#### **Southeastern Mental Health Authority**

Norwich, CT

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**

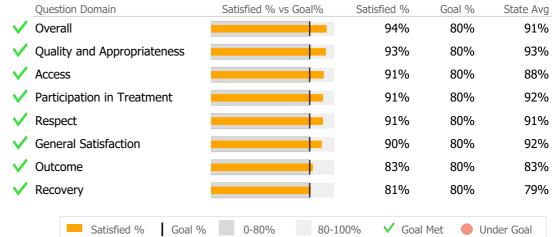




#### Clients by Level of Care

#	%
485	27.5%
294	16.7%
232	13.2%
174	9.9%
131	7.4%
49	2.8%
2	0.1%
396	22.5%
	485 294 232 174 131 49 2

# Consumer Satisfaction Survey (Based on 175 FY21 Surveys)



#### Client Demographics

				Caradan			
Age	#	%	State Avg	Gender	#	%	State Avg
18-25	203	15%	10%	Male	812	59%	59%
26-34	296	22%	22%	Female 🔀	565	41%	41%
35-44	281	20%	23%	Transgender	11	1%	0%
45-54	232	17%	18%				
55-64	226	16%	18%				
65+	134	10%	8%	Race	#	%	State Avg
				White/Caucasian	802	67%	61%
<b>Ethnicity</b>	#	%	State Avg	Black/African American	180	15%	17%
Non-Hispanic	943	68%	68%	Other	88	7%	13%
Unknown 📙	287	21%	12%	Unknown	65	5%	6%
Hispanic-Other	87	6%	9%	Multiple Races	43	4%	1%
Hisp-Puerto Rican	65	5%	11%	Am. Indian/Native Alaskan	18	1%	0%
				Asian	7	1%	1%
Hispanic-Cuban	4	0%	0%	Hawaiian/Other Pacific Islander	3	0%	0%
Hispanic-Mexican	3	0%	1%				
,							
	Unique (	lients	State Avg	▲ > 10% Over State Avg	> 10% L	Jnder St	ate Avg

#### **ACCESS**

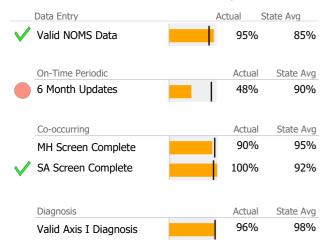
Southeastern Mental Health Authority Mental Health - ACT - Assertive Community Treatment Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

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

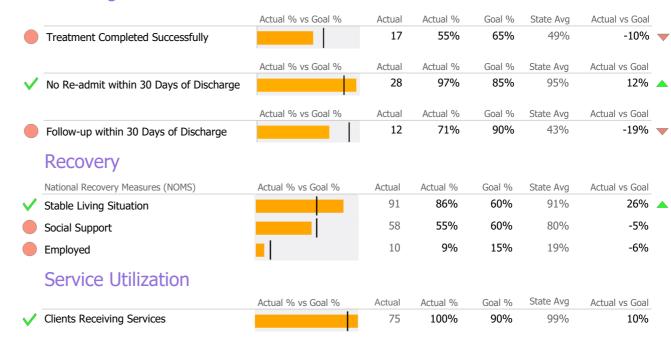
## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	105	112	-6%	
Admits	27	43	-37%	•
Discharges	31	35	-11%	•
Service Hours	3,677	3,535	4%	

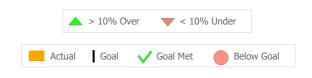
# **Data Submission Quality**



#### **Discharge Outcomes**



	 4011	III CCC CG		$\sim$ 111	17 NO	$\sim$ , .	10110						
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													83%
Discharges													100%
Services													100%
	1 or m	nore Recor	ds Sub	mitted to	DMHA	S							



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

#### **BHH ADULT NAE**

Southeastern Mental Health Authority

Mental Health - 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** State Avg Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Unique Clients N/A N/A 50% 41% 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 N/A N/A 30% 26% -30% **Employed** 60% 62% -60% -Social Support N/A N/A **Data Submission Quality** 95% -95% -Stable Living Situation N/A N/A 73% Data Entry Actual State Avg Service Utilization Valid NOMS Data 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services N/A N/A 90% 84% N/A 🔻 On-Time Periodic Actual State Avg 6 Month Updates N/A 49% Actual State Avg Co-occurring 90% N/A MH Screen Complete SA Screen Complete N/A 91% Data Submitted to DMHAS by Month Mar May % Months Submitted Apr Jun > 10% Over < 10% Under</p> Admissions 0% Discharges 0% ✓ Goal Met Below Goal Goal 1 or more Records Submitted to DMHAS \* State Avg based on 74 Active Standard Outpatient Programs

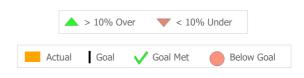
## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	96	94	2%
Admits	110	107	3%
Discharges	92	102	-10%

#### Crisis



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



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

#### **CORP Post-Release**

Southeastern Mental Health Authority

Forensic MH - Forensics Community-based - Re-entry Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

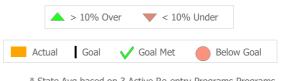
#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1	1	0%
Admits	-	-	
Discharges	-	-	
Service Hours	_	_	

Data Submitted to DMHAS by Month Sep Oct Nov Dec Jan Feb

1 or more Records Submitted to DMHAS

Mar Apr May Jun % Months Submitted Admissions 0% 0% Discharges Services 0%



<sup>\*</sup> State Avg based on 3 Active Re-entry Programs Programs

1 or more Records Submitted to DMHAS

\* 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** 105 110 -5% Treatment Completed Successfully 44% 50% 41% -6% 8 9 Admits -11% Recovery 9 Discharges 13 -31% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 682 535 28% 84 80% 60% 62% 20% 🔺 Social Support 95 90% 95% 73% -5% Stable Living Situation **Data Submission Quality** 12 -19% -**Employed** 11% 30% 26% Data Entry Actual State Avg Service Utilization Valid NOMS Data 94% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 92 96% 90% 84% 6% On-Time Periodic Actual State Avg 6 Month Updates 18% 49% Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Actual State Avg Co-occurring -37% 38% 75% 79% N/A 90% 2 or more Services within 30 days MH Screen Complete SA Screen Complete N/A 91% Diagnosis State Avg Actual 92% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 8% Discharges 42% ✓ Goal Met Actual Goal Below Goal Services 100%

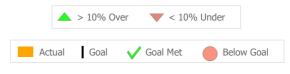
## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	407	349	17%	•
Admits	554	477	16%	•
Discharges	544	476	14%	•

#### **Crisis**



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



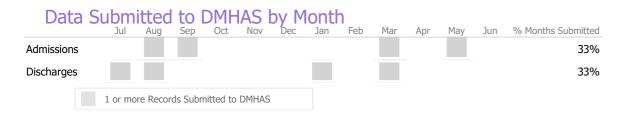
<sup>\*</sup> State Avg based on 26 Active Mobile Crisis Team Programs

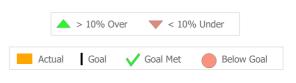
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	25	8%	
Admits	4	4	0%	
Discharges	4	2	100%	•





<sup>\*</sup> State Avg based on 1 Active Outreach & Engagement Programs

#### **SMHA Hsing Asst**

Southeastern Mental Health Authority Mental Health - Housing Services - Housing Assistance Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

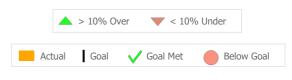
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	





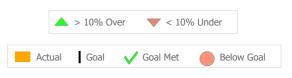


<sup>\*</sup> State Avg based on 0 Active Housing Assistance Programs

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	131	131	0%
Admits	131	127	3%
Discharges	129	128	1%
Service Hours	275	284	-3%

200	0001			- 11	., .	$\sim$ , .							
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%
	1 or n	nore Recor	ds Sub	mitted to	DMHAS	5							

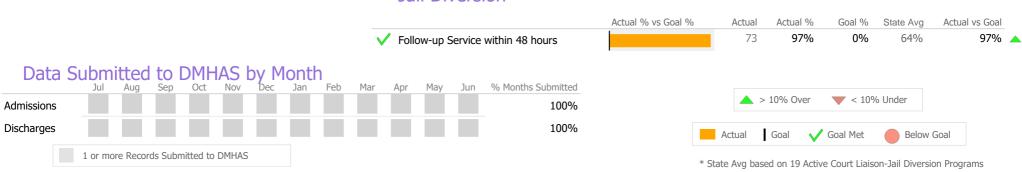


<sup>\*</sup> State Avg based on 16 Active Central Intake Programs

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	336	251	34%	•
Admits	193	117	65%	•
Discharges	159	97	64%	•

#### Jail Diversion



Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

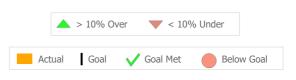
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	_	_	

Data Submitted to DMHAS by Month

Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun % Months Submitted Admissions 0% 0% Discharges



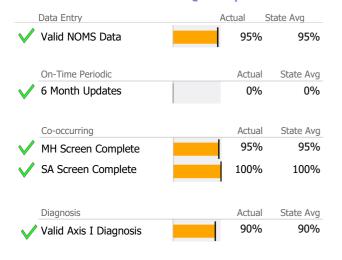


\* State Avg based on 26 Active Other Programs

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	49	49	0%
Admits	42	42	0%
Discharges	39	42	-7%
Bed Days	4,237	2,803	51%

## **Data Submission Quality**



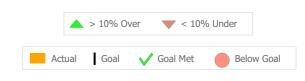
#### **Discharge Outcomes**



#### **Bed Utilization**







<sup>\*</sup> State Avg based on 1 Active Sub-Acute Programs

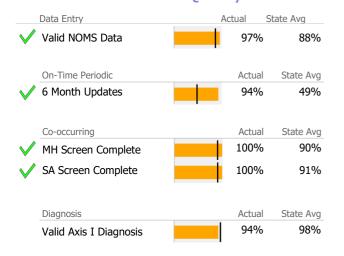
Connecticut Dept of Mental Health and Addiction Services

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

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	198	194	2%	
Admits	37	56	-34%	•
Discharges	41	34	21%	<b>^</b>
Service Hours	3,757	2,825	33%	•

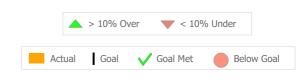
# **Data Submission Quality**



#### **Discharge Outcomes**







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

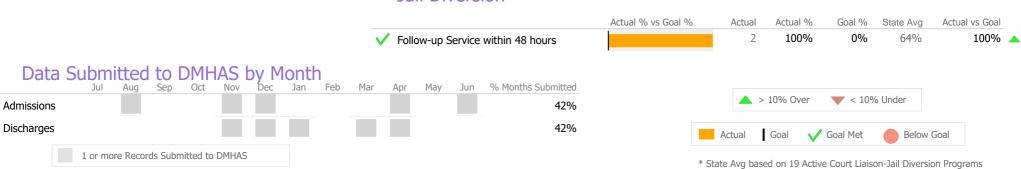
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	34	31	10%	
Admits	6	7	-14%	•
Discharges	7	3	133%	•

#### Jail Diversion



Mental Health - Community Support - CSP

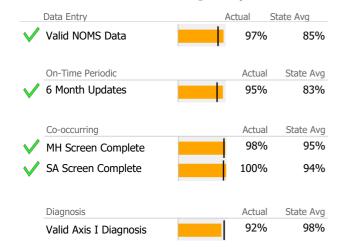
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

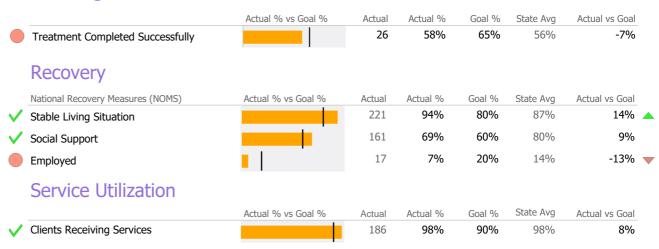
## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	232	204	14%	•
Admits	58	28	107%	•
Discharges	45	28	61%	•
Service Hours	4,488	3,873	16%	•

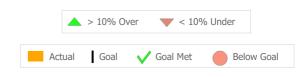
# **Data Submission Quality**



#### **Discharge Outcomes**







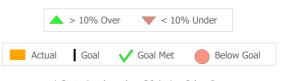
<sup>\*</sup> State Avg based on 38 Active CSP Programs

Mental Health - Other - Other

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2	4	-50%	•
Admits	1	4	-75%	•
Discharges	2	3	-33%	•
Service Hours	1	-		

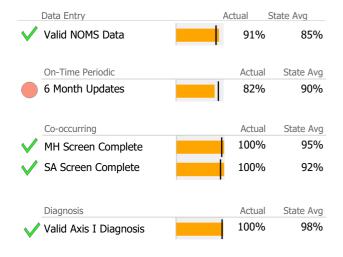




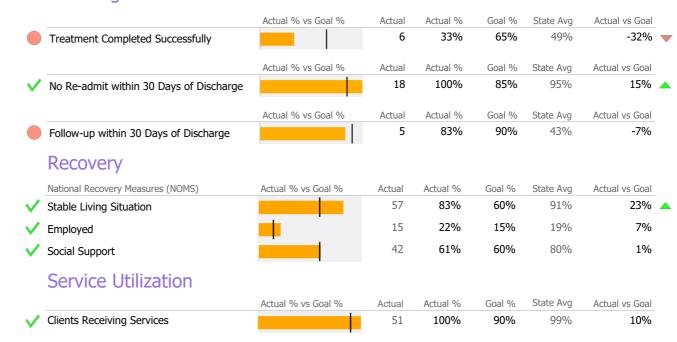
## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	69	65	6%	
Admits	23	17	35%	•
Discharges	18	19	-5%	
Service Hours	3,399	3,475	-2%	

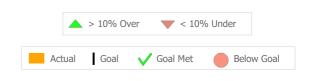
## **Data Submission Quality**



#### **Discharge Outcomes**







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