Mental Health Affiliates
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	90	80	13%	▲
Admits	17	1	1600%	▲
Discharges	20	8	150%	▲
Service Hours	666	1,111	-40%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	91%
✓	Valid TEDS Data	100%	92%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	98%	24%

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

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	99%	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		6	30%	50%	48%	-20%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		86	96%	75%	62%	21%	▲
✓	Abstinence/Reduced Drug Use		63	70%	55%	41%	15%	▲
🔴	Stable Living Situation		80	89%	95%	59%	-6%	
🔴	Employed		20	22%	50%	20%	-28%	▼
🔴	Self Help		8	9%	60%	14%	-51%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		63	90%	90%	37%	0%

Legend:
▲ > 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.

Next Steps 603551
Community Mental Health Affiliates
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	22	20	10%	
Admits	4	-		
Discharges	4	-		
Service Hours	160	132	21%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Stable Living Situation		18	82%	85%	88%	-3%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		15	83%	90%	96%	-7%

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		63%	96%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▢		▢			▢	50%
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 109 Active Supportive Housing – Scattered Site Programs

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

Parkview Res Intensive 03241X
Community Mental Health Affiliates
Mental Health - Residential Services - MH Intensive Res. Rehabilitation

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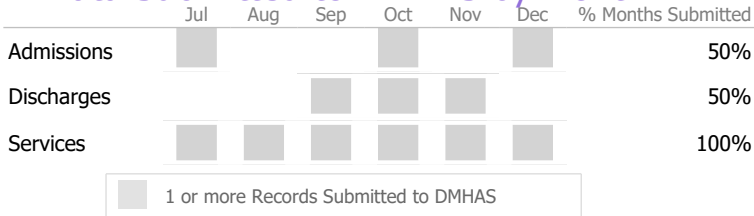
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16	16	0%
Admits	2	-	
Discharges	1	2	-50% ▼
Bed Days	2,525	2,586	-2%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Treatment Completed Successfully		1	100%	75%	67%	25% ▲
●	No Re-admit within 30 Days of Discharge		0	0%	85%	82%	-85% ▼
●	Follow-up within 30 Days of Discharge		0	0%	90%	80%	-90% ▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	98%

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

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	92%
✓	SA Screen Complete	100%	89%

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

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
●	Avg Utilization Rate		16	2,032 days	0.6	86%	90%	91%	-4%

■ < 90%   ■ 90-110%   ■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions				▮		▮	33%
Discharges		▮					17%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

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

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

Pleasant House
Community Mental Health Affiliates
Mental Health - Residential Services - MH Intensive Res. 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	6	6	0%
Admits	-	-	
Discharges	-	-	
Bed Days	1,104	1,104	0%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	75%	67%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	82%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	80%	N/A

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	98%

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

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	92%
✓ SA Screen Complete		100%	89%

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

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	1,744 days	0.5	100%	90%	91%	10%

	< 90%		90-110%		>110%

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 29 Active MH Intensive Res. Rehabilitation Programs

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

SOR- MAT Outreach
Community Mental Health Affiliates
Addiction - Recovery Support - Peer Based Mentoring

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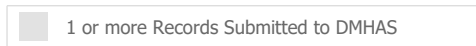
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	14	7	100%	▲
Admits	3	2	50%	▲
Discharges	1	-		

Data Submission Quality

Data Entry		Actual	State Avg
Valid TEDS Data		N/A	0%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	67%
✓ SA Screen Complete		100%	69%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	6%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							50%
Discharges							17%

1 or more Records Submitted to DMHAS
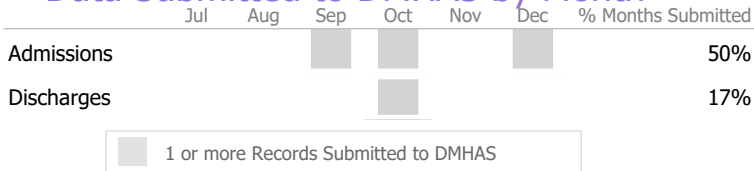
▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 8 Active Peer Based Mentoring Programs

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

State Hospital D/C Behavioral Health
Community Mental Health Affiliates
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	3	3	0%
Admits	-	-	
Discharges	-	-	
Service Hours	1	1	-26% ▼

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
✓ Stable Living Situation		3	100%	80%	72%	20% ▲
● Employed		0	0%	20%	15%	-20% ▼
● Social Support		1	33%	60%	69%	-27% ▼

Data Submission Quality

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

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

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		1	33%	90%	80%	-57% ▼

Data Submitted to DMHAS by Month
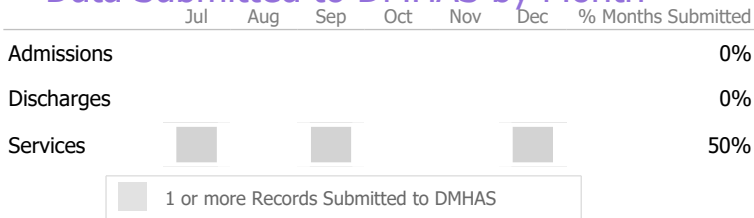
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							50%

1 or more Records Submitted to DMHAS

▲ > 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.

Supportive Housing 603293
Community Mental Health Affiliates
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	72	72	0%	
Admits	8	2	300%	▲
Discharges	4	6	-33%	▼
Service Hours	766	761	1%	

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		63	88%	85%	88%	3%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		68	100%	90%	96%	10%

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		64%	96%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	83%

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 109 Active Supportive Housing – Scattered Site Programs

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

Team Time Club House 603-281
Community Mental Health Affiliates
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)
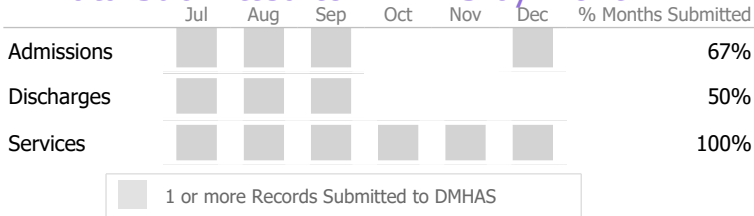
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	193	171	13%	▲
Admits	31	2	1450%	▲
Discharges	50	14	257%	▲
Service Hours	3,278	1,816	81%	▲
Social Rehab/PHP/IOP Days	2,090	0		

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services	▮▮▮▮	138	97%	90%	70%	7%

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
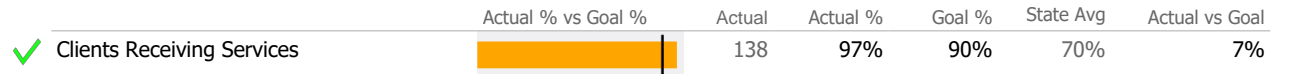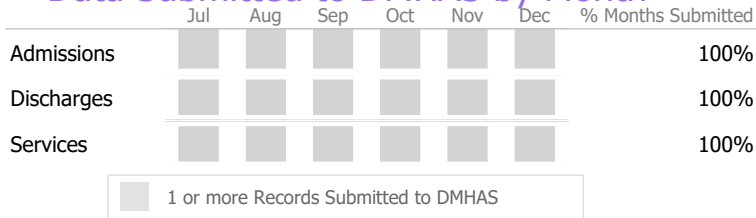
* State Avg based on 34 Active Social Rehabilitation Programs

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

Transitional Living Ct 603-240
Community Mental Health Affiliates
Mental Health - Residential Services - MH Intensive Res. 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	21	18	17%	▲
Admits	6	4	50%	▲
Discharges	5	4	25%	▲
Bed Days	2,914	2,797	4%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		4	80%	75%	67%	5%	
🔴	No Re-admit within 30 Days of Discharge		2	50%	85%	82%	-35%	▼
🔴	Follow-up within 30 Days of Discharge		2	50%	90%	80%	-40%	▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	91%	86%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	92%
✓	SA Screen Complete	100%	89%

Diagnosis		Actual	State Avg
	Valid Axis I Diagnosis	95%	99%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Avg Utilization Rate		15	625 days	0.4	106%	90%	91%	16%	▲

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual		Goal	✓ Goal Met	🔴 Below Goal

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

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