Community Mental Health Affiliates

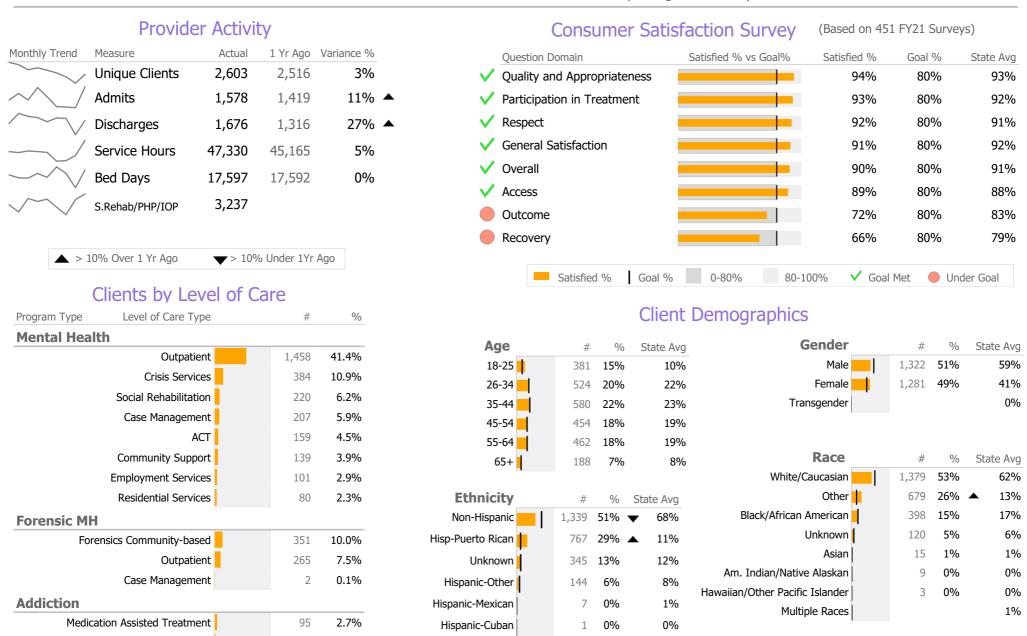
New Britain, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

▲ > 10% Over State Avg

▼ > 10% Under State Avg



Unique Clients State Avg

43

18

Outpatient

Recovery Support

1.2%

0.5%

Adult OP - Torrington 603216

Community Mental Health Affiliates

Mental Health - Outpatient - Standard Outpatient

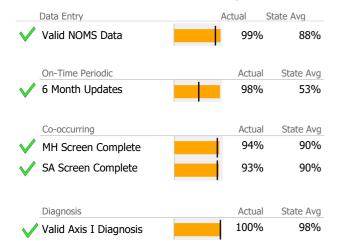
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	201	204	-1%	
Admits	78	155	-50%	•
Discharges	84	70	20%	•
Service Hours	1,888	2,464	-23%	•

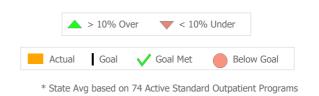
Data Submission Quality



Discharge Outcomes







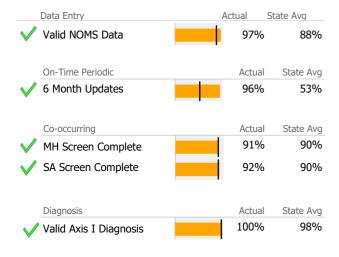
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity easure Actual 1 Yr Actual 1 Yr Actual 1,08 nique Clients 1,224 1,08

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,224	1,084	13%	•
Admits	499	413	21%	•
Discharges	499	355	41%	•
Service Hours	12,847	11,966	7%	

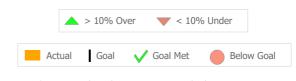
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 74 Active Standard Outpatient Programs

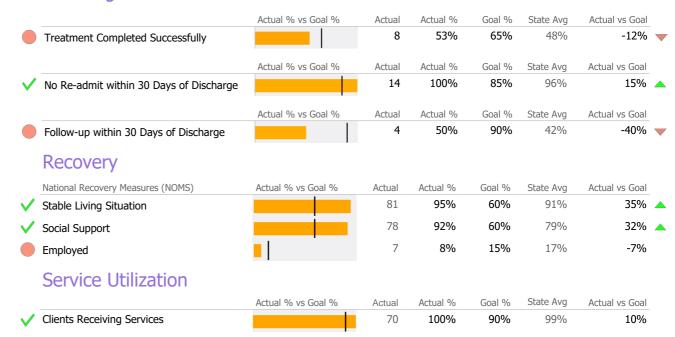
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	84	78	8%	
Admits	21	11	91%	•
Discharges	15	15	0%	
Service Hours	6,233	4,583	36%	•

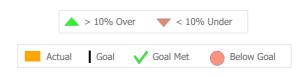
Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	93%	84%
On-Time Periodic	Actua	State Avg
✓ 6 Month Updates	98%	84%
Co-occurring	Actua	State Avg
✓ MH Screen Complete	100%	95%
✓ SA Screen Complete	100%	92%
	•	
Diagnosis	Actua	State Avg
✓ Valid Axis I Diagnosis	100%	98%

Discharge Outcomes







^{*} State Avg based on 23 Active Assertive Community Treatment Programs

1 or more Records Submitted to DMHAS

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

* State Avg based on 74 Active Standard Outpatient Programs

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 22 29 -24% Treatment Completed Successfully 33% 50% 41% -17% 18 Admits 11 64% Recovery Discharges 6 20 -70% **T** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 31 171 -82% 21 95% 60% 61% 35% 🔺 Social Support 17 77% 95% 72% -18% Stable Living Situation **Data Submission Quality** 2 9% **Employed** 30% 25% -21% Data Entry Actual State Avg Service Utilization Valid NOMS Data 98% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 8 50% 90% 82% -40% On-Time Periodic Actual State Avg 6 Month Updates 29% 53% Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Co-occurring Actual State Avg 95% 11% 75% 78% -64% -90% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 95% 90% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% Discharges 56% ✓ Goal Met Actual Goal Below Goal 100% Services

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 - March 2022 (Data as of Jun 27, 2022)

Program Activity

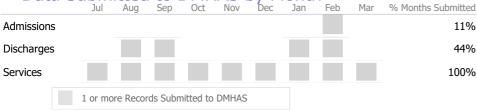
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	31	-61%	•
Admits	1	5	-80%	•
Discharges	6	17	-65%	•
Service Hours	54	142	-62%	•

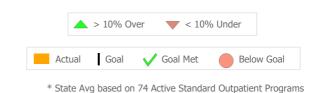
Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	6 88%
On-Time Periodic	Actua	al State Avg
√ 6 Month Updates	60%	53%

Discharge Outcomes



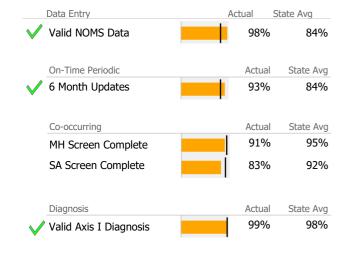




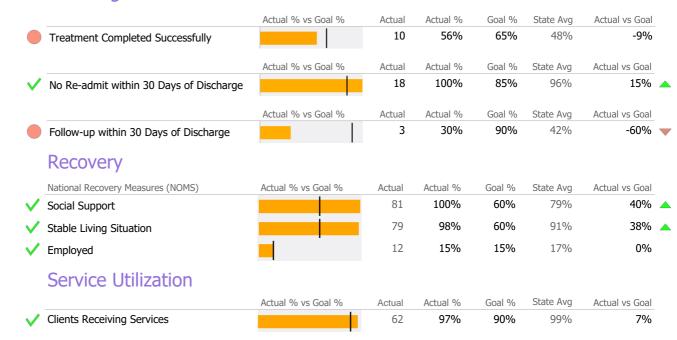
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	79	81	-2%
Admits	18	20	-10%
Discharges	18	14	29% 🔺
Service Hours	3,726	5,659	-34% ▼

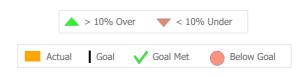
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 23 Active Assertive Community Treatment Programs

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 14 10 40% 5 83% 60% 72% 23% 🔺 Treatment Completed Successfully 7 3 133% Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 3 100% Discharges 6 80% 90% 79% -10% Follow-up within 30 Days of Discharge **Bed Days** 2,237 2,177 3% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** Social Support 14 93% 60% 85% 33% Data Entry Actual State Avg 93% 95% 95% -2% 14 Stable Living Situation Valid NOMS Data 100% 78% 0 0% 25% 12% -25% **Employed** On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 83% 90% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 609 days 68% 90% 92% -22% **T** 0.4 Co-occurring Actual State Avg 100% 98% MH Screen Complete >110% 90-110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 67% Discharges 44% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 80 Active Supervised Apartments Programs

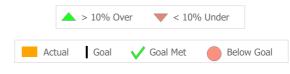
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	377	247	53%	•
Admits	377	275	37%	•
Discharges	371	266	39%	•

Crisis

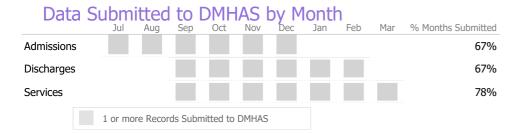


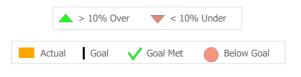
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admission	S										100%
Discharges	5										100%
1 or more Records Submitted to DMHAS											



^{*} State Avg based on 26 Active Mobile Crisis Team Programs

Program Activity Discharge Outcomes Actual % State Avg Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % Actual vs Goal Unique Clients 42 10% 50% 62% -40% -Treatment Completed Successfully 43 Admits Recovery 40 Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 134 27 63% 60% 72% 3% Social Support 6 14% 20% 17% -6% **Employed Data Submission Quality** -47% Stable Living Situation 14 33% 80% 75% Data Entry Actual State Avg Service Utilization Valid NOMS Data 80% 95% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 100% 90% 85% 10% On-Time Periodic Actual State Avg 6 Month Updates 100% 59%





^{*} State Avg based on 30 Active Standard Case Management Programs

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 6 **-67% ▼** Treatment Completed Successfully 100% 50% 17% 50% 🔺 Admits Recovery Discharges 1 4 -75% **T** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 55 98 -44% 🔻 2 100% 60% 68% 40% 🔺 Social Support 2 80% 82% 20% 🔺 100% Stable Living Situation **Data Submission Quality** 0 **Employed** 0% 20% 14% -20% Data Entry Actual State Avg 0 0% 60% 91% -60% -Self Help Valid NOMS Data 100% 93% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual vs Goal Actual % vs Goal % Actual Actual % 6 Month Updates 100% 100% Clients Receiving Services 94% 100% 90% 10% Co-occurring Actual State Avg 100% 100% MH Screen Complete SA Screen Complete 100% 100% State Avg Diagnosis Actual 100% 91% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 0% Discharges 11% ✓ Goal Met Actual Goal Below Goal Services 100% * State Avg based on 3 Active Standard Case Management Programs 1 or more Records Submitted to DMHAS

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 - March 2022 (Data as of Jun 27, 2022)

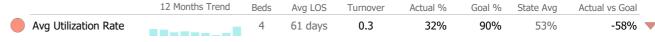
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	7	14%	•
Admits	7	7	0%	
Discharges	7	6	17%	•
Bed Days	355	470	-24%	•

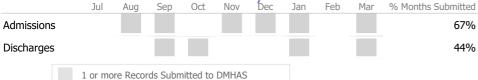
Discharge Outcomes

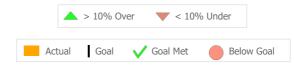


Bed Utilization



< 90% 90-110% >110%





^{*} State Avg based on 10 Active Respite Bed Programs

CSP/Recovery Pathways 603290, New Britain

Community Mental Health Affiliates

Mental Health - Community Support - CSP

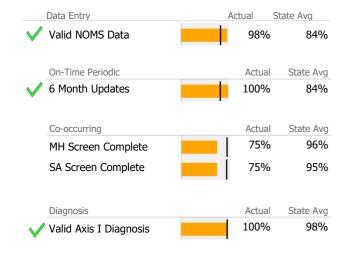
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

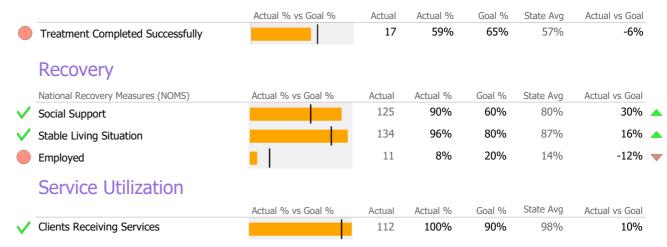
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	139	154	-10%	
Admits	11	38	-71%	•
Discharges	29	27	7%	
Service Hours	3,742	4,043	-7%	

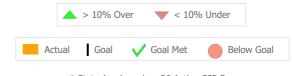
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 36 Active CSP Programs

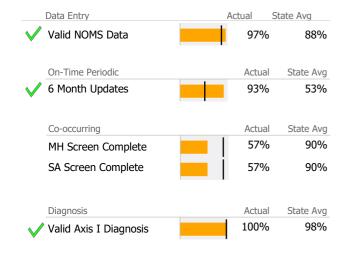
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

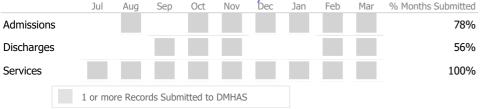
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	43	12	258%	•
Admits	26	12	117%	•
Discharges	7	-		
Service Hours	1,176	237		

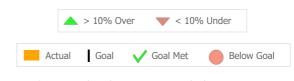
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 74 Active Standard Outpatient Programs

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 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	101	115	-12%	lacktriangle
Admits	50	33	52%	•
Discharges	60	57	5%	
Service Hours	1,813	2,100	-14%	•

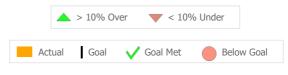
Recovery



Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	6 92%
On-Time Periodic	Actua	al State Avg
6 Month Updates	100%	6 91%

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	6										100%
Discharges	;										100%
Services											100%
1 or more Records Submitted to DMHAS											



^{*} State Avg based on 39 Active Employment Services Programs

1 or more Records Submitted to DMHAS

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

* State Avg based on 24 Active Group Home Programs

Program Activity Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 8 0% Treatment Completed Successfully 100% 80% 72% 20% 🔺 0% Admits 1 Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % Discharges 1 100% 85% 88% 15% No Re-admit within 30 Days of Discharge **Bed Days** 1,988 -8% 2,166 Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge 0 0% 90% 67% -90% **Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Valid NOMS Data 100% 99% 8 100% 60% 82% 40% Social Support 8 100% 90% 98% 10% Stable Living Situation On-Time Periodic Actual State Avg 6 Month Updates 100% 89% **Bed Utilization** Co-occurring Actual State Avg 12 Months Trend Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal 100% 86% MH Screen Complete Avg Utilization Rate 0.4 91% 90% 87% 1% 1,167 days SA Screen Complete 100% 95% < 90% 90-110% >110% Diagnosis State Avg Actual 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 11% Discharges 11% ✓ Goal Met Actual Goal Below Goal

Program Activity Discharge Outcomes Actual % Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 0% N/A N/A 50% 50% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 65 65 0% 6 100% 75% 76% 25% 🔺 Not Arrested 67% 55% 42% 12% 4 Abstinence/Reduced Drug Use **Data Submission Quality** 5% Stable Living Situation 6 100% 95% 75% Data Entry Actual State Avg 3 50% 33% 0% 50% **Employed** Valid NOMS Data 100% 87% -43% 🔷 17% 60% 15% Self Help Valid TEDS Data 100% 85% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 17% 15% Clients Receiving Services 6 100% 90% 58% 10% Service Engagement Co-occurring Actual State Avg N/A 92% MH Screen Complete Outpatient Actual % vs Goal % Actual vs Goal Actual Actual % Goal % State Ava SA Screen Complete N/A 93% 0% 75% 65% -75% -2 or more Services within 30 days Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 0% 0% Discharges Actual Goal ✓ Goal Met Below Goal Services 78% * State Avg based on 108 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 13 14 -7% 2 100% 60% 72% 40% 🔺 Treatment Completed Successfully 2 Admits 1 -50% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 3 -33% 🔻 Discharges 50% 90% 79% -40% Follow-up within 30 Days of Discharge **Bed Days** 3,132 3,232 -3% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** Social Support 12 92% 60% 85% 32% Data Entry Actual State Avg 13 95% 95% 5% 100% Stable Living Situation Valid NOMS Data 99% 78% 8% 25% 12% -17% **Employed** 1 On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 90% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 95% 90% 92% 5% State Avg 1,054 days 0.3 Co-occurring Actual 100% 98% MH Screen Complete 90-110% >110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Nov Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 11% Discharges 22% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 80 Active Supervised Apartments Programs

1 or more Records Submitted to DMHAS

Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Service Utilization Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Measure Actual 1 Yr Ago Variance % Clients Receiving Services 126 94% 90% 73% 4% **Unique Clients** 303 300 1% 107 149 Admits -28% 🔻 73% Discharges 176 102 73% 🔺 Service Hours 1,056 609 Jail Diversion Actual % vs Goal % Actual % Goal % Actual vs Goal Actual State Avg 0% 61% 85% 🔺 45 85% Follow-up Service within 48 hours Data Submitted to DMHAS by Month Sep % Months Submitted Feb Mar > 10% Over < 10% Under</p> Admissions 100% Discharges 100% Goal Below Goal Services 100% * State Avg based on 19 Active Court Liaison-Jail Diversion Programs

Jail Diversion-Women 603342

Community Mental Health Affiliates

1 or more Records Submitted to DMHAS

Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

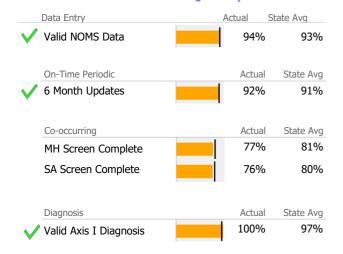
* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

Program Activity Service Utilization Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Measure Actual 1 Yr Ago Variance % Clients Receiving Services 39 95% 90% 73% 5% Unique Clients 71 92 -23% 🔻 42 35% 🔺 Admits 31 33 52 Discharges **-37% ▼** Service Hours 1,209 1,184 2% Jail Diversion Actual % vs Goal % Actual % Goal % Actual vs Goal Actual State Avg 0% 61% 62% 🔺 63% Follow-up Service within 48 hours Data Submitted to DMHAS by Month Sep % Months Submitted Feb Mar > 10% Over < 10% Under</p> Admissions 100% Discharges 100% Goal Below Goal Services 100%

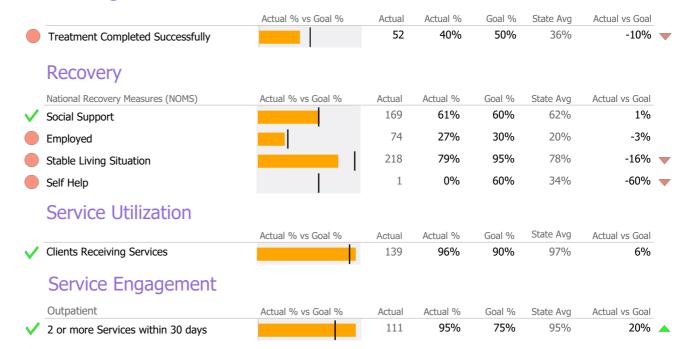
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	265	294	-10%
Admits	119	114	4%
Discharges	130	142	-8%
Service Hours	4.280	4.295	0%

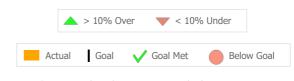
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 3 Active Standard Outpatient Programs

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 37 44 -16% 5 83% 50% 50% 33% 🔺 Treatment Completed Successfully 7 Admits **-43%** Recovery Discharges 6 10 -40% **T** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 678 756 -10% 35 95% 75% 76% 20% 🔺 Not Arrested 27 73% 55% 42% 18% 🔺 Abstinence/Reduced Drug Use **Data Submission Quality** 34 Stable Living Situation 92% 95% 75% -3% Data Entry Actual State Avg 0 0% 50% 33% -50% **Employed** Valid NOMS Data 97% 87% -57% 🔻 3% 60% 15% Self Help Valid TEDS Data 100% 85% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 100% 15% 30 Clients Receiving Services 97% 90% 58% 7% Service Engagement Co-occurring Actual State Avg 100% 92% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 88% 93% 25% 75% 65% -50% 2 or more Services within 30 days Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted Feb > 10% Over < 10% Under</p> Admissions 44% Discharges 56% Actual Goal ✓ Goal Met Below Goal Services 100% * State Avg based on 108 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

Living Free 2

On-Time Periodic

6 Month Updates

Community Mental Health Affiliates

Mental Health - Case Management - Standard Case Management

State Avg

59%

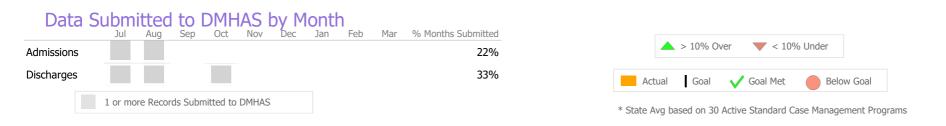
Actual

N/A

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Unique Clients 18 56 -68% 🔻 Treatment Completed Successfully 14 78% 50% 62% 28% 🔺 2 Admits 26 -92% **T** Recovery 18 Discharges 34 **-47% ▼** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 7 39% 20% 17% 19% 🔺 **Employed Data Submission Quality** 13 72% 60% 72% 12% 🔺 Social Support Data Entry State Avg 75% -8% Stable Living Situation 13 72% 80% Valid NOMS Data 91% 95%



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 - March 2022 (Data as of Jun 27, 2022)

* State Avg based on 30 Active Standard Case Management Programs

Program Activity Discharge Outcomes Variance % Measure 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Unique Clients 19 65 -71% 19 100% 50% 62% 50% 🔺 Treatment Completed Successfully 2 -95% 🔻 Admits 44 Recovery 19 Discharges 35 -46% **T** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 0 0% 20% 17% -20% **Employed Data Submission Quality** 5 26% 60% 72% -34% Social Support Data Entry State Avg 5% -75% -Stable Living Situation 80% 75% Valid NOMS Data 70% 95% On-Time Periodic State Avg Actual 6 Month Updates N/A 59% Data Submitted to DMHAS by Month Sep Dec Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 22% 11% Discharges Below Goal Actual Goal Goal Met 1 or more Records Submitted to DMHAS

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 - March 2022 (Data as of Jun 27, 2022)

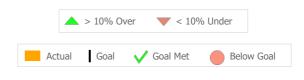
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	62	80	-23% ▼
Admits	27	29	-7%
Discharges	31	35	-11% 🔻
Service Hours	835	1,155	-28% ▼

Service Engagement



Data	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										89%
Discharges										89%
Services										100%
	1 or more Records Submitted to DMHAS									



^{*} State Avg based on 48 Active Outreach & Engagement Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Actual vs Goal Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Avg **Unique Clients** N/A N/A 50% 54% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal N/A N/A 55% 65% -55% -Abstinence/Reduced Drug Use **Data Submission Quality** 50% 47% -50% N/A N/A **Employed** State Avg Data Entry Actual 92% -75% -Not Arrested N/A N/A 75% Valid NOMS Data N/A 95% 60% 38% -60% -N/A N/A Self Help Valid TEDS Data N/A 93% 95% -95% -N/A N/A 83% Stable Living Situation On-Time Periodic State Avg Actual 6 Month Updates N/A 23% Co-occurring Actual State Avg N/A 79% MH Screen Complete SA Screen Complete N/A 91% Data Submitted to DMHAS by Month Dec Oct Nov Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 0% 0% Discharges Actual ✓ Goal Met Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 6 Active Naltrexone Programs

Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Variance % Actual % State Avg Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % Actual vs Goal **Unique Clients** 95 86 10% 8 27% 50% 44% -23% Treatment Completed Successfully 22 8 175% Admits Recovery 30 Discharges 14 114% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,016 1,530 -34% 91 96% 75% 66% 21% 🔺 Not Arrested 72% 55% 44% 17% 🔺 68 Abstinence/Reduced Drug Use **Data Submission Quality** -6% Stable Living Situation 85 89% 95% 63% Data Entry Actual State Avg 20 50% 22% -29% 21% **Employed** Valid NOMS Data 98% 92% 8 8% -52% -60% 15% Self Help Valid TEDS Data 100% 90% Service Utilization On-Time Periodic Actual State Avg State Avg Actual % vs Goal % Actual % Goal % Actual vs Goal Actual 6 Month Updates 100% 28% Clients Receiving Services 61 94% 90% 38% 4% Co-occurring Actual State Avg 94% 76% MH Screen Complete SA Screen Complete 94% 93% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 89% 100% Discharges ✓ Goal Met Actual Goal Below Goal Services 100% * State Avg based on 20 Active Buprenorphine Maintenance Programs 1 or more Records Submitted to DMHAS

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 - March 2022 (Data as of Jun 27, 2022)

Program Activity

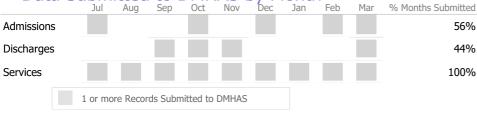
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	25	20	25% 🔺
Admits	7	-	
Discharges	11	1	1000% 🔺
Service Hours	189	172	10%

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Stable Living Situation		22	88%	85%	88%	3%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
1	Clients Receiving Services		14	93%	90%	97%	3%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	60%	% 96%
On-Time Periodic	Actua	al State Avg
6 Month Updates	75%	6 83%





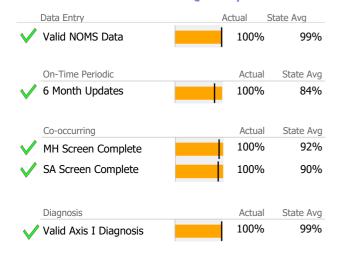
^{*} State Avg based on 109 Active Supportive Housing – Scattered Site Programs

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 16 16 0% Treatment Completed Successfully 100% 75% 67% 25% 🔺 2 Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 1 2 Discharges -50% 0 0% 85% 81% -85% No Re-admit within 30 Days of Discharge **Bed Days** 3,875 3,846 1% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge 0 0% 90% 85% -90% **Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 99% 99% 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 88% 90% 16 2,066 days 0.4 89% -2% On-Time Periodic Actual State Avg 90-110% >110% 6 Month Updates 100% 84% Co-occurring Actual State Avg 100% 92% MH Screen Complete SA Screen Complete 100% 90% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 22% Discharges 11% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 29 Active MH Intensive Res. Rehabilitation Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	-	-	
Discharges	-	-	
Bed Days	1,644	1,644	0%

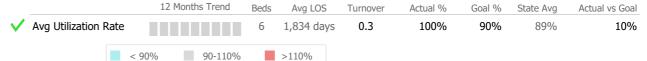
Data Submission Quality



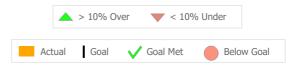
Discharge Outcomes

	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%	81%	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%	85%	N/A

Bed Utilization





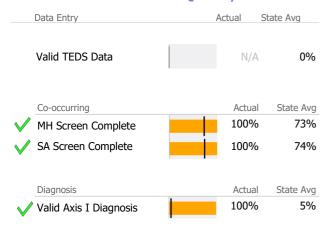


^{*} State Avg based on 29 Active MH Intensive Res. Rehabilitation Programs

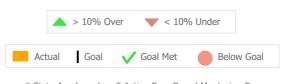
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	11	64%	•
Admits	7	6	17%	•
Discharges	1	_		

Data Submission Quality







^{*} State Avg based on 8 Active Peer Based Mentoring Programs

State Hospital D/C Behavioral Health

1 or more Records Submitted to DMHAS

Community Mental Health Affiliates

Services

Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

* State Avg based on 30 Active Standard Case Management Programs

Program Activity Discharge Outcomes Actual % Actual vs Goal Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Ava Unique Clients 3 0% N/A N/A 50% 62% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1 3 -57% 3 100% 80% 75% 20% 🔺 Stable Living Situation 0 0% 20% 17% -20% **Employed Data Submission Quality** -27% Social Support 33% 60% 72% Data Entry Actual State Avg Service Utilization Valid NOMS Data 100% 95% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 67% 90% 85% -23% -On-Time Periodic Actual State Avg 6 Month Updates 100% 59% Data Submitted to DMHAS by Month Sep Dec Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 0% 0% Discharges Actual Goal Below Goal Goal Met

33%

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 - March 2022 (Data as of Jun 27, 2022)

Program Activity

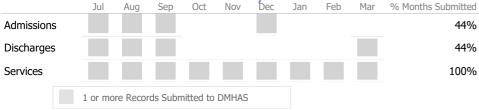
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	73	76	-4%	
Admits	8	5	60%	•
Discharges	5	7	-29%	•
Service Hours	1,006	1,116	-10%	

Recovery



Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	63%	96%
On-Time Periodic	Actual	State Avg
√ 6 Month Updates	94%	83%





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

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 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	220	179	23% 🔺
Admits	61	10	510% 🔺
Discharges	55	21	162% 🔺
Service Hours	5,300	2,817	88% 🔺
Social Rehab/PHP/IOP Days	3,237	0	

Service Utilization



	Ju	l Aug	Sep	Oct	. Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%
	1 or	1 or more Records Submitted to DMHAS								



^{*} State Avg based on 34 Active Social Rehabilitation Programs

Mental Health - Residential Services - MH Intensive Res. Rehabilitation

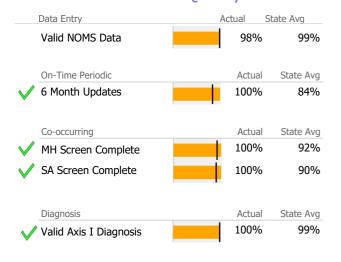
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

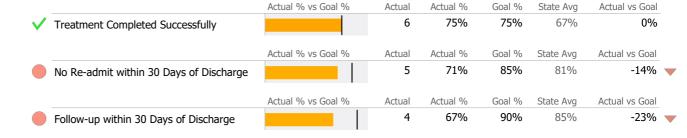
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	25	18	39%	•
Admits	10	4	150%	•
Discharges	8	4	100%	•
Bed Days	4,366	4,057	8%	

Data Submission Quality



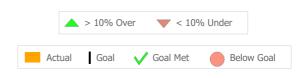
Discharge Outcomes



Bed Utilization







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