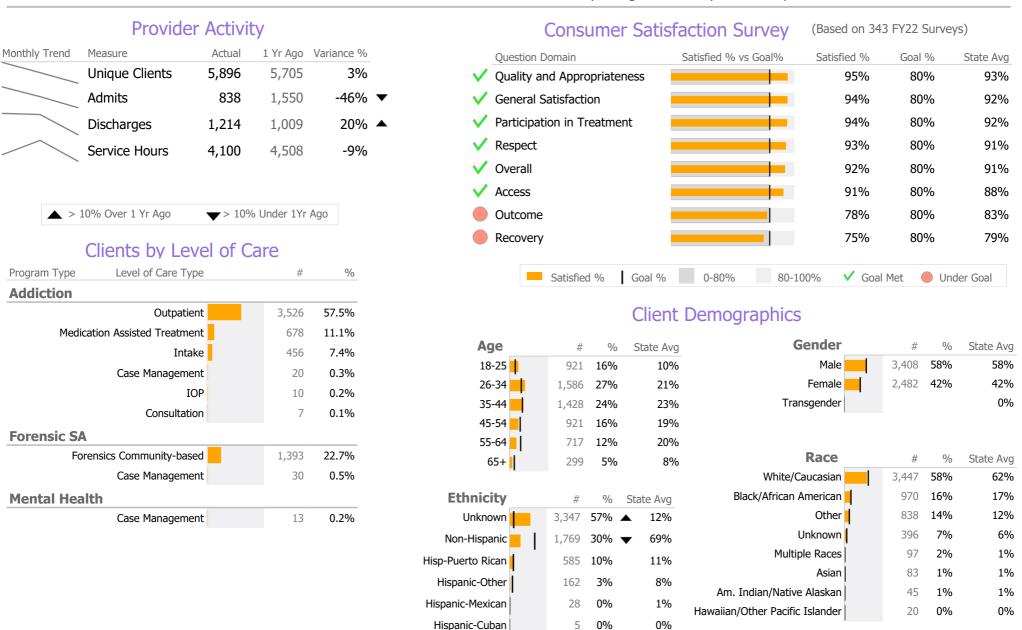
Plainville, CT

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

▲ > 10% Over State Avg

▼ > 10% Under State Avg

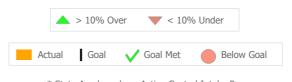


Unique Clients State Avg

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	456	346	32%	•
Admits	548	396	38%	•
Discharges	548	396	38%	•

	Jul	Aug	Sep	% Months Submitted	
Admissions				100%	
Discharges				100%	
	1 or mo	ore Record	ls Sub	omitted to DMHAS	



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

### Addiction - Outpatient - Gambling Outpatient

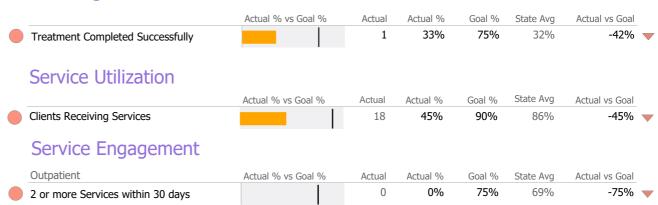
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	43	48	-10% 🔻	
Admits	-	10	-100% 🔻	,
Discharges	3	7	<b>-57%</b> ▼	,
Service Hours	58	107	-45% <b>▼</b>	

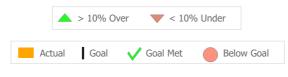
# **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	80%	98%
✓ Valid TEDS Data	58%	21%
On-Time Periodic	Actual	State Avg
6 Month Updates	11%	71%
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	100%

### Discharge Outcomes







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

Wheeler Clinic

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

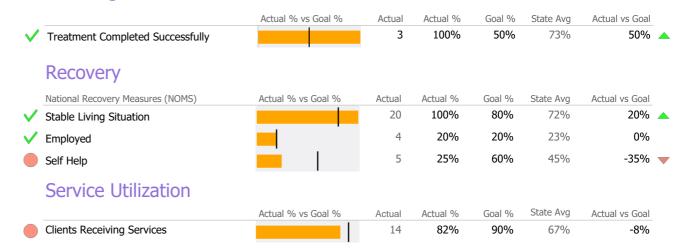
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	20	15	33%	•
Admits	9	15	-40%	•
Discharges	3	-		
Service Hours	54	23	131%	•

# **Data Submission Quality**

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	95%
On-Time Periodic	Actua	I State Avg
6 Month Updates	N/A	42%

### Discharge Outcomes







<sup>\*</sup> State Avg based on Active Standard Case Management 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	10	10	0%
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	
Social Rehab/PHP/IOP Davs	0	0	

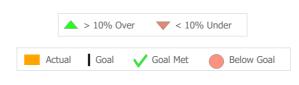
# **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	86%
Valid TEDS Data	N/A	89%
'		
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	0%	0%
'		
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	34%	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%	73%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		0	0%	50%	26%	-50%	$\overline{}$
Abstinence/Reduced Drug Use	İ	0	0%	55%	48%	-55%	
Self Help		0	0%	60%	23%	-60%	
Not Arrested		0	0%	75%	54%	-75%	
Stable Living Situation	· I	0	0%	95%	78%	-95%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	72%	N/A	

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
Services				0%
	1 or mo	ore Recor	ds Subr	nitted to DMHAS



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

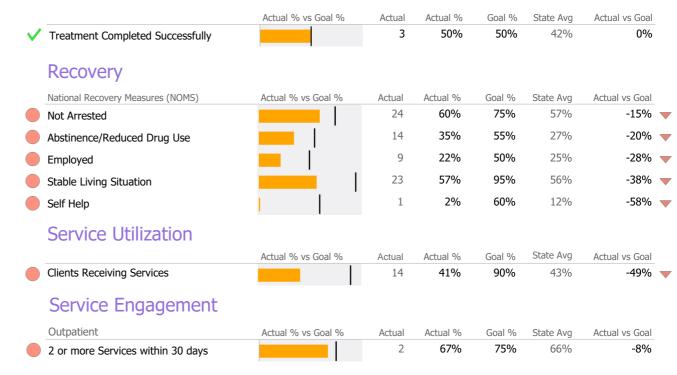
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	40	59	-32%	•
Admits	3	10	-70%	•
Discharges	6	8	-25%	•
Service Hours	76	104	-27%	•

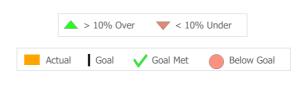
# **Data Submission Quality**

Data Entry	Į.	Actual	State Avg
Valid NOMS Data		74%	89%
✓ Valid TEDS Data		86%	81%
On-Time Periodic		Actual	State Avg
6 Month Updates		33%	14%
Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	99%

# **Discharge Outcomes**







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

Wheeler Clinic

6 Month Updates

### **Program Activity**

Addiction - Medication Assisted Treatment - Naltrexone

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Data Submi	ssion (	Duality	
Data Entry		Actual	State Avg
Data Entry  Valid NOMS Data		Actual	State Avg
•		Actual N	_
Valid NOMS Data		Actual N	/A 95%

### **Discharge Outcomes**

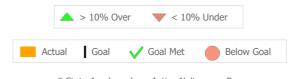
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	20%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		N/A	N/A	55%	40%	-55%	
Employed	ľ	N/A	N/A	50%	23%	-50%	
Not Arrested		N/A	N/A	75%	75%	-75%	
Self Help	1	N/A	N/A	60%	23%	-60%	_
Stable Living Situation	· 1	N/A	N/A	95%	65%	-95%	

# Data Submitted to DMHAS by Month

N/A

18%

	Jul Aug	Sep % Months Submit	ted
Admissions		C	)%
Discharges		C	)%
	1 or more Record	ds Submitted to DMHAS	



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

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	678	608	12%	•
Admits	3	43	-93%	•
Discharges	-	-		
Service Hours	-	-		

# **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	67%	94%
✓ Valid TEDS Data	100%	93%
On-Time Periodic	Actual	I State Avg
6 Month Updates	0%	23%
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	100%
On-Time Periodic  6 Month Updates  Diagnosis	Actual 0% Actual	State Av  239  State Av

### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	34%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		52	8%	55%	33%	-47%	
Employed	ľ	0	0%	50%	19%	-50%	
Self Help		23	3%	60%	10%	-57%	
Not Arrested	_ `	113	17%	75%	49%	-58%	_
Stable Living Situation		99	15%	95%	46%	-80%	~
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	34%	N/A	

	Jul Aug	Sep % Months Submitted	10110
Admissions		100%	
Discharges		0%	
Services		0%	
	1 or more Rec	cords Submitted to DMHAS	



<sup>\*</sup> State Avg based on Active Buprenorphine Maintenance Programs

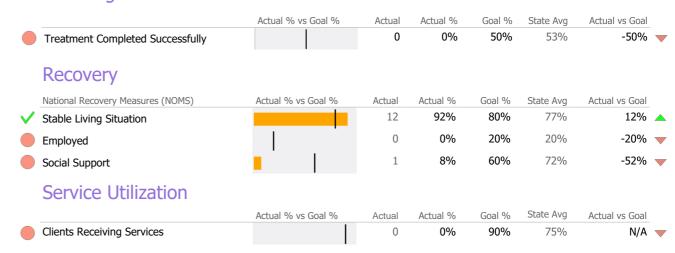
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	1	1200%	•
Admits	10	-		
Discharges	2	-		
Service Hours	-	-		

# **Data Submission Quality**

D	ata Entry	Actual	State	Avg
١	/alid NOMS Data	739	%	95%
C	On-Time Periodic	Actu	al St	tate Avg
<b>√</b> 6	Month Updates	1009	%	68%

### Discharge Outcomes





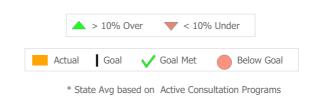


<sup>\*</sup> State Avg based on Active Standard Case Management Programs

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	12	-42%	•
Admits	2	-		
Discharges	-	1	-100%	•
Service Hours	_	_		





# **Program Activity**

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

# **Data Submission Quality**

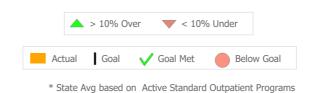
Data Entry	Actual	State Avg
Valid NOMS Data	N/A	90%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	52%

# Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	42%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		N/A	N/A	30%	23%	-30%	
Social Support	·	N/A	N/A	60%	57%	-60%	_
Stable Living Situation	i I	N/A	N/A	95%	71%	-95%	_
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		N/A	N/A	90%	74%	N/A	_

# Data Submitted to DMHAS by Month Submitted Month Submitted





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)

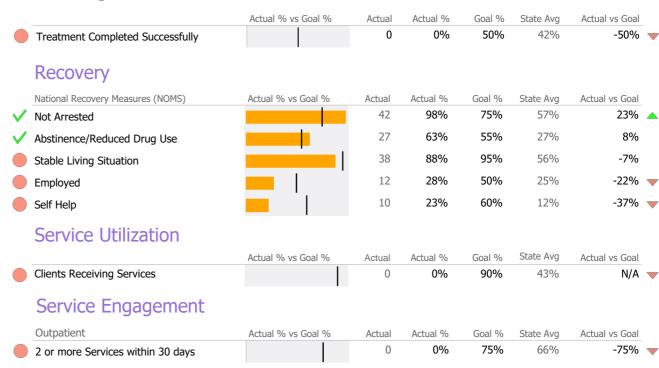
### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	43	24	79%	•
Admits	13	11	18%	•
Discharges	4	6	-33%	•
Service Hours	_	_		

# **Data Submission Quality**

Data Entry	Actual	State Avg
✓ Valid NOMS Data	93%	89%
✓ Valid TEDS Data	96%	81%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	14%
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%
	•	

### **Discharge Outcomes**







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

# **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 2022 - September 2022 (Data as of Dec 16, 2022)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	7	29%	•
Admits	-	-		
Discharges	-	1	-100%	•
Service Hours	13	3		

# **Data Submission Quality**

Data Entry	Actual State Avg
Valid NOMS Data	N/A 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		N/A	N/A	50%	75%	N/A	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
<b>/</b>	Employed		2	22%	20%	31%	2%	
	Social Support		3	33%	60%	78%	-27%	
	Stable Living Situation		3	33%	80%	56%	-47%	
	Self Help	'	1	11%	60%	66%	-49%	_
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		2	22%	90%	69%	-68%	





<sup>\*</sup> State Avg based on Active Standard Case Management Programs

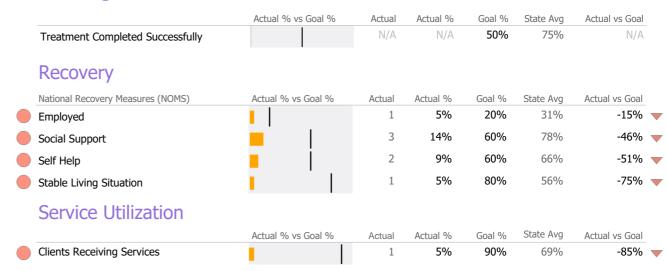
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	21	5%	
Admits	-	1	-100%	•
Discharges	-	1	-100%	•
Service Hours			-25%	•

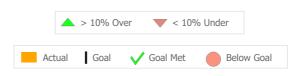
# **Data Submission Quality**

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	0%

### Discharge Outcomes





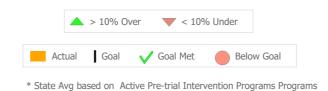


<sup>\*</sup> State Avg based on Active Standard Case Management Programs

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	370	395	-6%	
Admits	59	133	-56%	•
Discharges	104	100	4%	

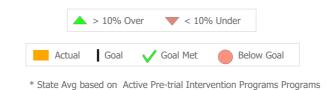
	Jul Aug	Sep % Months Submitted					
Admissions		100%					
Discharges		100%					
	1 or more Records Submitted to DMHAS						



### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,024	957	7%	
Admits	126	298	-58%	•
Discharges	219	119	84%	•

	Jul Aug	Sep % Months Submitted				
Admissions		100%				
Discharges		100%				
1 or more Records Submitted to DMHAS						



Wheeler Clinic

Addiction - Outpatient - Standard Outpatient

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

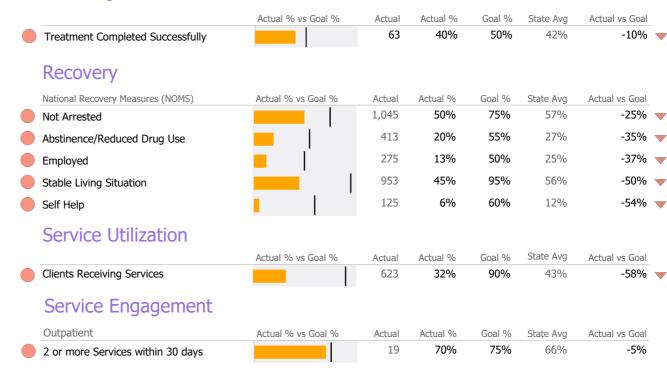
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2,097	2,059	2%	
Admits	27	330	-92%	•
Discharges	159	174	-9%	
Service Hours	2,097	2,266	-7%	

# **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	75%	89%
✓ Valid TEDS Data	85%	81%
On-Time Periodic	Actual	State Avg
6 Month Updates	9%	14%
Diagnosis	 Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%

### **Discharge Outcomes**







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

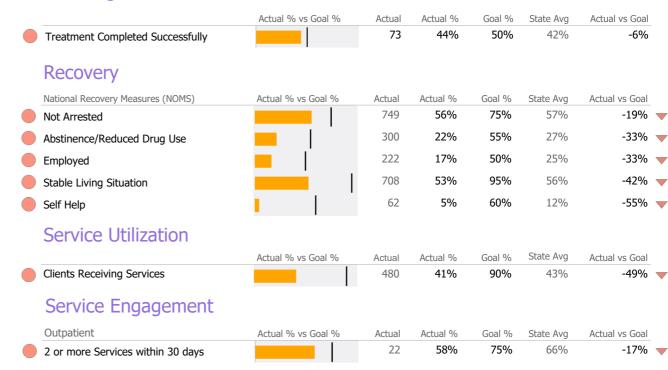
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1,343	1,416	-5%
Admits	38	300	-87% <b>▼</b>
Discharges	166	193	-14% 🔻
Service Hours	1,802	1,932	-7%

# **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	76%	89%
✓ Valid TEDS Data	84%	81%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	14%	14%
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	99%	99%

### Discharge Outcomes



	Jui	Jul	Aug	Sep	% Months Submitted		
Admissions					100%		
Discharges					100%		
Services					67%		
	1 or more Records Submitted to DMHAS						



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

### **TPP New Britain**

Wheeler Clinic

Addiction - 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)

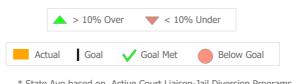
### **Program Activity** Measure 1 Yr Ago Variance % **Unique Clients** Admits Discharges Service Hours **Data Submission Quality** Data Entry State Avg Valid TEDS Data N/A N/A

# Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		N/A	N/A	90%	100%	N/A	

# Data Submitted to DMHAS by Month

Admissions Discharges 1 or more Records Submitted to DMHAS



<sup>\*</sup> State Avg based on Active Court Liaison-Jail Diversion Programs