Wheeler Clinic
Plainville, 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

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	9,040	7,381	22%	▲
	Admits	5,431	4,754	14%	▲
	Discharges	4,706	3,635	29%	▲
	Service Hours	16,928	16,417	3%	

▲ > 10% Over 1 Yr Ago   ▼ > 10% Under 1Yr Ago

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	4,958	52.6%
	Intake	1,414	15.0%
	Medication Assisted Treatment	673	7.1%
	Case Management	77	0.8%
	Consultation	12	0.1%
	IOP	10	0.1%
Forensic SA			
	Forensics Community-based	2,246	23.8%
	Case Management	31	0.3%

Consumer Satisfaction Survey   (Based on 347 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Quality and Appropriateness		95%	80%	93%
✓ Respect		94%	80%	91%
✓ Participation in Treatment		94%	80%	92%
✓ General Satisfaction		94%	80%	92%
✓ Overall		92%	80%	91%
✓ Access		89%	80%	88%
🔴 Outcome		77%	80%	83%
🔴 Recovery		74%	80%	79%

Satisfied % | Goal % ▨ 0-80% ▨ 80-100% ✓ Goal Met 🔴 Under Goal

Client Demographics

Age

Age	#	%	State Avg
18-25	1,447	16%	10%
26-34	2,456	27%	22%
35-44	2,190	24%	23%
45-54	1,383	15%	18%
55-64	1,138	13%	18%
65+	404	4%	8%

Gender

Gender	#	%	State Avg
Male	5,453	60%	59%
Female	3,578	40%	41%
Transgender			0%

Ethnicity

Ethnicity	#	%		State Avg
Unknown	4,671	52%	▲	12%
Non-Hispanic	3,100	34%	▼	68%
Hisp-Puerto Rican	960	11%		11%
Hispanic-Other	244	3%		9%
Hispanic-Mexican	56	1%		1%
Hispanic-Cuban	9	0%		0%

Race

Race	#	%	State Avg
White/Caucasian	5,264	58%	61%
Black/African American	1,407	16%	17%
Other	1,305	14%	13%
Unknown	676	7%	6%
Multiple Races	177	2%	1%
Asian	119	1%	1%
Am. Indian/Native Alaskan	67	1%	0%
Hawaiian/Other Pacific Islander	25	0%	0%

Unique Clients | State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

Variances in data may be indicative of operational adjustments related to the pandemic.

Access Line
Wheeler Clinic
Addiction - Intake - Central Intake

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	1,414	1,218	16%	▲
Admits	1,898	1,583	20%	▲
Discharges	1,898	1,583	20%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%
Discharges	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✓ Goal Met   ● Below Goal
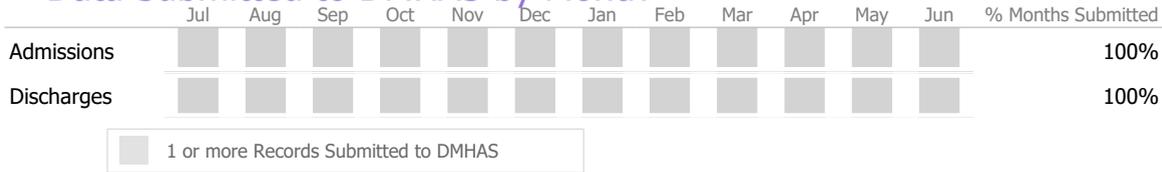
* State Avg based on 1 Active Central Intake Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Bettor Choice 620740
Wheeler Clinic
Addiction - Outpatient - Gambling 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	69	54	28%	▲
Admits	31	32	-3%	
Discharges	26	16	63%	▲
Service Hours	402	519	-23%	▼

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Treatment Completed Successfully		19	73%	75%	60%	-2%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Clients Receiving Services		27	63%	90%	90%	-27% ▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✅ 2 or more Services within 30 days		24	77%	75%	81%	2%

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		77%	95%
✅ Valid TEDS Data		69%	24%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		13%	74%

Co-occurring		Actual	State Avg
✅ MH Screen Complete		100%	44%
✅ SA Screen Complete		100%	49%

Diagnosis		Actual	State Avg
✅ Valid Axis I Diagnosis		100%	100%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪	▪		▪	▪		92%
Discharges	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪			92%
Services	▪	▪	▪	▪	▪	▪	▪			▪	▪	▪	83%

☐ 1 or more Records Submitted to DMHAS
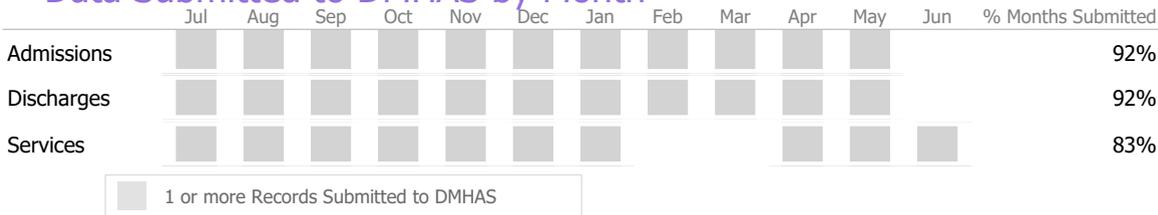
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✅ Goal Met   🔴 Below Goal

* State Avg based on 7 Active Gambling Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Coach 2.0
Wheeler Clinic
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

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	41		
Admits	44	-	
Discharges	33	-	
Service Hours	228	-	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		90%	93%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	48%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Treatment Completed Successfully		10	30%	50%	67%	-20% ▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		40	91%	80%	80%	11% ▲
✓	Employed		9	20%	20%	27%	0%
●	Self Help		12	27%	60%	53%	-33% ▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Clients Receiving Services		9	82%	90%	78%	-8%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions			▣	▣	▣		▣	▣			▣	▣	58%
Discharges							▣	▣	▣		▣	▣	42%
Services							▣	▣	▣		▣	▣	42%

▣ 1 or more Records Submitted to DMHAS
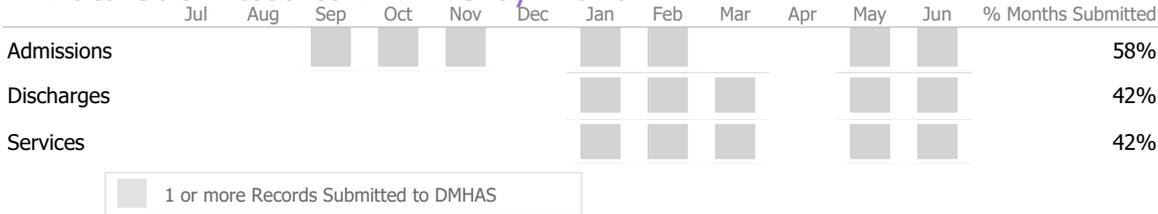
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 13 Active Standard Case Management Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Latino Outreach 620296 Inactive
Wheeler Clinic
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	36	37	-3%	
Admits	8	10	-20%	▼
Discharges	36	9	300%	▲
Service Hours	178	351	-49%	▼

Service Engagement
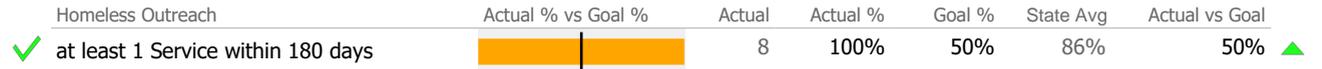
Homeless Outreach		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	at least 1 Service within 180 days		8	100%	50%	86%	50%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪		▪		▪	▪	▪						42%
Discharges	▪			▪		▪		▪					33%
Services	▪	▪	▪	▪	▪		▪	▪					67%

☐ 1 or more Records Submitted to DMHAS
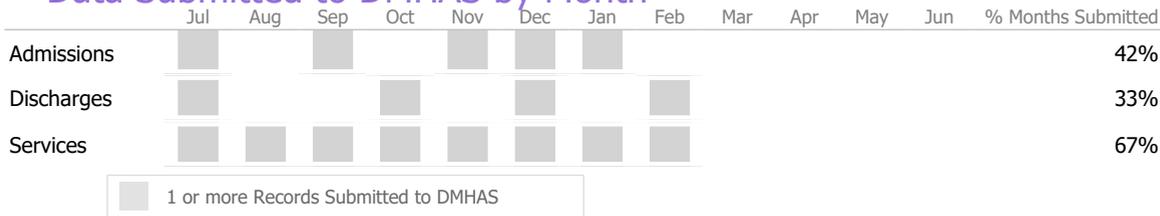
▲ > 10% Over   ▼ < 10% Under

☐ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 22 Active Outreach & Engagement Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Lifeline For Wmn and Chld62030
Wheeler Clinic
Addiction - IOP - Standard IOP

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	10	11	-9%
Admits	-	-	
Discharges	-	1	-100% ▼
Service Hours	-	-	
Social Rehab/PHP/IOP Days	0	0	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	85%
Valid TEDS Data		N/A	87%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		0%	0%

Co-occurring		Actual	State Avg
MH Screen Complete		N/A	88%
SA Screen Complete		N/A	88%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	53%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	65%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Employed		0	0%	50%	19%	-50% ▼
● Abstinence/Reduced Drug Use		0	0%	55%	55%	-55% ▼
● Self Help		0	0%	60%	18%	-60% ▼
● Not Arrested		0	0%	75%	64%	-75% ▼
● Stable Living Situation		0	0%	95%	87%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		0	0%	90%	77%	N/A ▼

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 63 Active Standard IOP Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Lifeline for Women and Children - OP
Wheeler Clinic
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	72	109	-34%	▼
Admits	23	49	-53%	▼
Discharges	37	59	-37%	▼
Service Hours	296	273	8%	

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	75%	87%
✓	Valid TEDS Data	91%	84%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	40%	15%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	91%
✓	SA Screen Complete	100%	93%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	99%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		14	38%	50%	48%	-12%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		59	81%	75%	77%	6%	
🔴	Abstinence/Reduced Drug Use		39	53%	55%	42%	-2%	
🔴	Employed		28	38%	50%	33%	-12%	▼
🔴	Stable Living Situation		57	78%	95%	76%	-17%	▼
🔴	Self Help		2	3%	60%	16%	-57%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		18	50%	90%	58%	-40%	▼

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		13	57%	75%	63%	-18%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢			▢			67%
Discharges	▢	▢	▢	▢	▢	▢	▢	▢	▢		▢	▢	92%
Services	▢	▢	▢	▢	▢	▢	▢			▢	▢	▢	83%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 117 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

MAT - Naltrexone - Plainville
Wheeler Clinic
Addiction - Medication Assisted Treatment - Naltrexone

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	-	-	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	45%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Abstinence/Reduced Drug Use		N/A	N/A	55%	65%	-55% ▼
● Employed		N/A	N/A	50%	50%	-50% ▼
● Not Arrested		N/A	N/A	75%	90%	-75% ▼
● Self Help		N/A	N/A	60%	35%	-60% ▼
● Stable Living Situation		N/A	N/A	95%	84%	-95% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data		N/A 96%
Valid TEDS Data		N/A 86%

On-Time Periodic	Actual	State Avg
6 Month Updates		N/A 35%

Co-occurring	Actual	State Avg
MH Screen Complete		N/A 75%
SA Screen Complete		N/A 91%

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 8 Active Naltrexone Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

MATx OP
Wheeler Clinic
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

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	673	571	18%	▲
Admits	102	170	-40%	▼
Discharges	-	-		
Service Hours	-	-		

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	61%	92%
✓	Valid TEDS Data	100%	88%

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	0%	26%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	75%
✓	SA Screen Complete	100%	93%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	44%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Not Arrested		272	40%	75%	68%	-35% ▼
🔴 Abstinence/Reduced Drug Use		125	19%	55%	44%	-36% ▼
🔴 Employed		6	1%	50%	23%	-49% ▼
🔴 Self Help		61	9%	60%	16%	-51% ▼
🔴 Stable Living Situation		226	34%	95%	64%	-61% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Clients Receiving Services		0	0%	90%	38%	N/A ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢		▢	92%
Discharges													0%
Services													0%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 22 Active Buprenorphine Maintenance Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

NHDT
Wheeler Clinic
Mental Health - 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

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

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	95%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	69%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	63%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		N/A	N/A	20%	20%	-20% ▼
Social Support		N/A	N/A	60%	74%	-60% ▼
Stable Living Situation		N/A	N/A	80%	78%	-80% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		N/A	N/A	90%	90%	N/A ▼

Data Submitted to DMHAS by Month

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

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 31 Active Standard Case Management Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

NHDTP Inactive
Wheeler Clinic
Addiction - 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	12	53	-77%	▼
Admits	-	14	-100%	▼
Discharges	8	41	-80%	▼
Service Hours	-	-		

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges		▢		▢			▢	▢					33%
Services													0%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 1 Active Consultation Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Outpatient Clinic
Wheeler Clinic
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

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

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data		N/A	88%

On-Time Periodic	Actual	State Avg
6 Month Updates		N/A	49%

Co-occurring	Actual	State Avg
MH Screen Complete		N/A	90%
SA Screen Complete		N/A	91%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	41%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Employed		N/A	N/A	30%	26%	-30% ▼
● Social Support		N/A	N/A	60%	62%	-60% ▼
● Stable Living Situation		N/A	N/A	95%	73%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		N/A	N/A	90%	84%	N/A ▼

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Parents Recovering from Opioid Use Disorder (PROUD
Wheeler Clinic
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	55	13	323%	▲
Admits	42	13	223%	▲
Discharges	25	-		
Service Hours	-	-		

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		98%	87%
✓ Valid TEDS Data		99%	84%

On-Time Periodic		Actual	State Avg
◯ 6 Month Updates		0%	15%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	91%
✓ SA Screen Complete		100%	93%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
◯ Treatment Completed Successfully		3	12%	50%	48%	-38%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		55	100%	75%	77%	25%	▲
✓ Abstinence/Reduced Drug Use		36	65%	55%	42%	10%	
◯ Stable Living Situation		47	85%	95%	76%	-10%	
◯ Employed		19	35%	50%	33%	-15%	▼
◯ Self Help		10	18%	60%	16%	-42%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
◯ Clients Receiving Services		0	0%	90%	58%	N/A	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
◯ 2 or more Services within 30 days		0	0%	75%	63%	-75%	▼

Data Submitted to DMHAS by Month
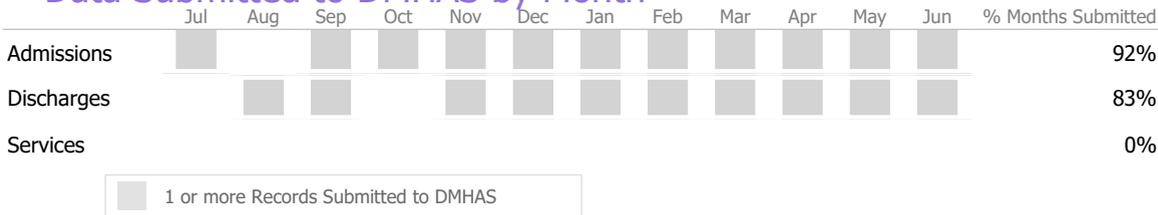
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪		▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	92%
Discharges		▪	▪		▪	▪	▪	▪	▪	▪	▪	▪	83%
Services													0%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ◯ Below Goal

* State Avg based on 117 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Post-Release Transitional Forensic Case Management**
Wheeler Clinic
Forensic SA - 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

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	22	-64%	▼
Admits	1	9	-89%	▼
Discharges	1	15	-93%	▼
Service Hours	3	125	-98%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		0%	0%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		1	100%	50%	79%	50%	▲

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		6	75%	60%	84%	15%	▲
✓	Employed		2	25%	20%	33%	5%	
●	Stable Living Situation		6	75%	80%	62%	-5%	
●	Self Help		3	38%	60%	65%	-22%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		1	14%	90%	76%	-76%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													8%
Discharges													8%
Services													17%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 8 Active Standard Case Management Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Pre-Release Transitional Forensic Case Management
Wheeler Clinic
Forensic SA - 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

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	24	32	-25%	▼
Admits	4	10	-60%	▼
Discharges	2	12	-83%	▼
Service Hours	4	22	-81%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		0%	0%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		2	100%	50%	79%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Employed		1	4%	20%	33%	-16%	▼
● Social Support		4	17%	60%	84%	-43%	▼
● Self Help		2	8%	60%	65%	-52%	▼
● Stable Living Situation		1	4%	80%	62%	-76%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		3	14%	90%	76%	-76%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions			▪	▪	▪						▪		33%
Discharges	▪									▪			17%
Services	▪	▪										▪	25%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▪ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 8 Active Standard Case Management Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

PTIP - 2024 E. Main St. 620713
Wheeler Clinic
Forensic SA - Forensics Community-based - Pre-trial Intervention 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	673	425	58%	▲
Admits	412	217	90%	▲
Discharges	375	164	129%	▲

Data Submitted to DMHAS by Month
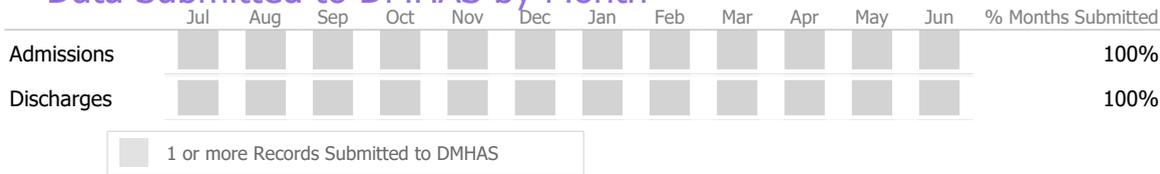
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%
Discharges	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 16 Active Pre-trial Intervention Programs Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

PTIP-75 N. Mountain Rd. 620707
Wheeler Clinic
Forensic SA - Forensics Community-based - Pre-trial Intervention 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	1,574	829	90%	▲
Admits	917	208	341%	▲
Discharges	717	169	324%	▲

Data Submitted to DMHAS by Month
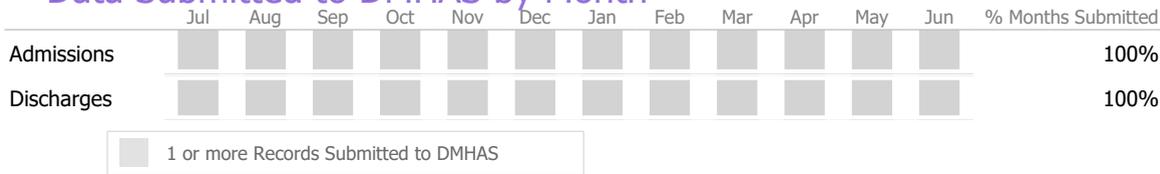
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%
Discharges	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

█ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 16 Active Pre-trial Intervention Programs Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

SA OP Hartford 620203
Wheeler Clinic
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	2,802	2,521	11%	▲
Admits	1,034	1,476	-30%	▼
Discharges	769	756	2%	
Service Hours	8,681	8,650	0%	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		70%	87%
✓ Valid TEDS Data		85%	84%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		11%	15%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	91%
✓ SA Screen Complete		100%	93%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		99%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		273	36%	50%	48%	-14%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		2,314	83%	75%	77%	8%	
🔴 Abstinence/Reduced Drug Use		1,029	37%	55%	42%	-18%	▼
🔴 Stable Living Situation		2,064	74%	95%	76%	-21%	▼
🔴 Employed		610	22%	50%	33%	-28%	▼
🔴 Self Help		318	11%	60%	16%	-49%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		1,090	54%	90%	58%	-36%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 2 or more Services within 30 days		655	63%	75%	63%	-12%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Discharges	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Services	▪	▪	▪	▪	▪	▪	▪			▪	▪	▪	83%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 117 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

SA OP Plainville 620200
Wheeler Clinic
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	2,032	1,869	9%
Admits	915	960	-5%
Discharges	779	753	3%
Service Hours	7,137	6,478	10%

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		69%	87%
✓ Valid TEDS Data		86%	84%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		16%	15%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	91%
✓ SA Screen Complete		100%	93%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		99%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		335	43%	50%	48%	-7%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Not Arrested		1,610	79%	75%	77%	4%
● Abstinence/Reduced Drug Use		763	37%	55%	42%	-18% ▼
● Stable Living Situation		1,548	76%	95%	76%	-19% ▼
● Employed		619	30%	50%	33%	-20% ▼
● Self Help		145	7%	60%	16%	-53% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		657	52%	90%	58%	-38% ▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		581	64%	75%	63%	-11% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%
Discharges	▢	▢	▢	▢	▢	▢	▢			▢	▢	▢	100%
Services	▢	▢	▢	▢	▢	▢	▢		▢	▢	▢	▢	83%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Legend: ▬ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 117 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.