**Catholic Charities - of Hartford**
Hartford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2022 -March 2023    (Data as of Jul 03, 2023)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 880 | 1,207 | -27% | ▼ |
| | Admits | 437 | 938 | -53% | ▼ |
| | Discharges | 583 | 615 | -5% | |
| | Service Hours | 3,057 | 2,769 | 10% | |

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

## Clients by Level of Care

| Program Type | Level of Care Type | | # | % |
|---|---|---|---|---|
| **Forensic SA** | | | | |
| | Forensics Community-based | | 582 | 61.5% |
| **Mental Health** | | | | |
| | Outpatient | | 114 | 12.0% |
| | Case Management | | 77 | 8.1% |
| **Addiction** | | | | |
| | Outpatient | | 174 | 18.4% |

## Consumer Satisfaction Survey    (Based on 161 FY22 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Quality and Appropriateness | | 97% | 80% | 93% |
| ✓ | Overall | | 93% | 80% | 91% |
| ✓ | Participation in Treatment | | 92% | 80% | 92% |
| ✓ | General Satisfaction | | 89% | 80% | 92% |
| ✓ | Respect | | 88% | 80% | 91% |
| ✓ | Access | | 86% | 80% | 88% |
| ⬤ | Recovery | | 76% | 80% | 79% |
| ⬤ | Outcome | | 74% | 80% | 83% |

Legend: ▬ Satisfied %    | Goal %    ▨ 0-80%    ▨ 80-100%    ✓ Goal Met    ⬤ Under Goal

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 124 | 14% | 10% |
| 26-34 | 216 | 25% | 20% |
| 35-44 | 199 | 23% | 24% |
| 45-54 | 152 | 17% | 18% |
| 55-64 | 126 | 14% | 19% |
| 65+ | 63 | 7% | 9% |

### Gender

| | # | % | | State Avg |
|---|---|---|---|---|
| Male | 620 | 70% | ▲ | 59% |
| Female | 260 | 30% | ▼ | 41% |
| Transgender | | | | 0% |

### Ethnicity

| | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 385 | 44% | ▼ | 68% |
| Hisp-Puerto Rican | 334 | 38% | ▲ | 11% |
| Hispanic-Other | 125 | 14% | | 9% |
| Hispanic-Mexican | 32 | 4% | | 1% |
| Hispanic-Cuban | 2 | 0% | | 0% |
| Unknown | 2 | 0% | ▼ | 12% |

### Race

| | # | % | | State Avg |
|---|---|---|---|---|
| White/Caucasian | 441 | 50% | ▼ | 61% |
| Black/African American | 248 | 28% | ▲ | 17% |
| Other | 170 | 19% | | 13% |
| Unknown | 12 | 1% | | 7% |
| Asian | 5 | 1% | | 1% |
| Am. Indian/Native Alaskan | 3 | 0% | | 1% |
| Hawaiian/Other Pacific Islander | 1 | 0% | | 0% |
| Multiple Races | | | | 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.

**Cathedral Green**
Catholic Charities - of Hartford
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
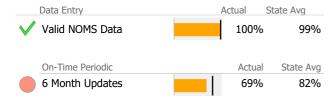Reporting Period: July 2022 - March 2023   (Data as of Jul 03, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 14 | 15 | -7% | |
| Admits | - | 1 | -100% | ▼ |
| Discharges | 2 | 3 | -33% | ▼ |
| Service Hours | 163 | 165 | -1% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 14 | 100% | 85% | 94% | 15% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 13 | 100% | 90% | 97% | 10% |

## Data Submission Quality

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

| | On-Time Periodic | | Actual | State Avg |
|---|---|---|---|---|
| 🔴 | 6 Month Updates | | 69% | 82% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | ▪ | | ▪ | 22% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | 89% |

▪ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▪ Actual | | Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|---|

* State Avg based on 65 Active Supportive Housing – Development Programs

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

**Hartford -IHF HASAP Hispanic Alcohol Program**
Catholic Charities - of Hartford
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - March 2023  (Data as of Jul 03, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 174 | 132 | 32% | ▲ |
| Admits | 118 | 74 | 59% | ▲ |
| Discharges | 83 | 57 | 46% | ▲ |
| Service Hours | 1,191 | 663 | 80% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 16 | 19% | 50% | 41% | -31% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Not Arrested | | 155 | 84% | 75% | 62% | 9% | |
| ● Stable Living Situation | | 172 | 93% | 95% | 65% | -2% | |
| ● Employed | | 72 | 39% | 50% | 32% | -11% | ▼ |
| ● Improved/Maintained Function Score | | 90 | 49% | 75% | 30% | -26% | ▼ |
| ● Abstinence/Reduced Drug Use | | 52 | 28% | 55% | 33% | -27% | ▼ |
| ● Self Help | | 19 | 10% | 60% | 16% | -50% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 96% | 83% |
| ✓ | Valid TEDS Data | 96% | 72% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 66% | 14% |

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

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 100 | 97% | 90% | 61% | 7% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | 79 | 69% | 75% | 56% | -6% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 105 Active Standard Outpatient Programs

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

**Hartford -IHF- PTIP**
Catholic Charities - of Hartford
Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

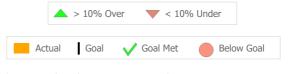Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - March 2023  (Data as of Jul 03, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 582 | 820 | -29% | ▼ |
| Admits | 274 | 719 | -62% | ▼ |
| Discharges | 456 | 424 | 8% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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.

# Waterbury - Adelante OP
Catholic Charities - of Hartford
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - March 2023  (Data as of Jul 03, 2023)
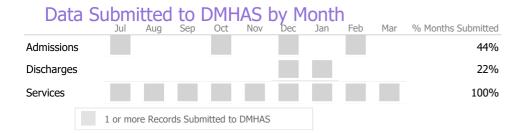
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients ▲ | 19 | 21 | -10% |
| Admits | 4 | 4 | 0% |
| Discharges | 4 | 6 | -33% ▼ |
| Service Hours | 1,200 | 1,154 | 4% |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 95% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 85% | 49% |

| 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 | | 3 | 75% | 50% | 44% | 25% ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 19 | 95% | 60% | 60% | 35% ▲ |
| ✓ Stable Living Situation | | 20 | 100% | 95% | 73% | 5% |
| ✓ Improved/Maintained Function Score | | 15 | 75% | 75% | 25% | 0% |
| ⬤ Employed | | 1 | 5% | 30% | 25% | -25% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 15 | 94% | 90% | 82% | 4% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 3 | 75% | 75% | 78% | 0% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ■ | | | ■ | | ■ | | ■ | | 44% |
| Discharges | | | | | | ■ | ■ | | | 22% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal ✓ Goal Met ⬤ Below Goal

* State Avg based on 71 Active Standard Outpatient Programs

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

**Waterbury - Hispanic CM**
Catholic Charities - of Hartford
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - March 2023  (Data as of Jul 03, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 55 | 58 | -5% | |
| Admits | 19 | 8 | 138% | ▲ |
| Discharges | 18 | 22 | -18% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 97% | 95% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 90% | 65% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 4 | 22% | 50% | 63% | -28% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 57 | 95% | 60% | 74% | 35% | ▲ |
| ✓ Stable Living Situation | | 54 | 90% | 80% | 78% | 10% | |
| ● Employed | | 3 | 5% | 20% | 22% | -15% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 78% |
| Discharges | | | | | | | | | | 78% |

☐ 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.

**Waterbury- St. Francis Xavier**
Catholic Charities - of Hartford
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - March 2023  (Data as of Jul 03, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---------|--------|----------|-----------|---|
| Unique Clients | 8 | 10 | -20% | ▼ |
| Admits | - | 2 | -100% | ▼ |
| Discharges | 1 | 2 | -50% | ▼ |
| Service Hours | 83 | 59 | 42% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 7 | 88% | 85% | 94% | 3% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 7 | 100% | 90% | 97% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|--------|-----------|
| ✓ | Valid NOMS Data | 99% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|--------|-----------|
| ✓ | 6 Month Updates | 100% | 82% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | 0% |
| Discharges | ▢ | | | | | | | | | 11% |
| Services | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 89% |

▢ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

Actual | Goal ✓ Goal Met ● Below Goal

\* State Avg based on 65 Active Supportive Housing – Development Programs

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

**Waterbury-Clinical Services**
Catholic Charities - of Hartford
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
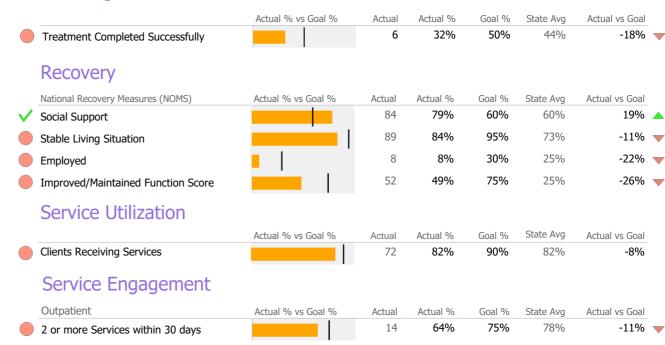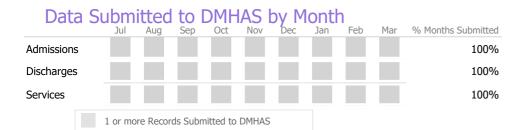Reporting Period: July 2022 - March 2023  (Data as of Jul 03, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 105 | 108 | -3% | |
| Admits | 22 | 8 | 175% | ▲ |
| Discharges | 19 | 29 | -34% | ▼ |
| Service Hours | 420 | 577 | -27% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 87% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 🔴 6 Month Updates | | 20% | 49% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✅ Valid Axis I Diagnosis | | 99% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 6 | 32% | 50% | 44% | -18% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✅ Social Support | | 84 | 79% | 60% | 60% | 19% | ▲ |
| 🔴 Stable Living Situation | | 89 | 84% | 95% | 73% | -11% | ▼ |
| 🔴 Employed | | 8 | 8% | 30% | 25% | -22% | ▼ |
| 🔴 Improved/Maintained Function Score | | 52 | 49% | 75% | 25% | -26% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 72 | 82% | 90% | 82% | -8% | |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 14 | 64% | 75% | 78% | -11% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 71 Active Standard Outpatient Programs

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