Social Rehabilitation

Inpatient Services

Community Support

Forensics Community-based

Forensic MH

Addiction

Crisis Services

ACT

Outpatient

Outpatient

Satisfied %

(Based on 235 FY21 Surveys)

Goal %

State Avg

91%

92%

91%

92%

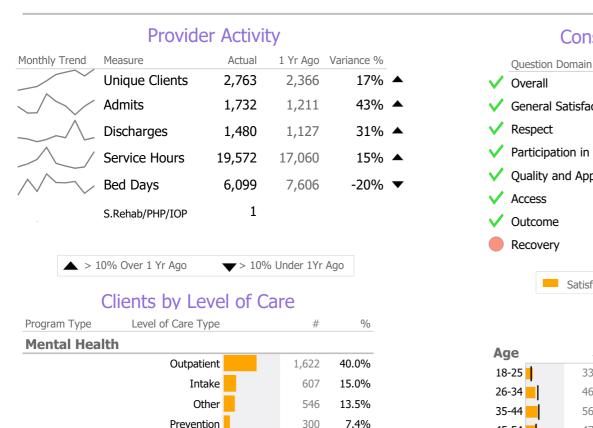
93%

88%

83% 79%

State Avg

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



198

131

57

42

32

232

90

202

4.9%

3.2%

1.4%

1.0%

0.8%

5.7%

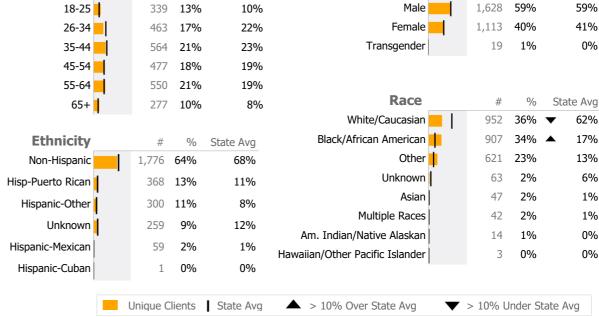
2.2%

5.0%

	Question L	omain			Satisfied % vs	s Goal%	Satisfied %	Goal	%	State Av
✓	Overall						94%	80	%	919
V	General S	Satisfactio	on				93%	80	%	929
V	Respect						93%	80	%	919
/	Participat	ion in Tr	eatme	ent			92%	80	%	929
V	Quality ar	nd Appro	priate	ness			91%	80	%	939
/	Access						90%	80	%	889
/	Outcome						81%	80	%	830
	Recovery						77%	80	%	799
		Satisfied	%	Goal %	0-80%	80-10		oal Met	Und	er Goal
				Ciletti	. Demogi					
Αg	je	#	%	State Av	9	G	iender	#	%	State A
18	-25 📙	339	13%	10%	0		Male	1,628	59%	59
26	-34	463	17%	22%	0		Female	1,113	40%	4:
35	-44	564	21%	23%	, 0	Trar	nsgender	19	1%	(
45	-54	477	18%	19%	,					

Satisfied % vs Goal%

Consumer Satisfaction Survey



ACT Team Pre Admit

Connecticut Mental Health Center Mental Health - Other - Other

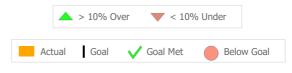
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	5	60%	•
Admits	6	-		
Discharges	3	3	0%	
Service Hours	11	1		





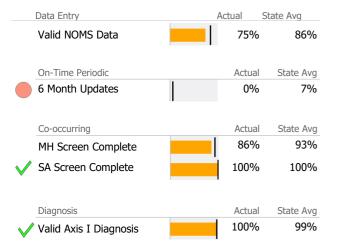
^{*} State Avg based on 26 Active Other Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	14	17	-18%	•
Admits	6	9	-33%	•
Discharges	8	12	-33%	•
Transfers - In	1	2	-50%	•
Transfers - Out	1	1	0%	
Bed Days	1,581	2,356	-33%	•

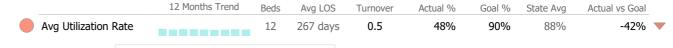
Data Submission Quality



Discharge Outcomes



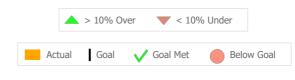
Bed Utilization



>110%

90-110%



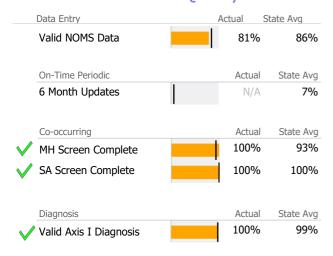


^{*} State Avg based on 11 Active Acute Psychiatric Programs

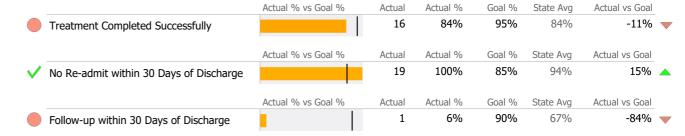
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	5	260%	•
Admits	20	5	300%	•
Discharges	19	6	217%	•
Bed Days	179	14	1179%	•

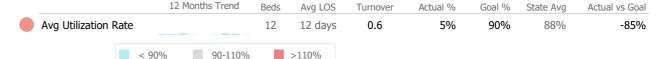
Data Submission Quality



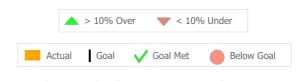
Discharge Outcomes



Bed Utilization







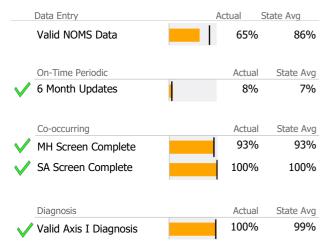
^{*} State Avg based on 11 Active Acute Psychiatric Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	28	27	4%	
Admits	12	14	-14%	•
Discharges	11	11	0%	
Transfers - In	1	-		
Transfers - Out	1	2	-50%	•
Bed Days	4,339	4,165	4%	

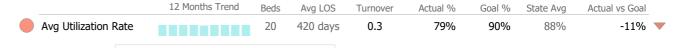
Data Submission Quality



Discharge Outcomes



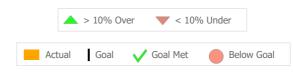
Bed Utilization



>110%

90-110%



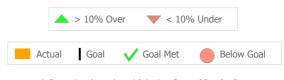


^{*} State Avg based on 11 Active Acute Psychiatric Programs

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

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	19	16%	•
Admits	9	10	-10%	
Discharges	13	5	160%	•
Service Hours	2	1		





FORDD Mens Forensic Drug Diversion

Connecticut Mental Health Center

Mental Health - Outpatient - Court Liaison-Jail Diversion

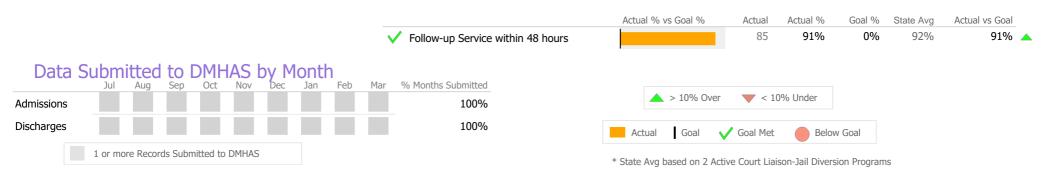
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	133	91	46%	•
Admits	104	63	65%	•
Discharges	82	54	52%	•

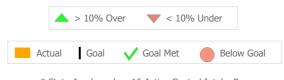
Jail Diversion



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

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	31	-71%	•
Admits	9	30	-70%	•
Discharges	9	31	-71%	•
Service Hours	1	9	-89%	•





FORDD Womens Forensic Drug Diversion

Connecticut Mental Health Center

Mental Health - Outpatient - Court Liaison-Jail Diversion

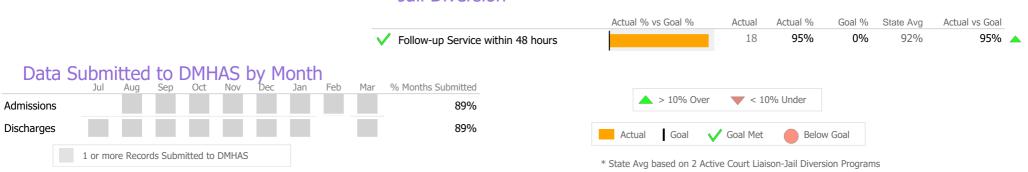
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	35	44	-20%	•
Admits	22	25	-12%	•
Discharges	18	30	-40%	•

Jail Diversion



* State Avg based on 74 Active Standard Outpatient Programs

1 or more Records Submitted to DMHAS

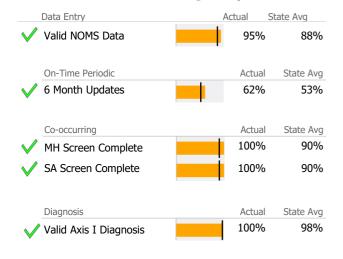
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 95 101 -6% Treatment Completed Successfully 3 19% 50% 41% -31% 9 18 -50% 🔻 Admits Recovery Discharges 16 14 14% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 860 971 -11% 61 64% 60% 61% 4% Social Support 87 92% 95% 72% -3% Stable Living Situation **Data Submission Quality** -19% -**Employed** 10 11% 30% 25% Data Entry Actual State Avg Service Utilization Valid NOMS Data 92% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 79 100% 90% 82% 10% On-Time Periodic Actual State Avg 6 Month Updates 64% 53% Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Co-occurring Actual State Avg 9 25% 100% 90% 2 or more Services within 30 days 100% 75% 78% MH Screen Complete SA Screen Complete 100% 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 67% Discharges 100% ✓ Goal Met Actual Goal Below Goal 100% Services

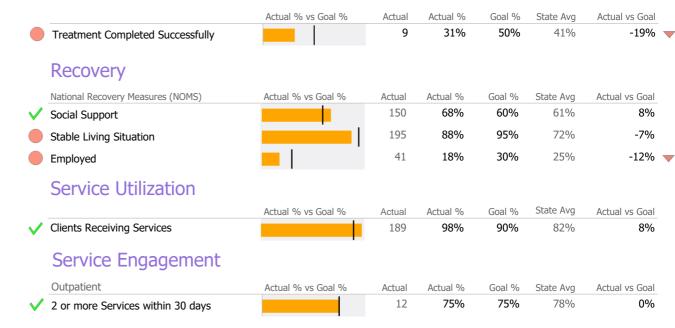
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	222	232	-4%	
Admits	16	27	-41%	•
Discharges	29	22	32%	•
Service Hours	2,171	2,268	-4%	

Data Submission Quality



Discharge Outcomes





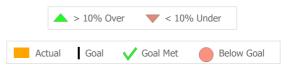


^{*} State Avg based on 74 Active Standard Outpatient Programs

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

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	46	-43%	lacktriangle
Admits	26	45	-42%	•
Discharges	25	46	-46%	•
Service Hours	7	19	-61%	•

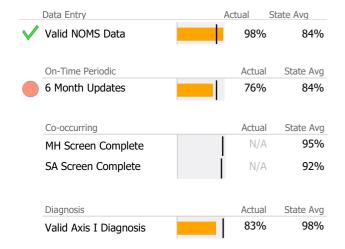




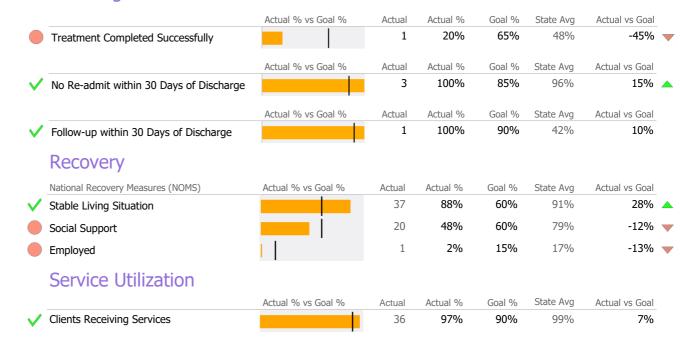
Program Activity

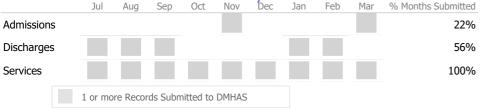
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	42	43	-2%	
Admits	3	1	200%	•
Discharges	5	3	67%	•
Service Hours	783	756	4%	

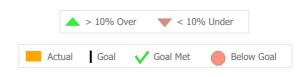
Data Submission Quality



Discharge Outcomes







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

Services

1 or more Records Submitted to DMHAS

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

* 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** 90 82 10% Treatment Completed Successfully 8 29% 50% 36% -21% 30 131% Admits 13 Recovery 28 56% Discharges 18 National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,942 1,243 56% 90 100% 60% 34% 40% 🔺 Self Help 50% 62% -10% 45 60% Social Support **Data Submission Quality** Stable Living Situation 67 74% 95% 78% -21% Data Entry Actual State Avg 3 3% 30% 20% -27% **Employed** Valid NOMS Data 91% 93% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual vs Goal Actual % vs Goal % Actual Actual % 87% 6 Month Updates 91% Clients Receiving Services 61 97% 98% 90% 8% Service Engagement Co-occurring Actual State Avg 100% 81% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 28 93% 75% 95% 18% 🔺 SA Screen Complete 100% 80% 2 or more Services within 30 days State Avg Diagnosis Actual 91% 97% Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 89% Discharges 89% ✓ Goal Met Actual Goal Below Goal

100%

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

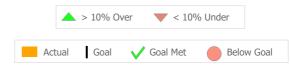
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	18	44%	•
Admits	26	16	63%	•
Discharges	25	18	39%	•

Crisis



		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admission	S										89%
Discharges	5										89%
	1	l or m	ore Recor	ds Subr	nitted to	DMHAS					



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

1 or more Records Submitted to DMHAS

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

* State Avg based on 36 Active CSP Programs

Program Activity Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 32 38 -16% Treatment Completed Successfully 50% 65% 57% -15% 3 7 -57% Admits Recovery 2 9 Discharges **-78% ▼** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,061 573 85% 29 91% 80% 87% 11% 🔺 Stable Living Situation 18 56% 60% 80% -4% Social Support **Data Submission Quality** 2 6% **Employed** 20% 14% -14% Data Entry Actual State Avg Service Utilization Valid NOMS Data 99% 84% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 30 100% 90% 98% 10% On-Time Periodic Actual State Avg 6 Month Updates 93% 84% Co-occurring Actual State Avg 100% 96% MH Screen Complete SA Screen Complete 100% 95% Diagnosis State Avg Actual 59% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 22% Discharges 22% ✓ Goal Met Actual Goal Below Goal Services 100%

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	143	119	20%	•
Admits	88	58	52%	•
Discharges	73	64	14%	•
Service Hours	808	730	11%	•

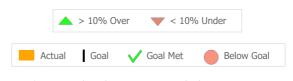
Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	84%	88%
On-Time Periodic	Actua	l State Avg
6 Month Updates	21%	53%
Co-occurring	Actua	al State Avg
✓ MH Screen Complete	100%	6 90%
✓ SA Screen Complete	100%	6 90%
Diagnosis	Actua	I State Avg
Valid Axis I Diagnosis	87%	98%

Discharge Outcomes







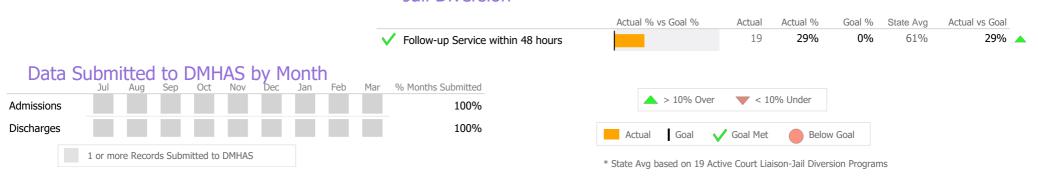
^{*} State Avg based on 74 Active Standard Outpatient Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	232	143	62%	•
Admits	203	107	90%	•
Discharges	206	82	151%	•

Jail Diversion



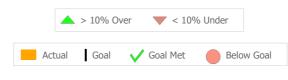
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	110	69	59%	•
Admits	114	75	52%	•
Discharges	108	74	46%	•

Crisis



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
	1 or n	nore Record	ds Sub	mitted t	o DMHA	S				



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

SA Screen Complete

Valid Axis I Diagnosis

Diagnosis

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

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 177 191 -7% Treatment Completed Successfully 3 25% 50% 41% -25% 13 Admits 11 18% Recovery 12 Discharges 25 -52% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,265 924 37% 104 59% 60% 61% -1% Social Support 92% 95% 72% -3% 163 Stable Living Situation **Data Submission Quality** 21 -18% **Employed** 12% 30% 25% Data Entry Actual State Avg Service Utilization Valid NOMS Data 96% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 163 99% 90% 82% 9% On-Time Periodic Actual State Avg 6 Month Updates 64% 53% Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Ava Actual vs Goal Co-occurring Actual State Avg Actual 9 100% 90% 69% 75% 78% -6% 2 or more Services within 30 days MH Screen Complete



100%

Actual 80%

90%

State Avg

98%

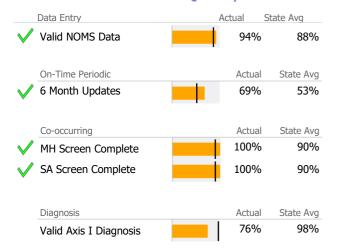


^{*} State Avg based on 74 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	256	266	-4%	
Admits	21	7	200%	•
Discharges	28	24	17%	•
Service Hours	1,552	1,341	16%	•

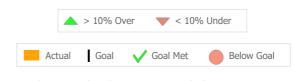
Data Submission Quality



Discharge Outcomes







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

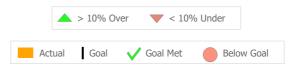
Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 289 309 -6% Treatment Completed Successfully 3 25% 50% 41% -25% 5 7 Admits -29% Recovery 12 22 Discharges -45% **T** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1.762 1,624 8% 193 67% 60% 61% 7% Social Support 256 89% 95% 72% -6% Stable Living Situation **Data Submission Quality** -22% -**Employed** 24 8% 30% 25% Data Entry Actual State Avg Service Utilization Valid NOMS Data 97% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 276 100% 90% 82% 10% On-Time Periodic Actual State Avg 6 Month Updates 80% 53% Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Co-occurring Actual State Avg -55% -100% 90% 20% 75% 78% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 100% 90% Diagnosis State Avg Actual 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 56% Discharges 67% Actual Goal ✓ Goal Met Below Goal Services 100%

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	443	249	78%	•
Admits	440	243	81%	•
Discharges	372	238	56%	•
Service Hours	71	12		

Data	Jul	Aug	Sep	Oct	Nov	- /	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%
	1 or mo	ore Record	ds Sub	mitted t	o DMHA	NS				



^{*} State Avg based on 16 Active Central Intake 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 % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal -16% 🔻 **Unique Clients** 107 87 23% Treatment Completed Successfully 10 34% 50% 41% 38 52% 🔺 Admits 25 Recovery 29 Discharges 35 -17% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 909 517 76% 88 81% 60% 61% 21% 🔺 Social Support 48 44% 30% 25% 14% 🔺 **Employed Data Submission Quality** 94% 95% Stable Living Situation 102 72% -1% Data Entry Actual State Avg Service Utilization Valid NOMS Data 93% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 79 100% 90% 82% 10% On-Time Periodic Actual State Avg 6 Month Updates 78% 53% Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Co-occurring Actual State Avg 95% 20% 95% 90% 2 or more Services within 30 days 36 75% 78% MH Screen Complete SA Screen Complete 100% 90% Diagnosis State Avg Actual 72% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% Discharges 78% ✓ Goal Met Actual Goal Below Goal Services 100%

Park Street Transitional Living

Connecticut Mental Health Center

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	0	9	•
Admits	-	1	-100% 🔻
Discharges	-	9	-100% 🔻

Data Submission Quality

Data Entry	Actual S	State Avg
Valid NOMS Data	N/A	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	84%
Co-occurring	Actual	State Avg
MH Screen Complete	N/A	92%
SA Screen Complete	N/A	90%

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

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		10	N/A	N/A	0%	90%	89%	-90%

Data Submitted to DMHAS by Month

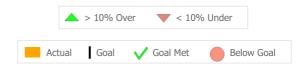
Admissions

Discharges

Oct Nov Dec Jan Feb Mar % Months Submitted

O%

O%

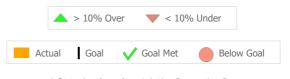


^{*} State Avg based on 29 Active MH Intensive Res. Rehabilitation Programs

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

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	300	320	-6%
Admits	-	-	
Discharges	19	14	36% 🔺





Park Street/Rehabilitation Services

Connecticut Mental Health Center

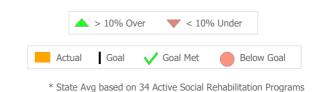
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

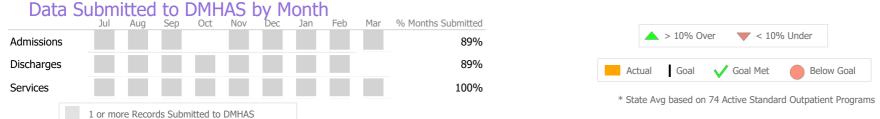
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Service Utilization Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Measure Actual 1 Yr Ago Variance % Clients Receiving Services 36 19% 90% 72% -71% **Unique Clients** 198 214 -7% 7 7 0% Admits 7 21 Discharges **-67% ▼** 17% Service Hours 288 246 Social Rehab/PHP/IOP 1 0 Days





Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 59 41 44% Treatment Completed Successfully 19% 50% 41% -31% 18 18 0% Admits Recovery 21 Discharges 1 2000% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 514 632 -19% 31 53% 60% 61% -7% Social Support 51 86% 95% 72% -9% Stable Living Situation **Data Submission Quality** 8 **Employed** 14% 30% 25% -16% Data Entry Actual State Avg Service Utilization Valid NOMS Data 89% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 35 92% 90% 82% 2% On-Time Periodic Actual State Avg 6 Month Updates 68% 53% Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Co-occurring Actual State Avg Actual 19% 94% 90% 2 or more Services within 30 days 17 94% 75% 78% MH Screen Complete SA Screen Complete 100% 90% Diagnosis State Avg Actual 63% 98% Valid Axis I Diagnosis



Research-OP-CNRU-Angarita-COCAINE

Connecticut Mental Health Center

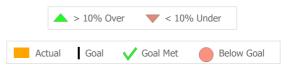
Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	7	214%	•
Admits	15	7	114%	•
Discharges	4	1	300%	•
Service Hours	_	_		





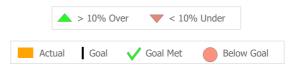
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

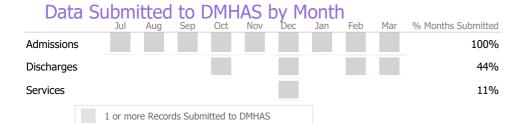
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2	2	0%	
Admits	2	1	100%	•
Discharges	-	1	-100%	•
Service Hours	_	_		

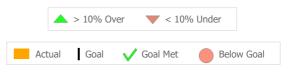


1 or more Records Submitted to DMHAS

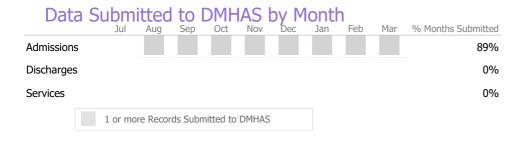


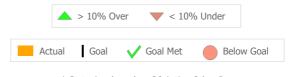
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	88	27	226%	•
Admits	59	26	127%	•
Discharges	5	5	0%	
Service Hours	2	-		





Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	23	5	360%	•
Admits	15	4	275%	•
Discharges	-	1	-100%	•
Service Hours	-	21	-100%	•





Research-OP-Corlett-BLAM

Connecticut Mental Health Center

Mental Health - Other - Other

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	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Data Submitted to DMHAS by Month
Jul Aug Sep Oct Nov Dec Jan Feb Mar % Months Submitted

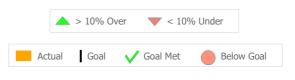
Admissions

Discharges

Oct Nov Dec Jan Feb Mar % Months Submitted

0%

1 or more Records Submitted to DMHAS



^{*} State Avg based on 26 Active Other Programs

Research-OP-Fineberg-KETAMINE

Connecticut Mental Health Center Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

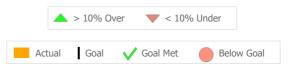
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2	1	100%	•
Admits	1	1	0%	
Discharges	-	-		
Service Hours	-	5	-100%	\blacksquare

Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec Jan Feb Mar % Months Submitted Admissions Discharges

Services

1 or more Records Submitted to DMHAS



11% 0%

0%

Research-OP-Powers-Psychosis

Connecticut Mental Health Center

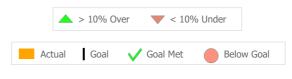
Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	15		
Admits	15	-	
Discharges	-	-	
Service Hours	27	-	

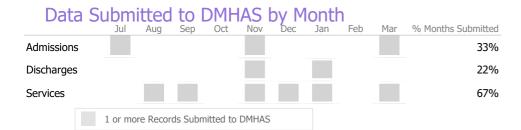


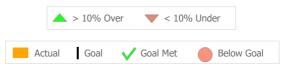


Connecticut Mental Health Center

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

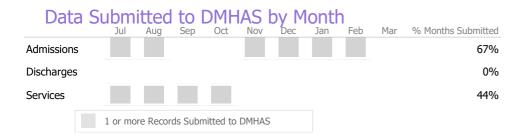
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	1	600%	•
Admits	3	-		
Discharges	4	-		
Service Hours	26	1		

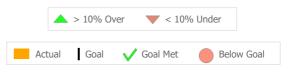




Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	23	6	283%	•
Admits	10	5	100%	•
Discharges	-	-		
Service Hours	21	10	105%	•





^{*} State Avg based on 26 Active Other Programs

Research-OP-SATU

Connecticut Mental Health Center

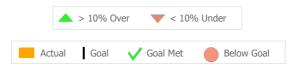
Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

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





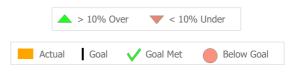
Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

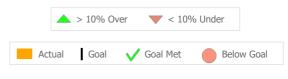
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	68	29	134%	•
Admits	31	18	72%	•
Discharges	-	-		
Service Hours	-	-		





Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	33	21	57%	•
Admits	18	18	0%	
Discharges	5	4	25%	•
Service Hours	-	_		





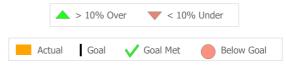
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	86	63	37%	•
Admits	87	63	38%	•
Discharges	86	63	37%	•
Service Hours	188	99	89%	•

Data Submitted to DMHAS by Month

Data	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%
	1 or m	ore Record	ds Sub	mitted t	o DMHA	S				



^{*} State Avg based on 16 Active Central Intake Programs

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

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 100% N/A N/A 50% 50% N/A Treatment Completed Successfully Admits 1 Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 32 8 2 100% 55% 42% 45% 🔺 Abstinence/Reduced Drug Use 2 100% 60% 15% 40% Self Help **Data Submission Quality** 2 25% Not Arrested 100% 75% 76% Data Entry Actual State Avg 2 95% 75% 5% 100% Stable Living Situation Valid NOMS Data 100% 87% 0% 50% 50% 33% **Employed** 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% Clients Receiving Services 100% 90% 58% 10% Service Engagement Co-occurring Actual State Avg 100% 92% MH Screen Complete Outpatient Actual vs Goal Actual % vs Goal % Actual Actual % Goal % State Ava SA Screen Complete 100% 93% 2 or more Services within 30 days 100% 75% 65% 25% 🔺 Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Nov Dec Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 11% 0% Discharges ✓ Goal Met Actual Goal Below Goal Services 100% * State Avg based on 108 Active Standard Outpatient Programs

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

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 200 162 23% 11 14% 50% 50% -36% Treatment Completed Successfully 89 41% 🔺 Admits 63 Recovery 78 Discharges 54 44% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,962 1,612 22% 201 99% 60% 15% 39% Self Help 90% 95% 75% -5% 182 Stable Living Situation **Data Submission Quality** 87 43% 50% 33% -7% **Employed** Data Entry Actual State Avg 98 48% 55% 42% -7% Abstinence/Reduced Drug Use Valid NOMS Data 91% 87% 122 60% 75% 76% -15% Not Arrested Valid TEDS Data 96% 85% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 94% 15% Clients Receiving Services 123 97% 90% 58% 7% Service Engagement Co-occurring Actual State Avg 100% 92% MH Screen Complete Outpatient Actual vs Goal Actual % vs Goal % Actual Actual % Goal % State Ava SA Screen Complete 100% 93% 2 or more Services within 30 days 82 93% 75% 65% 18% 🔺 Diagnosis Actual State Avg 99% 99% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% 100% Discharges ✓ Goal Met Actual Goal Below Goal Services 100% * State Avg based on 108 Active Standard Outpatient Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

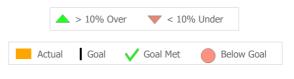
* State Avg based on 74 Active Standard Outpatient Programs

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 11 13 -15% 0 0% 50% 41% -50% Treatment Completed Successfully 3 Admits 33% Recovery -25% Discharges 3 4 National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 67 53 27% 0 0% 30% 25% -30% **Employed** 36% 95% 72% -59% 4 Stable Living Situation **Data Submission Quality** 0 0% Social Support 60% 61% -60% Data Entry Actual State Avg Service Utilization Valid NOMS Data 78% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 100% 90% 82% 10% On-Time Periodic Actual State Avg 29% 53% 6 Month Updates Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Co-occurring Actual State Avg -25% -100% 90% 50% 75% 78% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 100% 90% Diagnosis State Avg Actual 91% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 33% Discharges 22% Actual Goal Goal Met Below Goal Services 100%

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

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	258	179	44%	•
Admits	76	68	12%	•
Discharges	75	14	436%	•





^{*} State Avg based on 1 Active Outreach & Engagement Programs

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

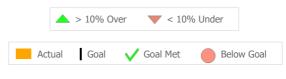
* State Avg based on 74 Active Standard Outpatient Programs

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 40 55 -27% Treatment Completed Successfully 33% 50% 41% -17% 19 -5% Admits 20 Recovery Discharges 3 15 -80% **T** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 729 831 -12% 23 57% 60% 61% -3% Social Support 27 68% 95% 72% -27% Stable Living Situation **Data Submission Quality** 0 **Employed** 0% 30% 25% -30% Data Entry Actual State Avg Service Utilization Valid NOMS Data 89% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 34 92% 90% 82% 2% On-Time Periodic Actual State Avg 6 Month Updates 13% 53% Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Actual State Avg Co-occurring 25% 40% 2 or more Services within 30 days 19 100% 75% 78% 90% MH Screen Complete SA Screen Complete 100% 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 67% Discharges 33% ✓ Goal Met Actual Goal Below Goal Services 100%

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

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	20	22	-9%
Admits	20	19	5%
Discharges	20	22	-9%
Service Hours	-	-	

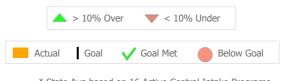




Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	10	-50%	•
Admits	5	10	-50%	•
Discharges	5	10	-50%	•
Service Hours	_	_		





Admissions

Discharges

Services

1 or more Records Submitted to DMHAS

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

✓ Goal Met

* State Avg based on 74 Active Standard Outpatient Programs

Below Goal

Actual

Goal

Program Activity Discharge Outcomes Actual % Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 82 90 -9% 3 33% 50% 41% -17% Treatment Completed Successfully 7 13 Admits **-46% ** Recovery 9 Discharges 10 -10% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 2,513 2,553 -2% 24 29% 30% 25% -1% **Employed** 48 59% 60% 61% -1% Social Support **Data Submission Quality** 69 84% 95% Stable Living Situation 72% -11% Data Entry Actual State Avg Service Utilization Valid NOMS Data 95% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 74 100% 90% 82% 10% On-Time Periodic Actual State Avg 6 Month Updates 83% 53% Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Actual State Avg Co-occurring 25% 62% 90% 2 or more Services within 30 days 100% 75% 78% MH Screen Complete SA Screen Complete 100% 90% Diagnosis State Avg Actual 93% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p>

67%

56%

100%