Community Renewal Team (CRT)
Hartford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - March 2022   (Data as of Jun 27, 2022)
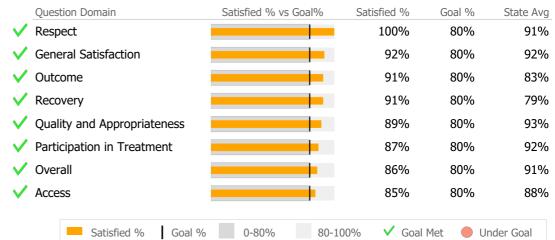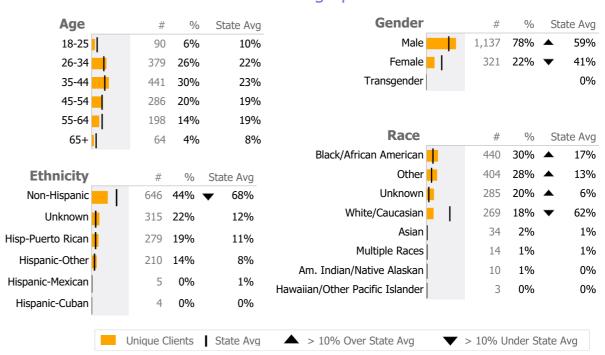
Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	1,459	1,294	13%	▲
	Admits	505	519	-3%	
	Discharges	186	308	-40%	▼
	Service Hours	344	4,165	-92%	▼
	Bed Days	66	171	-61%	▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	1,344	90.0%
Mental Health			
	Case Management	70	4.7%
	Outpatient	33	2.2%
Forensic SA			
	Case Management	44	2.9%
Forensic MH			
	Crisis Services	2	0.1%

Consumer Satisfaction Survey   (Based on 86 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Respect		100%	80%	91%
✓ General Satisfaction		92%	80%	92%
✓ Outcome		91%	80%	83%
✓ Recovery		91%	80%	79%
✓ Quality and Appropriateness		89%	80%	93%
✓ Participation in Treatment		87%	80%	92%
✓ Overall		86%	80%	91%
✓ Access		85%	80%	88%

▮ Satisfied %	│ Goal %	▮ 0-80%	▮ 80-100%	✓ Goal Met	● Under Goal

Client Demographics

Age

	#	%	State Avg
18-25	90	6%	10%
26-34	379	26%	22%
35-44	441	30%	23%
45-54	286	20%	19%
55-64	198	14%	19%
65+	64	4%	8%

Gender

	#	%		State Avg
Male	1,137	78%	▲	59%
Female	321	22%	▼	41%
Transgender				0%

Ethnicity

	#	%		State Avg
Non-Hispanic	646	44%	▼	68%
Unknown	315	22%		12%
Hisp-Puerto Rican	279	19%		11%
Hispanic-Other	210	14%		8%
Hispanic-Mexican	5	0%		1%
Hispanic-Cuban	4	0%		0%

Race

	#	%		State Avg
Black/African American	440	30%	▲	17%
Other	404	28%	▲	13%
Unknown	285	20%	▲	6%
White/Caucasian	269	18%	▼	62%
Asian	34	2%		1%
Multiple Races	14	1%		1%
Am. Indian/Native Alaskan	10	1%		0%
Hawaiian/Other Pacific Islander	3	0%		0%

▮ Unique Clients	│ State Avg	▲ > 10% Over State Avg	▼ > 10% Under State Avg

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

Asian Family Service OP 627210
Community Renewal Team (CRT)
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	33	36	-8%	
Admits	7	10	-30%	▼
Discharges	3	7	-57%	▼
Service Hours	2	445	-100%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	88%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	74%	53%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	90%
✓	SA Screen Complete	100%	90%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		1	33%	50%	41%	-17%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		27	82%	60%	61%	22%	▲
✓	Stable Living Situation		32	97%	95%	72%	2%	
🔴	Employed		9	27%	30%	25%	-3%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		1	3%	90%	82%	-87%	▼

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		0	0%	75%	78%	-75%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		▢	▢	▢				▢		56%
Discharges		▢	▢	▢						33%
Services	▢	▢								22%

▢ 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.

CORP-Prison Off Re-entry703555
Community Renewal Team (CRT)
Forensic MH - 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)
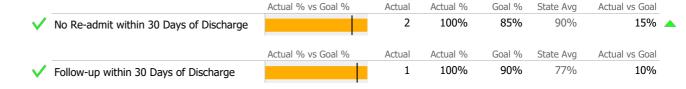
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2	3	-33%	▼
Admits	1	1	0%	
Discharges	2	2	0%	
Service Hours	7	5	61%	▲
Bed Days	66	171	-61%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	No Re-admit within 30 Days of Discharge		2	100%	85%	90%	15%	▲
✓	Follow-up within 30 Days of Discharge		1	100%	90%	77%	10%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		3	63 days	1.5	8%	90%	65%	-82%	▼

	< 90%		90-110%		>110%

Data Submission Quality

Data Entry	Actual	State Avg

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

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	35%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		■								11%
Discharges	■		■							22%
Services	■	■	■							33%

■	1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

■ Actual		Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 7 Active Respite Bed Programs

Variances in data may be indicative of operational adjustments related to the pandemic.
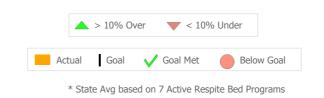
Homeless Outreach Team 703-294
Community Renewal Team (CRT)
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)
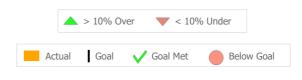
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	60	134	-55%	▼
Admits	36	21	71%	▲
Discharges	15	106	-86%	▼
Service Hours	89	42	111%	▲

Service Engagement

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ at least 1 Service within 180 days		34	94%	50%	94%	44%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▢	▢	▢	▢	▢			▢	▢	78%
Discharges	▢	▢	▢	▢	▢				▢	67%
Services	▢	▢	▢	▢	▢			▢	▢	78%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 48 Active Outreach & Engagement Programs

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

Next StepsHsgSuppPilots 703551
Community Renewal Team (CRT)
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	10	9	11%	▲
Admits	2	1	100%	▲
Discharges	2	1	100%	▲
Service Hours	149	339	-56%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Stable Living Situation		10	100%	85%	88%	15%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		8	100%	90%	97%	10%

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	100%	96%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions			▪	▪						22%
Discharges	▪	▪								22%
Services			▪		▪		▪			33%

☐ 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.

Post-Release Transitional Forensic Case Management
Community Renewal Team (CRT)
Forensic SA - 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)
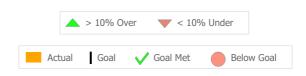
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	32	6	433%	▲
Admits	24	3	700%	▲
Discharges	19	3	533%	▲
Service Hours	62	15		

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		0%	4%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Treatment Completed Successfully		8	42%	50%	75%	-8%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		30	94%	60%	81%	34%	▲
✔ Employed		11	34%	20%	29%	14%	▲
🔴 Self Help		14	44%	60%	58%	-16%	▼
🔴 Stable Living Situation		13	41%	80%	60%	-39%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		13	93%	90%	64%	3%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▪			▪		▪		▪	▪	56%
Discharges		▪	▪	▪	▪		▪		▪	67%
Services	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%

▪ 1 or more Records Submitted to DMHAS

Legend:
▲ > 10% Over   ▼ < 10% Under

| Actual | | Goal | ✔ Goal Met | 🔴 Below Goal |

* State Avg based on 8 Active Standard Case Management Programs

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

Pre-Release Transitional Forensic Case Management
Community Renewal Team (CRT)
Forensic SA - 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)
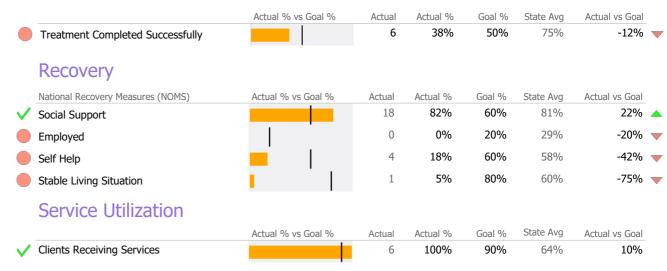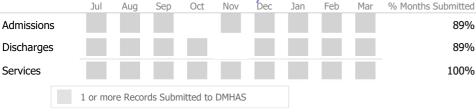
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	18	22%	▲
Admits	19	16	19%	▲
Discharges	16	5	220%	▲
Service Hours	19	27	-28%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		97%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	4%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		6	38%	50%	75%	-12%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		18	82%	60%	81%	22%	▲
🔴	Employed		0	0%	20%	29%	-20%	▼
🔴	Self Help		4	18%	60%	58%	-42%	▼
🔴	Stable Living Situation		1	5%	80%	60%	-75%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		6	100%	90%	64%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■		■	■	■	■	■	89%
Discharges	■	■	■	■		■	■	■	■	89%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 8 Active Standard Case Management Programs

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

SA Outpatient 703725
Community Renewal Team (CRT)
Addiction - 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	1,344	1,109	21%	▲
Admits	416	467	-11%	▼
Discharges	129	184	-30%	▼
Service Hours	17	3,293	-99%	▼

Data Submission Quality

Data Entry	Actual % vs Goal	Actual	State Avg
✔ Valid NOMS Data		98%	87%
✔ Valid TEDS Data		85%	85%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		1%	15%

Co-occurring		Actual	State Avg
MH Screen Complete		90%	92%
SA Screen Complete		88%	93%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		22	17%	50%	50%	-33%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Not Arrested		1,128	82%	75%	76%	7%	
🔴 Abstinence/Reduced Drug Use		725	53%	55%	42%	-2%	
🔴 Employed		469	34%	50%	33%	-16%	▼
🔴 Stable Living Situation		877	64%	95%	75%	-31%	▼
🔴 Self Help		50	4%	60%	15%	-56%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		11	1%	90%	58%	-89%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 2 or more Services within 30 days		0	0%	75%	65%	-75%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Discharges		▪	▪	▪	▪	▪	▪	▪	▪	100%
Services	▪	▪		▪		▪				44%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 108 Active Standard Outpatient Programs

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