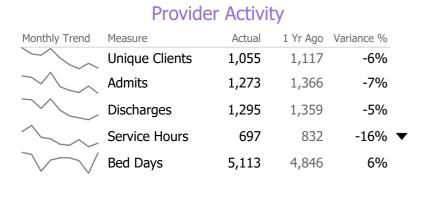
Cornell Scott-Hill Health Corporation New Haven, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

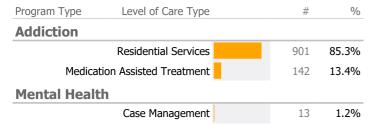
Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)



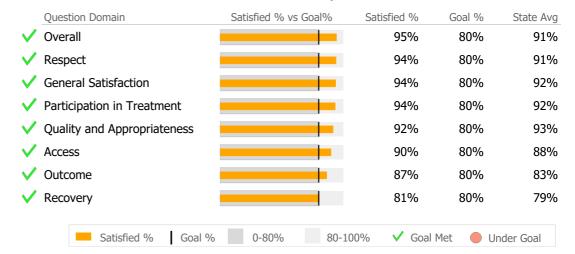
▲ > 10% Over 1 Yr Ago

 \mathbf{v} > 10% Under 1Yr Ago

Clients by Level of Care



Consumer Satisfaction Survey (Based on 293 FY23 Surveys)



Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	30	3%	9%	Male 🗾	745	71%	▲ 59%
26-34	230	22%	20%	Female <mark>—</mark>	309	29%	▼ 40%
35-44	330	31%	25%	Transgender			0%
45-54	233	22%	18%				
55-64	196	19%	19%				
65+	36	3%	10%	Race	#	%	State Avg
				White/Caucasian	707	67%	59%
Ethnicity	#	%	State Avg	Black/African American	192	18%	17%
Non-Hispanic	856	81%	▲ 64%	Other 📘	145	14%	12%
Hisp-Puerto Rican	130	12%	10%	Unknown	8	1%	9%
Hispanic-Other	56	5%	10%	Am. Indian/Native Alaskan	3	0%	1%
Unknown	13	1%	▼ 14%	Asian			1%
1	15	170	•	Multiple Races			1%
Hispanic-Cuban			0%	Hawaiian/Other Pacific Islander			0%
Hispanic-Mexican			1%	1			
	Unique C	lients	State Avg	▲ > 10% Over State Avg	> 10% L	Inder Si	ate 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

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%	93%	-50% 🔻

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	S										0%
Discharges	5										0%
Services											0%
	:	1 or mo	re Recor	ds Subr	nitted to	DMHAS					

	> 10% 0	ver 🔻 < 10	0% Under	
Actual	Goal	🗸 Goal Met	Belo	w Goal

* State Avg based on 58 Active Outreach & Engagement Programs

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

Program Activity

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

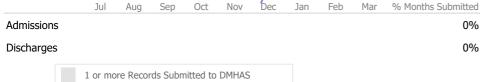
Data Submission Quality

	Data Entry	Actual	State Avg
	Valid NOMS Data	N/A	99%
	Valid TEDS Data	N/A	96%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	0%	8%
	Diagnosis	Actual	State Avg
\checkmark	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%	42%	N/A
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Abstinence/Reduced Drug Use		2	100%	55%	41%	45% 🔺
\checkmark	Not Arrested		2	100%	75%	64%	25% 🔺
\checkmark	Stable Living Situation		2	100%	95%	57%	5%
\checkmark	Employed		1	50%	50%	36%	0%
	Self Help	i	1	50%	60%	41%	-10%
	Improved/Maintained Function Score		0	0%	75%	28%	-75% 🔻

Data Submitted to DMHAS by Month





* State Avg based on 6 Active Naltrexone Programs

SCRC Residential Detox 986600

Cornell Scott-Hill Health Corporation Addiction - Residential Services - Medically Monitored Detox 3.7D Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

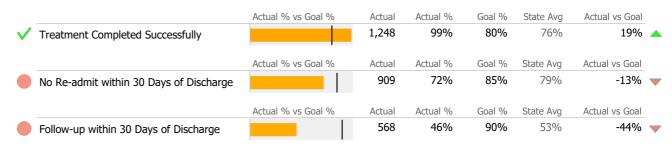
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	901	943	-4%
Admits	1,257	1,324	-5%
Discharges	1,260	1,325	-5%
Bed Days	5,113	4,846	6%

Data Submission Quality

Data Entry	Actual S	tate Avg
🗸 Valid NOMS Data	100%	88%
Valid TEDS Data	100%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	33%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%

Discharge Outcomes



Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization Rate		24	4 days	0.0	77%	90%	73%	-13%	
<	90% 90-110%		>110%						

Data Submitted to DMHAS by Month





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

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	140	160	-13%	-
Admits	16	42	-62%	•
Discharges	35	34	3%	
Service Hours	697	832	-16%	•

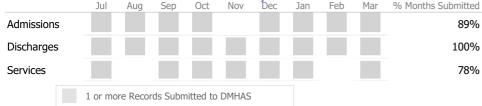
Data Submission Quality

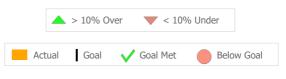
Data Entry	Actual S	tate Avg	
🗸 Valid NOMS Data	99% 97%		
Valid TEDS Data	100%	63%	
On-Time Periodic	Actual	State Avg	
V 6 Month Updates	100%	37%	
Diagnosis	Actual	State Avg	
Valid Axis I Diagnosis	100%	100%	

Discharge Outcomes

~	Treatment Completed Successfully	Actual % vs Goal %	Actual 22	Actual % 63%	Goal % 50%	State Avg 47%	Actual vs Goal 13%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Abstinence/Reduced Drug Use		132	94%	55%	54%	39%	
\checkmark	Not Arrested		139	99%	75%	69%	24%	
\checkmark	Employed		84	60%	50%	30%	10%	
\checkmark	Stable Living Situation		138	99%	95%	64%	4%	
	Self Help	— 1 [·]	29	21%	60%	23%	-39%	
	Improved/Maintained Function Score		24	18%	75%	32%	-57%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		105	100%	90%	53%	10%	

Data Submitted to DMHAS by Month





* State Avg based on 19 Active Buprenorphine Maintenance Programs