Middletown, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

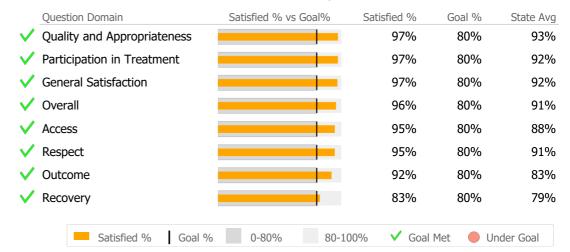
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)



Clients by Level of Care

Program Type	Level of Care Type	#	%
Forensic SA			
Forer	sics Community-based	1,059	53.9%
Mental Healt	h		
	Case Management	203	10.3%
	Outpatient	178	9.1%
	Residential Services	114	5.8%
Addiction			
	Residential Services	172	8.8%
	Outpatient	101	5.1%
	Case Management	85	4.3%
	Recovery Support	9	0.5%
Forensic MH			
Forer	sics Community-based	30	1.5%
	Residential Services	14	0.7%

Consumer Satisfaction Survey (Based on 251 FY21 Surveys)



Client Demographics

Age		#	%	State Avg	Gender	#	%	State Avg
18-25 📘		297	15%	9%	Male 🗾	1,168	61%	59%
26-34	•	525	27%	21%	Female	747	39%	41%
35-44		437	23%	23%	Transgender			0%
45-54		322	17%	19%				
55-64		261	14%	19%				
65+		82	4%	9%	Race	#	%	State Avg
					White/Caucasian 📒	892	46%	▼ 62%
Ethnicity		#	%	State Avg	Unknown 📙	507	26%	▲ 6%
Unknown		902	47%	▲ 11%	Black/African American	345	18%	17%
Non-Hispanic		793	41%	▼ 68%	Other <mark> </mark>	149	8%	13%
Hispanic-Other		142	7%	8%	Multiple Races	19	1%	1%
Hisp-Puerto Rican		86	4%	11%	Am. Indian/Native Alaskan	8	0%	0%
· ·					Asian	8	0%	1%
Hispanic-Mexican		3	0%	1%	Hawaiian/Other Pacific Islander			0%
Hispanic-Cuban		2	0%	0%				
	Ur	nique C	lients	State Avg	▲ > 10% Over State Avg	> 10% L	Inder Si	tate Avg

BOS 72

Connection Inc. Mental Health - Case Management - Supportive Housing – Scattered Site Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

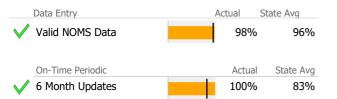
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	11		
Admits	4	-	
Discharges	1	-	
Service Hours	141	-	

	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Stable Living Situation		8	73%	85%	88%	-12%	▼
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		10	100%	90%	96%	10%	

Data Submission Quality



Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	5							50%
Discharges	5							17%
Services								67%
		1 or mo	ore Reco	rds Subn	nitted to	DMHAS		

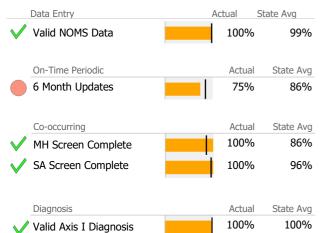
	> 10% 0	ver 🔻 < 10	% Under
Actual	Goal	V Goal Met	Below Goa

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10	9	11% 🔺
Admits	1	-	
Discharges	1	-	
Bed Days	1,620	1,656	-2%

Data Submission Quality



Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
 - 	Treatment Completed Successfully		1	100%	80%	73%	20%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
1	No Re-admit within 30 Days of Discharge		1	100%	85%	92%	15%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Follow-up within 30 Days of Discharge		1	100%	90%	70%	10%
ł	Recovery						
	Recovery National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
<u>_</u>	,	Actual % vs Goal %	Actual 9	Actual % 90%	Goal % 90%	State Avg 97%	Actual vs Goal

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Avg Utilization Rate		8	1,615 days	0.4	110%	90%	93%	20%	
		< 90% 90-110%		>110%						

Data	Submi		to _{Sep}		IAS Nov	by M	onth % Months	Submitted
Admissions								17%
Discharges								17%
	1 or mor	re Record	s Sub	mitted to	DMHAS	5		

	▲ > 10% C	Over 🔻 < 10	0% Under	
Act	tual Goal	V Goal Met	Below 0	Goal

* State Avg based on 24 Active Group Home Programs

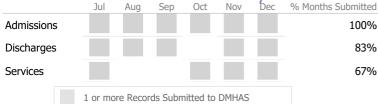
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	30	29	3%
Admits	17	8	113% 🔺
Discharges	15	8	88% 🔺
Service Hours	986	960	3%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	NaN
On-Time Periodic	Actual	State Avg
V 6 Month Updates	0%	0%

Data Submitted to DMHAS by Month



	>	10% Ove	r	▼ < 10%	Under	
Act	tual	Goal	\checkmark	Goal Met	Belo	w Goal

* State Avg based on 1 Active Day Reporting Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	62	62	0%
Admits	37	45	-18% 🔻
Discharges	35	38	-8%
Bed Days	4,498	4,073	10%

Data Submitted to DMHAS by Month

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

	> 10% Ov	er 🔻 < 10%	6 Under
Actual	Goal	V Goal Met	Below Goal

* State Avg based on 4 Active Shelter Programs

Groton Pilots

Connection Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Quality Dashboard

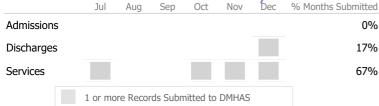
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	19	-5%	
Admits	-	1	-100% 🔻	
Discharges	2	1	100% 🔺	
Service Hours	82	154	-47% 🔻	

Data Submission Quality



Data Submitted to DMHAS by Month



Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Stable Living Situation		17	94%	85%	88%	9%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Clients Receiving Services		14	88%	90%	96%	-2%

	> 10% O	ver 🔻 < 10	% Under
Actual	Goal	V Goal Met	Below Goal

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

Valid Axis I Diagnosis

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

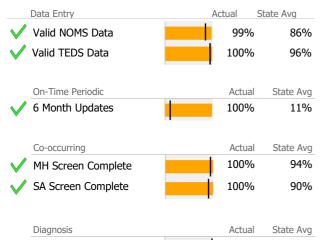
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

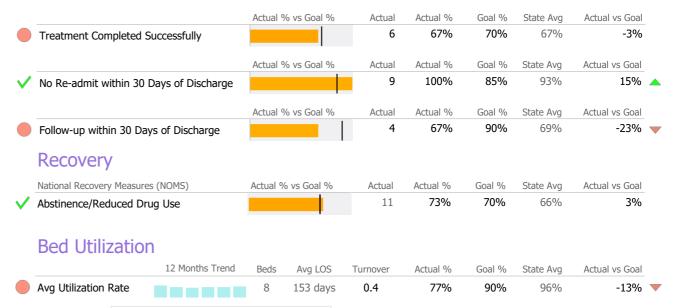
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	15	19	-21% 🔻
Admits	9	13	-31% 🔻
Discharges	9	12	-25% 🔻
Bed Days	1,134	1,432	-21% 🔻

Data Submission Quality



Discharge Outcomes





Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	5							67%
Discharges	5							83%
1 or more Records Submitted to DMHAS								

100%

100%

	> 10% 0	ver 🔻 < 109	% Under	
Actual	Goal	🗸 Goal Met	Belo	w Goal

* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Jefferson Commons

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Quality Dashboard

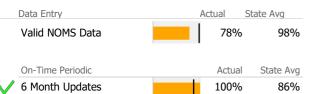
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	8	8	0%
Admits	-	1	-100% 🔻
Discharges	-	2	-100% 🔻
Service Hours	72	56	29% 🔺

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		8	100%	85%	94%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		8	100%	90%	95%	10%	

Data Submission Quality



Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions								0%
Discharges								0%
Services								67%
	1 0	1 or more Records Submitted to DMHAS						

	> 10% 0	ver v < 10	% Under
Actual	Goal	V Goal Met	Below Goal

* State Avg based on 65 Active Supportive Housing – Development Programs

LaBella Place

Connection Inc. 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	14	31	-55%	•
Admits	2	11	-82%	•
Discharges	4	17	-76%	•
Service Hours	33	65	-50%	

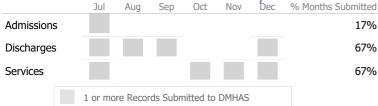
Data Submission Quality

6 Month Updates	0%	55%
On-Time Periodic	Actual	State Avg
Valid NOMS Data	76%	94%
Data Entry	Actual S	State Avg

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		0	0%	50%	64%	-50%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		13	93%	60%	69%	33%	
Employed		5	36%	20%	15%	16%	
Stable Living Situation		12	86%	80%	72%	6%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		10	100%	90%	80%	10%	

Data Submitted to DMHAS by Month



	, > 10% Ov	ver 🔻 < 109	% Under
Actual	Goal	V Goal Met	Below Goal

* State Avg based on 30 Active Standard Case Management Programs

Litchfield Next Steps

Connection Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Quality Dashboard

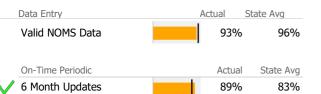
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10	10	0%
Admits	1	-	
Discharges	-	-	
Service Hours	59	85	-31%

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Stable Living Situation		8	80%	85%	88%	-5%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Clients Receiving Services		10	100%	90%	96%	10%

Data Submission Quality



Data Submitted to DMHAS by Month

Admissions		17%
Discharges		0%
Services		67%
	1 or more Records Submitted to DI	1HAS

		· 10% Ove	er	▼ < 10%	Under	
Act	tual	Goal	\checkmark	Goal Met	Belo	w Goal

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

Middlesex PILOTS Dev. 813-553 (Inactive)

Connection Inc.

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)

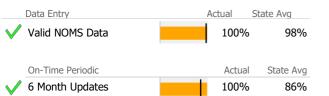
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	10	-20%	▼
Admits	2	2	0%	
Discharges	1	6	-83%	▼
Service Hours	63	33	92%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		8	100%	85%	94%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		7	100%	90%	95%	10%	

Data Submission Quality



Data Submitted to DMHAS by Month

	Jui	Aug	Sep	UCL	INOV	Dec	% Months Submitted
Admissions							17%
Discharges							17%
Services							67%
	1 or mo	re Reco	rds Subn	nitted to	DMHAS		

	> 10% 0	/er	▼ < 109	% Under	
Actual	Goal	V	Goal Met	Belo	w Goal

* State Avg based on 65 Active Supportive Housing – Development Programs

Middletown Pilots

Connection Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Quality Dashboard

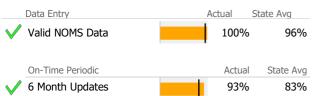
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	32	30	7%
Admits	2	9	-78% 🔻
Discharges	-	7	-100% 🔻
Service Hours	291	173	69% 🔺

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Stable Living Situation		26	81%	85%	88%	-4%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Clients Receiving Services		30	94%	90%	96%	4%

Data Submission Quality



Data Submitted Jul to Aug DMHAS Sep by Month Nov Admissions 17% Discharges 0% Services 50%

1 or more Records Submitted to DMHAS

	> 10% Ov	ver	• < 10%	6 Under	
Actual	Goal	\checkmark	Goal Met	Belo	w Goal

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

Milestone

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Quality Dashboard

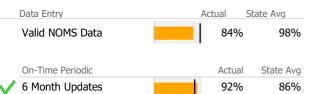
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	15	15	0%
Admits	3	-	
Discharges	-	-	
Service Hours	68	57	18%

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Stable Living Situation		9	60%	85%	94%	-25%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		14	93%	90%	95%	3%	

Data Submission Quality



Data	Submit	ted to Aug Sep	DMH	AS I	Dec	onth % Months Submitted
Admissions						33%
Discharges						0%
Services						67%
	1 or more	Records Sul	omitted to	DMHAS		

	^ >	10% Ove	er	▼ < 10%	Under	
Act	ual	Goal	\checkmark	Goal Met	Belo	w Goal

* State Avg based on 65 Active Supportive Housing – Development Programs

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

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	23	-57% 🔻
Admits	3	16	-81% 🔻
Discharges	10	17	-41% 🔻
Bed Days	393	637	-38% 🔻

Data Submission Quality

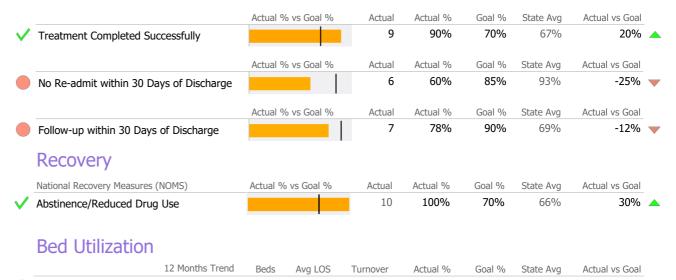
Valid Axis I Diagnosis

 \checkmark

Data Entry	Actual S	tate Avg
Valid NOMS Data	100%	86%
Valid TEDS Data	100%	96%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	11%
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	94%
✓ SA Screen Complete	100%	90%
•		
Diagnosis	Actual	State Avg

Discharge Outcomes

Avg Utilization Rate



0.8

27%

90%

96%

-63% 🔻

< 0.0%	90-110%	> 1100/-

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							33%
Discharges							50%
	1 or m	ore Reco	rds Subr	nitted to	DMHAS		

100%

100%

	> 10% 0	ver 🔻 < 1	0% Under	
Actual	Goal	🗸 Goal Met	Belo	w Goal

8

115 days

* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Mental Health - Residential Services - Residential Support

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	47	52	-10%
Admits	12	13	-8%
Discharges	7	12	-42% 🔻
Service Hours	1,130	668	69% 🔺

Data Submission Quality

	Data Entry	Actual	State Avg
	Valid NOMS Data	93%	99%
	On-Time Periodic	Actua	al State Avg
\checkmark	6 Month Updates	93%	93%
	Co-occurring	Actua	al State Avg
\checkmark	MH Screen Complete	100%	6 81%
\checkmark	SA Screen Complete	100%	6 83%
•			
	Diagnosis	Actua	l State Avg
		100%	
\sim	Valid Axis I Diagnosis	100%	6 95%

Data Submitted to DMHAS by Month



Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Treatment Completed Successfully		4	57%	50%	88%	7%
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Social Support		40	85%	60%	87%	25% 🔺
\checkmark	Stable Living Situation		47	100%	85%	97%	15% 🔺
	Employed		7	15%	25%	14%	-10% 👅
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Clients Receiving Services		33	83%	90%	97%	-8%

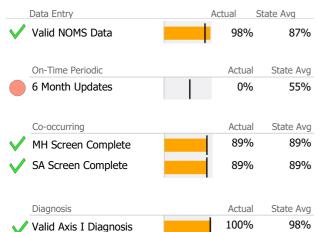
	> 10%	Over 🔻	< 10% Unde	٢
Actua	al Goal	V Goal N	let	Below Goal

* State Avg based on 24 Active Residential Support Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	178	68	162%	
Admits	97	41	137%	
Discharges	101	26	288%	
Service Hours	584	177		

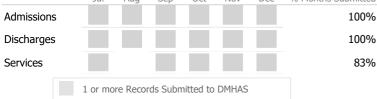
Data Submission Quality



Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		42	42%	50%	42%	-8%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		158	87%	60%	59%	27%	
\checkmark	Employed		79	44%	30%	23%	14%	
	Stable Living Situation		162	90%	95%	69%	-5%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		59	74%	90%	80%	-16%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		41	43%	75%	77%	-32%	▼

Data Submitted to DMHAS by Month



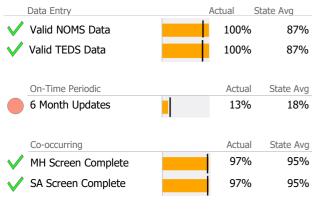
	>	10% Ove	ŗ	▼ < 10%	Under	
Act	ual	Goal	\checkmark	Goal Met	Belo	w Goal

* State Avg based on 74 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	55	44	25% 🔺	
Admits	31	24	29% 🔺	
Discharges	25	26	-4%	
Service Hours	133	-		

Data Submission Quality

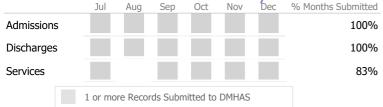




Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		8	32%	50%	50%	-18%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested		51	86%	75%	74%	11%
Abstinence/Reduced Drug Use		38	64%	55%	39%	9%
Self Help	i	36	61%	60%	14%	1%
Stable Living Situation	· · ·	48	81%	95%	72%	-14%
Employed	— '	18	31%	50%	30%	-19%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		24	71%	90%	55%	-19%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
-		20	65%	75%	63%	-10%

Data Submitted to DMHAS by Month



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

* State Avg based on 107 Active Standard Outpatient Programs

Ondusky Center

Connection Inc.

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)

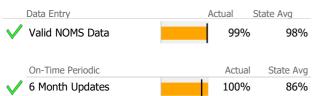
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	9	-11%	▼
Admits	1	-		
Discharges	-	3	-100%	▼
Service Hours	56	93	-39%	▼

Recovery

	'							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		8	100%	85%	94%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		8	100%	90%	95%	10%	

Data Submission Quality



Data Submitted to DMHAS by Month

		Jui	Aug	JCP	OCL	1100	DCC	70 PIONUIS Submitted			
Admissions	5							17%			
Discharges	5							0%			
Services								67%			
	1 or more Records Submitted to DMHAS										

	> 10% 0	/er	V < 10 ⁰	% Under	
Actual	Goal	V	Goal Met	Belo	w Goal

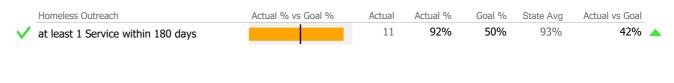
* State Avg based on 65 Active Supportive Housing – Development Programs

Mental Health - Case Management - Outreach & Engagement

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	38	36	6%
Admits	12	14	-14% 🔻
Discharges	15	18	-17% 🔻
Service Hours	147	146	0%

Service Engagement



Data Submitted to DMHAS by Month

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

	> 10% 0	ver 🔻 < 109	% Under
Actual	Goal	V Goal Met	Below Goal

* State Avg based on 47 Active Outreach & Engagement Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	14	-7%
Admits	-	-	
Discharges	-	-	
Bed Days	2,392	2,576	-7%

Data Submission Quality

Valid Axis I Diagnosis

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	98%
On-Time Periodic	Actua	al State Avg
6 Month Updates	0%	6 86%
Co-occurring	Actua	al State Avg
MH Screen Complete	N//	92%
SA Screen Complete	N/A	89%

Discharge Outcomes

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

Bed Utilization

		1	2 Month	ns Trend	Beds	Avg LOS	;	Turnover	Actu	al %	Goal %	St	tate Avg	Actua	l vs Goal
Avg Utilization F	Rate				15	2,302 day	ys	0.6	8	37%	90%)	91%		-3%
		< 90%		90-110%		>110%									

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admission	S							0%
Discharge	S							0%
		1 or mo	ore Reco	rds Subn	nitted to	DMHAS		

100%

99%

	>	10% Ove	r	▼ < 109	% Under	r
Actu	al	Goal	\checkmark	Goal Met		Below Goal

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

Valid Axis I Diagnosis

Mental Health - Residential Services - Supervised Apartments

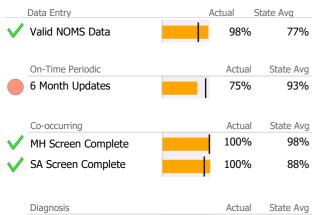
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	14	-7%
Admits	3	2	50% 🔺
Discharges	3	1	200% 🔺
Bed Days	2,039	2,323	-12% 🔻

Data Submission Quality



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		3	100%	60%	75%	40%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		1	33%	90%	81%	-57%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		13	100%	60%	86%	40%
Stable Living Situation	· · ·	13	100%	95%	96%	5%
Employed	- 1	1	8%	25%	13%	-17%

			12	2 Month	s Trend	Beds	Avg LOS	Turnove	r Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Avg Utilization F	Rate				12	988 days	s 0.5	92%	90%	94%	2%
			< 90%		90-110%		>110%					

Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec % Months Submitted Admissions Image: Constraint of the second secon

1 or more Records Submitted to DMHAS

100%

99%

	> 10% 0	ver 🔻 < 109	% Under
Actual	Goal	V Goal Met	Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	32	33	-3%	
Admits	3	4	-25% 🔻	
Discharges	4	5	-20% 🔻	
Service Hours	493	455	8%	

Data Submission Quality

	Data Entry	Actual	State Avg
	Valid NOMS Data	93%	99%
	On-Time Periodic	Actua	I State Avg
	6 Month Updates	81%	93%
		·	
	Co-occurring	Actua	State Avg
\checkmark	MH Screen Complete	100%	b 81%
\checkmark	SA Screen Complete	100%	83%
	Diagnosis	Actua	l State Avg
\checkmark	Valid Axis I Diagnosis	100%	95%

Discharge Outcomes

Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	4	100%	50%	88%	50% 🖌
Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	29	88%	85%	97%	3%
	17	52%	60%	87%	-8%
	2	6%	25%	14%	-19%
Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	25	86%	90%	97%	-4%
	Actual % vs Goal %	Actual % vs Goal % Actual 29 17 2 Actual % vs Goal % Actual Actual % vs Goal % Actual	Actual % vs Goal % Actual % Actual % vs Goal % Actual % 17 52% 2 6% Actual % vs Goal % Actual %	Actual % vs Goal % Actual % Goal % Actual % vs Goal % 29 88% 85% 17 52% 60% 2 6% 25% Actual % vs Goal % Actual % Goal %	Actual % vs Goal % Actual Actual % Goal % State Avg 29 88% 85% 97% 17 52% 60% 87% 2 6% 25% 14% Actual % vs Goal % Actual Actual % Goal % State Avg

Data Submitted to DMHAS by Month



	> 10% 0	ver 🔍 < 10%	% Under
Actual	Goal	V Goal Met	Below Goal

* State Avg based on 24 Active Residential Support Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,059	210	404%	
Admits	793	140	466%	
Discharges	427	123	247%	

Data Submitted to DMHAS by Month



	▲ > 10% C	Over 🔻 < 10	% Under
Actua	al Goal	🗸 Goal Met	Below Goal

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

Connection Inc. Addiction - Residential Services - Recovery House

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	86	70	23%	
Admits	63	50	26%	
Discharges	60	56	7%	
Bed Days	4,032	3,677	10%	

Discharge Outcomes



Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	5							100%
Discharges	5							100%

	> 10% 0	ver 💙 < 10%	6 Under
Actual	Goal	V Goal Met	Below Goal

* State Avg based on 12 Active Recovery House Programs

Ross Center

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Quality Dashboard

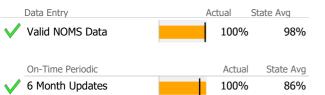
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	14	-7%	
Admits	-	2	-100% 🔻	,
Discharges	-	1	-100% 🔻	,
Service Hours	82	60	37% 🔺	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		13	100%	85%	94%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		13	100%	90%	95%	10%	

Data Submission Quality



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							67%

	^ >	10% Ove	er	▼ < 10%	6 Under	
Act	tual	Goal	\checkmark	Goal Met	Belo	w Goal

* State Avg based on 65 Active Supportive Housing – Development Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	14	6	133%	
Admits	9	4	125%	
Discharges	9	4	125%	
Bed Days	1,010	317	219%	

Data Submission Quality

Actual S	tate Avg
100%	100%
Actual	State Avg
N/A	N/A
	100% Actual

Data Submitted to DMHAS by Month



	^ >	10% Ove	r	▼ < 10%	Under	
Actu	ıal	Goal	<	Goal Met	Belo	w Goal

* State Avg based on 1 Active Transitional Programs

West Village

Connection Inc.

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Quality Dashboard

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	37	-3%	
Admits	2	6	-67% 🔻	
Discharges	2	7	-71% 🔻	
Service Hours	436	361	21% 🔺	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Stable Living Situation		34	94%	85%	94%	9%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Clients Receiving Services		34	100%	90%	95%	10%

Data Submission Quality



Data Submitted Jul Aug to Sep DMHAS by Month Submitted Admissions 33% Discharges 17% Services 67%

1 or more Records Submitted to DMHAS

	> 10% 0	/er	V < 10 ⁰	% Under	
Actual	Goal	\checkmark	Goal Met	Belo	w Goal

* State Avg based on 65 Active Supportive Housing – Development Programs

Connection Inc. Addiction - Case Management - Outreach & Engagement

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	85	121	-30% 🔻
Admits	26	50	-48% 🔻
Discharges	39	72	-46% 🔻
Service Hours	309	197	57% 🔺

Service Engagement



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%
Services							67%
	1 or mo						

	> 10% 0	ver 🔻 < 100	% Under	
Actual	Goal	V Goal Met	Below Goa	I

* State Avg based on 22 Active Outreach & Engagement Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	19	-53%	▼
Admits	8	9	-11%	▼
Discharges	5	7	-29%	▼

Data Submitted to DMHAS by Month





* State Avg based on 1 Active Other Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	46	46	0%	
Admits	23	33	-30%	▼
Discharges	20	15	33%	
Service Hours	99	4		

Data Submission Quality

Data Entry	Actual S	State Avg
Valid NOMS Data	95%	87%
Valid TEDS Data	100%	87%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	18%
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	95%
V SA Screen Complete	100%	95%
Discussion	A	Charles Asses



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		8	40%	50%	50%	-10%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		28	61%	55%	39%	6%
Not Arrested		35	76%	75%	74%	1%
Stable Living Situation	· · · · ·	42	91%	95%	72%	-4%
Self Help		21	46%	60%	14%	-14%
Employed		14	30%	50%	30%	-20%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		10	38%	90%	55%	-52%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		11	48%	75%	63%	-27%

Data Submitted to DMHAS by Month



	> 10% 0	ver	< 10	% Under	
Actual	Goal	\checkmark	Goal Met	Belo	w Goal

* State Avg based on 107 Active Standard Outpatient Programs