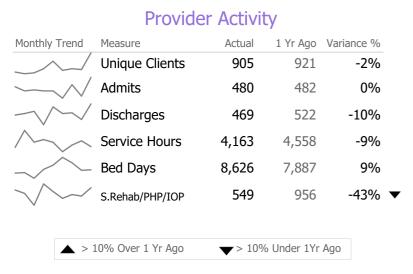
Chemical Abuse Services Agency (CASA) Bridgeport, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

(Based on 313 FY23 Surveys)

Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)



Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|--------------|------------------------|-----|-------|
| Addiction | | | |
| Medicat | ion Assisted Treatment | 525 | 52.2% |
| | Outpatient | 136 | 13.5% |
| | Residential Services | 103 | 10.2% |
| | IOP | 64 | 6.4% |
| | Case Management | 61 | 6.1% |
| | PHP | 53 | 5.3% |
| | Recovery Support | 31 | 3.1% |
| Mental Healt | h | | |
| | Case Management | 32 | 3.2% |

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-----------------------------|----------------------|-------------|--------|-----------|
| Quality and Appropriateness | | 90% | 80% | 93% |
| Participation in Treatment | | 89% | 80% | 92% |
| / Overall | | 89% | 80% | 91% |
| General Satisfaction | | 88% | 80% | 92% |
| Respect | | 86% | 80% | 91% |
| Access | | 83% | 80% | 88% |
| Outcome | | 78% | 80% | 83% |
| Recovery | | 78% | 80% | 79% |

Consumer Satisfaction Survey

Client Demographics

| Age | | # | % | State Avg | Gender | # | % | State Avg |
|-------------------|----|----------|--------|--------------|---------------------------------|---------|----------|--------------|
| 18-25 | | 22 | 2% | 9% | Male | 581 | 64% | 59% |
| 26-34 | | 150 | 17% | 20% | Female | 323 | 36% | 40% |
| 35-44 | İ. | 299 | 33% | 25% | Transgender | | | 0% |
| 45-54 | Ĺ | 206 | 23% | 18% | | | | |
| 55-64 | | 177 | 20% | 19% | | | | |
| 65+ | | 50 | 6% | 10% | Race | # | % | State Avg |
| | | | | | White/Caucasian 📒 📔 | 389 | 43% | ▼ 59% |
| Ethnicity | | # | % | State Avg | Other | 350 | 39% | ▲ 12% |
| Non-Hispanic | | 517 | 57% | 64% | Black/African American | 147 | 16% | 17% |
| Hisp-Puerto Rican | | 297 | 33% | ▲ 10% | Multiple Races | 7 | 1% | 1% |
| Hispanic-Other | | 64 | 7% | 10% | Unknown | 5 | 1% | 9% |
| Hispanic-Mexican | | 21 | 2% | 1% | Am. Indian/Native Alaskan | 4 | 0% | 1% |
| | | | | | Hawaiian/Other Pacific Islander | 2 | 0% | 0% |
| Unknown | | 4 | 0% | ▼ 14% | Asian | 1 | 0% | 1% |
| Hispanic-Cuban | | 2 | 0% | 0% | | | | |
| | | | | | | | | |
| | | Unique C | lients | State Avg | ▲ > 10% Over State Avg | > 10% L | Inder St | ate Avg |

Areyto Apartments

Chemical Abuse Services Agency (CASA) Mental Health - Case Management - Supportive Housing – Development Connecticut Dept of Mental Health and Addiction Services

Goal %

Program Quality Dashboard

Actual vs Goal

Actual vs Goal

10%

15% 🔺

State Avg

State Avg

98%

93%

Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)

Actual %

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 21 | 22 | -5% |
| Admits | 2 | 2 | 0% |
| Discharges | 1 | 3 | -67% 🔻 |
| Service Hours | 160 | 157 | 2% |

Stable Living Situation 21 100% 85% Service Utilization Actual % vs Goal % Actual % Actual % Goal % Clients Receiving Services 20 100% 90%

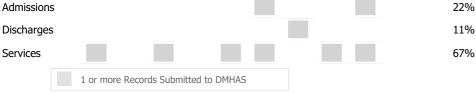
Actual % vs Goal %

Actual

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|--------|-------------|
| Valid NOMS Data | 99% | 98% |
| On-Time Periodic | Actua | l State Avg |
| 6 Month Updates | 0% | 82% |

Data Submitted Jul Aug to DMHAS by Month Oct Nov Dec Jan Feb Mar % Months Submitted Admissions 22%





* State Avg based on 68 Active Supportive Housing – Development Programs

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

Recovery

 \checkmark

National Recovery Measures (NOMS)

Chemical Abuse Services Agency (CASA) Addiction - Outpatient - Standard Outpatient

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 13 | 3 | 333% 🔺 | |
| Admits | 13 | - | | |
| Discharges | 4 | 1 | 300% 🔺 | |
| Service Hours | 102 | 138 | -26% 🔻 | |

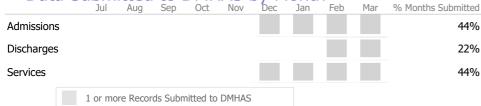
Data Submission Quality

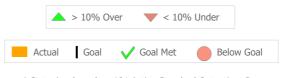
| Data Entry | Actual S | tate Avg |
|------------------------|----------|-----------|
| Valid NOMS Data | 100% | 89% |
| Valid TEDS Data | 100% | 67% |
| | | |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | N/A | 9% |
| | | |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |
| | - | |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|------------------------------------|------------------------|--------|------------|---------|-----------|----------------|--|
| | Treatment Completed Successfully | | 1 | 25% | 50% | 52% | -25% | |
| | _ | | | | | | | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Not Arrested | | 13 | 100% | 75% | 58% | 25% | |
| \checkmark | Employed | | 8 | 62% | 50% | 30% | 12% | |
| \checkmark | Abstinence/Reduced Drug Use | | 8 | 62% | 55% | 32% | 7% | |
| \checkmark | Stable Living Situation | | 13 | 100% | 95% | 59% | 5% | |
| \checkmark | Improved/Maintained Function Score | | 4 | 100% | 75% | 46% | 25% | |
| | Self Help | | 0 | 0% | 60% | 16% | -60% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Clients Receiving Services | | 9 | 100% | 90% | 41% | 10% | |
| | Service Engagement | | | | | | | |
| | 00 | Asherel 0/ see Cool 0/ | A | A shuel O/ | Carl 01 | Chatta Au | Asharlan C. J | |
| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | 2 or more Services within 30 days | | 12 | 92% | 75% | 45% | 17% | |

Data Submitted to DMHAS by Month





Program Activity

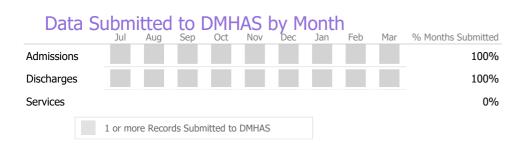
| Measure | Actual | 1 Yr Ago | Variance % | |
|------------------------------|--------|----------|------------|--|
| Unique Clients | 48 | 33 | 45% | |
| Admits | 40 | 25 | 60% | |
| Discharges | 41 | 28 | 46% | |
| Service Hours | - | - | | |
| Social Rehab/PHP/IOP Days | 0 | 0 | | |

Data Submission Quality

| Data Entry | Actual S | tate Avg |
|------------------------|----------|-----------|
| 🗸 Valid NOMS Data | 100% | 22% |
| Valid TEDS Data | 100% | 13% |
| | | |
| On-Time Periodic | Actual | State Avg |
| V 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 | | 18 | 44% | 50% | 43% | -6% | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| No Re-admit within 30 Days of Discharge | | 37 | 90% | 85% | 89% | 5% | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Follow-up within 30 Days of Discharge | | 14 | 78% | 90% | 74% | -12% | |
| Recovery | | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Improved/Maintained Function Score | | 40 | 95% | 75% | 96% | 20% | |
| Stable Living Situation | | 40 | 82% | 95% | 83% | -13% | |
| Employed | | 10 | 20% | 50% | 21% | -30% | |
| Self Help | _ . | 6 | 12% | 60% | 19% | -48% | |
| Service Utilization | | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Clients Receiving Services | | 0 | 0% | 90% | 10% | N/A | |





Chemical Abuse Services Agency (CASA) Addiction - Residential Services - Transitional/Halfway House 3.1 Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)

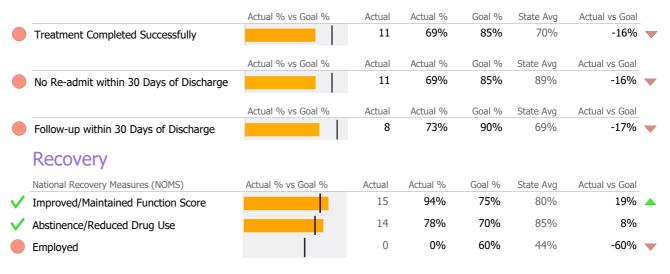
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 18 | 30 | -40% 🔻 |
| Admits | 15 | 28 | -46% 🔻 |
| Discharges | 16 | 27 | -41% 🔻 |
| Bed Days | 770 | 1,377 | -44% 🔻 |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 100% | 88% |
| Valid TEDS Data | 100% | 98% |
| | • | |
| On-Time Periodic | Actua | State Avg |
| 6 Month Updates | N/A | A N/A |
| | | |
| Diagnosis | Actua | State Avg |
| Valid Axis I Diagnosis | 100% | b 100% |

Discharge Outcomes

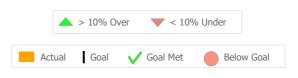


Bed Utilization



Data Submitted to DMHAS by Month





* State Avg based on 8 Active Transitional/Halfway House 3.1 Programs

Program Activity

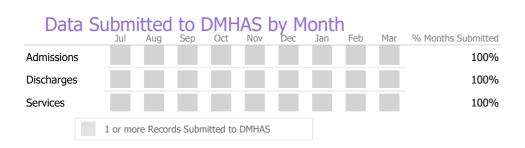
| Measure | Actual | 1 Yr Ago | Variance % | |
|------------------------------|--------|----------|------------|---|
| Unique Clients | 64 | 46 | 39% | |
| Admits | 56 | 40 | 40% | |
| Discharges | 40 | 33 | 21% | |
| Service Hours | 23 | 27 | -12% | ▼ |
| Social Rehab/PHP/IOP Days | 534 | 629 | -15% | ▼ |

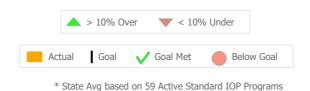
Data Submission Quality

| Data Entry | Ac | tual S | itate Avg |
|------------------------|----|--------|-----------|
| Valid NOMS Data | | 100% | 84% |
| Valid TEDS Data | | 100% | 83% |
| | | | |
| On-Time Periodic | | Actual | State Avg |
| V 6 Month Updates | | 0% | 0% |
| | | | |
| Diagnosis | | Actual | State Avg |
| Valid Axis I Diagnosis | | 100% | 99% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | J |
|---------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| Treatment Completed Successfully | | 26 | 65% | 50% | 50% | 15% | - |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Follow-up within 30 Days of Discharge | | 24 | 92% | 90% | 54% | 2% | |
| Recovery | | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Not Arrested | | 68 | 99% | 75% | 81% | 24% | |
| Abstinence/Reduced Drug Use | | 55 | 80% | 55% | 53% | 25% | |
| Stable Living Situation | | 68 | 99% | 95% | 82% | 4% | |
| Improved/Maintained Function Score | | 35 | 71% | 75% | 79% | -4% | |
| Employed | | 9 | 13% | 50% | 28% | -37% | |
| Self Help | | 6 | 9% | 60% | 32% | -51% | |
| Service Utilization | | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Clients Receiving Services | | 18 | 62% | 90% | 58% | -28% | |





| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 518 | 527 | -2% |
| Admits | 125 | 117 | 7% |
| Discharges | 140 | 146 | -4% |
| Service Hours | 2,640 | 2,526 | 4% |

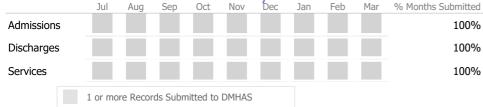
Data Submission Quality

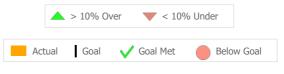
| Data Entry | Act | ual S | tate Avg |
|------------------------|-----|--------|-----------|
| Valid NOMS Data | | 100% | 98% |
| Valid TEDS Data | | 100% | 98% |
| | • | | |
| On-Time Periodic | | Actual | State Avg |
| V 6 Month Updates | | 85% | 73% |
| | | | |
| Diagnosis | | Actual | State Avg |
| Valid Axis I Diagnosis | | 100% | 99% |
| Ť | | | |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| \checkmark | Treatment Completed Successfully | | 74 | 53% | 50% | 57% | 3% | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Abstinence/Reduced Drug Use | | 468 | 87% | 50% | 65% | 37% | |
| \checkmark | Self Help | | 472 | 88% | 60% | 47% | 28% | |
| V | Not Arrested | | 531 | 99% | 75% | 93% | 24% | |
| \checkmark | Stable Living Situation | | 518 | 96% | 90% | 87% | 6% | |
| | Employed | | 148 | 28% | 40% | 38% | -12% | - |
| | Improved/Maintained Function Score | <u> </u> | 311 | 64% | 75% | 55% | -11% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Clients Receiving Services | | 391 | 98% | 90% | 85% | 8% | |
| | Service Engagement | | | | | | | |
| | Medication Assisted Treatment | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Length of Stay over 1 Year | | 362 | 70% | 50% | 67% | 20% | |
| | | | | | | | | |
| | | | | | | | | |

Data Submitted to DMHAS by Month





* State Avg based on 38 Active Methadone Maintenance Programs

CASA MAAS OP NonMethMn 989202

Chemical Abuse Services Agency (CASA) Addiction - Outpatient - Standard Outpatient Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 69 | 98 | -30% | ▼ |
| Admits | 44 | 69 | -36% | ▼ |
| Discharges | 45 | 68 | -34% | ▼ |
| Service Hours | 575 | 783 | -27% | ▼ |

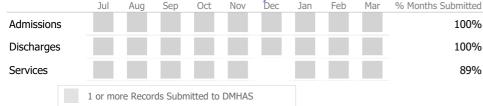
Data Submission Quality

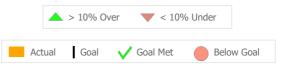
| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 100% | 89% |
| Valid TEDS Data | 100% | 67% |
| On-Time Periodic | Actual | State Avg |
| ✓ 6 Month Updates | 64% | 9% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| \checkmark | Treatment Completed Successfully | | 28 | 62% | 50% | 52% | 12% | |
| | - | | | | | | | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Not Arrested | | 72 | 100% | 75% | 58% | 25% | |
| \checkmark | Abstinence/Reduced Drug Use | | 53 | 74% | 55% | 32% | 19% | |
| \checkmark | Self Help | | 49 | 68% | 60% | 16% | 8% | |
| \checkmark | Stable Living Situation | | 72 | 100% | 95% | 59% | 5% | |
| \checkmark | Improved/Maintained Function Score | | 43 | 77% | 75% | 46% | 2% | |
| | Employed | | 23 | 32% | 50% | 30% | -18% | - |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Clients Receiving Services | | 26 | 96% | 90% | 41% | 6% | |
| | Service Engagement | | | | | | | |
| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | 2 or more Services within 30 days | | 31 | 70% | 75% | 45% | -5% | |

Data Submitted to DMHAS by Month





Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|------------------------------|--------|----------|------------|---|
| Unique Clients | 5 | 19 | -74% | ▼ |
| Admits | 3 | 17 | -82% | ▼ |
| Discharges | 3 | 16 | -81% | ▼ |
| Service Hours | 24 | 58 | -59% | ▼ |
| Social Rehab/PHP/IOP Days | 15 | 327 | -95% | ▼ |

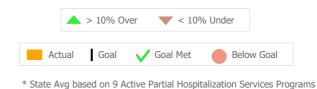
Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 100% | 22% |
| Valid TEDS Data | 100% | 13% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | N/A | 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 | | 1 | 33% | 50% | 43% | -17% | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | _ |
| No Re-admit within 30 Days of Discharge | | 2 | 67% | 85% | 89% | -18% | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Follow-up within 30 Days of Discharge | | 0 | 0% | 90% | 74% | -90% | |
| Recovery | | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Self Help | | 4 | 80% | 60% | 19% | 20% | |
| Stable Living Situation | · · · | 5 | 100% | 95% | 83% | 5% | |
| Improved/Maintained Function Score | | 3 | 100% | 75% | 96% | 25% | |
| Employed | — . | 1 | 20% | 50% | 21% | -30% | , |
| Service Utilization | | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Clients Receiving Services | | 1 | 50% | 90% | 10% | -40% | |

Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec Jan Feb Mar % Months Submitted Admissions 33% Discharges 22% Services 33% 1 or more Records Submitted to DMHAS



CASA Res Intensive 989601

Chemical Abuse Services Agency (CASA) Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7 Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 67 | 71 | -6% |
| Admits | 64 | 67 | -4% |
| Discharges | 60 | 67 | -10% |
| Bed Days | 2,854 | 2,287 | 25% 🔺 |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 100% | 89% |
| Valid TEDS Data | 100% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | N/A | 0% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 100% |

Discharge Outcomes

| | | Actual % vs Goal % | A shund | Ashual 0/ | Caal 0/ | Chata Aura | Astual us Casl | |
|--------------|---|--------------------|---------|-----------|---------|------------|----------------|---|
| | | Actual % VS Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Treatment Completed Successfully | | 35 | 58% | 80% | 78% | -22% | ▼ |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | No Re-admit within 30 Days of Discharge | | 57 | 95% | 85% | 89% | 10% | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Follow-up within 30 Days of Discharge | | 29 | 83% | 90% | 61% | -7% | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Improved/Maintained Function Score | | 58 | 97% | 75% | 83% | 22% | |
| | Self Help | | 2 | 3% | 60% | 74% | -57% | |
| | Abstinence/Reduced Drug Use | | 5 | 7% | 70% | 41% | -63% | |
| | | | | | | | | |

Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|----------------------|-----------------|------|---------|----------|----------|--------|-----------|----------------|--|
| \checkmark | Avg Utilization Rate | | 10 | 58 days | 0.1 | 104% | 90% | 94% | 14% | |
| | < | 90% 90-110% | | >110% | | | | | | |

Data Submitted to DMHAS by Month





* State Avg based on 7 Active SA Intensive Res. Rehabilitation 3.7 Programs

Harrison Apartments

Chemical Abuse Services Agency (CASA) Mental Health - Case Management - Supportive Housing – Development Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)

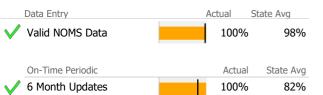
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 4 | 7 | -43% | ▼ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | 1 | 2 | -50% | ▼ |
| Service Hours | 35 | 80 | -56% | ▼ |

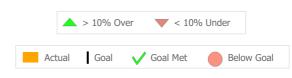
Recovery

| | , | | | | | | | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Stable Living Situation | | 4 | 100% | 85% | 93% | 15% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Clients Receiving Services | | 3 | 100% | 90% | 98% | 10% | |

Data Submission Quality



Data Submitted Jul to Aug Dep Dec Jan Feb Mar % Months Submitted Admissions 0% Discharges 11% Services 1 or more Records Submitted to DMHAS



* State Avg based on 68 Active Supportive Housing – Development Programs

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 12 | 14 | -14% 🔻 | |
| Admits | 3 | 6 | -50% 🔻 | |
| Discharges | 2 | 5 | -60% 🔻 | |
| Bed Days | 2,648 | 2,369 | 12% 🔺 | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|--------|----------------|
| Valid NOMS Data | 10 | 0% 99% |
| On-Time Periodic | Ac | tual State Avg |
| 6 Month Updates | | 0% 63% |

Discharge Outcomes

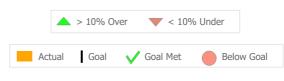
< 90%

90-110%

>110%

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|---------------------------------------|--------------------|----------|----------|--------|-----------|----------------|--|
| | Treatment Completed Successfully | | 0 | 0% | 85% | 64% | -85% | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 14% | N/A | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Self Help | | 2 | 17% | 60% | 44% | -43% | |
| | Bed Utilization 12 Months Trend | Beds Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Avg Utilization Rate | 10 492 days | 0.3 | 96% | 90% | 89% | 6% | |



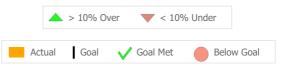


* State Avg based on 3 Active AIDS Residential Programs

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

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|---------|----------|----------|-----------|-------|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |
| | 1 or mo | ore Reco | rds Subn | nitted to | DMHAS | | | | | |



* State Avg based on 23 Active Outreach & Engagement Programs

Nueva Vida Arctic St OP 989204

Chemical Abuse Services Agency (CASA) Addiction - Outpatient - Standard Outpatient Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 23 | 35 | -34% 🔻 |
| Admits | 11 | 24 | -54% 🔻 |
| Discharges | 15 | 20 | -25% 🔻 |
| Service Hours | 328 | 612 | -46% 🔻 |

Data Submission Quality

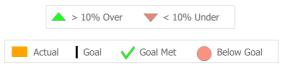
| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 100% | 89% |
| Valid TEDS Data | 96% | 67% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 9% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| Treatment Completed Successfully | | 4 | 27% | 50% | 52% | -23% | |
| Recovery | | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| V Not Arrested | | 23 | 96% | 75% | 58% | 21% | |
| Employed | | 15 | 62% | 50% | 30% | 12% | |
| ✓ Abstinence/Reduced Drug Use | | 16 | 67% | 55% | 32% | 12% | |
| Stable Living Situation | | 23 | 96% | 95% | 59% | 1% | |
| ✓ Improved/Maintained Function Score | | 15 | 75% | 75% | 46% | 0% | |
| Self Help | | 1 | 4% | 60% | 16% | -56% | |
| Service Utilization | | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Clients Receiving Services | | 6 | 67% | 90% | 41% | -23% | |
| Service Engagement | | | | | | | |
| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| ✓ 2 or more Services within 30 days | | 6 | 60% | 75% | 45% | -15% | ▼ |

Data Submitted to DMHAS by Month





PILOTS

Chemical Abuse Services Agency (CASA)

Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 7 | 11 | -36% 🔻 | |
| Admits | 4 | 8 | -50% 🔻 | |
| Discharges | 4 | 7 | -43% 🔻 | |
| Service Hours | 4 | 8 | -53% 🔻 | |

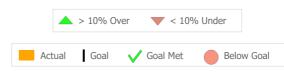
Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| \checkmark | Stable Living Situation | | 7 | 100% | 85% | 93% | 15% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Clients Receiving Services | | 2 | 67% | 90% | 98% | -23% | |

Data Submission Quality

| Data Entry | Actual S | State Avg |
|------------------|----------|-----------|
| Valid NOMS Data | 100% | 98% |
| | | |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 82% |





* State Avg based on 68 Active Supportive Housing – Development Programs

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 31 | 27 | 15% | |
| Admits | 27 | 22 | 23% | |
| Discharges | 32 | 19 | 68% | |
| Service Hours | 273 | 170 | 61% | |

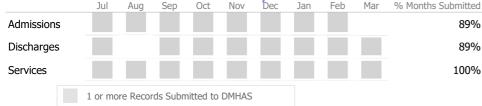
Data Submission Quality

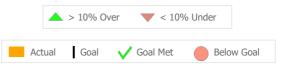
| Data Entry | | Actual S | tate Avg |
|------------------------|---|----------|-----------|
| Valid NOMS Data | | 100% | 89% |
| Valid TEDS Data | | 100% | 67% |
| | • | | |
| On-Time Periodic | | Actual | State Avg |
| 6 Month Updates | | 0% | 9% |
| | | | |
| Diagnosis | | Actual | State Avg |
| Valid Axis I Diagnosis | | 100% | 99% |
| • | | | |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| \checkmark | Treatment Completed Successfully | | 27 | 84% | 50% | 52% | 34% | |
| | 5 | | | | | | | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Abstinence/Reduced Drug Use | | 34 | 89% | 55% | 32% | 34% | |
| \checkmark | Not Arrested | | 38 | 100% | 75% | 58% | 25% | |
| \checkmark | Improved/Maintained Function Score | | 30 | 88% | 75% | 46% | 13% | |
| \checkmark | Stable Living Situation | | 37 | 97% | 95% | 59% | 2% | |
| | Self Help | | 9 | 24% | 60% | 16% | -36% | |
| | Employed | | 6 | 16% | 50% | 30% | -34% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Clients Receiving Services | | 6 | 100% | 90% | 41% | 10% | |
| | Service Engagement | | | | | | | |
| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | 2 or more Services within 30 days | | 20 | 91% | 75% | 45% | 16% | |

Data Submitted to DMHAS by Month





Recovery House

Chemical Abuse Services Agency (CASA) Addiction - Residential Services - Recovery House

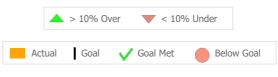
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 31 | 22 | 41% | |
| Admits | 25 | 19 | 32% | |
| Discharges | 21 | 18 | 17% | |
| Bed Days | 2,354 | 1,854 | 27% | |

Discharge Outcomes



Data Submitted to DMHAS by Month Sep Oct Nov Jan Feb Mar % Months Submitted Jul Aug Dec Admissions 100% Discharges 100% 1 or more Records Submitted to DMHAS



* State Avg based on 12 Active Recovery House Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 7 | 7 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | - | - | |

Data Submission Quality

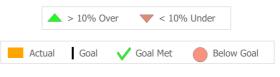
| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | N/A | 97% |
| Valid TEDS Data | N/A | 63% |
| | | |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 37% |
| | | |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 100% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 47% | N/A |
| Recovery | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Employed | | 0 | 0% | 50% | 30% | -50% |
| Abstinence/Reduced Drug Use | | 0 | 0% | 55% | 54% | -55% |
| Self Help | ľ. | 0 | 0% | 60% | 23% | -60% |
| Improved/Maintained Function Score | | 0 | 0% | 75% | 32% | -75% |
| Not Arrested | i | 0 | 0% | 75% | 69% | -75% |
| Stable Living Situation | | 0 | 0% | 95% | 64% | -95% |
| Service Utilization | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Clients Receiving Services | | 0 | 0% | 90% | 53% | N/A |

Data Submitted to DMHAS by Month

| | | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|-----------|----|---------|-----------|---------|-----------|-------|-----|-----|-----|-----|--------------------|
| Admissior | าร | | | | | | | | | | 0% |
| Discharge | s | | | | | | | | | | 0% |
| Services | | | | | | | | | | | 0% |
| | | 1 or mo | ore Recor | ds Subr | nitted to | DMHAS | | | | | |



* State Avg based on 19 Active Buprenorphine Maintenance Programs

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

Data Submission Quality

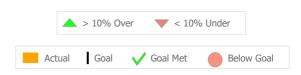
| Data Entry | Actual S | tate Avg |
|------------------|----------|-----------|
| Valid NOMS Data | N/A | 89% |
| Valid TEDS Data | N/A | 67% |
| | | |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | N/A | 9% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 52% | 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% | 32% | -55% 🔻 |
| Employed | l | N/A | N/A | 50% | 30% | -50% 🔻 |
| Improved/Maintained Function Score | | N/A | N/A | 75% | 46% | -75% 🔷 |
| Not Arrested | i | N/A | N/A | 75% | 58% | -75% 🔻 |
| Self Help | | N/A | N/A | 60% | 16% | -60% 🔻 |
| Stable Living Situation | · 1 | N/A | N/A | 95% | 59% | -95% 🔻 |
| Service Utilization | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Clients Receiving Services | | N/A | N/A | 90% | 41% | 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% |
| | 1 or more Records Submitted to DMHAS | | | | | | | | | | |

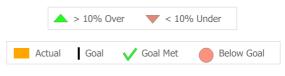


| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 61 | 46 | 33% 🔺 | |
| Admits | 48 | 37 | 30% 🔺 | |
| Discharges | 44 | 26 | 69% 🔺 | |
| Service Hours | - | - | | |

Service Engagement



Data Submitted to DMHAS by Month Sep Nov Jan Mar % Months Submitted Jul Aug Oct Dec Feb Admissions 100% Discharges 100% Services 0% 1 or more Records Submitted to DMHAS



* State Avg based on 23 Active Outreach & Engagement Programs