

Reporting Period: July 2023 - December 2023 (Data as of Mar 26, 2024)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	807	835	-3%
	Admits	875	907	-4%
	Discharges	889	899	-1%
	Service Hours	479	561	-15% ▼
	Bed Days	3,432	3,191	8%

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

Consumer Satisfaction Survey

(Based on 293 FY23 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Overall		95%	80%	91%
✓ Respect		94%	80%	91%
✓ General Satisfaction		94%	80%	92%
✓ Participation in Treatment		94%	80%	92%
✓ Quality and Appropriateness		92%	80%	93%
✓ Access		90%	80%	88%
✓ Outcome		87%	80%	83%
✓ Recovery		81%	80%	79%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction	Residential Services	658	81.4%
	Medication Assisted Treatment	137	17.0%
Mental Health	Case Management	13	1.6%

Client Demographics

Age	#	%	State Avg
18-25	21	3%	8%
26-34	172	21%	19%
35-44	257	32%	24%
45-54	175	22%	18%
55-64	150	19%	19%
65+	32	4%	10%

Gender	#	%	State Avg
Male	573	71%	▲ 59%
Female	233	29%	▼ 41%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	646	80%	▲ 65%
Hisp-Puerto Rican	108	13%	10%
Hispanic-Other	44	5%	10%
Unknown	9	1%	▼ 14%
Hispanic-Cuban			0%
Hispanic-Mexican			1%

Race	#	%	State Avg
White/Caucasian	543	67%	60%
Black/African American	138	17%	17%
Other	119	15%	12%
Unknown	5	1%	8%
Am. Indian/Native Alaskan	2	0%	1%
Asian			1%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%

■ 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.

Homeless Outreach & Engagement

Cornell Scott-Hill Health Corporation

Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	13	0%
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Service Engagement

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
at least 1 Service within 180 days		0	0%	50%	92%	-50% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual | Goal Goal Met Below Goal

* State Avg based on 54 Active Outreach & Engagement Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	2	3	-33% ▼
Admits	-	-	
Discharges	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	100%
Valid TEDS Data	N/A	100%
On-Time Periodic		
6 Month Updates	0%	8%
Diagnosis		
Valid Axis I Diagnosis	100%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	45%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		2	100%	55%	40%	45% ▲
✓ Not Arrested		2	100%	75%	60%	25% ▲
✓ Stable Living Situation		2	100%	95%	52%	5%
✓ Employed		1	50%	50%	38%	0%
● Self Help		1	50%	60%	42%	-10%
● Improved/Maintained Function Score		0	0%	75%	25%	-75% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	658	670	-2%
Admits	864	876	-1%
Discharges	866	874	-1%
Bed Days	3,432	3,191	8%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	89%
Valid TEDS Data	100%	98%
On-Time Periodic		
6 Month Updates	N/A	50%
Diagnosis		
Valid Axis I Diagnosis	100%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		855	99%	80%	75%	19% ▲
● No Re-admit within 30 Days of Discharge		610	70%	85%	78%	-15% ▼
● Follow-up within 30 Days of Discharge		380	44%	90%	52%	-46% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		24	4 days	0.0	78%	90%	74%	-12% ▼

Legend: ■ < 90% ■ 90-110% ■ > 110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■	■	■	■	100%
Discharges	■	■	■	■	■	■	100%

Legend: ■ 1 or more Records Submitted to DMHAS

Legend: ▲ > 10% Over ▼ < 10% Under

Legend: ■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 6 Active Medically Monitored Detox 3.7D Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	135	151	-11% ▼
Admits	11	31	-65% ▼
Discharges	23	25	-8%
Service Hours	479	561	-15% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	99%	96%
Valid TEDS Data	100%	60%
On-Time Periodic		
6 Month Updates	100%	39%
Diagnosis		
Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		13	57%	50%	47%	7%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		129	96%	55%	52%	41% ▲
✓ Not Arrested		134	99%	75%	66%	24% ▲
✓ Employed		81	60%	50%	30%	10%
✓ Stable Living Situation		133	99%	95%	61%	4%
● Self Help		23	17%	60%	20%	-43% ▼
● Improved/Maintained Function Score		14	11%	75%	27%	-64% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		112	100%	90%	53%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■	■		■	83%
Discharges	■	■	■	■	■	■	100%
Services	■		■	■	■	■	83%

■ 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

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