#### **Provider Activity Consumer Satisfaction Survey** (Based on 206 FY21 Surveys) Monthly Trend Actual 1 Yr Ago Variance % Measure **Ouestion Domain** Satisfied % vs Goal% Satisfied % Goal % State Ava **Unique Clients** 4% 5,130 4,922 Overall 91% 80% 91% 8,198 8,029 2% Admits General Satisfaction 88% 80% 92% **Quality and Appropriateness** 87% 80% 93% 2% Discharges 7,981 7,804 Participation in Treatment 86% 80% 92% Service Hours 15% 🔺 40,081 34,758 Respect 86% 80% 91% **Bed Days** 41,960 44,194 -5% Access 84% 80% 88% 83% Outcome 76% 80% ▲ > 10% Over 1 Yr Ago > 10% Under 1Yr Ago 73% 80% 79% Recovery Clients by Level of Care Goal % ✓ Goal Met Satisfied % 0-80% 80-100% Under Goal Program Type Level of Care Type % Client Demographics **Mental Health** Intake 1,941 24.9% Gender Age # % State Avg % State Avg Outpatient 1,713 22.0% 10% 3,143 61% 59% 18-25 499 10% Male Community Support 379 4.9% 1,983 39% 41% 26-34 23% 22% Female 1,171 Crisis Services 299 3.8% 0% 26% Transgender 35-44 1,334 23% **Employment Services** 140 1.8% 45-54 1,006 20% 18% Social Rehabilitation 92 1.2% 55-64 855 17% 18% ACT 68 0.9% Race % State Avg 65+ 248 5% 8% Residential Services 22 0.3% White/Caucasian 2,262 44% 61% Consultation 17 0.2% **Ethnicity** Unknown 1,528 30% 6% # % State Avg Black/African American 1,063 21% 17% Case Management 13 0.2% Non-Hispanic 2,866 56% **T** 68% Hawaiian/Other Pacific Islander 3% 0% 162 Addiction Hispanic-Other 1,222 24% 🔺 9% Multiple Races 59 1% 1% Residential Services 2,148 27.6% Unknown | 20% 1,039 12% Asian 1% 1% 35 Outpatient 523 6.7% Hisp-Puerto Rican 0% 🔻 11% Am. Indian/Native Alaskan 18 0% 0% Case Management 2.2% 175 0% Hispanic-Cuban Other 13% 3 **Employment Services** 175 2.2% Hispanic-Mexican 1% **Forensic SA** 91 Forensics Community-based 1.2% Unique Clients State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

## **ABI Consultation Services**

InterCommunity Inc.

Mental Health - Consultation - Consultation

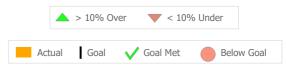
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 17     | 17       | 0%         |   |
| Admits         | -      | 1        | -100%      | • |
| Discharges     | 1      | -        |            |   |
| Service Hours  | 1      | 2        | -53%       | • |





<sup>\*</sup> State Avg based on 10 Active Consultation Programs

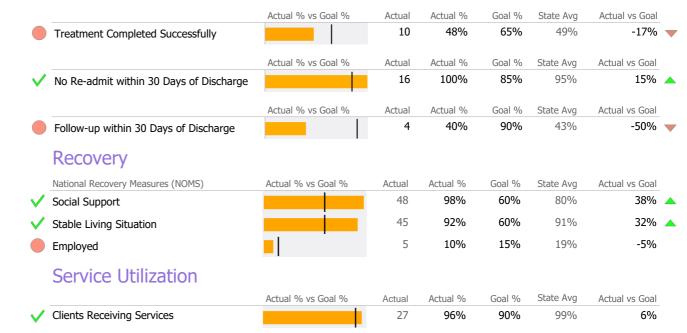
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 49     | 44       | 11%        | • |
| Admits         | 16     | 18       | -11%       | • |
| Discharges     | 21     | 14       | 50%        | • |
| Service Hours  | 2,499  | 2,630    | -5%        |   |

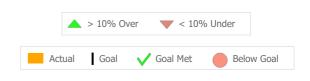
## **Data Submission Quality**

| Data Entry               | Actual | State Avg   |
|--------------------------|--------|-------------|
| Valid NOMS Data          | 78%    | 85%         |
| On-Time Periodic         | Actua  | I State Avg |
| ✓ 6 Month Updates        | 96%    | 90%         |
| Co-occurring             | Actua  | l State Avg |
| ✓ MH Screen Complete     | 95%    | 95%         |
| SA Screen Complete       | 91%    | 92%         |
| Diagnosis                | Actua  | I State Avg |
| ✓ Valid Axis I Diagnosis | 100%   | 98%         |

## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 23 Active Assertive Community Treatment Programs

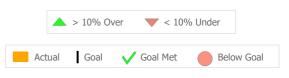
## Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 1,941  | 1,754    | 11%        | • |
| Admits         | 2,095  | 1,903    | 10%        |   |
| Discharges     | 2,097  | 1,901    | 10%        |   |
| Service Hours  | 1,972  | 1,691    | 17%        | • |

|            | Jul    | Aug       | Sep     | Oct       | Nov   | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|--------|-----------|---------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions |        |           |         |           |       |     |     |     |     |     |     |     | 100%               |
| Discharges |        |           |         |           |       |     |     |     |     |     |     |     | 100%               |
| Services   |        |           |         |           |       |     |     |     |     |     |     |     | 100%               |
|            | 1 or m | ore Recor | ds Subr | nitted to | DMHAS | ;   |     |     |     |     |     |     |                    |

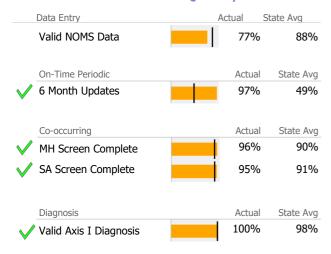


<sup>\*</sup> State Avg based on 16 Active Central Intake Programs

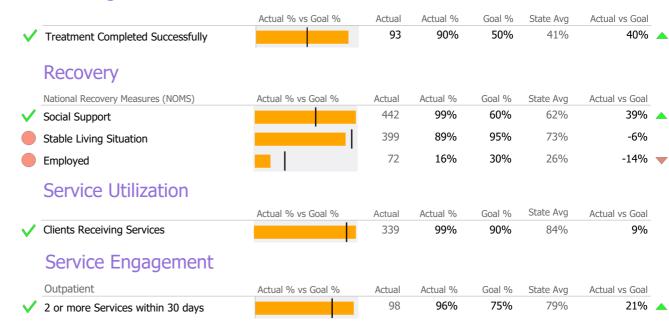
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 439    | 446      | -2%        |   |
| Admits         | 103    | 73       | 41%        | • |
| Discharges     | 103    | 110      | -6%        |   |
| Service Hours  | 7,029  | 6,325    | 11%        | • |

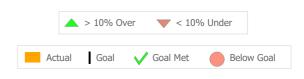
## **Data Submission Quality**



## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 74 Active Standard Outpatient Programs

## **Career Opportunities**

InterCommunity Inc.

Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |  |
|----------------|--------|----------|------------|--|
| Unique Clients | 140    | 146      | -4%        |  |
| Admits         | 84     | 82       | 2%         |  |
| Discharges     | 82     | 93       | -12% 🔻     |  |
| Service Hours  | 1,270  | 1,300    | -2%        |  |

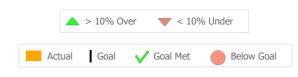
## Recovery



## **Data Submission Quality**

| Data Entry       | Actual | State Avg   |
|------------------|--------|-------------|
| Valid NOMS Data  | 80%    | 92%         |
| On-Time Periodic | Actua  | I State Avg |
| 6 Month Updates  | 100%   | 88%         |

|            | Jul     | Aug      | Sep      | Oct       | Nov   | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|---------|----------|----------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions |         |          |          |           |       |     |     |     |     |     |     |     | 92%                |
| Discharges |         |          |          |           |       |     |     |     |     |     |     |     | 75%                |
| Services   |         |          |          |           |       |     |     |     |     |     |     |     | 100%               |
|            | 1 or mo | ore Reco | rds Subn | nitted to | DMHAS |     |     |     |     |     |     |     |                    |



<sup>\*</sup> State Avg based on 39 Active Employment Services Programs

1 or more Records Submitted to DMHAS

\* State Avg based on 9 Active Transitional/Halfway House 3.1 Programs

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 48 51 -6% 25 68% 85% 64% -17% Treatment Completed Successfully Admits 35 41 -15% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 37 Discharges 39 -5% 33 89% 85% 83% 4% No Re-admit within 30 Days of Discharge Service Hours 34 40 -15% Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Bed Davs 4,188 4,502 -7% Follow-up within 30 Days of Discharge 11 44% 90% 73% -46% -Recovery **Data Submission Quality** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Data Entry Actual State Ava 36 75% 60% 15% **Employed** 38% Valid NOMS Data 86% 87% 11 23% 70% 81% -47% Abstinence/Reduced Drug Use Valid TEDS Data 85% 86% Service Utilization On-Time Periodic Actual State Avg State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal 6 Month Updates N/A N/A Clients Receiving Services 100% 90% 60% 10% 11 **Bed Utilization** Co-occurring Actual State Avg 98% 98% MH Screen Complete 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal SA Screen Complete 98% 98% Avg Utilization Rate 142 days 0.2 76% 90% 85% -14% **T** 15 >110% 90-110% < 90% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 83% 100% Discharges ✓ Goal Met Actual Goal Below Goal 100% Services

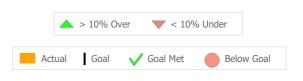
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

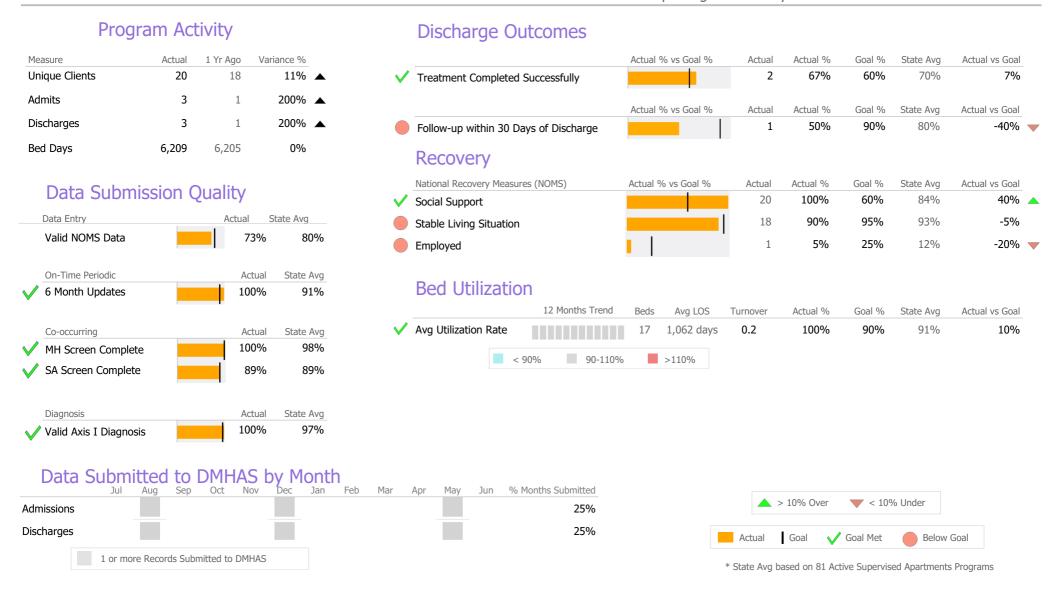
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Service Utilization** Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Measure Actual 1 Yr Ago Variance % Clients Receiving Services 76 84% 90% 75% -6% **Unique Clients** 92 103 -11% 15 19 -21% Admits 2 27 -93% **~** Discharges -9% Service Hours 718 785 Social Rehab/PHP/IOP 0 Days





<sup>\*</sup> State Avg based on 34 Active Social Rehabilitation Programs



InterCommunity Inc.

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

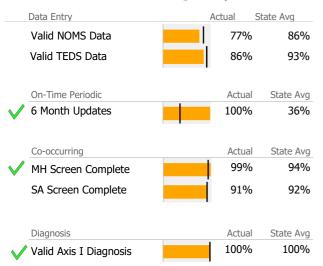
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

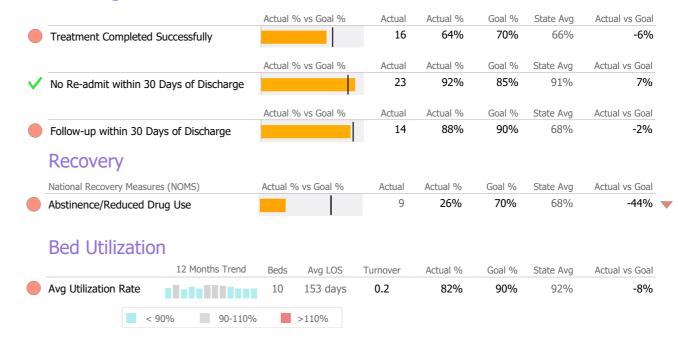
## **Program Activity**

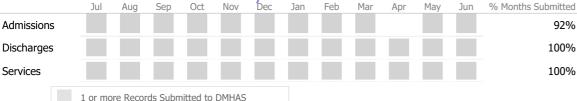
| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 35     | 28       | 25%        | • |
| Admits         | 26     | 18       | 44%        | • |
| Discharges     | 25     | 19       | 32%        | • |
| Service Hours  | 1,960  | 1,909    | 3%         |   |
| Bed Days       | 2,979  | 3,067    | -3%        |   |

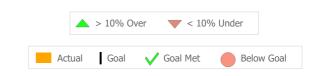
## **Data Submission Quality**



## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 29 Active Intermediate/Long Term Res.Tx 3.5 Programs

Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

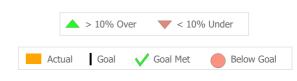
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 299    | 316      | -5%        |   |
| Admits         | 418    | 521      | -20%       | • |
| Discharges     | 418    | 523      | -20%       | • |

## Crisis



|            | Jul     | Aug       | Sep     | Oct       | Nov   | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|---------|-----------|---------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions |         |           |         |           |       |     |     |     |     |     |     |     | 100%               |
| Discharges |         |           |         |           |       |     |     |     |     |     |     |     | 100%               |
|            | 1 or mo | ore Recor | ds Subn | nitted to | DMHAS | ;   |     |     |     |     |     |     |                    |



<sup>\*</sup> State Avg based on 26 Active Mobile Crisis Team Programs

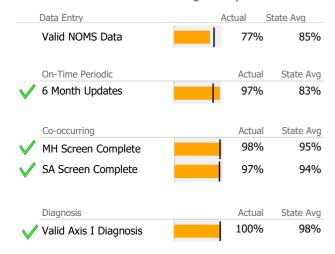
## Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

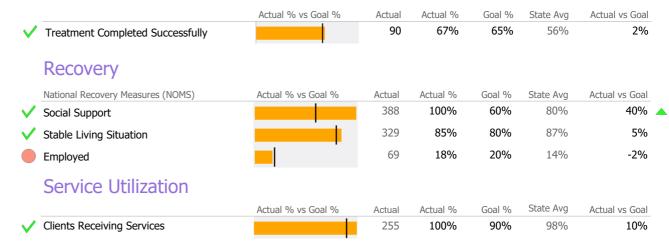
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 379    | 393      | -4%        |   |
| Admits         | 147    | 143      | 3%         |   |
| Discharges     | 134    | 161      | -17%       | • |
| Service Hours  | 9,832  | 10,670   | -8%        |   |

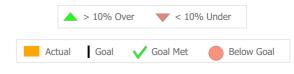
## **Data Submission Quality**



## Discharge Outcomes





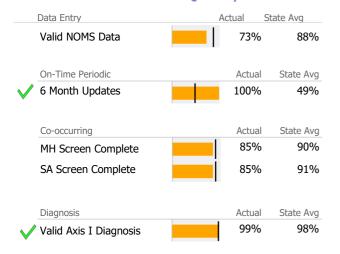


<sup>\*</sup> State Avg based on 38 Active CSP Programs

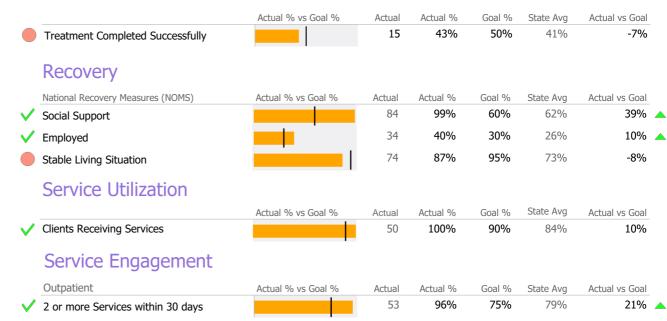
# Program Activity Actual 1 Yr Ag

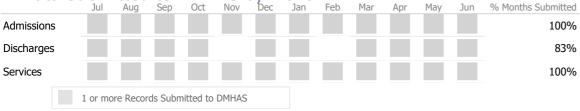
| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 80     | 36       | 122%       | • |
| Admits         | 57     | 36       | 58%        | • |
| Discharges     | 35     | 8        | 338%       | • |
| Service Hours  | 1,801  | 474      |            |   |

## **Data Submission Quality**



## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 74 Active Standard Outpatient Programs

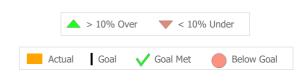
Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Unique Clients** 395 417 -5% 391 82% 85% 79% -3% Treatment Completed Successfully 473 510 -7% Admits 477 510 -6% Discharges **Bed Utilization** Bed Days 4,424 -27% 🔻 6,025 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 20 days 0.1 52% 90% 64% -38% **T** -----< 90% 90-110% >110%



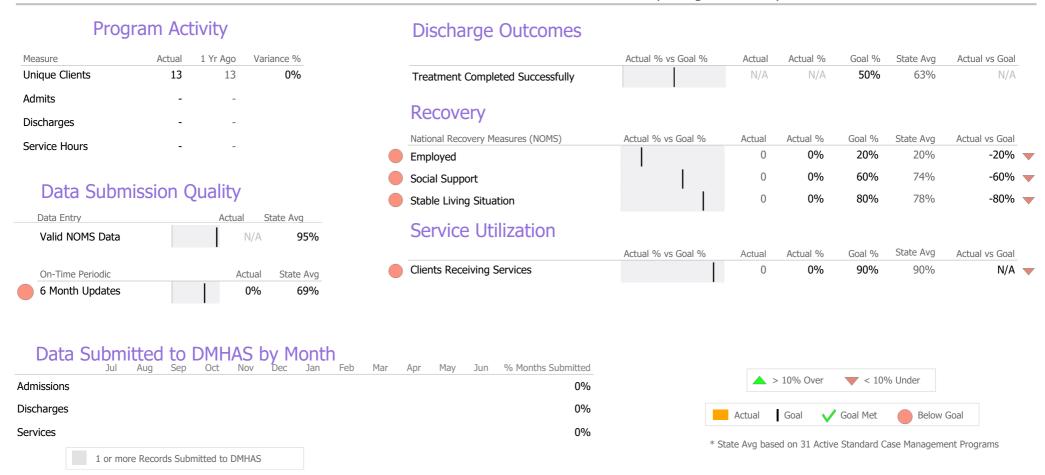


<sup>\*</sup> State Avg based on 12 Active Recovery House Programs

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Mental Health - Case Management - Standard Case Management



1 or more Records Submitted to DMHAS

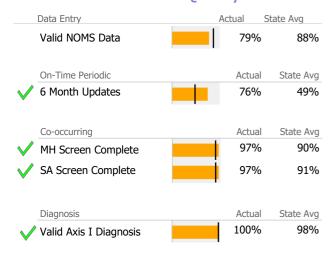
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 459 266 73% 🔺 221 69% 50% 48% 19% 🔺 Treatment Completed Successfully 62% 🔺 Admits 364 225 Recovery 115% Discharges 318 148 National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,333 1,067 25% 378 78% 95% 76% -17% Stable Living Situation 75% 77% 248 51% -24% Not Arrested **Data Submission Quality Employed** 99 20% 50% 33% -30% Data Entry Actual State Avg 91 19% 60% 16% -41% Self Help Valid NOMS Data 83% 87% -45% 🔷 47 10% 55% 42% Abstinence/Reduced Drug Use Valid TEDS Data 72% 84% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 79% 15% Clients Receiving Services 154 92% 90% 58% 2% Service Engagement Co-occurring Actual State Avg 99% 91% MH Screen Complete Outpatient Actual vs Goal Actual % vs Goal % Actual Actual % Goal % State Ava SA Screen Complete 99% 93% 174 50% 75% 63% -25% -2 or more Services within 30 days Diagnosis Actual State Avg 99% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted Jun > 10% Over < 10% Under 100% Admissions 100% Discharges Actual Goal ✓ Goal Met Below Goal Services 100% \* State Avg based on 117 Active Standard Outpatient Programs

## Program Activity

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 1,304  | 1,139    | 14%        | • |
| Admits         | 952    | 863      | 10%        |   |
| Discharges     | 848    | 728      | 16%        | • |
| Service Hours  | 7,280  | 5,668    | 28%        | • |

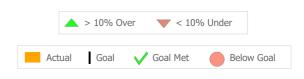
## **Data Submission Quality**



## **Discharge Outcomes**



|            | Jul  |            | Sep     | Oct       | Nov   | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|------|------------|---------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions |      |            |         |           |       |     |     |     |     |     |     |     | 100%               |
| Discharges |      |            |         |           |       |     |     |     |     |     |     |     | 100%               |
| Services   |      |            |         |           |       |     |     |     |     |     |     |     | 100%               |
|            | 1 or | more Recor | ds Subr | nitted to | DMHAS | 5   |     |     |     |     |     |     |                    |



<sup>\*</sup> State Avg based on 74 Active Standard Outpatient Programs

## **Parents Recovering from Opioid Use Disorder (PROUD**

InterCommunity Inc.

Addiction - Outpatient - Standard Outpatient

1 or more Records Submitted to DMHAS

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 75 16 369% 🔺 8 35% 50% 48% -15% Treatment Completed Successfully 65 306% Admits 16 Recovery 23 Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,093 137 66 81% 95% 76% -14% Stable Living Situation 52% 75% 77% -23% -42 Not Arrested **Data Submission Quality** 25% Abstinence/Reduced Drug Use 20 55% 42% -30% Data Entry Actual State Avg 21 -34% 26% 60% 16% Self Help Valid NOMS Data 79% 87% 8 10% 50% 33% -40% **Employed** Valid TEDS Data 92% 84% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 82% 15% Clients Receiving Services 56 97% 90% 58% 7% Service Engagement Co-occurring Actual State Avg 96% 91% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 97% 93% 2 or more Services within 30 days 53 83% 75% 63% 8% Diagnosis Actual State Avg 97% 99% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under Admissions 100% 75% Discharges Actual Goal ✓ Goal Met Below Goal Services 100% \* State Avg based on 117 Active Standard Outpatient Programs

## **Recovery Oriented Employment Services**

1 or more Records Submitted to DMHAS

InterCommunity Inc.

Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

\* State Avg based on 10 Active Employment Services Programs

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity** Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Measure Actual 1 Yr Ago Variance % 27 39% 35% 35% 4% **Employed Unique Clients** 68 92 -26% 20 87 **-77% ▼** Admits 39 -9% Discharges 43 **Data Submission Quality** Data Entry State Avg Valid NOMS Data 79% 86% Valid TEDS Data 56% 66% On-Time Periodic State Avg Actual 6 Month Updates 75% 71% Co-occurring Actual State Avg MH Screen Complete 96% 88% SA Screen Complete 96% 88% Diagnosis State Avg Actual 100% 8% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep % Months Submitted Mar Apr May Jun > 10% Over < 10% Under Admissions 58% 67% Discharges Actual Goal ✓ Goal Met Below Goal

1 or more Records Submitted to DMHAS

\* State Avg based on 8 Active Medically Monitored Detox 3.7D Programs

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % State Avg Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % Actual vs Goal **Unique Clients** 1,852 2,060 -10% 1,568 63% 80% 69% -17% Treatment Completed Successfully 2,492 Admits 2,789 -11% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2,492 Discharges 2,790 -11% 1,997 80% 85% 80% -5% No Re-admit within 30 Days of Discharge **Bed Days** 9,977 11,127 -10% Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 810 52% 90% 54% -38% -**Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 78% 86% 12 Months Trend Avg LOS Beds Turnover Actual % Goal % State Avg Actual vs Goal Valid TEDS Data 96% 98% Avg Utilization Rate 90% 35 4 days 0.0 78% 69% -12% **T** 90-110% >110% On-Time Periodic Actual State Avg 6 Month Updates N/A N/A Co-occurring Actual State Avg 99% 96% MH Screen Complete SA Screen Complete 98% 96% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under Admissions 100% 100% Discharges ✓ Goal Met Actual Goal Below Goal

## **SA Jail Diversion Program**

InterCommunity Inc.

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

1 or more Records Submitted to DMHAS

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

\* State Avg based on 5 Active Court Liaison-Jail Diversion Programs

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 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 13 90% 85% 10% 100% Unique Clients 91 10 810% 88 5 1660% Admits 79 6 1217% Discharges 91 5 Service Hours Jail Diversion Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual 0% 0% 0% 71% Follow-up Service within 48 hours Data Submitted to DMHAS by Month Sep % Months Submitted Mar > 10% Over < 10% Under</p> Admissions 100% Discharges 100% Goal Goal Met Below Goal Services 100%

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 483 436 11% 🔺 322 67% 80% 69% -13% Treatment Completed Successfully 9% Admits 479 441 Actual % vs Goal % Goal % Actual Actual % State Avg Actual vs Goal 478 Discharges 443 8% 423 88% 85% 89% 3% No Re-admit within 30 Days of Discharge **Bed Days** 9,824 2% 9,623 Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 233 72% 90% 64% -18% **Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 87% Valid NOMS Data 89% 253 50% 60% -10% Self Help 67% Valid TEDS Data 93% 95% 137 27% 70% 42% -43% -Abstinence/Reduced Drug Use On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates N/A 0% 12 Months Trend Avg LOS Beds Turnover Actual % Goal % State Ava Actual vs Goal Avg Utilization Rate 28 0.0 96% 90% 91% 6% 23 days Co-occurring Actual State Avg 100% 94% MH Screen Complete < 90% 90-110% >110% SA Screen Complete 100% 94% Diagnosis Actual State Avg ✓ Valid Axis I Diagnosis 100% 100% Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under Admissions 100% 100% Discharges ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS \* State Avg based on 9 Active SA Intensive Res. Rehabilitation 3.7 Programs

### **SATEP ADRC Res Intermed.950403**

InterCommunity Inc.

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 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 71 63 13% 34 55% 70% 66% -15% Treatment Completed Successfully 60 9% Admits 55 Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 62 Discharges 53 17% 57 92% 85% 91% 7% No Re-admit within 30 Days of Discharge **Bed Days** 3,691 2% 3,610 Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 26 76% 90% 68% -14% **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 89% 86% 39 54% 70% 68% -16% Abstinence/Reduced Drug Use Valid TEDS Data 91% 93% **Bed Utilization** On-Time Periodic State Avg Actual 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal 6 Month Updates N/A 36% Avg Utilization Rate 90% 92% 11% 📤 10 70 days 0.1 101% Co-occurring Actual State Avg < 90% 90-110% >110% 100% 94% MH Screen Complete SA Screen Complete 100% 92% Diagnosis Actual State Avg ✓ Valid Axis I Diagnosis 100% 100% Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under Admissions 100% 100% Discharges Actual ✓ Goal Met Goal Below Goal 1 or more Records Submitted to DMHAS \* State Avg based on 29 Active Intermediate/Long Term Res.Tx 3.5 Programs

## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance %    |
|----------------|--------|----------|---------------|
| Unique Clients | 108    | 158      | -32% ▼        |
| Admits         | 65     | 94       | -31% 🔻        |
| Discharges     | 59     | 115      | <b>-49% ▼</b> |
| Service Hours  | 475    | 856      | <b>-45%</b> ▼ |

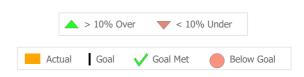
## Recovery



## **Data Submission Quality**

| Data Entry       | Ad | ctual  | State Avg |
|------------------|----|--------|-----------|
| Valid NOMS Data  |    | 77%    | 86%       |
| On-Time Periodic |    | Actual | State Avg |
| 6 Month Updates  |    | 44%    | 71%       |

|            | Jul    | Aug       | Sep      | Oct       | Nov   | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|--------|-----------|----------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions |        |           |          |           |       |     |     |     |     |     |     |     | 100%               |
| Discharges |        |           |          |           |       |     |     |     |     |     |     |     | 50%                |
| Services   |        |           |          |           |       |     |     |     |     |     |     |     | 100%               |
|            | 1 or n | nore Reco | rds Subr | nitted to | DMHAS |     |     |     |     |     |     |     |                    |



<sup>\*</sup> State Avg based on 10 Active Employment Services Programs

Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

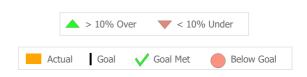
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 175    | 75       | 133%       | • |
| Admits         | 130    | 76       | 71%        | • |
| Discharges     | 137    | 15       | 813%       | • |
| Service Hours  | 895    | 210      |            |   |

## Service Engagement



| Data         | Jul     |           |         | Oct       | Nov   | Dec | Jan | Feb | Mar   | Λωκ | May | Turn | % Months Submitted |
|--------------|---------|-----------|---------|-----------|-------|-----|-----|-----|-------|-----|-----|------|--------------------|
|              | Jui     | Aug       | Sep     | UCL       | IVOV  | Dec | JdH | гер | Ividi | Apr | May | Jun  | % MOHUIS Submitted |
| Admissions   |         |           |         |           |       |     |     |     |       |     |     |      | 100%               |
|              |         |           |         |           |       |     |     |     |       |     |     |      | =                  |
| Discharges   |         |           |         |           |       |     |     |     |       |     |     |      | 100%               |
| Discrial ges |         |           |         |           |       |     |     |     |       |     |     |      | 10070              |
| Services     |         |           |         |           |       |     |     |     |       |     |     |      | 100%               |
| Sel vices    |         |           |         |           |       |     |     |     |       |     |     |      | 100%               |
|              |         |           |         |           |       |     |     |     |       |     |     |      |                    |
|              | 1 or mo | re Record | ds Subn | nitted to | DMHAS | 5   |     |     |       |     |     |      |                    |



<sup>\*</sup> State Avg based on 22 Active Outreach & Engagement Programs

## Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

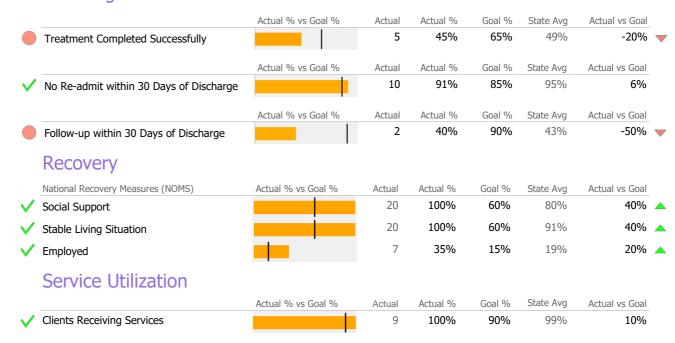
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 19     | 19       | 0%         |   |
| Admits         | 10     | 9        | 11%        | • |
| Discharges     | 11     | 9        | 22%        | • |
| Service Hours  | 946    | 924      | 2%         |   |

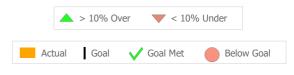
## **Data Submission Quality**

| Data Entry        | Actual State Avg |
|-------------------|------------------|
| Valid NOMS Data   | 77% 85%          |
| On-Time Periodic  | Actual State Avg |
| √ 6 Month Updates | 100% 90%         |

## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 23 Active Assertive Community Treatment Programs

Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 100% N/A N/A 60% 70% N/A Treatment Completed Successfully 0% Admits 1 1 Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges N/A N/A 90% 80% N/A Follow-up within 30 Days of Discharge Service Hours 852 51 Recovery Bed Davs 668 35 1809% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 2 75% **Employed** 100% 25% 12% **Data Submission Quality** 2 84% 40% 100% 60% Social Support Data Entry Actual State Avg 2 100% 95% 93% 5% Stable Living Situation Valid NOMS Data 82% 80% **Bed Utilization** On-Time Periodic Actual State Avg 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal 6 Month Updates 100% 91% Avg Utilization Rate 2.0 90% -79% 16 355 days 11% 91% Co-occurring State Avg Actual 90-110% >110% < 90% MH Screen Complete 100% 98% SA Screen Complete 100% 89% Diagnosis State Avg Actual 100% 97% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Mar % Months Submitted Apr May Jun > 10% Over < 10% Under</p> Admissions 8% Discharges 0% ✓ Goal Met Actual Goal Below Goal Services 100% \* State Avg based on 81 Active Supervised Apartments Programs 1 or more Records Submitted to DMHAS