McCall Foundation Inc
Torrington, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2022 - June 2023   (Data as of Sep 25, 2023)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	1,346	1,210	11%	▲
	Admits	1,245	1,484	-16%	▼
	Discharges	1,114	1,301	-14%	▼
	Service Hours	7,402	8,021	-8%	
	Bed Days	53,644	28,404	89%	▲

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Addiction				
	Outpatient		720	40.6%
	Residential Services		475	26.8%
	Case Management		193	10.9%
	Medication Assisted Treatment		136	7.7%
	Employment Services		69	3.9%
Mental Health				
	Employment Services		132	7.4%
	Community Support		22	1.2%
	Residential Services		21	1.2%
	Case Management		6	0.3%

Consumer Satisfaction Survey   (Based on 981 FY22 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Participation in Treatment		96%	80%	92%
✓ General Satisfaction		96%	80%	92%
✓ Quality and Appropriateness		96%	80%	93%
✓ Overall		95%	80%	91%
✓ Respect		94%	80%	91%
✓ Access		92%	80%	88%
✓ Outcome		90%	80%	83%
✓ Recovery		88%	80%	79%

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

Client Demographics

Age

Age	#	%	State Avg
18-25	95	7%	10%
26-34	371	28%	21%
35-44	412	31%	24%
45-54	242	18%	18%
55-64	185	14%	18%
65+	41	3%	9%

Gender

Gender	#	%	State Avg
Male	851	63%	59%
Female	491	37%	41%
Transgender			0%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	993	74%	67%
Unknown	250	19%	13%
Hispanic-Other	88	7%	9%
Hisp-Puerto Rican	11	1%	10%
Hispanic-Mexican	3	0%	1%
Hispanic-Cuban	1	0%	0%

Race

Race	#	%		State Avg
White/Caucasian	930	69%		60%
Unknown	237	18%	▲	7%
Other	95	7%		12%
Black/African American	70	5%	▼	18%
Am. Indian/Native Alaskan	7	1%		1%
Asian	7	1%		1%
Multiple Races				1%
Hawaiian/Other Pacific Islander				0%

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.

Carnes Weeks
McCall Foundation Inc
Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	290	298	-3%	
Admits	286	308	-7%	
Discharges	264	303	-13%	▼
Bed Days	14,832	6,491	129%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		98%	92%
✓ Valid TEDS Data		97%	94%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		0%	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		191	72%	80%	71%	-8%	
✓	No Re-admit within 30 Days of Discharge		248	94%	85%	90%	9%	
🔴	Follow-up within 30 Days of Discharge		90	47%	90%	59%	-43%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Improved/Maintained Function Score		243	85%	75%	82%	10%	
🔴	Self Help		167	54%	60%	70%	-6%	
🔴	Abstinence/Reduced Drug Use		104	34%	70%	39%	-36%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Avg Utilization Rate		20	142 days	0.0	203%	90%	100%	113%	▲

🟦 < 90%	⬜ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜		92%
Discharges	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜	⬜		92%

⬜ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

🟧 Actual   │ Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 9 Active SA Intensive Res. Rehabilitation 3.7 Programs

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

Coach 2.0
McCall Foundation Inc
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	39	61	-36%	▼
Admits	13	61	-79%	▼
Discharges	23	35	-34%	▼
Service Hours	86	362	-76%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Treatment Completed Successfully		8	35%	50%	61%	-15%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		12	31%	20%	29%	11%	▲
✓	Stable Living Situation		33	85%	80%	73%	5%	
✓	Self Help		24	62%	60%	48%	2%	

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	94%

On-Time Periodic		Actual	State Avg
●	6 Month Updates	6%	38%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		12	75%	90%	69%	-15%	▼

Data Submitted to DMHAS by Month
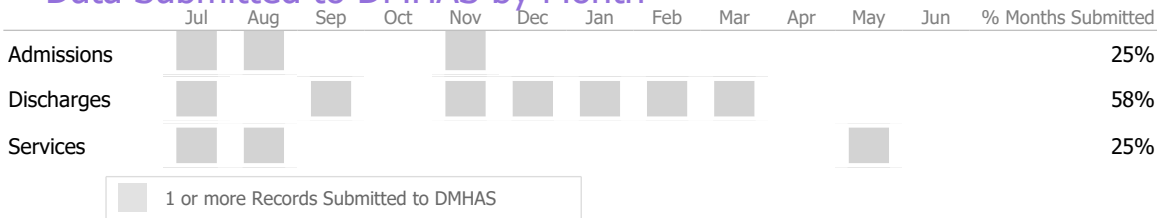
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													25%
Discharges													58%
Services													25%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 13 Active Standard Case Management Programs

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

Dempsey Center
McCall Foundation Inc
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 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	60	35	71%	▲
Admits	28	33	-15%	▼
Discharges	35	-		
Bed Days	10,830	4,883	122%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	92%
✓	Valid TEDS Data	98%	94%

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

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		22	63%	70%	66%	-7%	
✓	No Re-admit within 30 Days of Discharge		30	86%	85%	90%	1%	
🔴	Follow-up within 30 Days of Discharge		14	64%	90%	65%	-26%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		46	73%	70%	68%	3%	
🔴	Improved/Maintained Function Score		19	30%	95%	77%	-65%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Avg Utilization Rate		19	420 days	0.1	156%	90%	78%	66%	▲
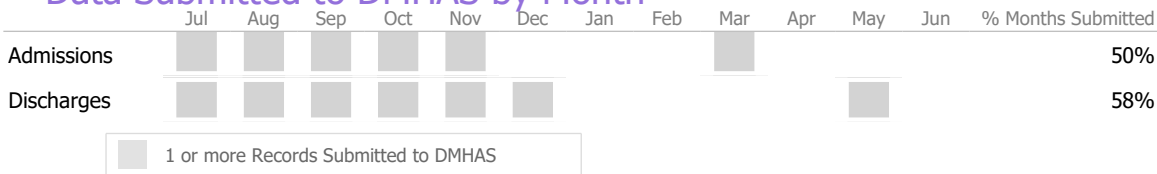
☐ < 90%	☐ 90-110%	☐ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■	■	■				■				50%
Discharges	■	■	■	■	■	■					■		58%

☐ 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.

Dempsey Center CSSD
McCall Foundation Inc
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 - June 2023   (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	72	22	227%	▲
Admits	50	22	127%	▲
Discharges	49	-		
Bed Days	7,210	1,997	261%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		39	80%	70%	66%	10%	▲
✓	No Re-admit within 30 Days of Discharge		46	94%	85%	90%	9%	
🔴	Follow-up within 30 Days of Discharge		23	59%	90%	65%	-31%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	92%
✓	Valid TEDS Data	98%	94%

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

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		51	71%	70%	68%	1%	
🔴	Improved/Maintained Function Score		36	60%	95%	77%	-35%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Avg Utilization Rate		15	246 days	0.1	132%	90%	78%	42%	▲

■ < 90%	■ 90-110%	■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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.

Dempsey OP
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	55	41	34%	▲
Admits	14	35	-60%	▼
Discharges	23	-		
Service Hours	16	77	-79%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	97%	85%
✔	Valid TEDS Data	99%	74%

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		15	65%	50%	42%	15%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Not Arrested		47	85%	75%	66%	10%	
✔	Abstinence/Reduced Drug Use		33	60%	55%	35%	5%	
✔	Self Help		33	60%	60%	18%	0%	
🔴	Employed		5	9%	50%	35%	-41%	▼
🔴	Stable Living Situation		25	45%	95%	68%	-50%	▼
🔴	Improved/Maintained Function Score		6	11%	75%	42%	-64%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		9	28%	90%	64%	-62%	▼

Service Engagement

	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		1	7%	75%	57%	-68%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■											17%
Discharges	■	■											17%
Services	■	■											17%

☐ 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.

Employment Services Torrington
McCall Foundation Inc
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	132		
Admits	132	-	
Discharges	33	-	
Service Hours	1,336	-	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Employed		39	30%	35%	43%	-5%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		97	98%	90%	95%	8%

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	93%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		0%	77%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions		▢	▢	▢	▢	▢	▢	▢	▢	▢		▢	92%
Discharges		▢	▢	▢	▢	▢	▢	▢	▢				67%
Services						▢				▢	▢		25%

▢ 1 or more Records Submitted to DMHAS
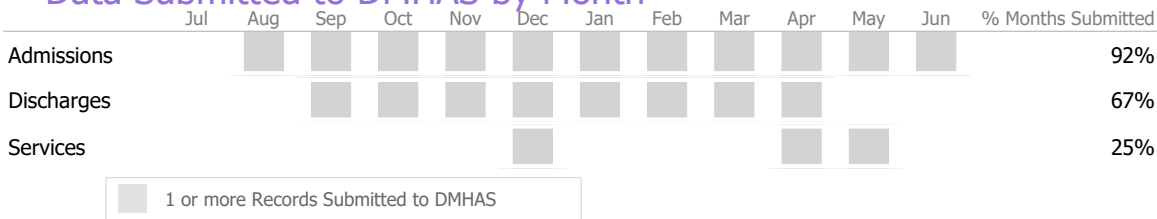
▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 44 Active Employment Services Programs

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

Glenlunan House
McCall Foundation Inc
Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	4	50%	▲
Admits	2	-		
Discharges	1	-		
Bed Days	1,702	1,460	17%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		0	0%	75%	68%	-75%	▼
🔴	No Re-admit within 30 Days of Discharge		0	0%	85%	80%	-85%	▼
	Follow-up within 30 Days of Discharge		N/A	N/A	90%	75%	N/A	

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	100%	98%

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	0%	77%

Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	97%

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Improved/Maintained Function Score		1	17%	75%	37%	-58%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔	Avg Utilization Rate		5	1,814 days	0.3	93%	90%	92%	3%

🟦 < 90%   ⬜ 90-110%   🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions				▨		▨							17%
Discharges						▨							8%

⬜ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 35 Active MH Intensive Res. Rehabilitation Programs

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

Hanson House
McCall Foundation Inc
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 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	8	13%	▲
Admits	3	10	-70%	▼
Discharges	3	3	0%	
Bed Days	2,547	160	1492%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		1	33%	70%	66%	-37%	▼
🔴	No Re-admit within 30 Days of Discharge		1	33%	85%	90%	-52%	▼
✅	Follow-up within 30 Days of Discharge		1	100%	90%	65%	10%	

Data Submission Quality

Data Entry		Actual	State Avg
✅ Valid NOMS Data		96%	92%
Valid TEDS Data		60%	94%

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

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		5	50%	70%	68%	-20%	▼
🔴	Improved/Maintained Function Score		0	0%	95%	77%	-95%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✅	Avg Utilization Rate		7	365 days	0.2	100%	90%	78%	10%

▢ < 90%	▢ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													8%
Discharges													8%

▢ 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

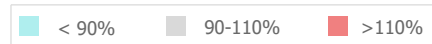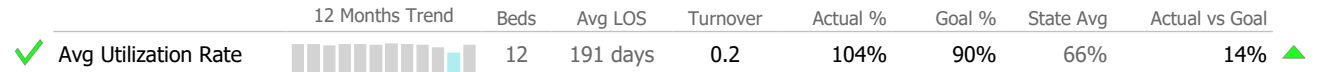Variances in data may be indicative of operational adjustments related to the pandemic.

Hotchkiss House CSSD
McCall Foundation Inc
Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	38	35	9%	▼
Admits	25	25	0%	
Discharges	26	22	18%	▲
Bed Days	4,539	4,207	8%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Treatment Completed Successfully		15	58%	85%	79%	-27%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Avg Utilization Rate		12	191 days	0.2	104%	90%	66%	14%	▲

■ < 90%	■ 90-110%	■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	■	■	■	100%
Discharges	■	■	■	■	■	■	■	■		■	■	■	92%

■	1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

■ Actual	❘ Goal	✓ Goal Met	● Below Goal
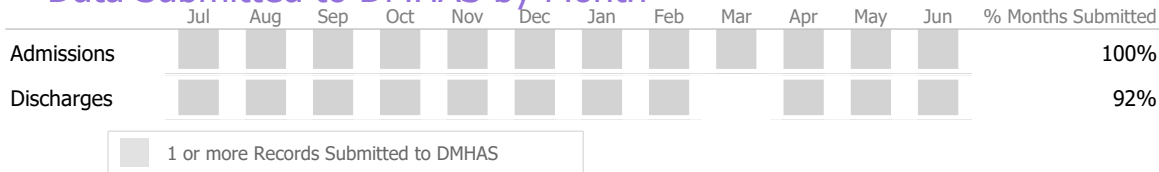
* State Avg based on 12 Active Recovery House Programs

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

MAT Naltrexone Main Campus
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	15	32	-53%	▼
Admits	-	20	-100%	▼
Discharges	-	18	-100%	▼

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	37%	N/A

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	99%
Valid TEDS Data	N/A	94%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	0%	23%

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
● Not Arrested		10	67%	75%	85%	-8%
● Employed		4	27%	50%	41%	-23% ▼
● Abstinence/Reduced Drug Use		2	13%	55%	61%	-42% ▼
● Self Help		2	13%	60%	43%	-47% ▼
● Stable Living Situation		7	47%	95%	70%	-48% ▼
● Improved/Maintained Function Score		0	0%	75%	11%	-75% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 6 Active Naltrexone Programs

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

MAT Neltrexone Renato
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3	2	50% ▲
Admits	1	-	
Discharges	1	-	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		0	0%	50%	37%	-50% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Abstinence/Reduced Drug Use		1	33%	55%	61%	-22% ▼
● Not Arrested		1	33%	75%	85%	-42% ▼
● Employed		0	0%	50%	41%	-50% ▼
● Self Help		0	0%	60%	43%	-60% ▼
● Improved/Maintained Function Score		0	0%	75%	11%	-75% ▼
● Stable Living Situation		0	0%	95%	70%	-95% ▼

Data Submission Quality
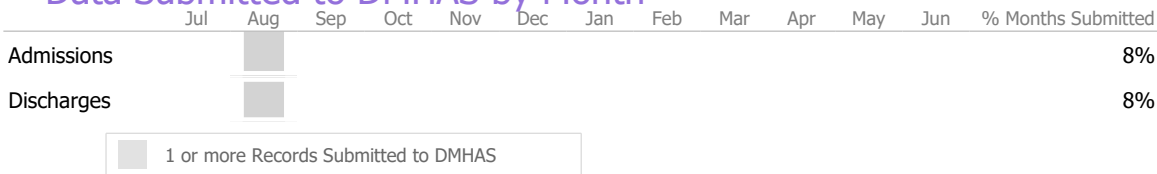
Data Entry		Actual	State Avg
Valid NOMS Data		60%	99%
✓ Valid TEDS Data		100%	94%

On-Time Periodic		Actual	State Avg
● 6 Month Updates		0%	23%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions		▪											8%
Discharges		▪											8%

▪ 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.

MATx Main Campus
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	77	160	-52%	▼
Admits	3	92	-97%	▼
Discharges	8	98	-92%	▼
Service Hours	86	1,370	-94%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	90%
	Valid TEDS Data	50%	81%

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	0%	41%

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	12%	50%	37%	-38%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		73	95%	75%	75%	20%	▲
✓	Employed		45	58%	50%	32%	8%	
🔴	Stable Living Situation		69	90%	95%	71%	-5%	
🔴	Abstinence/Reduced Drug Use		27	35%	55%	52%	-20%	▼
🔴	Self Help		17	22%	60%	18%	-38%	▼
🔴	Improved/Maintained Function Score		1	1%	75%	26%	-74%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		51	74%	90%	62%	-16%	▼

Data Submitted to DMHAS by Month
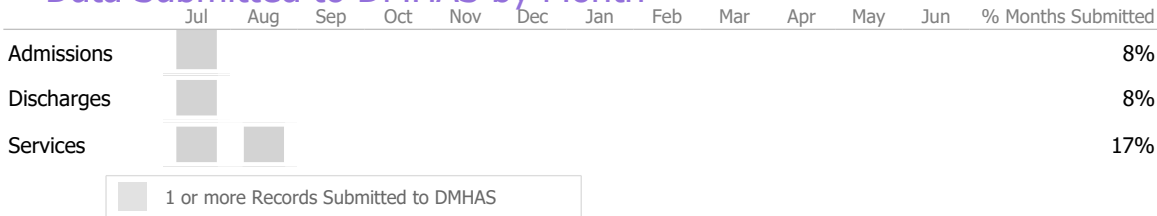
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													8%
Discharges													8%
Services													17%

☐ 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.

McCall House
McCall Foundation Inc
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	44	75	-41%	▼
Admits	24	64	-63%	▼
Discharges	22	57	-61%	▼
Bed Days	7,789	6,560	19%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Treatment Completed Successfully		10	45%	85%	69%	-40%	▼
●	No Re-admit within 30 Days of Discharge		18	82%	85%	85%	-3%	
●	Follow-up within 30 Days of Discharge		6	60%	90%	66%	-30%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	94%	94%
	Valid TEDS Data	85%	95%

On-Time Periodic		Actual	State Avg
●	6 Month Updates	0%	8%

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	
✓	Employed		35	80%	60%	51%	20%	▲
●	Abstinence/Reduced Drug Use		30	68%	70%	75%	-2%	
●	Improved/Maintained Function Score		9	20%	75%	62%	-55%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Avg Utilization Rate		13	291 days	0.1	164%	90%	105%	74%	▲

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪							50%
Discharges	▪	▪	▪	▪	▪	▪							50%

☐ 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.

Migeon Pilots Development
McCall Foundation Inc
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	4	50%	▲
Admits	3	-		
Discharges	2	1	100%	▲
Service Hours	59	11		

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Stable Living Situation		4	67%	85%	94%	-18%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✅ Clients Receiving Services		4	100%	90%	98%	10%

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		84%	99%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		0%	85%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions				▢					▢		▢		25%
Discharges		▢			▢								17%
Services		▢											8%

▢ 1 or more Records Submitted to DMHAS

Legend:
- ▲ > 10% Over
- ▼ < 10% Under
- 🟧 Actual
- | Goal
- ✅ Goal Met
- 🔴 Below Goal
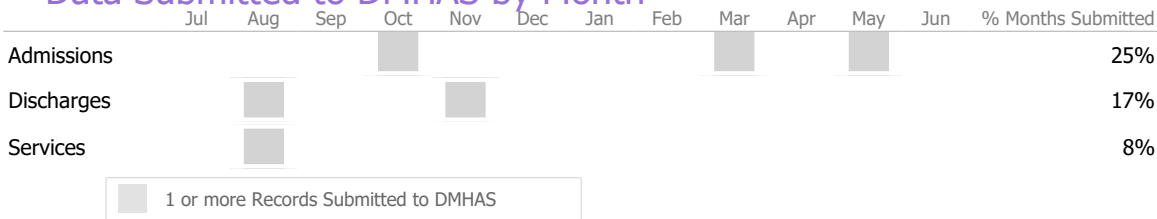
* State Avg based on 66 Active Supportive Housing – Development Programs

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

Rogers House
McCall Foundation Inc
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	6	33%	▲
Admits	2	4	-50%	▼
Discharges	4	-		
Bed Days	2,024	1,334	52%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		0%	66%

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		4	100%	80%	78%	20%	▲
✔	No Re-admit within 30 Days of Discharge		4	100%	85%	86%	15%	▲
✔	Follow-up within 30 Days of Discharge		4	100%	90%	77%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		8	100%	60%	89%	40%	▲
✔ Stable Living Situation		8	100%	90%	100%	10%	
🔴 Improved/Maintained Function Score		3	43%	95%	43%	-52%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		6	487 days	0.2	92%	90%	85%	2%
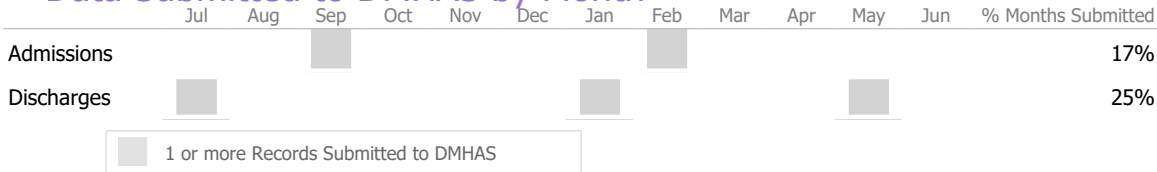
▨ < 90%	▨ 90-110%	▨ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions			▨					▨					17%
Discharges	▨					▨				▨			25%

▨ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

🟧 Actual	┃ Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 23 Active Group Home Programs

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

Rogers House CSP
McCall Foundation Inc
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	3	67%	▲
Admits	2	1	100%	▲
Discharges	2	-		
Service Hours	57	103	-45%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		1	50%	65%	53%	-15%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		4	80%	60%	79%	20%	▲
✔	Stable Living Situation		5	100%	80%	88%	20%	▲
✔	Employed		1	20%	20%	15%	0%	
🔴	Improved/Maintained Function Score		2	40%	65%	44%	-25%	▼

Data Submission Quality

	Data Entry		Actual	State Avg
✔	Valid NOMS Data		100%	89%

	On-Time Periodic		Actual	State Avg
🔴	6 Month Updates		0%	83%

	Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis		100%	97%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		3	100%	90%	97%	10%

Data Submitted to DMHAS by Month
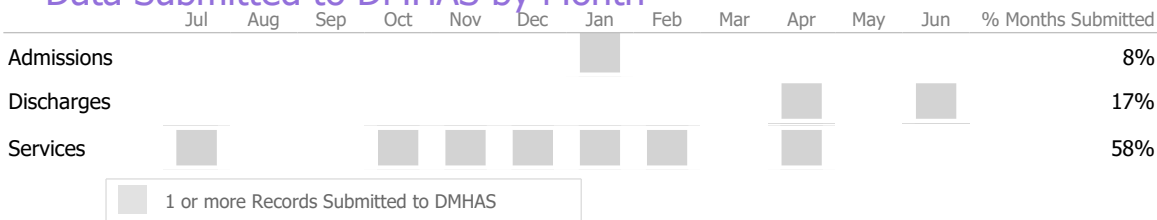
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions							▪						8%
Discharges										▪	▪		17%
Services	▪			▪	▪	▪	▪	▪		▪			58%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal ✔ Goal Met 🔴 Below Goal

* State Avg based on 36 Active CSP Programs

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

Senior Outreach and Engagement
McCall Foundation Inc
Addiction - Case Management - Outreach & Engagement

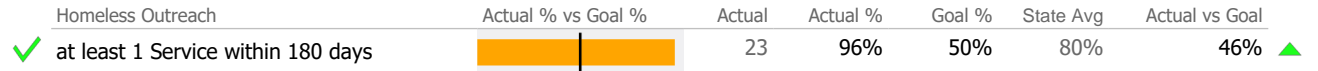Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
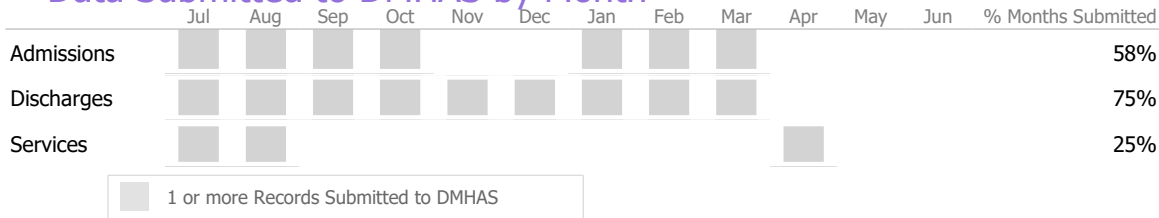Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	37	22	68%	▲
Admits	24	14	71%	▲
Discharges	23	9	156%	▲
Service Hours	141	35		

Service Engagement

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ at least 1 Service within 180 days		23	96%	50%	80%	46%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions		▢	▢	▢			▢	▢	▢				58%
Discharges	▢	▢	▢	▢	▢	▢	▢	▢	▢				75%
Services		▢	▢							▢			25%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 25 Active Outreach & Engagement Programs

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

SOR E MAT Renato
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	5	20%	▲
Admits	1	3	-67%	▼
Discharges	-	-		

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	37%	N/A

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Not Arrested		4	67%	75%	75%	-8%	
●	Abstinence/Reduced Drug Use		2	33%	55%	52%	-22%	▼
●	Self Help		2	33%	60%	18%	-27%	▼
●	Employed		1	17%	50%	32%	-33%	▼
●	Stable Living Situation		2	33%	95%	71%	-62%	▼
●	Improved/Maintained Function Score		0	0%	75%	26%	-75%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	100%	90%
✓	Valid TEDS Data	100%	81%

On-Time Periodic		Actual	State Avg
●	6 Month Updates	0%	41%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions									▢				8%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under
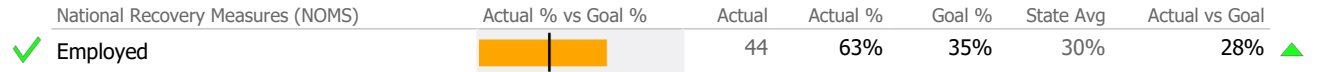
▮ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 19 Active Buprenorphine Maintenance Programs

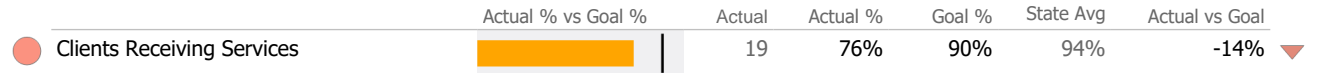Variances in data may be indicative of operational adjustments related to the pandemic.

SOR Employment
McCall Foundation Inc
Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	69	83	-17%	▼
Admits	56	62	-10%	
Discharges	45	70	-36%	▼
Service Hours	221	180	23%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Employed		44	63%	35%	30%	28%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		19	76%	90%	94%	-14%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		97%	92%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		11%	52%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪	▪	▪				75%
Discharges	▪	▪	▪	▪	▪	▪	▪	▪	▪				75%
Services	▪	▪								▪			25%

▪ 1 or more Records Submitted to DMHAS
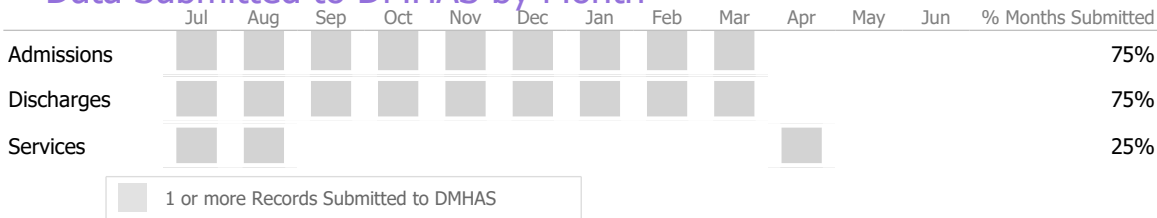
▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 10 Active Employment Services Programs

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

SOR Mobile MAT
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	53	-32%	▼
Admits	-	43	-100%	▼
Discharges	3	17	-82%	▼
Service Hours	-	155	-100%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	87%	90%
✓	Valid TEDS Data	83%	81%

On-Time Periodic		Actual	State Avg
●	6 Month Updates	0%	41%

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		0	0%	50%	37%	-50%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Not Arrested		26	72%	75%	75%	-3%	
●	Employed		8	22%	50%	32%	-28%	▼
●	Abstinence/Reduced Drug Use		6	17%	55%	52%	-38%	▼
●	Self Help		6	17%	60%	18%	-43%	▼
●	Stable Living Situation		15	42%	95%	71%	-53%	▼
●	Improved/Maintained Function Score		0	0%	75%	26%	-75%	▼

Service Utilization

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													8%
Services													17%

☐ 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.

Torrington Case Management
McCall Foundation Inc
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	30	-13%	▼
Admits	15	28	-46%	▼
Discharges	15	21	-29%	▼
Service Hours	43	69	-38%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		91%	94%

On-Time Periodic		Actual	State Avg
6 Month Updates	🔴	13%	38%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		2	13%	50%	61%	-37%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		16	62%	20%	29%	42%	▲
✓	Stable Living Situation		22	85%	80%	73%	5%	
🔴	Self Help		12	46%	60%	48%	-14%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		4	36%	90%	69%	-54%	▼

Data Submitted to DMHAS by Month
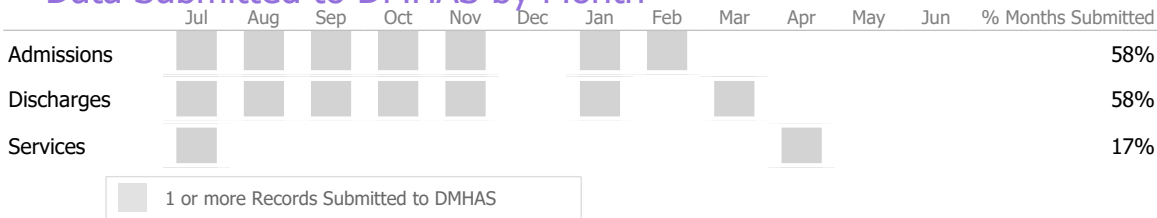
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▮	▮	▮	▮	▮		▮	▮					58%
Discharges	▮	▮	▮	▮	▮		▮		▮				58%
Services	▮									▮			17%

▮ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 13 Active Standard Case Management Programs

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

Torrington Main Campus OP
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	665	682	-2%	
Admits	496	551	-10%	
Discharges	459	518	-11%	▼
Service Hours	4,297	4,911	-12%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	85%
✓	Valid TEDS Data	94%	74%

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	1%	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		205	45%	50%	42%	-5%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		686	94%	75%	66%	19%	▲
✓	Employed		402	55%	50%	35%	5%	
🔴	Abstinence/Reduced Drug Use		362	50%	55%	35%	-5%	
🔴	Stable Living Situation		619	85%	95%	68%	-10%	
🔴	Self Help		264	36%	60%	18%	-24%	▼
🔴	Improved/Maintained Function Score		338	55%	75%	42%	-20%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		157	59%	90%	64%	-31%	▼

Service Engagement

	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		249	55%	75%	57%	-20%	▼

Data Submitted to DMHAS by Month
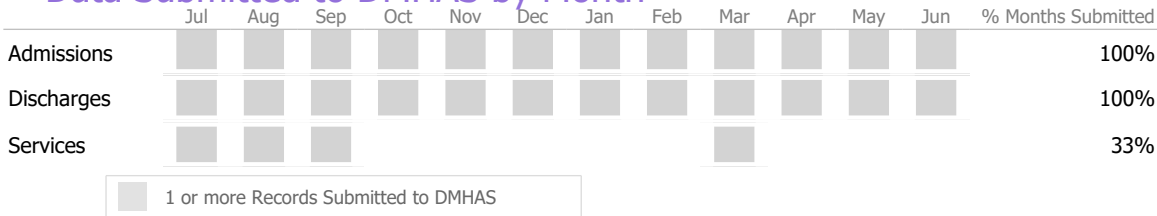
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Discharges	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Services	▪	▪	▪						▪				33%

▪ 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.

Winsted OP
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

right header

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	21	-14%	▼
Admits	3	17	-82%	▼
Discharges	1	6	-83%	▼
Service Hours	15	41	-63%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	70%	85%
✓	Valid TEDS Data	81%	74%

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		1	100%	50%	42%	50%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		17	94%	75%	66%	19%	▲
✓	Employed		10	56%	50%	35%	6%	
●	Abstinence/Reduced Drug Use		9	50%	55%	35%	-5%	
●	Stable Living Situation		9	50%	95%	68%	-45%	▼
●	Self Help		1	6%	60%	18%	-54%	▼
●	Improved/Maintained Function Score		0	0%	75%	42%	-75%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		8	47%	90%	64%	-43%	▼

Service Engagement

	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	2 or more Services within 30 days		3	100%	75%	57%	25%	▲

Data Submitted to DMHAS by Month
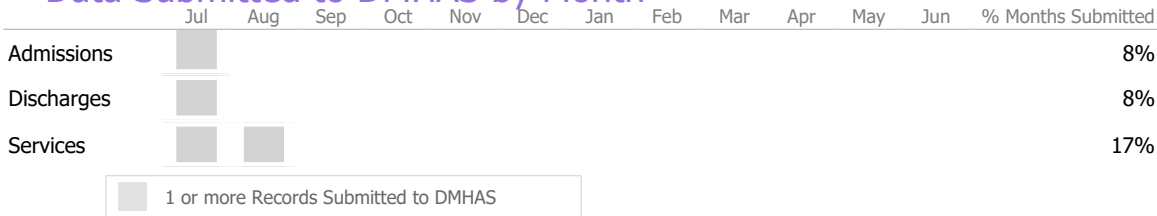
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													8%
Discharges													8%
Services													17%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under
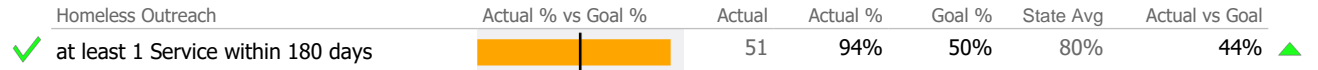
■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 105 Active Standard Outpatient Programs

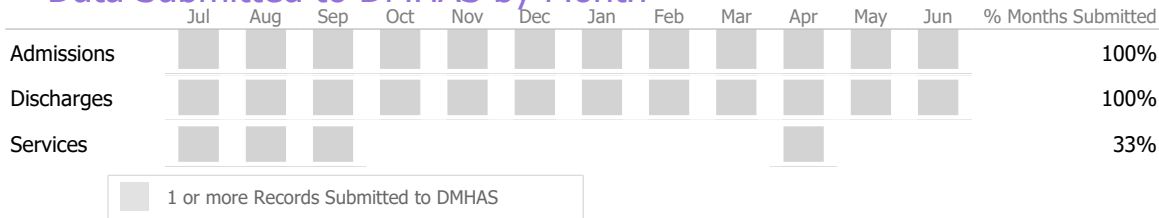Variances in data may be indicative of operational adjustments related to the pandemic.

Women's REACH Program
McCall Foundation Inc
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	100	166	-40%	▼
Admits	55	87	-37%	▼
Discharges	66	123	-46%	▼
Service Hours	787	449	75%	▲

Service Engagement

Homeless Outreach		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	at least 1 Service within 180 days		51	94%	50%	80%	44%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Discharges	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Services	▪	▪	▪							▪			33%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 25 Active Outreach & Engagement Programs

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

Wynnewood House
McCall Foundation Inc
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	5	40%	▲
Admits	2	2	0%	
Discharges	1	-		
Bed Days	2,171	1,312	65%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		20%	66%

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%	80%	78%	20%	▲
✓	No Re-admit within 30 Days of Discharge		1	100%	85%	86%	15%	▲
✓	Follow-up within 30 Days of Discharge		1	100%	90%	77%	10%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		7	100%	60%	89%	40%	▲
✓	Stable Living Situation		7	100%	90%	100%	10%	
🔴	Improved/Maintained Function Score		2	33%	95%	43%	-62%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		6	603 days	0.2	99%	90%	85%	9%

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													17%
Discharges													8%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal | ✓ Goal Met | 🔴 Below Goal

* State Avg based on 23 Active Group Home Programs

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

Wynnewood House CSP
McCall Foundation Inc
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	17	12	42%	▲
Admits	5	2	150%	▲
Discharges	5	-		
Service Hours	257	259	-1%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		2	40%	65%	53%	-25%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		16	94%	60%	79%	34%	▲
✔	Stable Living Situation		17	100%	80%	88%	20%	▲
🔴	Employed		2	12%	20%	15%	-8%	
🔴	Improved/Maintained Function Score		2	14%	65%	44%	-51%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		12	100%	90%	97%	10%

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	100%	89%

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	0%	83%

Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	97%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions					▪			▪	▪				25%
Discharges	▪			▪	▪					▪	▪		42%
Services	▪				▪	▪	▪	▪	▪	▪			58%

□ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 36 Active CSP Programs

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