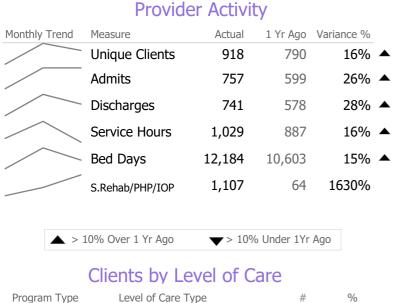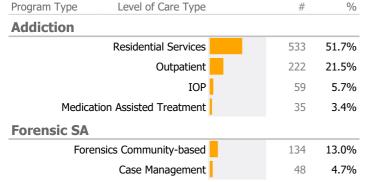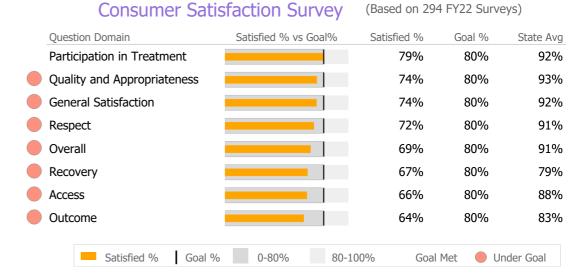**SCADD**
Lebanon, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2022 - September 2022   (Data as of Dec 16, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	918	790	16%	▲
	Admits	757	599	26%	▲
	Discharges	741	578	28%	▲
	Service Hours	1,029	887	16%	▲
	Bed Days	12,184	10,603	15%	▲
	S.Rehab/PHP/IOP	1,107	64	1630%	

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Residential Services	533	51.7%
	Outpatient	222	21.5%
	IOP	59	5.7%
	Medication Assisted Treatment	35	3.4%
Forensic SA			
	Forensics Community-based	134	13.0%
	Case Management	48	4.7%

Consumer Satisfaction Survey   (Based on 294 FY22 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
	Participation in Treatment		79%	80%	92%
●	Quality and Appropriateness		74%	80%	93%
●	General Satisfaction		74%	80%	92%
●	Respect		72%	80%	91%
●	Overall		69%	80%	91%
●	Recovery		67%	80%	79%
●	Access		66%	80%	88%
●	Outcome		64%	80%	83%

Legend: Satisfied % | Goal % | 0-80% | 80-100% | Goal Met | ● Under Goal

Client Demographics

Age	#	%	State Avg
18-25	75	8%	10%
26-34	296	32% ▲	21%
35-44	267	29%	23%
45-54	167	18%	19%
55-64	99	11%	20%
65+	14	2%	8%

Gender	#	%	State Avg
Male	702	77% ▲	58%
Female	214	23% ▼	42%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	734	80% ▲	69%
Hisp-Puerto Rican	112	12%	11%
Unknown	37	4%	12%
Hispanic-Other	31	3%	8%
Hispanic-Cuban	2	0%	0%
Hispanic-Mexican	2	0%	1%

Race	#	%	State Avg
White/Caucasian	646	70%	62%
Black/African American	144	16%	17%
Other	74	8%	12%
Unknown	33	4%	6%
Am. Indian/Native Alaskan	9	1%	1%
Hawaiian/Other Pacific Islander	5	1%	0%
Asian	4	0%	1%
Multiple Races	3	0%	1%

Legend: 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.

Bank St 922402
SCADD
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
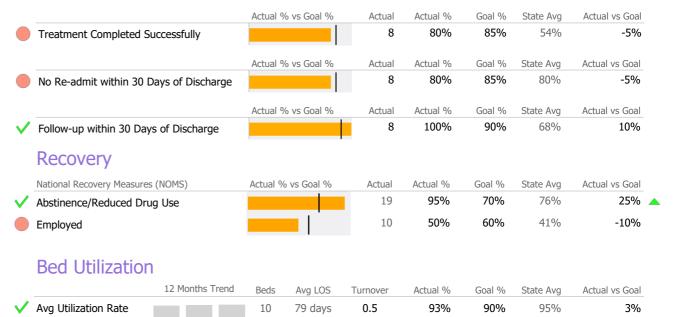Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	20	17	18%	▲
Admits	10	12	-17%	▼
Discharges	10	9	11%	▲
Bed Days	858	662	30%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		8	80%	85%	54%	-5%	
🔴	No Re-admit within 30 Days of Discharge		8	80%	85%	80%	-5%	
✅	Follow-up within 30 Days of Discharge		8	100%	90%	68%	10%	

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	82%	97%
✅	Valid TEDS Data	100%	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✅	Abstinence/Reduced Drug Use		19	95%	70%	76%	25%	▲
🔴	Employed		10	50%	60%	41%	-10%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✅ Avg Utilization Rate		10	79 days	0.5	93%	90%	95%	3%

🟦 < 90%	⬜ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 Active Transitional/Halfway House 3.1 Programs

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

Coit St Women-DMHAS 922401
SCADD
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	20	15	33%	▲
Admits	12	6	100%	▲
Discharges	10	7	43%	▲
Bed Days	724	744	-3%	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		3	30%	85%	54%	-55%	▼
🔴 No Re-admit within 30 Days of Discharge		8	80%	85%	80%	-5%	
🔴 Follow-up within 30 Days of Discharge		2	67%	90%	68%	-23%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		83%	97%
✔ Valid TEDS Data		100%	93%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	0%

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

Recovery

National Recovery Measures (NOMS)

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Abstinence/Reduced Drug Use		19	95%	70%	76%	25%	▲
🔴 Employed		4	20%	60%	41%	-40%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Avg Utilization Rate		11	77 days	0.6	72%	90%	95%	-18%	▼

< 90%	90-110%	>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				67%

1 or more Records Submitted to DMHAS

Legend:
▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✔ Goal Met   🔴 Below Goal

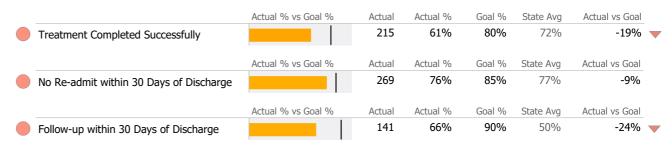* State Avg based on Active Transitional/Halfway House 3.1 Programs

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

Detox 922600
SCADD
Addiction - Residential Services - Medically Monitored Detox 3.7D

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	311	289	8%	
Admits	359	317	13%	▲
Discharges	355	314	13%	▲
Bed Days	1,458	1,221	19%	▲

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		215	61%	80%	72%	-19%	▼
● No Re-admit within 30 Days of Discharge		269	76%	85%	77%	-9%	
● Follow-up within 30 Days of Discharge		141	66%	90%	50%	-24%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	91%	85%
✓	Valid TEDS Data	100%	99%

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

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

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		20	4 days	0.1	79%	90%	80%	-11%	▼

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 Active Medically Monitored Detox 3.7D Programs

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

Lebanon Pines-CSSD 922702
SCADD
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	23	20	15%	▲
Admits	14	11	27%	▲
Discharges	13	9	44%	▲
Bed Days	899	895	0%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		12	92%	70%	63%	22%	▲
✔	No Re-admit within 30 Days of Discharge		12	92%	85%	93%	7%	
●	Follow-up within 30 Days of Discharge		7	58%	90%	72%	-32%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	76%	88%
✔	Valid TEDS Data	100%	92%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	10%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Abstinence/Reduced Drug Use		18	78%	70%	61%	8%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
●	Avg Utilization Rate		11	74 days	0.5	89%	90%	106%	-1%

▢ < 90%	▢ 90-110%	▢ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 Active Intermediate/Long Term Res.Tx 3.5 Programs

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

Lebanon Pines-DMHAS 922701
SCADD
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)
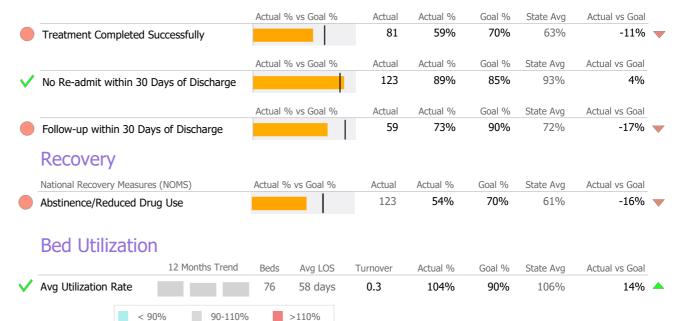
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	223	167	34%	▲
Admits	149	127	17%	▲
Discharges	138	86	60%	▲
Bed Days	7,252	6,397	13%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		81	59%	70%	63%	-11%	▼
✓	No Re-admit within 30 Days of Discharge		123	89%	85%	93%	4%	
🔴	Follow-up within 30 Days of Discharge		59	73%	90%	72%	-17%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	66%	88%
✓	Valid TEDS Data	100%	92%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	10%

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

Recovery

National Recovery Measures (NOMS)

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Abstinence/Reduced Drug Use		123	54%	70%	61%	-16%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Avg Utilization Rate		76	58 days	0.3	104%	90%	106%	14%	▲

■ < 90%   ■ 90-110%   ■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 Active Intermediate/Long Term Res.Tx 3.5 Programs

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

Main St Men 922403
SCADD
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	34	22	55%	▲
Admits	21	11	91%	▲
Discharges	22	14	57%	▲
Bed Days	993	684	45%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	97%
✓	Valid TEDS Data	99%	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%

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		10	45%	85%	54%	-40%	▼
✓ No Re-admit within 30 Days of Discharge		20	91%	85%	80%	6%	
🔴 Follow-up within 30 Days of Discharge		7	70%	90%	68%	-20%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Abstinence/Reduced Drug Use		33	97%	70%	76%	27%	▲
🔴 Employed		15	44%	60%	41%	-16%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Avg Utilization Rate		13	57 days	0.4	83%	90%	95%	-7%

< 90%	90-110%	>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 Active Transitional/Halfway House 3.1 Programs

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

New London IOP 922750
SCADD
Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	59	8	638%	▲
Admits	45	4	1025%	▲
Discharges	34	8	325%	▲
Service Hours	17	21	-20%	▼
Social Rehab/PHP/IOP Days	1,107	64	1630%	▲

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	37%	86%
✓	Valid TEDS Data	100%	89%

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

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	98%	98%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		4	12%	50%	34%	-38%	▼
🔴	Follow-up within 30 Days of Discharge		3	75%	90%	73%	-15%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Employed		22	37%	50%	26%	-13%	▼
🔴	Abstinence/Reduced Drug Use		23	38%	55%	48%	-17%	▼
🔴	Stable Living Situation		44	73%	95%	78%	-22%	▼
🔴	Self Help		3	5%	60%	23%	-55%	▼
🔴	Not Arrested		4	7%	75%	54%	-68%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		18	69%	90%	72%	-21%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions	▢	▢	▢	100%
Discharges	▢	▢	▢	100%
Services	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on Active Standard IOP Programs

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

New London Outpatient 922407
SCADD
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	222	166	34%	▲
Admits	92	78	18%	▲
Discharges	100	87	15%	▲
Service Hours	817	693	18%	▲

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		47%	89%
✓ Valid TEDS Data		100%	81%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	14%

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		43	43%	50%	42%	-7%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Abstinence/Reduced Drug Use		135	61%	55%	27%	6%	
🔴 Employed		84	38%	50%	25%	-12%	▼
🔴 Stable Living Situation		161	72%	95%	56%	-23%	▼
🔴 Self Help		50	22%	60%	12%	-38%	▼
🔴 Not Arrested		54	24%	75%	57%	-51%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		120	98%	90%	43%	8%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 2 or more Services within 30 days		62	67%	75%	66%	-8%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

◼ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on Active Standard Outpatient Programs

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

Post-Release Transitional Forensic Case Management
SCADD
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	33	19	74%	▲
Admits	18	9	100%	▲
Discharges	20	6	233%	▲
Service Hours	115	95	21%	▲

Data Submission Quality

Data Entry	Actual % vs	Actual	State Avg
Valid NOMS Data		96%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	0%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		10	50%	50%	75%	0%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		32	97%	60%	78%	37%	▲
✓ Self Help		29	88%	60%	66%	28%	▲
✓ Employed		14	42%	20%	31%	22%	▲
✓ Stable Living Situation		31	94%	80%	56%	14%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		13	93%	90%	69%	3%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on Active Standard Case Management Programs

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

Pre-Release Transitional Forensic Case Management
SCADD
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	33	20	65%	▲
Admits	24	10	140%	▲
Discharges	22	12	83%	▲
Service Hours	45	18	147%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	0%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		22	100%	50%	75%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Self Help		34	100%	60%	66%	40%	▲
✓ Social Support		33	97%	60%	78%	37%	▲
✓ Employed		10	29%	20%	31%	9%	
● Stable Living Situation		23	68%	80%	56%	-12%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Clients Receiving Services		12	100%	90%	69%	10%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

▮ Actual		Goal	✓ Goal Met	● Below Goal

* State Avg based on Active Standard Case Management Programs

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

PTIP-Main Street 922705

SCADD

Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	122	141	-13%	▼
Admits	-	-		
Discharges	-	7	-100%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 Active Pre-trial Intervention Programs Programs

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

SOR E-MAT
SCADD
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	35	33	6%	
Admits	9	7	29%	▲
Discharges	12	8	50%	▲
Service Hours	35	60	-41%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		69%	94%
✓ Valid TEDS Data		100%	93%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	23%

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		3	25%	50%	34%	-25%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		30	86%	55%	33%	31%	▲
🔴	Self Help		16	46%	60%	10%	-14%	▼
🔴	Stable Living Situation		28	80%	95%	46%	-15%	▼
🔴	Employed		11	31%	50%	19%	-19%	▼
🔴	Not Arrested		16	46%	75%	49%	-29%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		20	87%	90%	34%	-3%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on Active Buprenorphine Maintenance Programs

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

SOR-MAT-Naltrexone
SCADD
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 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%
Valid TEDS Data		N/A	89%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	18%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	20%	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%	40%	-55% ▼
● Employed		N/A	N/A	50%	23%	-50% ▼
● Not Arrested		N/A	N/A	75%	75%	-75% ▼
● Self Help		N/A	N/A	60%	23%	-60% ▼
● Stable Living Situation		N/A	N/A	95%	65%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		N/A	N/A	90%	35%	N/A ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 Active Naltrexone Programs

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

STR TPP - New London
SCADD
Forensic SA - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	21	-43%	▼
Admits	4	7	-43%	▼
Discharges	5	11	-55%	▼
Service Hours	-	-		

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		0	0%	90%	62%	N/A	▼

Jail Diversion

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Follow-up Service within 48 hours		0	0%	0%	100%	0%

▲ > 10% Over	▼ < 10% Under

🟧 Actual		Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on Active Court Liaison-Jail Diversion Programs

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions	▪	▪		67%
Discharges	▪	▪	▪	100%
Services				0%

▪ 1 or more Records Submitted to DMHAS

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