

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---------------|----------------|--------|----------|------------|---|
| | Unique Clients | 985 | 459 | 115% | ▲ |
| | Admits | 1,246 | 511 | 144% | ▲ |
| | Discharges | 1,246 | 510 | 144% | ▲ |
| | Service Hours | 75 | 91 | -18% | ▼ |

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

Clients by Level of Care

Program Type Level of Care Type # %

Mental Health

| | | | |
|------------------|--|-----|-------|
| Outpatient | | 577 | 50.8% |
| Crisis Services | | 256 | 22.6% |
| Recovery Support | | 238 | 21.0% |
| Case Management | | 40 | 3.5% |
| IOP | | 24 | 2.1% |

Consumer Satisfaction Survey

(Based on 120 FY23 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ Participation in Treatment | | 92% | 80% | 92% |
| ✓ Quality and Appropriateness | | 92% | 80% | 93% |
| ✓ Respect | | 90% | 80% | 91% |
| ✓ Overall | | 89% | 80% | 91% |
| ✓ General Satisfaction | | 87% | 80% | 92% |
| ✓ Access | | 84% | 80% | 88% |
| ● Outcome | | 67% | 80% | 83% |
| ● Recovery | | 65% | 80% | 79% |

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

Client Demographics

| Age | # | % | State Avg |
|-------|-----|-----|-----------|
| 18-25 | 79 | 8% | 8% |
| 26-34 | 130 | 14% | 18% |
| 35-44 | 169 | 18% | 24% |
| 45-54 | 172 | 18% | 19% |
| 55-64 | 230 | 24% | 20% |
| 65+ | 180 | 19% | 11% |

| Gender | # | % | State Avg |
|-------------|-----|-----|-----------|
| Female | 497 | 50% | 42% |
| Male | 488 | 50% | 58% |
| Transgender | | | 0% |

| Ethnicity | # | % | State Avg |
|-------------------|-----|-----|-----------|
| Non-Hispanic | 760 | 77% | ▲ 66% |
| Hispanic-Other | 168 | 17% | 10% |
| Hisp-Puerto Rican | 31 | 3% | 11% |
| Unknown | 25 | 3% | 13% |
| Hispanic-Cuban | 1 | 0% | 0% |
| Hispanic-Mexican | | | 1% |

| Race | # | % | State Avg |
|---------------------------------|-----|-----|-----------|
| White/Caucasian | 609 | 62% | 60% |
| Other | 180 | 18% | 12% |
| Black/African American | 175 | 18% | 17% |
| Unknown | 9 | 1% | 8% |
| Asian | 8 | 1% | 1% |
| Multiple Races | 2 | 0% | 1% |
| Am. Indian/Native Alaskan | 1 | 0% | 1% |
| Hawaiian/Other Pacific Islander | 1 | 0% | 0% |

Unique Clients | State Avg | ▲ > 10% Over State Avg | ▼ > 10% Under State Avg

Crisis 522-200

Waterbury Hospital Health Center

Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2023 - September 2023 (Data as of Dec 26, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 256 | 401 | -36% ▼ |
| Admits | 292 | 486 | -40% ▼ |
| Discharges | 292 | 485 | -40% ▼ |

Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ● Evaluation within 1.5 hours of Request | | 9 | 8% | 75% | 78% | -67% ▼ |
| ● Community Location Evaluation | | 0 | 0% | 80% | 82% | -80% ▼ |
| ● Follow-up Service within 48 hours | | 52 | 47% | 90% | 85% | -43% ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 25 Active Mobile Crisis Team Programs

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---------------------------|--------|----------|------------|
| Unique Clients | 24 | 1 | 2300% ▲ |
| Admits | 18 | - | |
| Discharges | 15 | - | |
| Service Hours | - | - | |
| Social Rehab/PHP/IOP Days | 0 | 0 | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 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 | | 6 | 40% | 50% | 71% | -10% ▼ |
| Follow-up within 30 Days of Discharge | | 3 | 50% | 90% | 66% | -40% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 21 | 84% | 60% | 62% | 24% ▲ |
| Employed | | 5 | 20% | 30% | 29% | -10% |
| Stable Living Situation | | 21 | 84% | 95% | 74% | -11% ▼ |
| Improved/Maintained Function Score | | 0 | 0% | 75% | 61% | -75% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 0 | 0% | 90% | 30% | N/A ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal Goal Met Below Goal

* State Avg based on 3 Active Standard IOP Programs

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 577 | | |
| Admits | 660 | - | |
| Discharges | 651 | - | |
| Service Hours | - | - | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 91% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | N/A | 55% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 10 | 2% | 50% | 37% | -48% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 645 | 98% | 60% | 62% | 38% ▲ |
| Stable Living Situation | | 653 | 99% | 95% | 71% | 4% |
| Employed | | 130 | 20% | 30% | 23% | -10% |
| Improved/Maintained Function Score | | 274 | 42% | 75% | 35% | -33% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 0 | 0% | 90% | 79% | 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% | 61% | -75% ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal Goal Met Below Goal

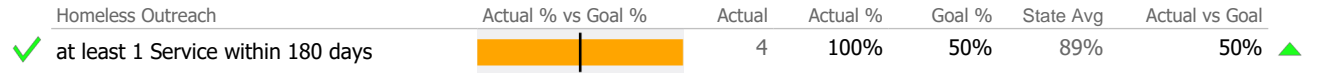
* State Avg based on 75 Active Standard Outpatient Programs

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

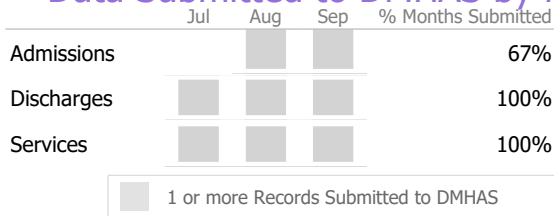
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 40 | 55 | -27% ▼ |
| Admits | 4 | 25 | -84% ▼ |
| Discharges | 16 | 25 | -36% ▼ |
| Service Hours | 75 | 91 | -18% ▼ |

Service Engagement



Data Submitted to DMHAS by Month



* State Avg based on 52 Active Outreach & Engagement Programs

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 238 | 3 | 7833% ▲ |
| Admits | 272 | - | |
| Discharges | 272 | - | |
| Service Hours | - | - | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | ■ | ■ | ■ | 100% |
| Discharges | ■ | ■ | ■ | 100% |
| Services | | | | 0% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal



* State Avg based on 2 Active Peer Based Mentoring Programs

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


Program Activity

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

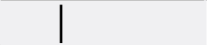
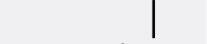
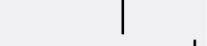
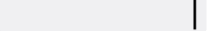
Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|---|-----------|
| Valid NOMS Data |  91% | N/A |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates |  55% | N/A |

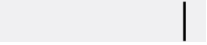
Discharge Outcomes

| | 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 |
|------------------------------------|---|--------|----------|--------|-----------|----------------|
| Employed |  | N/A | N/A | 30% | 23% | -30% ▼ |
| Improved/Maintained Function Score |  | N/A | N/A | 75% | 35% | -75% ▼ |
| Social Support |  | N/A | N/A | 60% | 62% | -60% ▼ |
| Stable Living Situation |  | N/A | N/A | 95% | 71% | -95% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|---|--------|----------|--------|-----------|----------------|
| Clients Receiving Services |  | N/A | N/A | 90% | 79% | N/A ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 75 Active Standard Outpatient Programs

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

Program Activity

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

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------------------|--------|----------|--------|-----------|----------------|
| No Re-admit within 30 Days of Discharge | <div style="width: 0%;"></div> | N/A | N/A | 85% | 86% | N/A |
| Follow-up within 30 Days of Discharge | <div style="width: 0%;"></div> | N/A | N/A | 90% | 70% | N/A |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|-----------------|------|---------|----------|----------|--------|-----------|----------------|
| ● Avg Utilization Rate | | 15 | N/A | N/A | 0% | 90% | 52% | -90% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 11 Active Respite Bed Programs