Wheeler Clinic Plainville, CT

Reporting Period: July 2022 - March 2023 (Data as of Jul 03, 2023)



▲ > 10% Over 1 Yr Ago

▼ > 10% Under 1Yr Ago

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	4,184	55.1%
	Intake	1,220	16.1%
Medicati	ion Assisted Treatment	297	3.9%
	Case Management	21	0.3%
Foren	sics Community-based	16	0.2%
	Consultation	12	0.2%
	IOP	6	0.1%
Forensic SA			
Foren	sics Community-based	1,800	23.7%
	Case Management	31	0.4%
Mental Healtl	h		
	Case Management	13	0.2%

Consumer Satisfaction Survey (Based on 343 FY22 Surveys)



Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	1,202	16%	10%	Male 🗾	4,464	60%	59%
26-34	1,835	25%	20%	Female	2,933	40%	41%
35-44	1,836	25%	24%	Transgender			0%
45-54	1,147	16%	18%				
55-64 📕	931	13%	19%				
65+	344	5%	9%	Race	#	%	State Avg
				White/Caucasian	4,047	55%	61%
Ethnicity	#	%	State Avg	Other 📙	1,194	16%	13%
Unknown	4,049	55%	▲ 12%	Black/African American	1,183	16%	17%
Non-Hispanic	2,357	32%	▼ 68%	Unknown 🛔	722	10%	7%
Hisp-Puerto Rican	727	10%	11%	Asian	106	1%	1%
Hispanic-Other	227	3%	9%	Multiple Races	80	1%	1%
				Am. Indian/Native Alaskan	48	1%	1%
Hispanic-Mexican	36	0%	1%	Hawaiian/Other Pacific Islander	21	0%	0%
Hispanic-Cuban	5	0%	0%				
,							
	Unique C	lients	State Avg	▲ > 10% Over State Avg	> 10% L	Inder St	ate Avg

Access Line

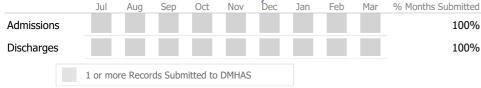
Wheeler Clinic Addiction - Intake - Central Intake

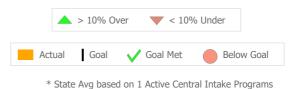
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard Reporting Period: July 2022 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,220	1,029	19%	
Admits	1,615	1,318	23%	
Discharges	1,615	1,318	23%	

Data Submitted to DMHAS by Month





Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	48	58	-17% 🔻	
Admits	19	27	-30% 🔻	
Discharges	29	30	-3%	
Service Hours	252	300	-16% 🔻	

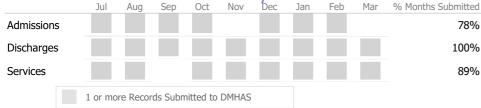
Data Submission Quality

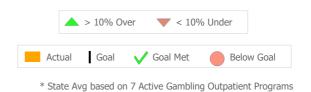
Data Entry	A	ctual S	State Avg
Valid NOMS Data		58%	97%
Valid TEDS Data		27%	24%
On-Time Periodic		Actual	State Avg
6 Month Updates		0%	77%
Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		20	69%	75%	55%	-6%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		13	68%	90%	94%	-22%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		15	79%	75%	71%	4%

Data Submitted to DMHAS by Month





Program Activity

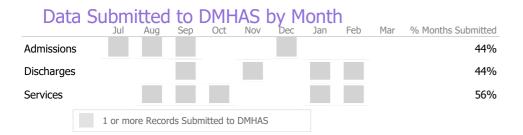
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	21	34	-38%	▼
Admits	10	35	-71%	▼
Discharges	21	24	-13%	▼
Service Hours	84	186	-55%	•

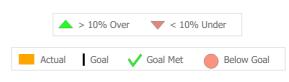
Data Submission Quality

Data Entry	Actual S	tate Avg
🗸 Valid NOMS Data	99%	94%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	40%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	1
Treatment Completed Successfully		21	100%	50%	64%	50%	-
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Stable Living Situation		21	100%	80%	73%	20%	
/ Employed		5	24%	20%	28%	4%	1
Self Help		6	29%	60%	48%	-31%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		N/A	N/A	90%	67%	N/A	





* State Avg based on 13 Active Standard Case Management Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	
Social Rehab/PHP/IOP Days	0	0	

Data Submission Quality

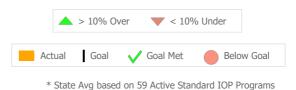
Data Entry		Actual	State Avg
Valid NOMS Data		N/A	91%
Valid TEDS Data		N/A	93%
On-Time Periodic		Actual	State Avg
6 Month Updates		0%	3%
	•		
Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	47%	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%	80%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		0	0%	50%	26%	-50% 🗨
Abstinence/Reduced Drug Use	I	0	0%	55%	50%	-55% 🤘
Self Help	I	0	0%	60%	29%	-60% 🤜
Improved/Maintained Function Score		0	0%	75%	52%	-75% 🦷
Not Arrested	İ	0	0%	75%	62%	-75% 🦷
Stable Living Situation	· · · · ·	0	0%	95%	81%	-95% 🤜
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		0	0%	90%	83%	N/A 🔫

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admission	IS										0%
Discharge	S										0%
Services											0%
		1 or mo	ore Recor	ds Subr	nitted to	DMHAS					



Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	52	60	-13%	▼
Admits	29	23	26%	
Discharges	27	37	-27%	▼
Service Hours	327	260	26%	

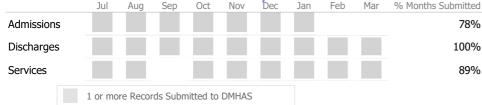
Data Submission Quality

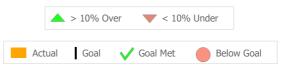
Data Entry	Actual S	State Avg
Valid NOMS Data	53%	83%
Valid TEDS Data	57%	72%
On-Time Periodic	Actual	State Avg
6 Month Updates	44%	14%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		11	41%	50%	41%	-9%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		25	48%	55%	33%	-7%	
Not Arrested		34	65%	75%	62%	-10%	
Employed		19	37%	50%	32%	-13%	
Stable Living Situation		35	67%	95%	65%	-28%	
Improved/Maintained Function Score		15	29%	75%	30%	-46%	
Self Help	• I .	3	6%	60%	16%	-54%	
Service Utilization							
Service Othization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
 Clients Receiving Services 		23	92%	90%	61%	2%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		15	52%	75%	56%	-23%	

Data Submitted to DMHAS by Month





Program Activity



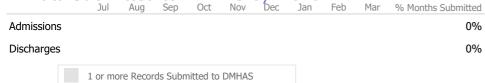
Data Submission Quality

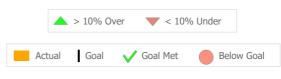
Data Entry	Actual	State Avg
Valid NOMS Data	N/A	98%
Valid TEDS Data	N/A	93%
On-Time Periodic	Actua	State Avg
6 Month Updates	N/A	29%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	31%	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%	57%	-55% 🔻
Employed		N/A	N/A	50%	39%	-50% 🔻
Improved/Maintained Function Score		N/A	N/A	75%	11%	-75% 🔶
Not Arrested	i i	N/A	N/A	75%	84%	-75% 🔷
Self Help		N/A	N/A	60%	41%	-60% 🔶
Stable Living Situation	· · · · · · · · · · · · · · · · · · ·	N/A	N/A	95%	70%	-95% 🔻

Data Submitted to DMHAS by Month





* State Avg based on 6 Active Naltrexone Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	297	342	-13% 🔻
Admits	62	142	-56% 🔻
Discharges	86	106	-19% 🔻
Service Hours	-	-	

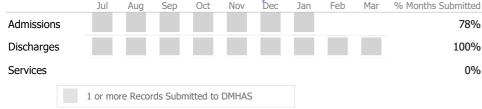
Data Submission Quality

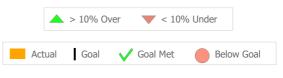
Data Entry	Actual S	itate Avg
Valid NOMS Data	24%	87%
Valid TEDS Data	27%	86%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	40%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		16	19%	50%	36%	-31%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		51	17%	55%	51%	-38%	
Not Arrested		94	32%	75%	72%	-43%	
Employed		6	2%	50%	31%	-48%	
Self Help		22	7%	60%	18%	-53%	
Improved/Maintained Function Score		31	10%	75%	19%	-65%	
Stable Living Situation		86	29%	95%	69%	-66%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	59%	N/A	

Data Submitted to DMHAS by Month





* State Avg based on 19 Active Buprenorphine Maintenance Programs

Program Activity

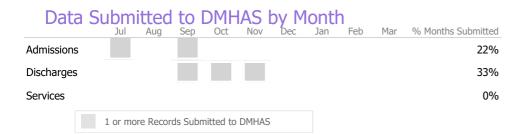
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	2	550% 🔺
Admits	10	1	900% 🔺
Discharges	7	-	
Service Hours	-	-	

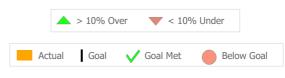
Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	75%	95%
On-Time Periodic	Actual	State Avg
6 Month Updates	17%	65%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		1	14%	50%	63%	-36%	-
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Stable Living Situation		12	92%	80%	78%	12%	
Employed		0	0%	20%	22%	-20%	
Social Support		1	8%	60%	74%	-52%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	86%	N/A	





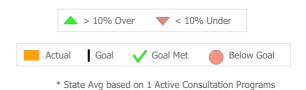
* State Avg based on 31 Active Standard Case Management Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	12	13	-8%
Admits	7	1	600% 🔺
Discharges	4	8	-50% 🔻
Service Hours	-	-	

Data Submitted to DMHAS by Month





Program Activity

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

Data Submission Quality

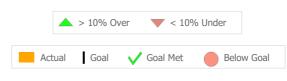
Data Entry	Actua	I S	tate Avg
Valid NOMS Data		N/A	90%
On-Time Periodic	A	ctual	State Avg
6 Month Updates		N/A	49%

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
Employed		N/A	N/A	30%	25%	-30%
Improved/Maintained Function Score	· ·	N/A	N/A	75%	25%	-75%
Social Support		N/A	N/A	60%	60%	-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%	82%	N/A

Data Submitted to DMHAS by Month Feb Mar % Months Submitted

	Jui	Aug	JCP	OCL	1100	DCC	Juli	T CD	1.101	70 FIORERS Submitted
Admissions										0%
Discharges										0%
	1 or mo	ore Reco	rds Subr	nitted to	DMHAS					



Wheeler Clinic

Addiction - Outpatient - Standard Outpatient

Reporting Period: July 2022 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	56	43	30% 🔺
Admits	30	30	0%
Discharges	19	21	-10%
Service Hours	-	-	

Data Submission Quality

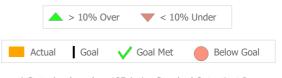
Data Entry	Actual S	tate Avg
Valid NOMS Data	98%	83%
Valid TEDS Data	96%	72%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	14%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		3	16%	50%	41%	-34%	
Deserver							
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
V Not Arrested		57	100%	75%	62%	25%	
Abstinence/Reduced Drug Use		41	72%	55%	33%	17%	
Stable Living Situation		50	88%	95%	65%	-7%	
Employed		15	26%	50%	32%	-24%	
Self Help		15	26%	60%	16%	-34%	
Improved/Maintained Function Score	– 1	7	12%	75%	30%	-63%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	61%	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%	56%	-75%	▼

Data Submitted to DMHAS by Month





Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Forensic SA - Case Management - Standard Case Management

Reporting Period: July 2022 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	10	9	11%	
Admits	2	4	-50%	▼
Discharges	-	2	-100%	▼
Service Hours	19	3		

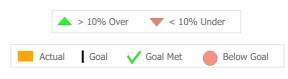
Data Submission Quality

	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	100%	99%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	0%	3%

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	
\checkmark	Employed		2	20%	20%	40%	0%	
	Social Support	·	5	50%	60%	85%	-10%	
	Stable Living Situation		5	50%	80%	57%	-30%	
	Self Help	1	1	10%	60%	76%	-50%	▼
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		3	30%	90%	69%	-60%	





* State Avg based on 8 Active Standard Case Management Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Forensic SA - Case Management - Standard Case Management

Reporting Period: July 2022 - March 2023 (Data as of Jul 03, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	22	23	-4%
Admits	1	3	-67% 🔻
Discharges	-	2	-100% 🔻
Service Hours		3	-92% 🔻

Data Submission Quality

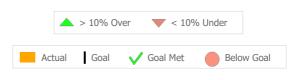
	Data Entry	Actual	State Avg	
\checkmark	Valid NOMS Data	1009	% 99%	
		•		
	On-Time Periodic	Actu	al State Avg	
\checkmark	6 Month Updates	50	% 3%	

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	
Employed		1	5%	20%	40%	-15%	
Self Help	_	3	14%	60%	76%	-46%	-
Social Support		3	14%	60%	85%	-46%	
Stable Living Situation		1	5%	80%	57%	-75%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		1	5%	90%	69%	-85%	

Data Submitted to DMHAS by Month Mar % Months Submitted Jul Aug Sep Oct Nov Dec Jan Feb Admissions 11% 0% Discharges Services 33% 1 or more Records Submitted to DMHAS



* State Avg based on 8 Active Standard Case Management Programs

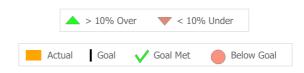
Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

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	1,313	1,430	-8%
Admits	405	772	-48% 🔻
Discharges	556	461	21% 🔺





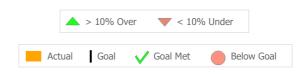
* State Avg based on 16 Active Pre-trial Intervention Programs Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	488	601	-19% 🔻
Admits	166	339	-51% 🔻
Discharges	261	270	-3%





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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2,295	2,722	-16% 🔻	
Admits	1,001	1,457	-31% 🔻	
Discharges	1,252	1,498	-16% 🔻	
Service Hours	7,827	6,998	12% 🔺	

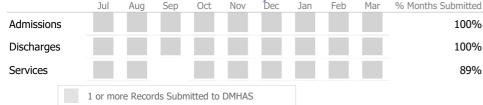
Data Submission Quality

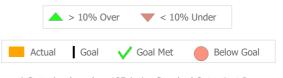
Data Entry	 Actual S	tate Avg
Valid NOMS Data	39%	83%
Valid TEDS Data	34%	72%
On-Time Periodic	Actual	State Avg
Valid TEDS Data On-Time Periodic 6 Month Updates Diagnosis	12%	14%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		348	28%	50%	41%	-22%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		1,134	49%	75%	62%	-26%	
Employed		510	22%	50%	32%	-28%	
Abstinence/Reduced Drug Use		575	25%	55%	33%	-30%	
Stable Living Situation	I	1,192	52%	95%	65%	-43%	
Improved/Maintained Function Score	— 1 [·]	726	32%	75%	30%	-43%	
Self Help	■ [`]	174	8%	60%	16%	-52%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		719	68%	90%	61%	-22%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		312	31%	75%	56%	-44%	•

Data Submitted to DMHAS by Month





Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1,787	1,966	-9%
Admits	875	1,106	-21% 🔻
Discharges	954	1,092	-13% 🔻
Service Hours	7,076	5,605	26% 🔺

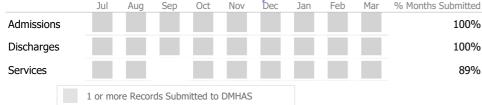
Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		43%	83%
Valid TEDS Data		37%	72%
On-Time Periodic		Actual	State Avg
✓ 6 Month Updates	•	19%	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		370	39%	50%	41%	-11%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Employed		493	28%	50%	32%	-22%	
Not Arrested		925	52%	75%	62%	-23%	
Abstinence/Reduced Drug Use		464	26%	55%	33%	-29%	
Stable Living Situation		1,007	56%	95%	65%	-39%	
Improved/Maintained Function Score		583	33%	75%	30%	-42%	
Self Help	I I .	78	4%	60%	16%	-56%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Clients Receiving Services		621	74%	90%	61%	-16%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		323	37%	75%	56%	-38%	

Data Submitted to DMHAS by Month





Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2022 - March 2023 (Data as of Jul 03, 2023)

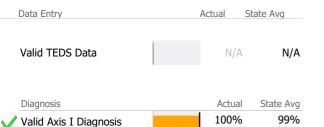
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16		
Admits	16	-	
Discharges	9	-	
Service Hours	-	-	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	71%	N/A	

Data Submission Quality



Jail Diversion

