Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

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

80-100%

✓ Goal Met

Under Goal

Provider Activity Actual





Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	721	40.9%
	Residential Services	409	23.2%
	Case Management	276	15.7%
Medicat	ion Assisted Treatment	241	13.7%
	Employment Services	82	4.7%
Mental Healt	h		
	Community Support	15	0.9%
	Residential Services	15	0.9%
	Case Management	4	0.2%

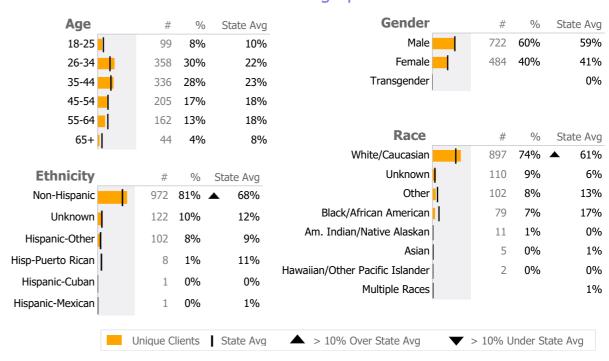
Consumer Satisfaction Survey (Based on 690 FY21 Surveys) **Ouestion Domain** Satisfied % vs Goal% Satisfied % Goal % State Avg General Satisfaction 96% 80% 92% Participation in Treatment 96% 80% 92% **Quality and Appropriateness** 96% 80% 93% Overall 80% 95% 91% 88% Access 93% 80% Respect 93% 80% 91% Outcome 80% 83% 91% Recovery 89% 80% 79%

Client Demographics

0-80%

Goal %

Satisfied %



Carnes Weeks

McCall Foundation Inc

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

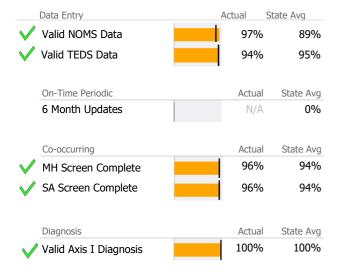
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

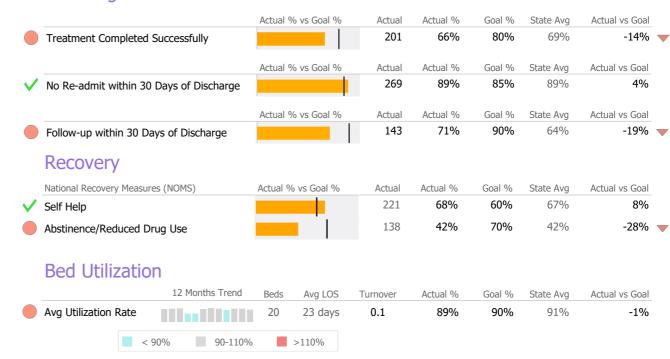
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	298	307	-3%
Admits	308	328	-6%
Discharges	303	324	-6%
Bed Days	6,491	6,834	-5%

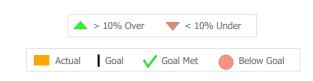
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 9 Active SA Intensive Res. Rehabilitation 3.7 Programs

On-Time Periodic

6 Month Updates

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

Program Activity Discharge Outcomes State Avg Actual vs Goal Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % **Unique Clients** 62 Treatment Completed Successfully 19 54% 50% 67% 4% 62 Admits Recovery 35 Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 372 26 42% 20% 27% 22% 🔺 **Employed** Stable Living Situation 55 89% 80% 80% 9% **Data Submission Quality** 32 52% -8% Self Help 60% 53% Data Entry Actual State Avg Service Utilization Valid NOMS Data 98% 93% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal

Clients Receiving Services

Data Submitted to DMHAS by Month

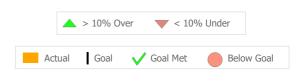
Actual

100%

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													83%
Services													50%
	1 or m	nore Reco	rds Subr	nitted to	DMHAS								

State Avg

48%



27

96%

90%

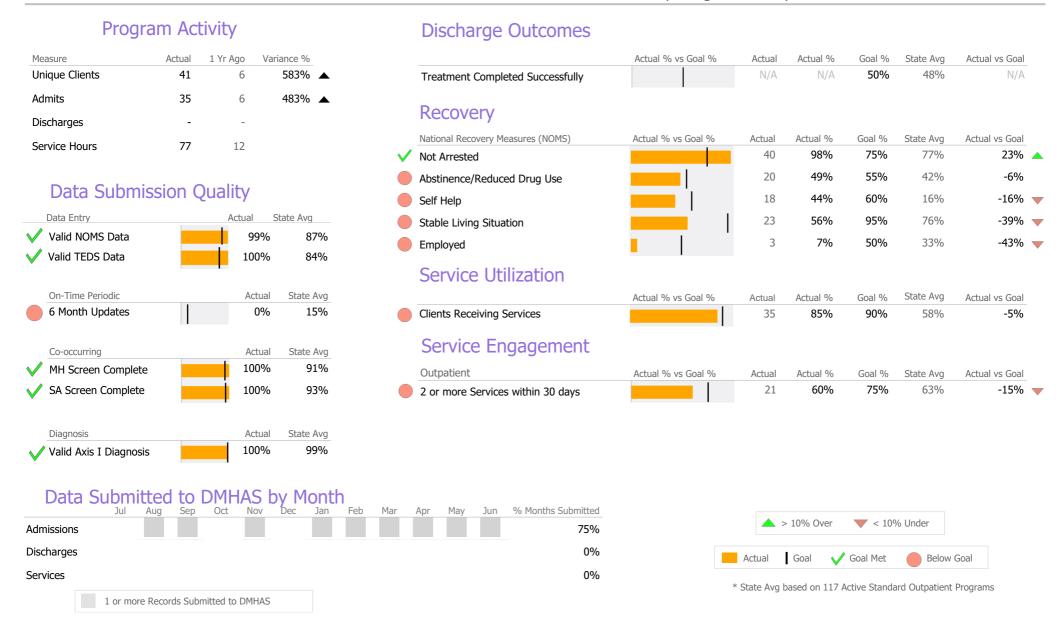
78%

6%

^{*} State Avg based on 13 Active Standard Case Management Programs

Program Activity Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 22 N/A N/A 70% 66% N/A Treatment Completed Successfully 22 Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges N/A 85% 91% N/A No Re-admit within 30 Days of Discharge 1,997 **Bed Days** Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge N/A N/A 90% 68% N/A **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 94% 86% 13 59% 70% 68% -11% Abstinence/Reduced Drug Use Valid TEDS Data 100% 93% **Bed Utilization** On-Time Periodic State Avg Actual 12 Months Trend 0% Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal 6 Month Updates 36% Avg Utilization Rate 90% 92% -54% 15 137 days 0.4 36% Co-occurring Actual State Avg 90-110% < 90% >110% 41% 94% MH Screen Complete SA Screen Complete 41% 92% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Nov Mar % Months Submitted > 10% Over < 10% Under</p> 58% Admissions 0% Discharges ✓ Goal Met Actual 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 Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 33 1550% N/A N/A 70% 66% N/A Treatment Completed Successfully 31 2 1450% Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges N/A 85% 91% N/A No Re-admit within 30 Days of Discharge 4878% **Bed Days** 4,829 97 Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge N/A N/A 90% 68% N/A **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 98% 86% 15 45% 70% 68% -25% Abstinence/Reduced Drug Use Valid TEDS Data 100% 93% **Bed Utilization** On-Time Periodic Actual State Avg 12 Months Trend 0% Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal 6 Month Updates 36% Avg Utilization Rate 90% 92% -20% **T** 19 240 days 0.3 70% Co-occurring Actual State Avg < 90% 90-110% >110% 100% 94% MH Screen Complete SA Screen Complete 100% 92% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> 92% Admissions 0% Discharges Actual Goal ✓ Goal Met Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 29 Active Intermediate/Long Term Res.Tx 3.5 Programs



1 or more Records Submitted to DMHAS

* State Avg based on 30 Active MH Intensive Res. Rehabilitation Programs

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

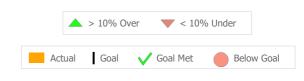
Program Activity Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 0% N/A N/A 75% 64% N/A Treatment Completed Successfully -100% 🕶 2 Admits Actual % vs Goal % Actual % State Avg Actual Goal % Actual vs Goal Discharges N/A N/A 85% 81% N/A No Re-admit within 30 Days of Discharge **Bed Days** 1,460 984 48% Actual % vs Goal % Actual % State Avg Actual vs Goal Actual Goal % Follow-up within 30 Days of Discharge N/A N/A 90% 81% N/A **Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 100% 99% 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 80% 90% 1,796 days 0.3 91% -10% On-Time Periodic Actual State Avg 90-110% >110% 6 Month Updates 100% 90% Actual State Avg Co-occurring 92% N/A MH Screen Complete SA Screen Complete N/A 90% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr May % Months Submitted > 10% Over < 10% Under</p> Admissions 0% Discharges 0% Actual Goal ✓ Goal Met Below Goal

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

Program Activity Discharge Outcomes Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 2 67% 70% 66% -3% Treatment Completed Successfully Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 3 Discharges 3 100% 85% 91% 15% No Re-admit within 30 Days of Discharge **Bed Days** 130 Actual % vs Goal % Actual vs Goal Actual Actual % Goal % State Avg Follow-up within 30 Days of Discharge 100% 90% 68% 10% **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 98% 86% 44% 70% 68% -26% Abstinence/Reduced Drug Use Valid TEDS Data 56% 93% **Bed Utilization** On-Time Periodic Actual State Avg 12 Months Trend 6 Month Updates Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal N/A 36% Avg Utilization Rate 62% 90% 92% -28% 32 days 8.0 Co-occurring Actual State Avg 90-110% < 90% >110% 78% 94% MH Screen Complete SA Screen Complete 89% 92% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 25% 8% Discharges ✓ Goal Met Actual 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 Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Unique Clients** 35 33 6% 14 67% 85% 79% -18% Treatment Completed Successfully 25 23 9% Admits 21 23 -9% Discharges **Bed Utilization** 23% **Bed Days** 4,264 3,469 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 187 days 0.2 97% 90% 64% 7% < 90% 90-110% >110%





^{*} 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)

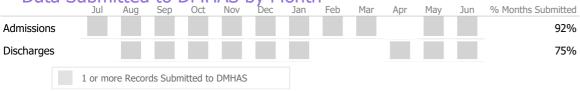
Program Activity Discharge Outcomes

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	32	34	-6%
Admits	20	35	-43% ▼
Discharges	18	22	-18% ▼

Data Submission Quality

	_		
Data Entry		Actual	State Avg
Valid NOMS Data		95%	96%
Valid TEDS Data		78%	86%
On-Time Periodic		Actual	State Avg
6 Month Updates		10%	35%
Co-occurring		Actual	State Avg
MH Screen Complete		90%	75%
SA Screen Complete		95%	91%
Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		100%	99%

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
/	Treatment Completed Successfully		10	56%	50%	45%	6%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
~	Not Arrested		33	100%	75%	90%	25%	_
V	Employed		21	64%	50%	50%	14%	_
✓	Abstinence/Reduced Drug Use		19	58%	55%	65%	3%	
	Stable Living Situation		28	85%	95%	84%	-10%	
	Self Help		15	45%	60%	35%	-15%	





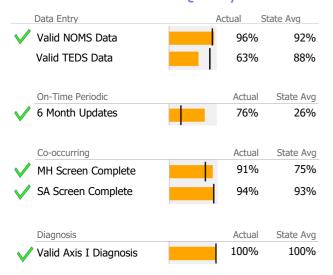
^{*} State Avg based on 8 Active Naltrexone Programs

Program Activity Discharge Outcomes State Avg Actual vs Goal Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % **Unique Clients** 0% N/A N/A 50% 45% N/A Treatment Completed Successfully 2 -100% Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 100% 55% 65% 45% 🔺 Abstinence/Reduced Drug Use **Data Submission Quality** 2 100% 75% 90% 25% Not Arrested State Avg Data Entry 2 95% 5% Stable Living Situation 100% 84% Valid NOMS Data N/A 96% 50% 50% 50% 0% **Employed** Valid TEDS Data N/A 86% 50% 35% -10% 60% Self Help On-Time Periodic State Avg Actual 6 Month Updates 0% 35% Co-occurring Actual State Avg N/A 75% MH Screen Complete SA Screen Complete N/A 91% Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 0% Discharges 0% ✓ Goal Met Below Goal Actual Goal 1 or more Records Submitted to DMHAS * State Avg based on 8 Active Naltrexone Programs

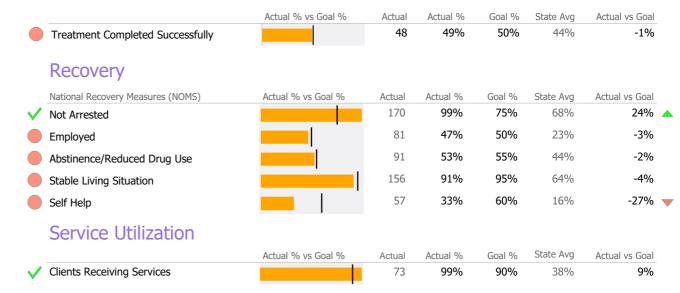
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	160	208	-23% ▼
Admits	92	120	-23% ▼
Discharges	98	139	-29% ▼
Service Hours	1,370	1,368	0%

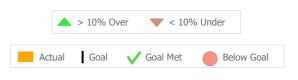
Data Submission Quality



Discharge Outcomes



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%
	1 or mo	re Recor	ds Subr	nitted to	DMHAS								



^{*} State Avg based on 22 Active Buprenorphine Maintenance Programs

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

1 or more Records Submitted to DMHAS

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** 70 71 -1% 28 49% 85% 64% -36% -Treatment Completed Successfully 59 Admits 58 2% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 57 Discharges 59 -3% 49 86% 85% 83% 1% No Re-admit within 30 Days of Discharge **Bed Days** 6,135 22% 5,044 Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 17 61% 90% 73% -29% -**Data Submission Quality** Recovery Data Entry Actual State Avg Actual vs Goal National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Valid NOMS Data 96% 87% 76% 55 70% 6% Abstinence/Reduced Drug Use 81% Valid TEDS Data 87% 86% 39 54% 60% 38% -6% **Employed** On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates N/A N/A 12 Months Trend Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal Avg Utilization Rate 96 days 0.2 112% 90% 85% 22% 🔺 Co-occurring Actual State Avg 98% 98% MH Screen Complete < 90% 90-110% >110% SA Screen Complete 98% 98% Diagnosis Actual State Avg ✓ Valid Axis I Diagnosis 100% 100% Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 100% 92% Discharges ✓ Goal Met Actual Goal Below Goal

Migeon Pilots Development

McCall Foundation Inc

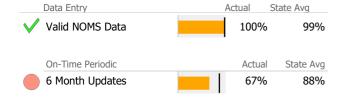
Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

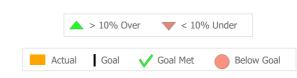
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Variance % Measure Actual 1 Yr Ago 100% 85% 95% 15% Stable Living Situation **Unique Clients** 5 -20% Service Utilization 2 Admits -100% 2 Discharges 1 -50% State Ava Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 3 100% 90% 98% 10% 29 Service Hours 11 -62% 🔻

Data Submission Quality







^{*} State Avg based on 65 Active Supportive Housing – Development Programs

Discharges

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** 200% N/A N/A 80% 62% N/A Treatment Completed Successfully 2 100% Admits Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Discharges N/A N/A 85% 90% N/A No Re-admit within 30 Days of Discharge 1,334 625% **Bed Days** 184 Actual % vs Goal % Actual % State Avg Actual vs Goal Actual Goal % Follow-up within 30 Days of Discharge N/A N/A 90% 72% N/A **Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Valid NOMS Data 100% 99% 6 100% 60% 87% 40% Social Support 6 100% 90% 98% 10% Stable Living Situation On-Time Periodic Actual State Avg 6 Month Updates 75% 86% **Bed Utilization** Actual State Avg 12 Months Trend Co-occurring Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal 75% 88% MH Screen Complete Avg Utilization Rate 347 days 0.4 61% 90% 93% -29% ------SA Screen Complete 75% 95% < 90% 90-110% >110% Diagnosis State Avg Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 25%

0%

Actual

Goal

Goal Met

* State Avg based on 26 Active Group Home Programs

Below Goal

1 or more Records Submitted to DMHAS

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

Program Activity Discharge Outcomes 1 Yr Ago Variance % Actual % State Avg Measure Actual Actual % vs Goal % Actual Goal % Actual vs Goal **Unique Clients** 50% N/A N/A 65% 56% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 103 123 -16% 3 100% 60% 80% 40% 🔺 Social Support 3 80% 87% 20% 🔺 100% Stable Living Situation **Data Submission Quality** 13% **Employed** 33% 20% 14% Data Entry Actual State Avg Service Utilization Valid NOMS Data 100% 85% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 100% 90% 98% 10% On-Time Periodic Actual State Avg 6 Month Updates 100% 83% Co-occurring Actual State Avg 100% 95% MH Screen Complete SA Screen Complete 100% 94% Diagnosis State Avg Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr May % Months Submitted > 10% Over < 10% Under</p> Admissions 8% Discharges 0% ✓ Goal Met Actual Goal Below Goal 0% Services * State Avg based on 38 Active CSP Programs

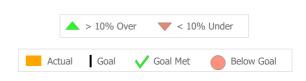
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	22	21	5%
Admits	14	11	27% 🔺
Discharges	8	14	-43% ▼
Service Hours	35	11	

Service Engagement







^{*} State Avg based on 22 Active Outreach & Engagement Programs

Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

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

Program Activity Discharge Outcomes Variance % Actual % State Avg Measure 1 Yr Ago Actual % vs Goal % Actual Goal % Actual vs Goal **Unique Clients** 150% N/A N/A 50% 44% N/A Treatment Completed Successfully 200% Admits 1 Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 4 80% 75% 68% 5% Not Arrested **Data Submission Quality** 3 60% 55% 44% 5% Abstinence/Reduced Drug Use Data Entry State Avg 2 Self Help 40% 60% 16% -20% Valid NOMS Data 100% 92% 20% 50% 23% -30% **Employed** Valid TEDS Data 100% 88% 3 95% -35% -60% 64% Stable Living Situation On-Time Periodic State Avg Actual 6 Month Updates 0% 26% Co-occurring Actual State Avg 100% 75% MH Screen Complete SA Screen Complete 100% 93% Diagnosis Actual State Avg ✓ Valid Axis I Diagnosis 100% 100% Data Submitted to DMHAS by Month Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 25% Discharges 0% ✓ Goal Met Below Goal Actual Goal 1 or more Records Submitted to DMHAS * State Avg based on 22 Active Buprenorphine Maintenance Programs

Addiction - 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	82	72	14%	•
Admits	61	62	-2%	
Discharges	69	52	33%	•
Service Hours	179	135	33%	•

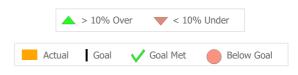
Recovery



Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	6 86%
On-Time Periodic	Actua	al State Avg
6 Month Updates	0%	6 71%

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admission	S													100%
Discharge	S													100%
Services														83%
	1	l or mo	ore Recor	ds Subm	nitted to	DMHAS								



^{*} State Avg based on 10 Active Employment Services Programs

Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

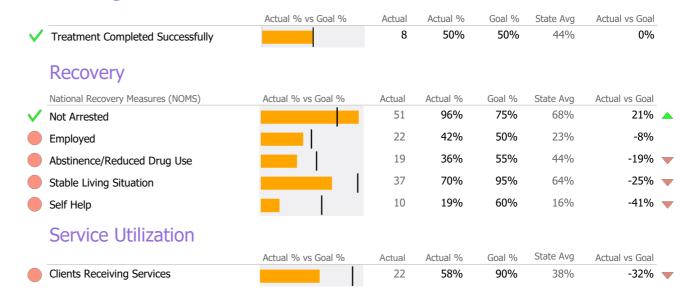
Program Activity

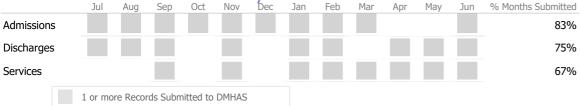
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	53	15	253%	•
Admits	43	15	187%	•
Discharges	16	5	220%	•
Service Hours	155	10		

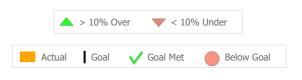
Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	89%	92%
Valid TEDS Data	60%	88%
On-Time Periodic	Actua	State Avg
6 Month Updates	6%	26%
Co-occurring	Actua	State Avg
MH Screen Complete	70%	75%
SA Screen Complete	77%	93%
Diagnosis	Actua	State Avg
✓ Valid Axis I Diagnosis	100%	100%

Discharge Outcomes







^{*} State Avg based on 22 Active Buprenorphine Maintenance Programs

Torrington Case Management

McCall Foundation Inc

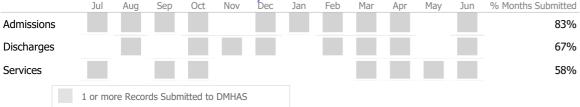
Addiction - Case Management - Standard Case Management

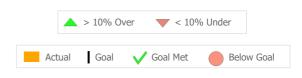
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Program Activity Discharge Outcomes Actual % Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Avg Actual vs Goal **Unique Clients** 30 38 -21% 5 24% 50% 67% -26% Treatment Completed Successfully 28 Admits 36 -22% 🔻 Recovery Discharges 21 36 **-42%** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 69 73 -5% 18 56% 20% 27% 36% 🔺 **Employed** 28 88% 80% 80% 8% Stable Living Situation **Data Submission Quality** 44% -16% Self Help 14 60% 53% Data Entry Actual State Avg Service Utilization Valid NOMS Data 99% 93% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 64% 90% 78% -26% -On-Time Periodic Actual State Avg 6 Month Updates 0% 48%







^{*} State Avg based on 13 Active Standard Case Management Programs

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 Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 677 678 0% 302 58% 50% 48% 8% Treatment Completed Successfully Admits 545 465 17% Recovery 517 Discharges 528 -2% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 4,907 4,663 5% 701 94% 75% 77% 19% 🔺 Not Arrested 44% 50% 33% -6% 326 **Employed Data Submission Quality** Abstinence/Reduced Drug Use 354 48% 55% 42% -7% Data Entry Actual State Avg 650 87% 95% -8% 76% Stable Living Situation Valid NOMS Data 97% 87% -21% -292 39% 60% 16% Self Help Valid TEDS Data 72% 84% Service Utilization On-Time Periodic State Avg Actual State Avg Actual % vs Goal % Actual % Goal % Actual vs Goal Actual 6 Month Updates 66% 15% Clients Receiving Services 222 96% 90% 58% 6% 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% 304 60% 75% 63% -15% 2 or more Services within 30 days Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted Jun > 10% Over < 10% Under</p> Admissions 100% 100% Discharges Actual Goal ✓ Goal Met Below Goal Services 100% * State Avg based on 117 Active Standard Outpatient Programs

Program Activity Discharge Outcomes Actual % Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 22 23 -4% 3 50% 50% 48% 0% Treatment Completed Successfully 18 7 Admits 157% Recovery Discharges 6 19 -68% **-**National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 41 55 -25% 21 95% 75% 77% 20% 🔺 Not Arrested 55% 50% 33% 5% 12 **Employed Data Submission Quality** 55% Abstinence/Reduced Drug Use 12 55% 42% 0% Data Entry Actual State Avg 95% -31% 14 64% 76% Stable Living Situation 85% Valid NOMS Data 87% 5% -55% 🔷 60% 16% Self Help Valid TEDS Data 59% 84% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual vs Goal Actual % vs Goal % Actual % Actual 6 Month Updates 50% 15% Clients Receiving Services 12 75% 90% 58% -15% Service Engagement Co-occurring Actual State Avg 61% 91% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 67% 93% 11% 75% 63% -64% -2 or more Services within 30 days Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Nov Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 42% 33% Discharges Actual Goal ✓ Goal Met Below Goal Services 83% * State Avg based on 117 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

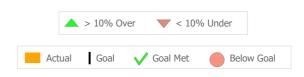
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	166	194	-14%	•
Admits	83	107	-22%	•
Discharges	101	114	-11%	•
Service Hours	449	632	-29%	•

Service Engagement



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													92%
Services													83%
	1 or mo	re Recor	ds Subn	nitted to	DMHAS								



^{*} State Avg based on 22 Active Outreach & Engagement Programs

1 or more Records Submitted to DMHAS

* State Avg based on 26 Active Group Home Programs

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Program Activity Discharge Outcomes 1 Yr Ago Variance % Measure Actual Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 3 67% 🔺 N/A N/A 80% 62% N/A Treatment Completed Successfully 2 2 0% Admits Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Discharges N/A N/A 85% 90% N/A No Re-admit within 30 Days of Discharge 174% **Bed Days** 1,312 478 Actual % vs Goal % Actual % State Avg Actual vs Goal Actual Goal % Follow-up within 30 Days of Discharge N/A N/A 90% 72% N/A **Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Valid NOMS Data 100% 99% 5 100% 60% 87% 40% Social Support 5 100% 90% 98% 10% Stable Living Situation On-Time Periodic Actual State Avg 6 Month Updates 67% 86% **Bed Utilization** Co-occurring Actual State Avg 12 Months Trend Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal 100% 88% MH Screen Complete Avg Utilization Rate 456 days 0.4 60% 90% 93% -30% Institution. SA Screen Complete 100% 95% < 90% 90-110% >110% Diagnosis State Avg Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 17% Discharges 0% Actual Goal Goal Met Below Goal

1 or more Records Submitted to DMHAS

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Program Activity Discharge Outcomes Variance % State Avg Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % Actual vs Goal **Unique Clients** 12 10 20% N/A N/A 65% 56% N/A Treatment Completed Successfully 2 -50% Admits 4 Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 259 219 18% 11 92% 60% 80% 32% 🔺 Social Support 12 100% 80% 87% 20% 🔺 Stable Living Situation **Data Submission Quality Employed** 8% 20% 14% -12% Data Entry Actual State Avg Service Utilization Valid NOMS Data 100% 85% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 12 100% 90% 98% 10% On-Time Periodic Actual State Avg 6 Month Updates 92% 83% Co-occurring Actual State Avg 100% 95% MH Screen Complete SA Screen Complete 100% 94% Diagnosis State Avg Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr May % Months Submitted > 10% Over < 10% Under</p> Admissions 8% Discharges 0% ✓ Goal Met Actual Goal Below Goal 0% Services * State Avg based on 38 Active CSP Programs