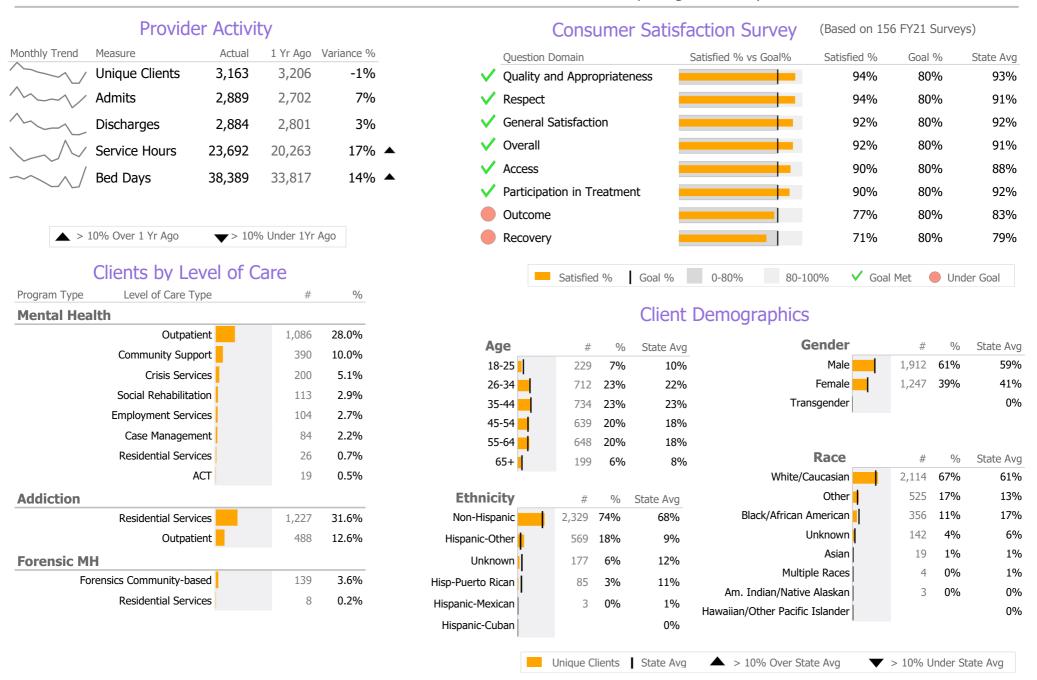
Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

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



### **ABI SA Counselor Outpatient Program**

Rushford Center

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** Measure Variance % Actual % vs Goal % Goal % Actual vs Goal Actual 1 Yr Ago Actual Actual % State Avg **Unique Clients** 35 39 -10% 50% 50% 48% 0% Treatment Completed Successfully Admits Recovery Discharges 4 0% National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Service Hours 62 3 33 94% 55% 42% 39% 🔺 Abstinence/Reduced Drug Use 33 94% 60% 16% 34% Self Help **Data Submission Quality** 77% 25% 🔺 35 100% 75% Not Arrested Data Entry State Avg 35 100% 95% 76% 5% Stable Living Situation Valid NOMS Data 100% 87% 2 6% **Employed** 50% 33% -44% -Valid TEDS Data 99% 84% Service Utilization On-Time Periodic Actual State Avg Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 6 Month Updates 0% 15% Clients Receiving Services 31 90% 58% 10% 100% Service Engagement Co-occurring Actual State Avg 91% N/A MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal SA Screen Complete 93% 0 0% 75% 63% -75% N/A 2 or more Services within 30 days Diagnosis Actual State Avg Valid Axis I Diagnosis 100% 99% Data Submitted to DMHAS by Month Mar May Jun % Months Submitted Apr > 10% Over < 10% Under</p> Admissions 0% Discharges 25% Actual Goal Goal Met Below Goal Services 50% \* State Avg based on 117 Active Standard Outpatient Programs

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

\* State Avg based on 74 Active Standard Outpatient 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** 795 923 -14% 74 24% 50% 41% -26% Treatment Completed Successfully Admits 300 356 -16% Recovery 306 Discharges 444 -31% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 10,969 8,919 23% 🔺 450 52% 60% 62% -8% Social Support 127 15% 30% 26% -15% **Employed Data Submission Quality** 95% Stable Living Situation 307 36% 73% -59% Data Entry Actual State Avg Service Utilization Valid NOMS Data 63% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 545 97% 90% 84% 7% On-Time Periodic Actual State Avg 6% 49% 6 Month Updates Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Ava Actual vs Goal Actual State Avg Actual Co-occurring 8% 2 or more Services within 30 days 217 79% 75% 79% 4% 90% MH Screen Complete SA Screen Complete 8% 91% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% Discharges 100% ✓ Goal Met Actual Goal Below Goal 100% Services

\* State Avg based on 74 Active Standard Outpatient Programs

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** 216 238 -9% 5 16% 50% 41% -34% Treatment Completed Successfully 24 Admits 30 -20% Recovery 32 Discharges 48 -33% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,812 1,941 -7% 184 85% 60% 62% 25% 🔺 Social Support 27 12% 30% 26% -18% **Employed Data Submission Quality** 80 37% 95% -58% -Stable Living Situation 73% Data Entry Actual State Avg Service Utilization 83% Valid NOMS Data 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 183 99% 90% 84% 9% On-Time Periodic Actual State Avg 36% 49% 6 Month Updates Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Ava Actual vs Goal Actual State Avg Actual Co-occurring 8% 16 67% 75% 79% -8% 90% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 8% 91% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 50% Discharges 92% ✓ Goal Met Actual Goal Below Goal 92% Services

## **Camp Street MH Intensive Forensic Residential Prog**

1 or more Records Submitted to DMHAS

Rushford Center

Forensic MH - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

\* State Avg based on 1 Active MH Intensive Res. Rehabilitation 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 Avg Actual vs Goal **Unique Clients** 11 -27% Treatment Completed Successfully 3 75% 75% 75% 0% 5 6 Admits -17% Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % 7 Discharges -43% **T** 2 50% 85% 50% -35% No Re-admit within 30 Days of Discharge **Bed Days** 1,584 1,565 1% Actual % vs Goal % Actual % State Avg Actual vs Goal Actual Goal % Follow-up within 30 Days of Discharge 67% 90% 67% -23% -**Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 62% 62% 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 90% 340 days 0.3 72% 72% -18% **T** On-Time Periodic Actual State Avg 90-110% >110% 6 Month Updates 50% 50% Co-occurring Actual State Avg 0% 0% MH Screen Complete SA Screen Complete 0% 0% Diagnosis State Avg Actual 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 33% Discharges 25% ✓ Goal Met Actual Goal Below Goal

#### **Career Development Svs 303-270**

**Rushford Center** 

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	104	121	-14%	•
Admits	50	52	-4%	
Discharges	53	66	-20%	•
Service Hours	307	254	21%	•

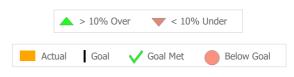
# Recovery



### **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	769	% 92%
On-Time Periodic	Actu	ıal State Avg
6 Month Updates	309	% 88%

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admission	S													100%
Discharge	s													92%
Services														92%
	1 (	or mo	re Recor	ds Subm	nitted to	DMHAS								



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

Services

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

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

\* State Avg based on 19 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 % 27 71% 90% 76% -19% Clients Receiving Services **Unique Clients** 139 56 148% 124 226% Admits 38 109 230% Discharges 33 85% 🔺 Service Hours 121 65 Jail Diversion Actual % vs Goal % Actual % Goal % Actual vs Goal Actual State Avg Follow-up Service within 48 hours 0% 33% 🔺 20 33% 64% Data Submitted to DMHAS by Month Sep % Months Submitted Mar > 10% Over < 10% Under</p> Admissions 100% Discharges 100% Goal Goal Met Below Goal

92%

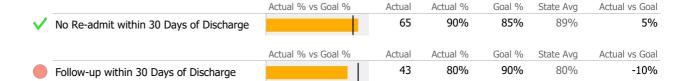
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	63	59	7%	
Admits	71	66	8%	
Discharges	72	64	13%	•
Bed Days	1,354	1,269	7%	

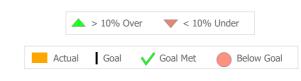
### Discharge Outcomes



### **Bed Utilization**



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
	1 or mo	re Reco	rds Subn	nitted to	DMHAS								



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

# Program Activity Service Utilization

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	113	92	23%	•
Admits	32	5	540%	•
Discharges	48	9	433%	•
Service Hours	3,033	721		
Social Rehab/PHP/IOP Days	0	2	-100%	•

# Actual % vs Goal % Actual % Actual % Goal % State Avg Actual vs Goal Clients Receiving Services 58 85% 90% 75% -5%

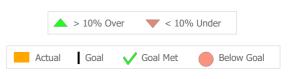
Data Submitted to DMHAS by Month

Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun % Months Submitted

Admissions

Discharges

1 or more Records Submitted to DMHAS



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

### **Homeless Case Management303-294**

**Rushford Center** 

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	25	48%	•
Admits	24	22	9%	
Discharges	22	11	100%	•
Service Hours	27	90	-70%	•

### Service Engagement



Data Submitted to DMHAS by Month

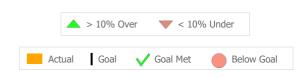
Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun % Months Submitted

Admissions

Discharges

Services

1 or more Records Submitted to DMHAS



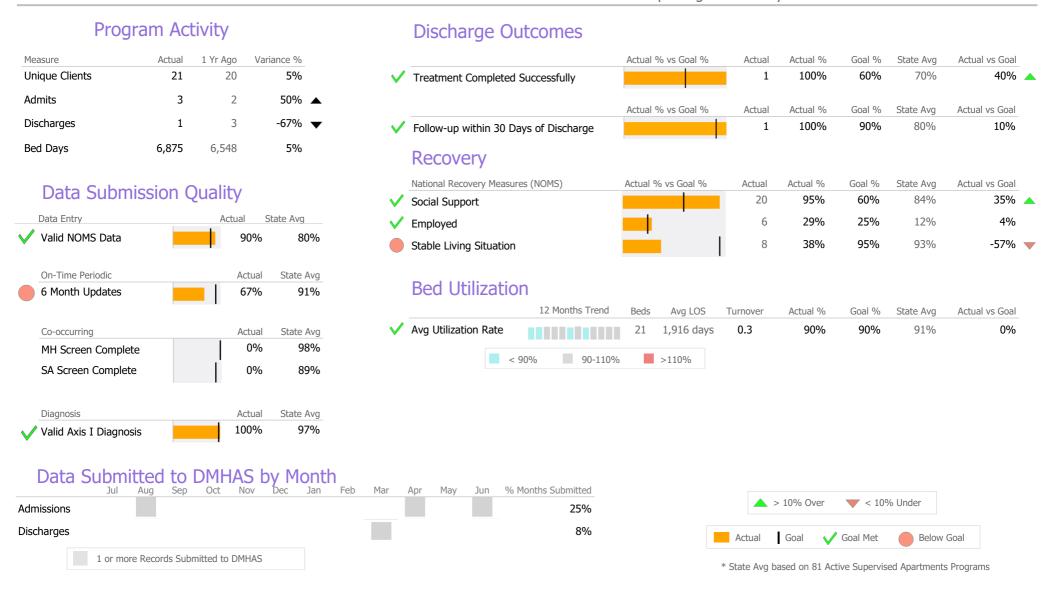
<sup>\*</sup> State Avg based on 50 Active Outreach & Engagement Programs

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

\* State Avg based on 74 Active Standard Outpatient Programs

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** 197 204 -3% Treatment Completed Successfully 3 7% 50% 41% -43% 34 Admits 38 -11% Recovery -7% Discharges 41 44 National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 2,141 1,920 12% 91 43% 60% 62% -17% Social Support 5% 30% 26% -25% -10 **Employed Data Submission Quality** 20 95% -85% -Stable Living Situation 10% 73% Data Entry Actual State Avg Service Utilization Valid NOMS Data 63% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 114 67% 90% 84% -23% -On-Time Periodic Actual State Avg 21% 49% 6 Month Updates Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Actual State Avg Co-occurring 22 6% 2 or more Services within 30 days 76% 75% 79% 1% 90% MH Screen Complete SA Screen Complete 6% 91% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 83% Discharges 92% ✓ Goal Met Actual Goal Below Goal 92% Services



#### **Program Activity Discharge Outcomes** Actual % Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 5 0% N/A N/A 50% 48% 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 0 0% 50% 33% -50% **Employed** 0 0% 55% 42% -55% -Abstinence/Reduced Drug Use **Data Submission Quality** 0 Self Help 0% 60% 16% -60% Data Entry Actual State Avg 0 0% 75% 77% -75% -Not Arrested Valid NOMS Data 87% N/A 0 -95% 🔷 0% 95% 76% Stable Living Situation Valid TEDS Data N/A 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 0 0% 90% 58% N/A 🔻 Service Engagement Co-occurring Actual State Avg N/A 91% MH Screen Complete Outpatient Actual % vs Goal % Actual vs Goal Actual Actual % Goal % State Ava SA Screen Complete N/A 93% 0% 75% 63% -75% -2 or more Services within 30 days Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 0% 0% Discharges Actual Goal ✓ Goal Met Below Goal Services 0% \* State Avg based on 117 Active Standard Outpatient 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)

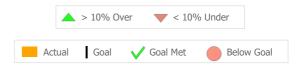
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	145	133	9%
Admits	177	163	9%
Discharges	177	161	10%
Service Hours	188	84	125% 🔺

#### Crisis



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



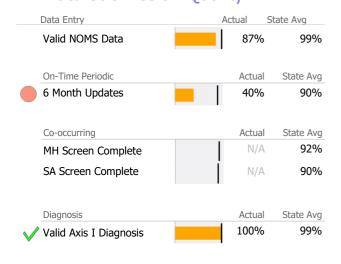
<sup>\*</sup> State Avg based on 26 Active Mobile Crisis Team Programs

#### **Program Activity Discharge Outcomes** Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 297 270 10% 5 42% 50% 48% -8% Treatment Completed Successfully 35 Admits 43 -19% Recovery Discharges 12 8 50% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 646 724 -11% 11 4% 50% 33% -46% -**Employed** 23 8% 55% 42% -47% Abstinence/Reduced Drug Use **Data Submission Quality** 8 Self Help 3% 60% 16% -57% Data Entry Actual State Avg 31 75% 77% -65% -10% Not Arrested Valid NOMS Data 44% 87% 25 8% 95% -87% 76% Stable Living Situation Valid TEDS Data 45% 84% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual vs Goal Actual % vs Goal % Actual % Actual 6 Month Updates 0% 15% 58 Clients Receiving Services 20% 90% 58% -70% Service Engagement Co-occurring Actual State Avg 37% 91% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 37% 93% 22 67% 75% 63% -8% 2 or more Services within 30 days Diagnosis Actual State Avg Valid Axis I Diagnosis 100% 99% Data Submitted to DMHAS by Month Sep Nov Mar May % Months Submitted Jun > 10% Over < 10% Under</p> Admissions 67% 50% Discharges Actual Goal ✓ Goal Met Below Goal Services 92% \* 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	5	6	<b>-17% ▼</b>
Admits	-	1	-100% 🔻
Discharges	-	1	-100% 🔻
Bed Days	1,825	1,811	1%

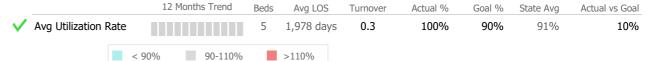
# **Data Submission Quality**

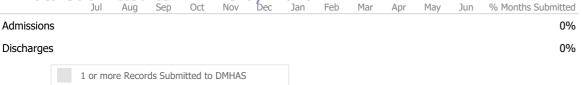


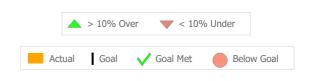
### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	75%	64%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	81%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	81%	N/A

### **Bed Utilization**







<sup>\*</sup> State Avg based on 30 Active MH Intensive Res. Rehabilitation Programs

#### Pilots Program 303-551

**Rushford Center** 

Mental Health - Case Management - Supportive Housing - Scattered Site

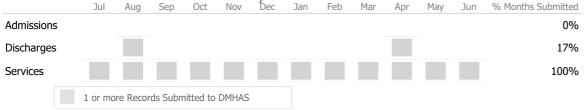
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

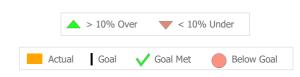
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity** Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Variance % Measure Actual 1 Yr Ago 2 13% 85% 87% -72% 🔷 Stable Living Situation Unique Clients 15 16 -6% Service Utilization Admits 2 100% Discharges 1 State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 12 92% 90% 97% 2% 73 Service Hours 53 37%

### **Data Submission Quality**







<sup>\*</sup> State Avg based on 110 Active Supportive Housing – Scattered Site Programs

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** 603 548 10% 434 70% 80% 69% -10% Treatment Completed Successfully Admits 625 541 16% Actual % vs Goal % Goal % Actual Actual % State Avg Actual vs Goal Discharges 617 543 14% 550 89% 85% 89% 4% No Re-admit within 30 Days of Discharge Bed Days 10,787 9,473 14% Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 195 45% 90% 64% -45% -**Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 82% Valid NOMS Data 89% 510 77% 60% 17% Self Help 67% Valid TEDS Data 100% 95% 179 27% 70% 42% -43% -Abstinence/Reduced Drug Use On-Time Periodic State Avg Actual **Bed Utilization** 6 Month Updates N/A 0% 12 Months Trend Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal Avg Utilization Rate 34 19 days 0.0 87% 90% 91% -3% Co-occurring Actual State Avg 44% 94% MH Screen Complete < 90% 90-110% >110% SA Screen Complete 37% 94% Diagnosis Actual State Avg 100% 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 \* State Avg based on 9 Active SA Intensive Res. Rehabilitation 3.7 Programs

Addiction - Residential Services - Medically Monitored Detox 3.7D

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

\* 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** 898 926 -3% Treatment Completed Successfully 729 66% 80% 69% -14% Admits 1,135 1,143 -1% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 1,110 1,148 -3% 920 83% 85% 80% -2% No Re-admit within 30 Days of Discharge **Bed Days** 4,800 4,588 5% Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 387 53% 90% 54% -37% **Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 78% 86% 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Valid TEDS Data 100% 98% Avg Utilization Rate 90% 19 4 days 0.0 69% 69% -21% **T** 90-110% >110% On-Time Periodic Actual State Avg 6 Month Updates N/A N/A Co-occurring Actual State Avg 56% 96% MH Screen Complete SA Screen Complete 52% 96% Diagnosis Actual State Avg 100% 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

### **Rushford Community Support/RP Program**

**Rushford Center** 

Mental Health - Community Support - CSP

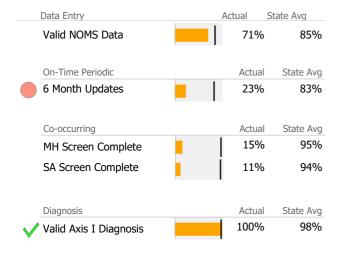
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

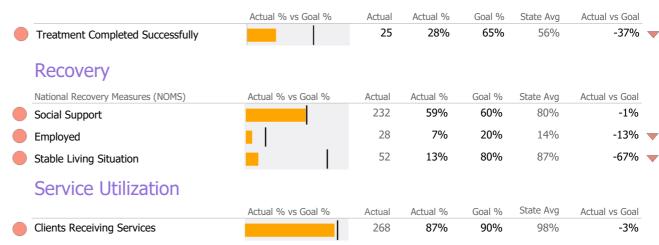
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	390	428	-9%	
Admits	47	66	-29%	•
Discharges	88	87	1%	
Service Hours	3,593	4,717	-24%	•

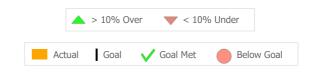
# **Data Submission Quality**



### **Discharge Outcomes**







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

Mental Health - Case Management - Supportive Housing - Scattered Site

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**

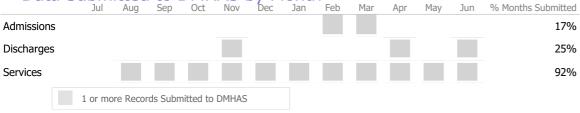
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	33	34	-3%	
Admits	2	5	-60%	•
Discharges	5	3	67%	•
Service Hours	202	148	37%	•

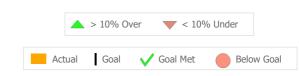
## Recovery

National I	Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable L	iving Situation		7	21%	85%	87%	-64%
Serv	ice Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients F	Receiving Services		28	100%	90%	97%	10%

### **Data Submission Quality**

Data Entry	Actua	Actual State Av	
Valid NOMS Data		83%	96%
On-Time Periodic	A	Actual	State Avg
6 Month Updates		38%	85%





<sup>\*</sup> State Avg based on 110 Active Supportive Housing – Scattered Site Programs

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 153 104 47% 89 62% 70% 66% -8% Treatment Completed Successfully Admits 149 83 80% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 143 90 59% 128 90% 85% 91% 5% No Re-admit within 30 Days of Discharge **Bed Days** 7.771 29% 6,002 Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 45 51% 90% 68% -39% -**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 91% 86% 133 81% 70% 68% 11% 🔺 Abstinence/Reduced Drug Use 99% Valid TEDS Data 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 82% 90% 92% 26 60 days 0.1 -8% Co-occurring Actual State Avg >110% < 90% 90-110% 77% 94% MH Screen Complete SA Screen Complete 75% 92% Diagnosis Actual State Avg ✓ Valid Axis I Diagnosis 100% 100% Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> 100% Admissions 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

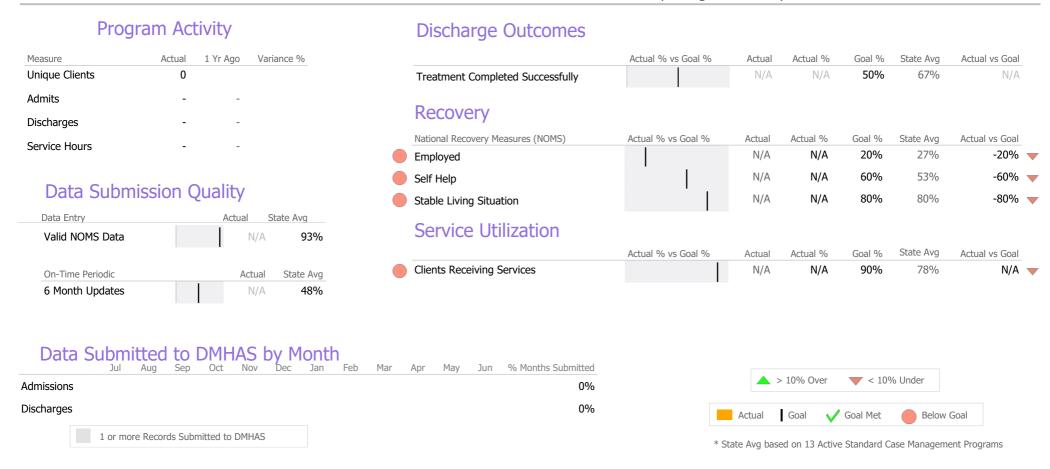
## **SUD CM/ Substance Use Disorder Case Management**

**Rushford Center** 

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)



Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

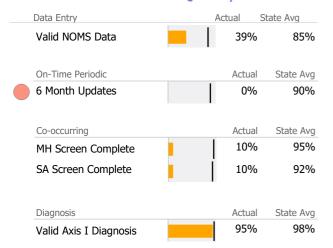
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 155 128 21% 3 11% 50% 48% -39% Treatment Completed Successfully 42 31% 🔺 Admits 32 Recovery Discharges 28 17 65% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 518 625 -17% 19 12% 50% 33% -38% -**Employed** 26 17% 55% 42% -38% -Abstinence/Reduced Drug Use **Data Submission Quality** 40 26% 75% 77% -49% -Not Arrested Data Entry Actual State Avg -54% 10 6% 60% 16% Self Help Valid NOMS Data 56% 87% 33 95% -74% 🔷 21% 76% Stable Living Situation Valid TEDS Data 51% 84% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 1% 15% Clients Receiving Services 40 31% 90% 58% -59% Service Engagement Co-occurring Actual State Avg 26% 91% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 26% 93% 27 66% 75% 63% -9% 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 100% 83% 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

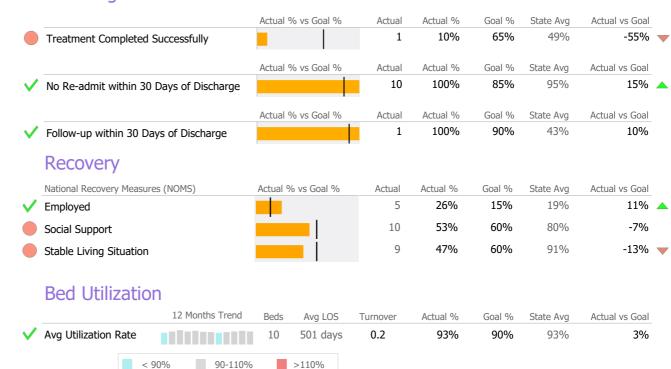
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	19	17	12%	•
Admits	10	10	0%	
Discharges	10	9	11%	•
Bed Days	3,393	2,561	32%	•

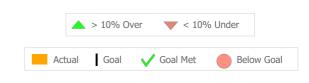
# **Data Submission Quality**



### **Discharge Outcomes**







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