Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

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

Provider Activity Measure Monthly Trend Actual 1 Yr Ago Variance % **Unique Clients** 13% 1,360 1,206 Admits 784 758 3% 700 625 12% Discharges Service Hours 11% 🔺 7,704 6,923 **Bed Days** 5,365 4.174 29% 🔺 559 78 617% S.Rehab/PHP/IOP > 10% Over 1 Yr Ago → > 10% Under 1Yr Ago Clients by Level of Care Program Type Level of Care Type % **Addiction** Outpatient 1,210 75.8% IOP 140 8.8% Case Management 99 6.2% **Residential Services** 88 5.5% **Medication Assisted Treatment** 2 0.1% **Mental Health** Case Management 58 3.6%



Gender Age # % State Avg % State Avg 10% 714 53% 41% 18-25 131 10% Female 59% 26-34 328 26% 22% Male 644 47% Transgender 0% 30% 35-44 383 23% 21% 45-54 265 18% 55-64 143 11% 18% **Race** % State Avg 65+ 34 3% 8% 74% White/Caucasian 1,003 61% **Ethnicity** Other 160 12% 13% State Avg # % Black/African American 98 7% 17% Non-Hispanic 998 73% 68% Unknown 75 6% 6% Hisp-Puerto Rican 216 16% 11% Asian 9 1% 1% Hispanic-Other 9% 78 6% Am. Indian/Native Alaskan 0% 0% 6 Unknown 4% 12% 53 Hawaiian/Other Pacific Islander 5 0% 0% Hispanic-Mexican 14 1% 1% 0% 1% Multiple Races Hispanic-Cuban 0% 0% Unique Clients State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

Behavioral Health Center OP Willimantic 026200

Perception Programs Inc

Addiction - Outpatient - Standard Outpatient

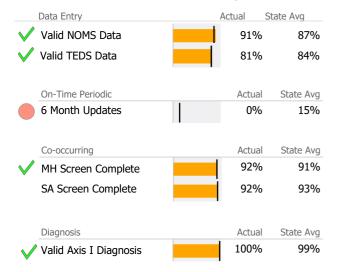
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	881	782	13%	•
Admits	335	388	-14%	•
Discharges	273	231	18%	•
Service Hours	4,542	4,177	9%	

Data Submission Quality



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/ Treatment Completed Successfully		171	63%	50%	48%	13%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested		544	59%	75%	77%	-16%
Abstinence/Reduced Drug Use		350	38%	55%	42%	-17%
Employed		233	25%	50%	33%	-25%
Stable Living Situation		598	65%	95%	76%	-30%
Self Help	<u> </u>	119	13%	60%	16%	-47%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		376	58%	90%	58%	-32%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		211	67%	75%	63%	-8%

	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	5							



^{*} State Avg based on 117 Active Standard Outpatient 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	99	122	-19%	•
Admits	54	57	-5%	
Discharges	59	83	-29%	•
Service Hours	340	428	-21%	•

Service Engagement



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													92%
Discharges													67%
Services													58%
	1 or mo	ore Record	ds Subn	nitted to	DMHAS								



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

CM Shelter Outreach 850-294

Perception Programs Inc

Mental Health - 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	37	38	-3%	
Admits	25	13	92% 🔺	
Discharges	1	26	-96% ▼	•
Service Hours	62	48	29% 🔺	

Service Engagement

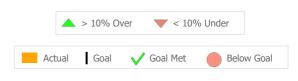
% Months Submitted



Data Submitted to DMHAS by Month

Admissions 50% Discharges 8% Services 42%





^{*} State Avg based on 50 Active Outreach & Engagement Programs

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 % Measure Actual Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 42 9 367% 20 59% 50% 53% 9% Treatment Completed Successfully 3 1167% Admits 38 Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 34 1 3300% 11 55% 90% 65% -35% Follow-up within 30 Days of Discharge Service Hours 89 3 Recovery Social Rehab/PHP/IOP 161 2 7950% 🔺 Days National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 8% Abstinence/Reduced Drug Use 29 63% 55% 55% **Data Submission Quality** 35 75% 64% 76% 1% Not Arrested 39 85% 95% 87% -10% Stable Living Situation Data Entry Actual State Avg Valid NOMS Data 95% 85% 12 26% 50% 19% -24% **Employed** Valid TEDS Data 97% 87% 5 11% 60% 18% -49% Self Help Service Utilization On-Time Periodic Actual State Avg 6 Month Updates 0% 0% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Clients Receiving Services 5 42% 90% 77% -48% -Co-occurring Actua State Avg 100% 88% MH Screen Complete SA Screen Complete 96% 88% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Feb Mar Apr May Jun % Months Submitted > 10% Over < 10% Under 50% Admissions Discharges 58% Actual Goal Goal Met Below Goal 83% Services * State Avg based on 63 Active Standard IOP Programs

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

Program Activity Discharge Outcomes Actual % State Avg Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % Actual vs Goal Unique Clients N/A N/A 50% 44% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 100% 75% 68% 25% 🔺 Not Arrested **Data Submission Quality** 2 100% 95% 64% 5% Stable Living Situation Data Entry State Avg 0 -50% **Employed** 0% 50% 23% Valid NOMS Data 100% 92% 0 0% 55% 44% -55% -Abstinence/Reduced Drug Use Valid TEDS Data 100% 88% 0 0% -60% -60% 16% Self Help On-Time Periodic State Avg Actual 6 Month Updates N/A 26% Co-occurring Actual State Avg MH Screen Complete 100% 75% SA Screen Complete 100% 93% Diagnosis Actual State Avg 100% ✓ Valid Axis I Diagnosis 100% Data Submitted to DMHAS by Month Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 8% Discharges 0% ✓ Goal Met Below Goal Actual Goal 1 or more Records Submitted to DMHAS * State Avg based on 22 Active Buprenorphine Maintenance 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 Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 351 311 13% 112 70% 50% 48% 20% 🔺 Treatment Completed Successfully 157 163 -4% Admits Recovery Discharges 161 123 31% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 2,244 1.891 19% 278 76% 75% 77% 1% Not Arrested 142 39% 55% 42% -16% Abstinence/Reduced Drug Use **Data Submission Quality** Stable Living Situation 291 79% 95% 76% -16% Data Entry Actual State Avg 50% 33% -19% 115 31% **Employed** Valid NOMS Data 97% 87% -56% 🔻 13 4% 60% 16% Self Help Valid TEDS Data 73% 84% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 0% 15% Clients Receiving Services 156 76% 90% 58% -14% Service Engagement Co-occurring Actual State Avg 77% 91% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 77% 93% 103 69% 75% 63% -6% 2 or more Services within 30 days Diagnosis Actual State Avg Valid Axis I Diagnosis 100% 99% Data Submitted to DMHAS by Month Mar % Months Submitted Jun > 10% Over < 10% Under</p> Admissions 92% 100% Discharges Actual Goal ✓ Goal Met Below Goal Services 100% * State Avg based on 117 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

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

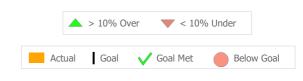
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	10	44	-77% ▼	
Admits	1	14	-93% ▼	
Discharges	10	35	-71% ▼	
Service Hours	8	66	-88% 🔻	

Service Engagement







^{*} State Avg based on 50 Active Outreach & Engagement 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 - 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** 39 27 44% 24 71% 70% 66% 1% Treatment Completed Successfully 32 Admits 24 33% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 34 20 70% 34 100% 85% 91% 15% No Re-admit within 30 Days of Discharge 29% 🔺 **Bed Days** 2,686 2,077 Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 13 54% 90% 68% -36% **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 92% 86% 34 87% 70% 68% 17% Abstinence/Reduced Drug Use Valid TEDS Data 100% 93% **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 N/A 36% Avg Utilization Rate 74% 90% 92% -16% **T** Internation. 86 days 0.2 Co-occurring Actual State Avg 90-110% >110% < 90% 98% 94% MH Screen Complete SA Screen Complete 98% 92% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted Jun > 10% Over < 10% Under</p> Admissions 92% 100% 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

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

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** 51 34 50% 21 54% 70% 66% -16% Treatment Completed Successfully 48 Admits 31 55% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 26% Discharges 39 31 33 85% 85% 91% 0% No Re-admit within 30 Days of Discharge **Bed Days** 2,097 28% 2,679 Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 14 67% 90% 68% -23% -**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 95% 86% 38 73% 70% 68% 3% Abstinence/Reduced Drug Use Valid TEDS Data 100% 93% **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 N/A 36% Avg Utilization Rate 73% 90% 92% -17% **V** Inter-Intelli 10 77 days 0.1 Co-occurring Actual State Avg 90-110% >110% < 90% 100% 94% MH Screen Complete SA Screen Complete 100% 92% Diagnosis Actual State Avg 96% 100% Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 100% 100% Discharges ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS

Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

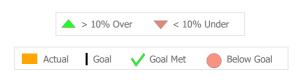
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity Service Engagement

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	15		
Admits	15	-	
Discharges	4	-	
Service Hours	47	_	

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ at least 1 Service within 180 days		13	87%	50%	93%	37% 🔺

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													50%
Discharges													25%
Services													42%
	1 or mo	ore Reco	rds Subn	nitted to	DMHAS								



^{*} State Avg based on 50 Active Outreach & Engagement Programs

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

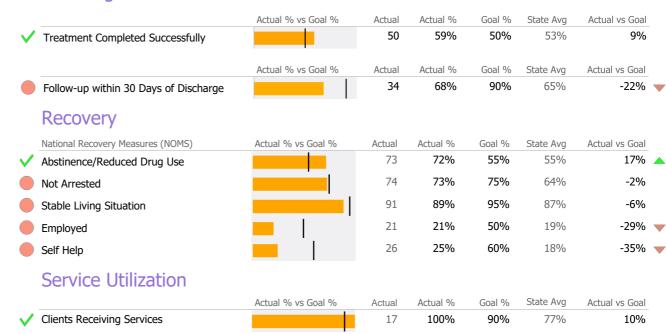
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	98	96	2%	
Admits	77	65	18%	•
Discharges	85	75	13%	•
Service Hours	372	311	20%	•
Social Rehab/PHP/IOP Days	398	76	424%	•

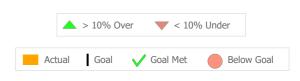
Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	88%	85%
✓ Valid TEDS Data	92%	87%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	0%	0%
Co-occurring	Actual	State Avg
MH Screen Complete	94%	88%
✓ SA Screen Complete	94%	88%
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	100%

Discharge Outcomes



Data	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%
	1 or more Records Submitted to DMHAS												



^{*} State Avg based on 63 Active Standard IOP Programs