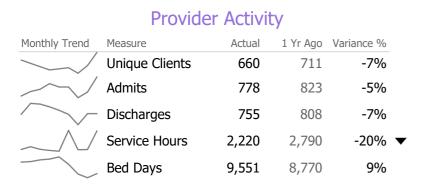
Wellmore

Waterbury, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

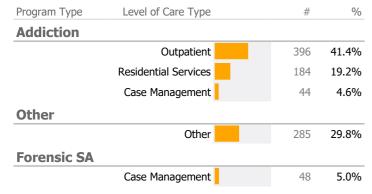
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)



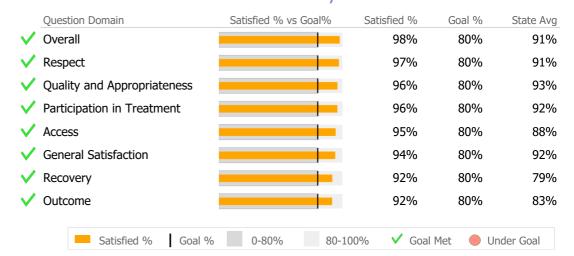
▲ > 10% Over 1 Yr Ago

▼ > 10% Under 1Yr Ago

Clients by Level of Care



Consumer Satisfaction Survey (Based on 224 FY21 Surveys)



Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	60	9%	10%	Male 🗾	513	78%	▲ 59%
26-34	197	30%	22%	Female <mark>=</mark>	147	22%	▼ 41%
35-44	215	33%	23%	Transgender			0%
45-54	111	17%	19%				
55-64	67	10%	19%				
65+	9	1%	8%	Race	#	%	State Avg
				White/Caucasian 📒 📔	288	44%	▼ 62%
Ethnicity	#	%	State Avg	Black/African American 📕	196	30%	▲ 17%
Non-Hispanic	445	67%	68%	Other 📕	168	25%	▲ 13%
Hisp-Puerto Rican	172	26%	▲ 11%	Am. Indian/Native Alaskan	5	1%	0%
Hispanic-Other	23	3%	8%	Asian	2	0%	1%
Hispanic-Mexican	16	2%	1%	Hawaiian/Other Pacific Islander	1	0%	0%
				Multiple Races			1%
Hispanic-Cuban	4	1%	0%	Unknown			6%
Unknown			▼ 12%	·			
	Unique C	lients	State Avg	▲ > 10% Over State Avg	> 10% l	Inder S	tate Avg

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

Case Management 931480

Wellmore

Addiction - Case Management - Standard Case Management

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	44	96	-54%	▼
Admits	28	73	-62%	▼
Discharges	39	74	-47%	▼
Service Hours	151	324	-53%	▼

Data Submission Quality

Data Entry	Actual S	State Avg
Valid NOMS Data	100%	92%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	49%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Treatment Completed Successfully		39	100%	50%	67%	50%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Self Help		41	91%	60%	51%	31%	
\checkmark	Employed		15	33%	20%	27%	13%	
\checkmark	Stable Living Situation		42	93%	80%	79%	13%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		6	100%	90%	76%	10%	

Data Submitted to DMHAS by Month



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

* State Avg based on 13 Active Standard Case Management Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	19	15	27%	
Admits	19	14	36%	
Discharges	17	12	42%	
Bed Days	597	477	25%	

Discharge Outcomes



Data Submitted to DMHAS by Month



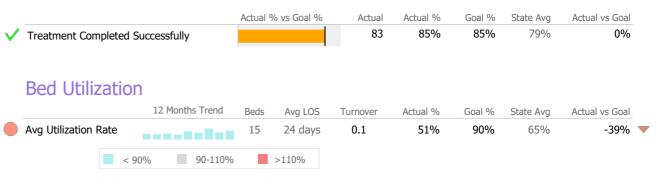
	> 10% 0	ver 💙 < 10%	% Under	
Actual	Goal	V Goal Met	Below Go	bal

* State Avg based on 12 Active Recovery House Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	96	89	8%
Admits	91	87	5%
Discharges	98	92	7%
Bed Days	2,089	2,096	0%

Discharge Outcomes



Data Submitted to DMHAS by Month



	► > 10% C	over 🔻 < 10	% Under	
Actua	Goal	🗸 Goal Met	Below	w Goal

* State Avg based on 12 Active Recovery House Programs

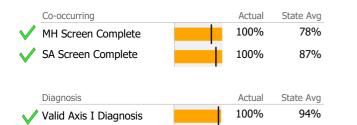
Other - Other - Integrated Primary Care

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	285	291	-2%
Admits	129	145	-11% 🔻
Discharges	93	110	-15% 🔻
Service Hours	245	513	-52% 🔻

Data Submission Quality

Data Entry	Actual	State Avg



Data Submitted to DMHAS by Month



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

* State Avg based on 6 Active Integrated Primary Care Programs

Addiction - Residential Services - Recovery House

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

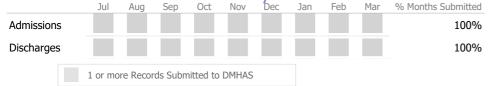
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	73	81	-10%
Admits	58	67	-13% 🔻
Discharges	63	65	-3%
Bed Days	5,363	4,945	8%

Discharge Outcomes



Data Submitted to DMHAS by Month



	^ >	10% Ove	r	▼	< 10%	Unde	r	
Act	cual	Goal	\checkmark	Goal	Met		Below	Goal

* State Avg based on 12 Active Recovery House Programs

Forensic SA - Case Management - Standard Case Management

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	31	8	288%	
Admits	24	4	500%	
Discharges	27	8	238%	
Service Hours	131	89	48%	

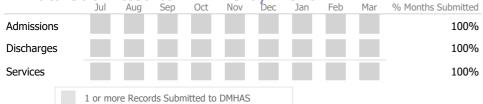
Data Submission Quality

Data Entry	Actual	State Avg
🗸 Valid NOMS Data	100%	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	
\checkmark	Treatment Completed Successfully		19	70%	50%	75%	20%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		28	90%	60%	81%	30%	
\checkmark	Employed	·	15	48%	20%	29%	28% 🔺	
\checkmark	Stable Living Situation		28	90%	80%	60%	10%	
\checkmark	Self Help		19	61%	60%	58%	1%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		4	100%	90%	64%	10%	

Data Submitted to DMHAS by Month



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

* State Avg based on 8 Active Standard Case Management Programs

Forensic SA - Case Management - Standard Case Management

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	7	214%	
Admits	19	4	375%	
Discharges	18	5	260%	
Service Hours	65	22	193%	

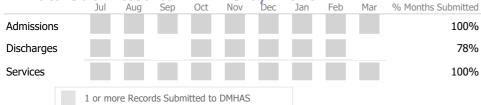
Data Submission Quality

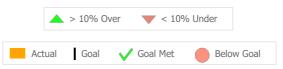
Data Entry	Actual	State Avg
🗸 Valid NOMS Data	100%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	4%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Treatment Completed Successfully		17	94%	50%	75%	44%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		20	91%	60%	81%	31%	
	Self Help		13	59%	60%	58%	-1%	
	Stable Living Situation		16	73%	80%	60%	-7%	
	Employed	I	2	9%	20%	29%	-11%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		4	100%	90%	64%	10%	

Data Submitted to DMHAS by Month





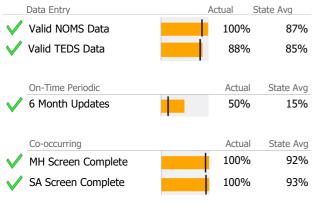
* State Avg based on 8 Active Standard Case Management Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	396	443	-11% 🔻
Admits	398	414	-4%
Discharges	386	429	-10%
Service Hours	1,629	1,842	-12% 🔻

Data Submission Quality

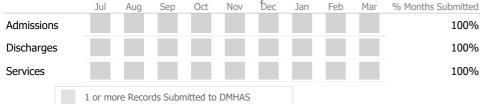


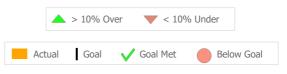
Diagnosis Actual State Avg Valid Axis I Diagnosis 100% 99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		254	66%	50%	50%	16%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested		404	94%	75%	76%	19%
Abstinence/Reduced Drug Use		235	54%	55%	42%	-1%
Stable Living Situation		366	85%	95%	75%	-10%
Employed	·	145	34%	50%	33%	-16%
Self Help		84	19%	60%	15%	-41%
Self Help Service Utilization		84	19%	60%	15%	-41%
·	Actual % vs Goal %	84 Actual	19% Actual %	60% Goal %	15% State Avg	-41% Actual vs Goal
·	Actual % vs Goal %					
Service Utilization	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Service Utilization Clients Receiving Services	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal

Data Submitted to DMHAS by Month





* State Avg based on 108 Active Standard Outpatient Programs

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

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	17	19	-11%	▼
Admits	12	15	-20%	▼
Discharges	14	13	8%	
Bed Days	1,502	1,252	20%	

Data Submission Quality

Valid Axis I Diagnosis

Data Entry	Actual	State Avg	
Valid NOMS Data	100%	6 86%	
Valid TEDS Data	100%	6 93%	
On-Time Periodic	Actua	al State Avg	
6 Month Updates	N//	8%	
Co-occurring	Actua	al State Avg	
V MH Screen Complete	100%	6 95%	
🗸 SA Screen Complete	100%	6 92%	
Diagnosis	Actua	al State Avg	

Discharge Outcomes

		Actual % vs Goal	% Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Treatment Completed Successfully		10	71%	70%	69%	1%
		Actual % vs Goal 9	% Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	No Re-admit within 30 Days of Discharge		13	93%	85%	91%	8%
		Actual % vs Goal	% Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Follow-up within 30 Days of Discharge		8	80%	90%	69%	-10%
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	6 Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Abstinence/Reduced Drug Use		14	78%	70%	66%	8%
	Bed Utilization						
	12 Months Trend	Beds Avg LOS	5 Turnover	Actual %	Goal %	State Avg	Actual vs Goal
	Avg Utilization Rate	8 173 day	s 0.3	69%	90%	89%	-21%
	< 90% 90-1109	% >110%					

Data Submitted to DMHAS by Month



100%

100%



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