SCADD
Lebanon, CT

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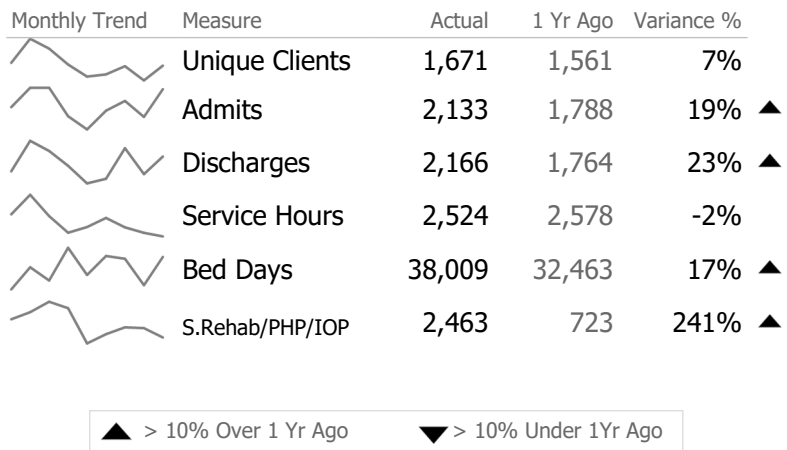Provider Quality Dashboard
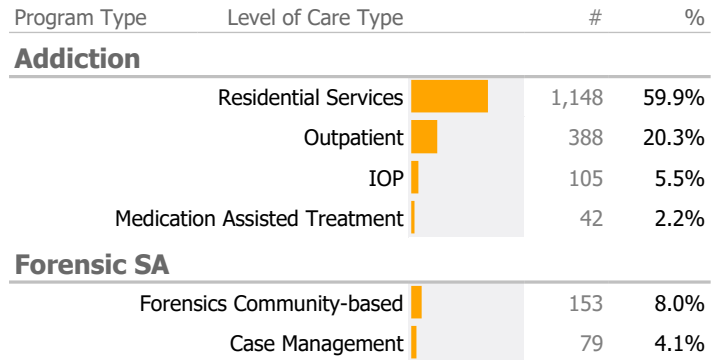Reporting Period: July 2022 - March 2023   (Data as of Jul 03, 2023)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	1,671	1,561	7%	
	Admits	2,133	1,788	19%	▲
	Discharges	2,166	1,764	23%	▲
	Service Hours	2,524	2,578	-2%	
	Bed Days	38,009	32,463	17%	▲
	S.Rehab/PHP/IOP	2,463	723	241%	▲

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Residential Services	1,148	59.9%
	Outpatient	388	20.3%
	IOP	105	5.5%
	Medication Assisted Treatment	42	2.2%
Forensic SA			
	Forensics Community-based	153	8.0%
	Case Management	79	4.1%

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%

Satisfied % | Goal % | 0-80% | 80-100% | Goal Met | Under Goal

Client Demographics

Age

Age	#	%	State Avg
18-25	99	6%	10%
26-34	470	28%	20%
35-44	526	31%	24%
45-54	329	20%	18%
55-64	216	13%	19%
65+	31	2%	9%

Gender

Gender	#	%		State Avg
Male	1,298	78%	▲	59%
Female	371	22%	▼	41%
Transgender				0%

Ethnicity

Ethnicity	#	%		State Avg
Non-Hispanic	1,344	80%	▲	68%
Hisp-Puerto Rican	206	12%		11%
Hispanic-Other	60	4%		9%
Unknown	53	3%		12%
Hispanic-Mexican	6	0%		1%
Hispanic-Cuban	2	0%		0%

Race

Race	#	%		State Avg
White/Caucasian	1,222	73%	▲	61%
Black/African American	250	15%		17%
Other	119	7%		13%
Unknown	48	3%		7%
Am. Indian/Native Alaskan	15	1%		1%
Asian	7	0%		1%
Hawaiian/Other Pacific Islander	6	0%		0%
Multiple Races	4	0%		1%

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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	38	42	-10%
Admits	31	37	-16% ▼
Discharges	31	31	0%
Bed Days	2,642	2,302	15% ▲

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Treatment Completed Successfully		23	74%	85%	65%	-11% ▼
🔴 No Re-admit within 30 Days of Discharge		26	84%	85%	84%	-1%
✅ Follow-up within 30 Days of Discharge		22	96%	90%	69%	6%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	88%	95%
✅ Valid TEDS Data	100%	94%

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		32	78%	70%	75%	8%
✅ Employed		26	63%	60%	48%	3%
🔴 Improved/Maintained Function Score		24	59%	75%	49%	-16% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✅ Avg Utilization Rate		10	81 days	0.2	96%	90%	96%	6%

🟦 < 90%	⬜ 90-110%	🟥 >110%

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 9 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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	37	34	9%	
Admits	29	25	16%	▲
Discharges	26	24	8%	
Bed Days	2,578	2,319	11%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		12	46%	85%	65%	-39%	▼
🔴	No Re-admit within 30 Days of Discharge		21	81%	85%	84%	-4%	
🔴	Follow-up within 30 Days of Discharge		8	67%	90%	69%	-23%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	91%	95%
✔	Valid TEDS Data	100%	94%

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

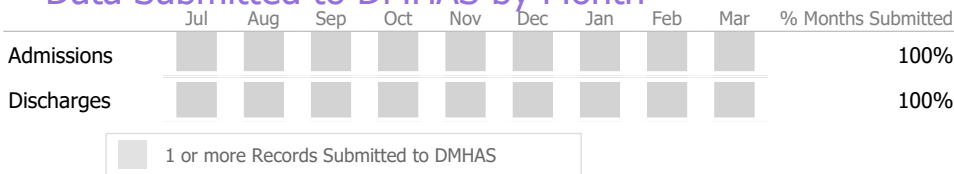| Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	100%

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Abstinence/Reduced Drug Use		36	97%	70%	75%	27%	▲
🔴	Employed		11	30%	60%	48%	-30%	▼
🔴	Improved/Maintained Function Score		11	30%	75%	49%	-45%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Avg Utilization Rate		11	129 days	0.2	86%	90%	96%	-4%

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Discharges	▪	▪		▪	▪	▪	▪	▪	▪	89%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

☐ Actual		Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 9 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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	763	735	4%	
Admits	1,059	893	19%	▲
Discharges	1,057	886	19%	▲
Bed Days	4,352	3,614	20%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		671	63%	80%	72%	-17%	▼
🔴	No Re-admit within 30 Days of Discharge		796	75%	85%	77%	-10%	
🔴	Follow-up within 30 Days of Discharge		388	58%	90%	49%	-32%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	88%	87%
✔	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	0.0	79%	90%	74%	-11%	▼

- ▯ < 90%   ▯ 90-110%   🟥 >110%

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 8 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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	54	40	35%	▲
Admits	45	31	45%	▲
Discharges	43	30	43%	▲
Bed Days	2,805	2,603	8%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		35	81%	70%	65%	11%	▲
✓	No Re-admit within 30 Days of Discharge		39	91%	85%	90%	6%	
🔴	Follow-up within 30 Days of Discharge		19	54%	90%	67%	-36%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	90%	91%
✓	Valid TEDS Data	100%	94%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	1%

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		45	83%	70%	68%	13%	▲
🔴	Improved/Maintained Function Score		36	67%	95%	55%	-28%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		11	75 days	0.1	93%	90%	113%	3%

🟦 < 90%   ⬜ 90-110%   🟥 >110%

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 23 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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	473	369	28%	▲
Admits	414	337	23%	▲
Discharges	405	297	36%	▲
Bed Days	22,353	18,845	19%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		227	56%	70%	65%	-14%	▼
✓	No Re-admit within 30 Days of Discharge		354	87%	85%	90%	2%	
🔴	Follow-up within 30 Days of Discharge		162	71%	90%	67%	-19%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	83%	91%
✓	Valid TEDS Data	100%	94%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	1%

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		307	62%	70%	68%	-8%	
🔴	Improved/Maintained Function Score		308	63%	95%	55%	-32%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		86	69 days	0.1	95%	90%	113%	5%

🟦 < 90%	⬜ 90-110%	🟥 >110%

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 23 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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	64	55	16%	▲
Admits	51	45	13%	▲
Discharges	51	44	16%	▲
Bed Days	3,279	2,780	18%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		99%	95%
✓ Valid TEDS Data		100%	94%

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		35	69%	85%	65%	-16%	▼
✓	No Re-admit within 30 Days of Discharge		46	90%	85%	84%	5%	
🔴	Follow-up within 30 Days of Discharge		28	80%	90%	69%	-10%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		60	94%	70%	75%	24%	▲
🔴	Employed		35	55%	60%	48%	-5%	
🔴	Improved/Maintained Function Score		33	52%	75%	49%	-23%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		13	73 days	0.1	92%	90%	96%	2%

■ < 90%   ■ 90-110%   ■ >110%

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 9 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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	105	61	72%	▲
Admits	97	58	67%	▲
Discharges	100	54	85%	▲
Service Hours	56	44	26%	▲
Social Rehab/PHP/IOP Days	2,463	723	241%	▲

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		49%	91%
✓ Valid TEDS Data		100%	93%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	3%

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		32	32%	50%	47%	-18%	▼
● Follow-up within 30 Days of Discharge		26	81%	90%	80%	-9%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Improved/Maintained Function Score		82	74%	75%	52%	-1%	
● Employed		37	33%	50%	26%	-17%	▼
● Abstinence/Reduced Drug Use		40	36%	55%	50%	-19%	▼
● Stable Living Situation		76	68%	95%	81%	-27%	▼
● Self Help		35	32%	60%	29%	-28%	▼
● Not Arrested		12	11%	75%	62%	-64%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		9	82%	90%	83%	-8%	

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 59 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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	388	319	22%	▲
Admits	281	249	13%	▲
Discharges	320	255	25%	▲
Service Hours	1,877	1,899	-1%	

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	56%	83%
✓	Valid TEDS Data	98%	72%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	90%	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		167	52%	50%	41%	2%

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Abstinence/Reduced Drug Use		218	53%	55%	33%	-2%
🔴	Self Help		217	53%	60%	16%	-7%
🔴	Employed		144	35%	50%	32%	-15% ▼
🔴	Improved/Maintained Function Score		199	48%	75%	30%	-27% ▼
🔴	Stable Living Situation		257	62%	95%	65%	-33% ▼
🔴	Not Arrested		111	27%	75%	62%	-48% ▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		88	95%	90%	61%	5%

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	2 or more Services within 30 days		181	68%	75%	56%	-7%

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.

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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	44	36	22%	▲
Admits	29	26	12%	▲
Discharges	38	28	36%	▲
Service Hours	351	344	2%	

Data Submission Quality

Data Entry	Actual % vs Goal %	Actual	State Avg
Valid NOMS Data		97%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	3%

Discharge Outcomes

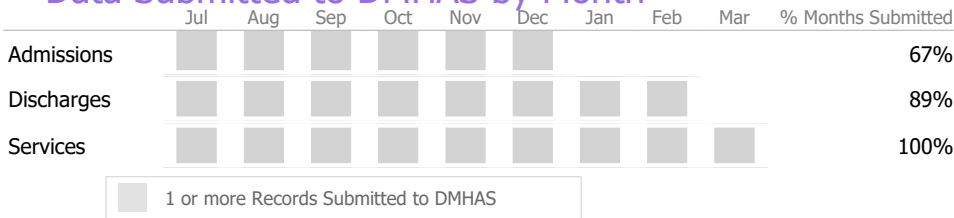|		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		23	61%	50%	75%	11%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		43	98%	60%	85%	38%	▲
✓	Self Help		40	91%	60%	76%	31%	▲
✓	Employed		21	48%	20%	40%	28%	▲
✓	Stable Living Situation		41	93%	80%	57%	13%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		6	100%	90%	69%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▢	▢	▢	▢	▢					67%
Discharges		▢	▢	▢	▢	▢	▢	▢		89%
Services	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%

▢ 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
SCADD
Forensic SA - 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	64	42	52%	▲
Admits	56	33	70%	▲
Discharges	45	36	25%	▲
Service Hours	155	78	99%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	3%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		43	96%	50%	75%	46%	▲

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Self Help		66	100%	60%	76%	40%	▲
✓	Social Support		65	98%	60%	85%	38%	▲
✓	Employed		18	27%	20%	40%	7%	
●	Stable Living Situation		42	64%	80%	57%	-16%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Clients Receiving Services		21	100%	90%	69%	10%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										89%
Services										100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

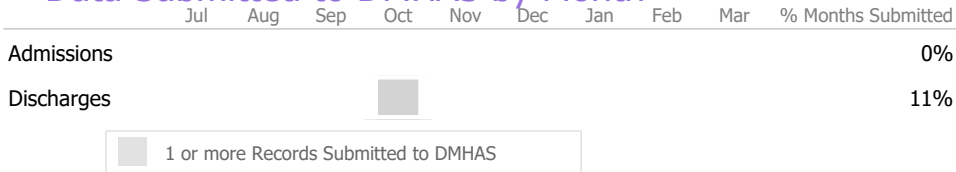Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 8 Active Standard Case Management Programs

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

Pre-Trial Impaired Driving Intervention (FFS)
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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	123	142	-13%	▼
Admits	-	-		
Discharges	1	17	-94%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges				☐						11%

☐ 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.

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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	40	54	-26%	▼
Admits	15	28	-46%	▼
Discharges	24	32	-25%	▼
Service Hours	82	214	-62%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	81%	87%
✔	Valid TEDS Data	100%	86%

On-Time Periodic		Actual	State Avg
✔	6 Month Updates	100%	40%

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

Discharge Outcomes

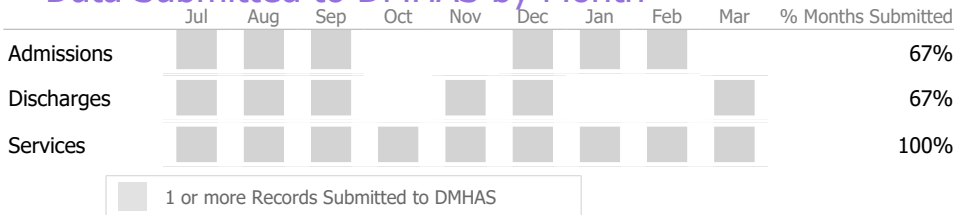|	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		6	25%	50%	36%	-25%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Abstinence/Reduced Drug Use		32	78%	55%	51%	23%	▲
🔴 Self Help		23	56%	60%	18%	-4%	
🔴 Employed		15	37%	50%	31%	-13%	▼
🔴 Stable Living Situation		33	80%	95%	69%	-15%	▼
🔴 Not Arrested		21	51%	75%	72%	-24%	▼
🔴 Improved/Maintained Function Score		11	27%	75%	19%	-48%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		17	100%	90%	59%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▩	▩	▩		▩	▩		▩		67%
Discharges	▩	▩	▩		▩				▩	67%
Services	▩	▩	▩	▩	▩	▩	▩	▩	▩	100%

▩ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 19 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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	1	300%	▲
Admits	3	1	200%	▲
Discharges	1	-		
Service Hours	4	-		

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	100%	98%
✓	Valid TEDS Data	100%	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	29%

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

Discharge Outcomes

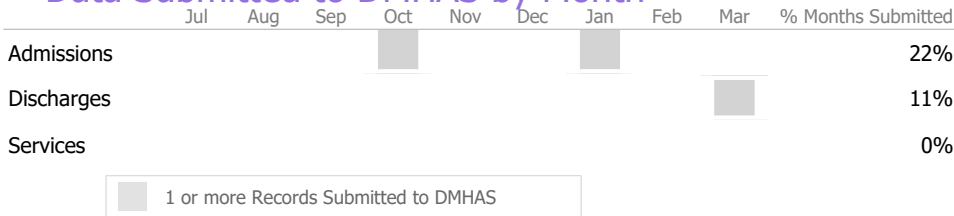|		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		1	100%	50%	31%	50%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		4	100%	55%	57%	45%	▲
✓	Self Help		4	100%	60%	41%	40%	▲
✓	Employed		3	75%	50%	39%	25%	▲
✓	Not Arrested		4	100%	75%	84%	25%	▲
●	Stable Living Situation		3	75%	95%	70%	-20%	▼
●	Improved/Maintained Function Score		0	0%	75%	11%	-75%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		1	33%	90%	41%	-57%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions				▪			▪			22%
Discharges									▪	11%
Services										0%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 6 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 - March 2023 (Data as of Jul 03, 2023)

Program Activity

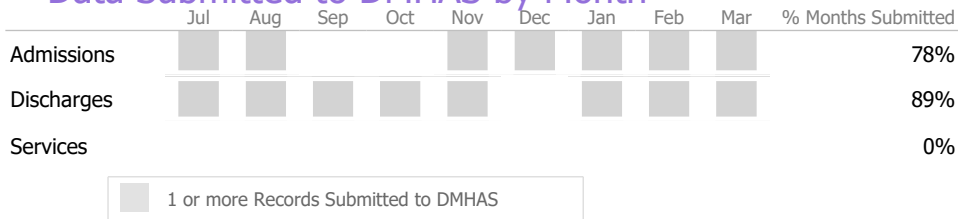| Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	30	38	-21%	▼
Admits	23	25	-8%	
Discharges	24	30	-20%	▼
Service Hours	-	-		

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		0	0%	90%	84%	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%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▪	▪			▪		▪	▪	▪	78%
Discharges	▪	▪	▪	▪	▪		▪	▪	▪	89%
Services										0%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal ✓ Goal Met 🔴 Below Goal

* State Avg based on 5 Active Court Liaison-Jail Diversion Programs

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