SCADD
Lebanon, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2023 - December 2023 (Data as of Mar 26, 2024)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	1,143	1,265	-10%
	Admits	1,352	1,409	-4%
	Discharges	1,524	1,434	6%
	Service Hours	750	1,837	-59% ▼
	Bed Days	26,017	25,289	3%
	S.Rehab/PHP/IOP	1,167	1,811	-36% ▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Residential Services	874	67.5%
	Outpatient	232	17.9%
	IOP	54	4.2%
	Medication Assisted Treatment	35	2.7%
Forensic SA			
	Case Management	62	4.8%
	Forensics Community-based	37	2.9%

Consumer Satisfaction Survey

(Based on 591 FY23 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Participation in Treatment		82%	80%	92%
● General Satisfaction		77%	80%	92%
● Quality and Appropriateness		75%	80%	93%
● Overall		75%	80%	91%
● Respect		73%	80%	91%
● Outcome		73%	80%	83%
● Recovery		73%	80%	79%
● Access		68%	80%	88%

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

Client Demographics

Age	#	%	State Avg
18-25	46	4%	8%
26-34	282	25%	19%
35-44	361	32%	24%
45-54	239	21%	18%
55-64	181	16%	19%
65+	34	3%	10%

Gender	#	%	State Avg
Male	886	78% ▲	59%
Female	251	22% ▼	41%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	912	80% ▲	65%
Hisp-Puerto Rican	124	11%	10%
Hispanic-Other	71	6%	10%
Unknown	32	3% ▼	14%
Hispanic-Mexican	3	0%	1%
Hispanic-Cuban	1	0%	0%

Race	#	%	State Avg
White/Caucasian	791	69%	60%
Black/African American	195	17%	17%
Other	121	11%	12%
Unknown	17	1%	8%
Am. Indian/Native Alaskan	8	1%	1%
Asian	6	1%	1%
Hawaiian/Other Pacific Islander	5	0%	0%
Multiple Races			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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	29	31	-6%
Admits	20	21	-5%
Discharges	20	22	-9%
Bed Days	1,698	1,753	-3%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	86%
✓ Valid TEDS Data	100%	98%

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

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

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully	15	75%	85%	68%	-10% ▼
No Re-admit within 30 Days of Discharge	15	75%	85%	86%	-10%
Follow-up within 30 Days of Discharge	12	80%	90%	69%	-10%

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use	27	93%	70%	77%	23% ▲
Employed	17	59%	60%	46%	-1%
Improved/Maintained Function Score	14	70%	75%	81%	-5%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		10	86 days	0.3	92%	90%	92%	2%

< 90% | 90-110% | >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	27	0%	
Admits	17	19	-11%	▼
Discharges	17	17	0%	
Bed Days	1,892	1,685	12%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	86%
✓ Valid TEDS Data	100%	98%

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

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		13	76%	85%	68%	-9%	
✓ No Re-admit within 30 Days of Discharge		16	94%	85%	86%	9%	
● Follow-up within 30 Days of Discharge		10	77%	90%	69%	-13%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Abstinence/Reduced Drug Use		25	93%	70%	77%	23%	▲
● Employed		12	44%	60%	46%	-16%	▼
✓ Improved/Maintained Function Score		16	94%	75%	81%	19%	▲

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		11	117 days	0.3	93%	90%	92%	3%

< 90% | 90-110% | >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	595	516	15%	▲
Admits	705	682	3%	
Discharges	702	681	3%	
Bed Days	3,245	2,803	16%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	89%
✓ Valid TEDS Data	100%	98%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	50%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully	526	75%	80%	75%	-5%
No Re-admit within 30 Days of Discharge	586	83%	85%	78%	-2%
Follow-up within 30 Days of Discharge	279	53%	90%	52%	-37% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		20	5 days	0.0	88%	90%	74%	-2%

< 90% | 90-110% | >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 6 Active Medically Monitored Detox 3.7D Programs

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

Lebanon Pines
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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	372	338	10%	▲
Admits	295	271	9%	
Discharges	294	270	9%	
Bed Days	16,839	15,013	12%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	94%
✓ Valid TEDS Data	100%	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	100%

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		223	76%	70%	75%	6%	
✓ No Re-admit within 30 Days of Discharge		267	91%	85%	90%	6%	
● Follow-up within 30 Days of Discharge		117	52%	90%	55%	-38%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Abstinence/Reduced Drug Use		326	85%	70%	75%	15%	▲
● Improved/Maintained Function Score		274	93%	95%	93%	-2%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		97	66 days	0.2	94%	90%	68%	4%

< 90% | 90-110% | >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 19 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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	50	50	0%
Admits	38	37	3%
Discharges	37	37	0%
Bed Days	2,301	2,160	7%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	86%
✓ Valid TEDS Data	100%	98%

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

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		27	73%	85%	68%	-12% ▼
✓ No Re-admit within 30 Days of Discharge		33	89%	85%	86%	4%
● Follow-up within 30 Days of Discharge		22	81%	90%	69%	-9%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		45	90%	70%	77%	20% ▲
✓ Improved/Maintained Function Score		31	84%	75%	81%	9%
● Employed		13	26%	60%	46%	-34% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		13	66 days	0.2	96%	90%	92%	6%

< 90% | 90-110% | >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	54	85	-36%	▼
Admits	45	75	-40%	▼
Discharges	47	74	-36%	▼
Service Hours	21	48	-56%	▼
Social Rehab/PHP/IOP Days	1,167	1,811	-36%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	82%
✓ Valid TEDS Data	100%	83%

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

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		21	45%	50%	51%	-5%	
● Follow-up within 30 Days of Discharge		8	38%	90%	52%	-52%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		51	91%	75%	79%	16%	▲
✓ Self Help		37	66%	60%	34%	6%	
✓ Employed		28	50%	50%	30%	0%	
✓ Improved/Maintained Function Score		40	85%	75%	77%	10%	
● Abstinence/Reduced Drug Use		24	43%	55%	52%	-12%	▼
● Stable Living Situation		44	79%	95%	82%	-16%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		9	100%	90%	60%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	232	308	-25%	▼
Admits	161	186	-13%	▼
Discharges	203	202	0%	
Service Hours	529	1,341	-61%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	88%
✓ Valid TEDS Data	100%	75%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	10%

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		121	60%	50%	53%	10%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Self Help		186	76%	60%	15%	16%	▲
✓ Not Arrested		230	94%	75%	53%	19%	▲
✓ Abstinence/Reduced Drug Use		163	67%	55%	28%	12%	▲
✓ Improved/Maintained Function Score		190	91%	75%	41%	16%	▲
✓ Employed		128	52%	50%	28%	2%	
● Stable Living Situation		215	88%	95%	55%	-7%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		36	86%	90%	37%	-4%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days		107	69%	75%	45%	-6%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 101 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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	44	-86%	▼
Admits	-	29	-100%	▼
Discharges	-	34	-100%	▼
Service Hours	-	305	-100%	▼

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	18%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	77%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Self Help		6	100%	60%	65%	40%	▲
✓ Social Support		6	100%	60%	81%	40%	▲
✓ Stable Living Situation		6	100%	80%	62%	20%	▲
✓ Employed		2	33%	20%	28%	13%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		0	0%	90%	70%	N/A	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							17%

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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	56	46	22%	▲
Admits	39	38	3%	
Discharges	30	40	-25%	▼
Service Hours	48	70	-32%	▼

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	18%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		28	93%	50%	77%	43%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Self Help		56	100%	60%	65%	40%	▲
✓ Social Support		56	100%	60%	81%	40%	▲
● Employed		10	18%	20%	28%	-2%	
● Stable Living Situation		21	38%	80%	62%	-42%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		23	88%	90%	70%	-2%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 8 Active Standard Case Management 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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	34	37	-8%	
Admits	15	11	36%	▲
Discharges	14	19	-26%	▼
Service Hours	74	64	16%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	96%
✓ Valid TEDS Data	100%	60%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	39%

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		3	21%	50%	47%	-29%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		34	100%	75%	66%	25%	▲
✓ Abstinence/Reduced Drug Use		27	79%	55%	52%	24%	▲
✓ Self Help		25	74%	60%	20%	14%	▲
● Stable Living Situation		32	94%	95%	61%	-1%	
● Employed		13	38%	50%	30%	-12%	▼
● Improved/Maintained Function Score		19	73%	75%	27%	-2%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		17	85%	90%	53%	-5%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	2	4	-50%
Admits	-	1	-100%
Discharges	1	2	-50%
Service Hours	-	9	-100%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	100%
Valid TEDS Data	100%	100%

On-Time Periodic	Actual	State Avg
6 Month Updates	100%	8%

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		0	0%	50%	45%	-50%

Recovery

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

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		0	0%	90%	28%	N/A

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							17%
Services							33%

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 2023 - December 2023 (Data as of Mar 26, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	37	20	85%	▲
Admits	17	12	42%	▲
Discharges	35	10	250%	▲
Service Hours	78	-		

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		2	100%	90%	80%	10%

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	% Months Submitted
Admissions							67%
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 5 Active Court Liaison-Jail Diversion Programs

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