**Midwestern CT Council on Alcoholism (MCCA)**
Danbury, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2023 - June 2024   (Data as of Sep 10, 2024)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|---|
| | Unique Clients | 3,509 | 3,886 | -10% |
| | Admits | 3,830 | 3,751 | 2% |
| | Discharges | 3,978 | 3,926 | 1% |
| | Service Hours | 5,368 | 5,296 | 1% |
| | Bed Days | 21,785 | 25,904 | -16% ▼ |

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

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Forensic SA** | | | |
| | Forensics Community-based | 2,018 | 54.9% |
| **Addiction** | | | |
| | Residential Services | 1,007 | 27.4% |
| | Outpatient | 416 | 11.3% |
| | Forensics Community-based | 123 | 3.3% |
| | Case Management | 80 | 2.2% |
| **Mental Health** | | | |
| | Residential Services | 33 | 0.9% |

## Consumer Satisfaction Survey   (Based on 1,212 FY23 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✔ | Quality and Appropriateness | | 89% | 80% | 93% |
| ✔ | Participation in Treatment | | 89% | 80% | 92% |
| ✔ | Overall | | 88% | 80% | 91% |
| ✔ | Respect | | 86% | 80% | 91% |
| ✔ | Outcome | | 82% | 80% | 83% |
| ✔ | General Satisfaction | | 82% | 80% | 92% |
| ✔ | Recovery | | 82% | 80% | 79% |
| ● | Access | | 79% | 80% | 88% |

Legend: Satisfied % | Goal % | 0-80% | 80-100% | ✔ Goal Met | ● Under Goal

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 430 | 12% | 9% |
| 26-34 | 929 | 27% | 20% |
| 35-44 | 963 | 27% | 25% |
| 45-54 | 580 | 17% | 18% |
| 55-64 | 456 | 13% | 18% |
| 65+ | 147 | 4% | 9% |

### Gender

| | # | % | | State Avg |
|---|---|---|---|---|
| Male | 2,491 | 71% | ▲ | 60% |
| Female | 1,015 | 29% | ▼ | 40% |
| Transgender | | | | 0% |

### Ethnicity

| | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 2,401 | 68% | | 64% |
| Hispanic-Other | 752 | 21% | | 11% |
| Hisp-Puerto Rican | 177 | 5% | | 10% |
| Unknown | 101 | 3% | ▼ | 15% |
| Hispanic-Mexican | 71 | 2% | | 1% |
| Hispanic-Cuban | 7 | 0% | | 0% |

### Race

| | # | % | | State Avg |
|---|---|---|---|---|
| White/Caucasian | 2,690 | 77% | ▲ | 58% |
| Black/African American | 459 | 13% | | 17% |
| Other | 227 | 6% | | 12% |
| Unknown | 77 | 2% | | 9% |
| Asian | 40 | 1% | | 1% |
| Am. Indian/Native Alaskan | 9 | 0% | | 1% |
| Hawaiian/Other Pacific Islander | 6 | 0% | | 0% |
| Multiple Races | 1 | 0% | | 1% |

Legend: 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.

**Danbury Case Management**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 80 | 122 | -34% | ▼ |
| Admits | 46 | 73 | -37% | ▼ |
| Discharges | 54 | 84 | -36% | ▼ |
| Service Hours | 351 | 491 | -28% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 97% | 95% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 28% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 45 | 83% | 50% | 47% | 33% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 31 | 36% | 20% | 32% | 16% | ▲ |
| ● Stable Living Situation | | 68 | 79% | 80% | 70% | -1% | |
| ● Self Help | | 9 | 10% | 60% | 41% | -50% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 32 | 100% | 90% | 78% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | 92% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | | 83% |
| Services | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | | | 75% |

▢ 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.

**Detoxification Program**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Residential Services - Medically Monitored Detox 3.7D

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 750 | 682 | 10% | |
| Admits | 956 | 879 | 9% | |
| Discharges | 952 | 885 | 8% | |
| Bed Days | 4,309 | 3,817 | 13% | ▲ |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 674 | 71% | 80% | 76% | -9% | |
| ● No Re-admit within 30 Days of Discharge | | 770 | 81% | 85% | 78% | -4% | |
| ● Follow-up within 30 Days of Discharge | | 446 | 66% | 90% | 52% | -24% | ▼ |

## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| ✓ Valid NOMS Data | 99% | 88% |
| ✓ 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% | 99% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 14 | 5 days | 0.0 | 84% | 90% | 82% | -6% |

| Legend | |
|---|---|
| ▢ < 90% | ▢ 90-110% | ▢ >110% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

Legend: ▲ > 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.

**MCCA -  Bettor Choice 740**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Outpatient - Gambling Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 130 | 123 | 6% | |
| Admits | 56 | 61 | -8% | |
| Discharges | 52 | 47 | 11% | ▲ |
| Service Hours | 1,951 | 1,916 | 2% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 27 | 52% | 75% | 51% | -23% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 85 | 100% | 90% | 84% | 10% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 39 | 74% | 75% | 64% | -1% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 98% | 98% |
| ✓ | Valid TEDS Data | 45% | 29% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 77% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 99% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 7 Active Gambling Outpatient Programs

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

**MCCA TPP Torrington**
Midwestern CT Council on Alcoholism (MCCA)
Forensic SA - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 56 | 48 | 17% | ▲ |
| Admits | 55 | 41 | 34% | ▲ |
| Discharges | 53 | 40 | 33% | ▲ |
| Service Hours | 117 | 79 | 48% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 9 | 90% | 90% | 93% | 0% |

## 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 | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |
| Services | | | | | | | | | | | | | 92% |

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.

**MCCA Women's OP**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 35 | 20 | 75% | ▲ |
| Admits | 22 | 14 | 57% | ▲ |
| Discharges | 23 | 6 | 283% | ▲ |
| Service Hours | 156 | 100 | 56% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 90% |
| ✓ Valid TEDS Data | | 100% | 66% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 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 | | 11 | 48% | 50% | 53% | -2% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Abstinence/Reduced Drug Use | | 28 | 78% | 55% | 34% | 23% | ▲ |
| ✓ | Not Arrested | | 34 | 94% | 75% | 61% | 19% | ▲ |
| ✓ | Employed | | 22 | 61% | 50% | 32% | 11% | ▲ |
| 🔴 | Stable Living Situation | | 32 | 89% | 95% | 62% | -6% | |
| ✓ | Improved/Maintained Function Score | | 21 | 84% | 75% | 52% | 9% | |
| 🔴 | Self Help | | 7 | 19% | 60% | 18% | -41% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 12 | 92% | 90% | 45% | 2% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | | 17 | 77% | 75% | 47% | 2% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 75% |
| Discharges | | | | | | | | | | | | | 83% |
| Services | | | | | | | | | | | | | 92% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 104 Active Standard Outpatient Programs

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

**McDonough House**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 364 | 371 | -2% |
| Admits | 392 | 365 | 7% |
| Discharges | 381 | 377 | 1% |
| Bed Days | 6,186 | 5,526 | 12% ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 88% |
| ✓ Valid TEDS Data | | 99% | 94% |

| 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 | | 287 | 75% | 80% | 75% | -5% |
| ✓ | No Re-admit within 30 Days of Discharge | | 336 | 88% | 85% | 87% | 3% |
| 🔴 | Follow-up within 30 Days of Discharge | | 173 | 60% | 90% | 60% | -30% ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Self Help | | 396 | 99% | 60% | 73% | 39% ▲ |
| ✓ | Improved/Maintained Function Score | | 371 | 97% | 75% | 83% | 22% ▲ |
| 🔴 | Abstinence/Reduced Drug Use | | 216 | 54% | 70% | 45% | -16% ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 20 | 18 days | 0.0 | 85% | 90% | 92% | -5% |

■ < 90%    ■ 90-110%    ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 7 Active SA Intensive Res. Rehabilitation 3.7 Programs

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

**New Milford OP**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 224 | 212 | 6% | |
| Admits | 184 | 187 | -2% | |
| Discharges | 186 | 164 | 13% | ▲ |
| Service Hours | 1,796 | 1,710 | 5% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 99% | 90% |
| ✓ | Valid TEDS Data | 98% | 66% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 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 | | 136 | 73% | 50% | 53% | 23% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Employed | | 154 | 61% | 50% | 32% | 11% | ▲ |
| ✓ | Not Arrested | | 212 | 84% | 75% | 61% | 9% | |
| ✓ | Improved/Maintained Function Score | | 199 | 97% | 75% | 52% | 22% | ▲ |
| ● | Stable Living Situation | | 236 | 94% | 95% | 62% | -1% | |
| ● | Abstinence/Reduced Drug Use | | 127 | 50% | 55% | 34% | -5% | |
| ● | Self Help | | 30 | 12% | 60% | 18% | -48% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 61 | 92% | 90% | 45% | 2% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 132 | 80% | 75% | 47% | 5% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 104 Active Standard Outpatient Programs

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

**Parents Recovering from Opioid Use Disorder (PROUD**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 29 | | |
| Admits | 30 | - | |
| Discharges | 13 | - | |
| Service Hours | 132 | - | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 90% |
| ✔ Valid TEDS Data | | 99% | 66% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 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 | | 2 | 15% | 50% | 53% | -35% ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Abstinence/Reduced Drug Use | | 25 | 83% | 55% | 34% | 28% ▲ |
| ✔ Not Arrested | | 25 | 83% | 75% | 61% | 8% |
| 🔴 Stable Living Situation | | 25 | 83% | 95% | 62% | -12% ▼ |
| ✔ Improved/Maintained Function Score | | 15 | 88% | 75% | 52% | 13% ▲ |
| 🔴 Employed | | 4 | 13% | 50% | 32% | -37% ▼ |
| 🔴 Self Help | | 1 | 3% | 60% | 18% | -57% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 13 | 76% | 90% | 45% | -14% ▼ |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 11 | 38% | 75% | 47% | -37% ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | 67% |
| Discharges | | | | | ▢ | ▢ | ▢ | | | ▢ | ▢ | ▢ | 50% |
| Services | | | | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | 58% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under
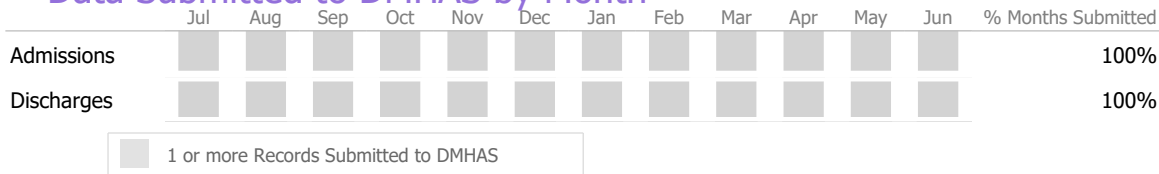
■ Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 104 Active Standard Outpatient Programs

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

**PTIP Danbury**
Midwestern CT Council on Alcoholism (MCCA)
Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---------|--------|----------|------------|---|
| Unique Clients | 1,753 | 986 | 78% | ▲ |
| Admits | 1,520 | 694 | 119% | ▲ |
| Discharges | 1,399 | 750 | 87% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|---------------------|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Discharges | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under
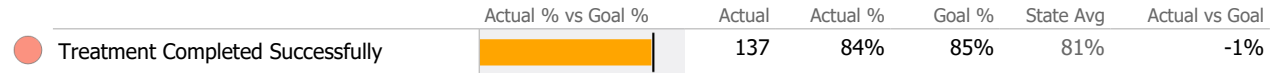
■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 10 Active Pre-trial Intervention Programs Programs

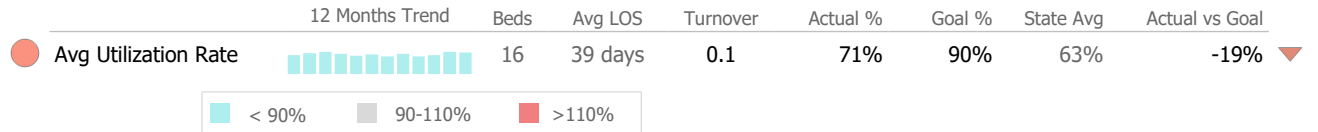Variances in data may be indicative of operational adjustments related to the pandemic.

**Sobering Center**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 148 | 169 | -12% | ▼ |
| Admits | 160 | 183 | -13% | ▼ |
| Discharges | 163 | 184 | -11% | ▼ |
| Bed Days | 4,181 | 3,456 | 21% | ▲ |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 137 | 84% | 85% | 81% | -1% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 16 | 39 days | 0.1 | 71% | 90% | 63% | -19% ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal
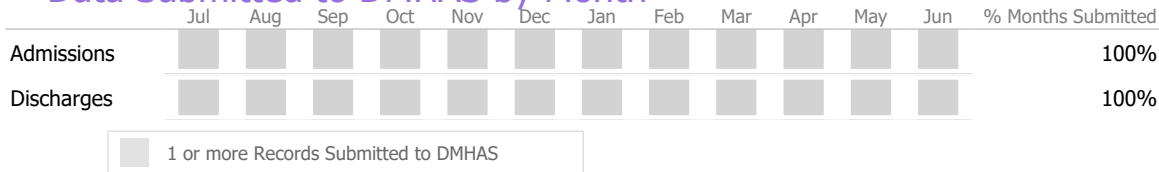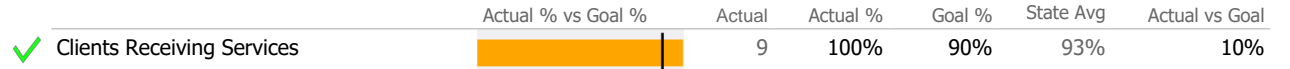
* State Avg based on 12 Active Recovery House Programs

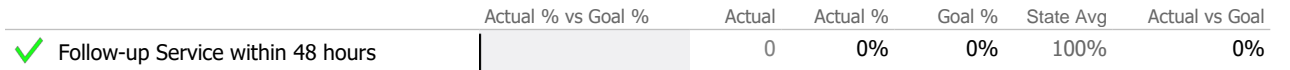Variances in data may be indicative of operational adjustments related to the pandemic.

**STR TPP Waterbury**
Midwestern CT Council on Alcoholism (MCCA)
Forensic SA - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 86 | 107 | -20% | ▼ |
| Admits | 68 | 91 | -25% | ▼ |
| Discharges | 77 | 92 | -16% | ▼ |
| Service Hours | 134 | 192 | -30% | ▼ |

## Service Utilization
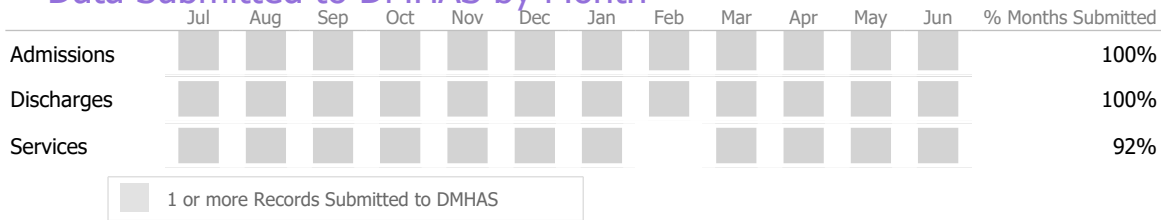
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 9 | 100% | 90% | 93% | 10% |

## 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 | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Discharges | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | 92% |

▫ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under
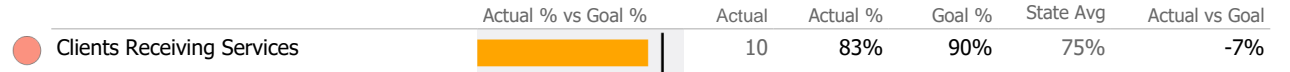
■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 5 Active Court Liaison-Jail Diversion Programs

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

**TPP New Haven**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 89 | 73 | 22% | ▲ |
| Admits | 83 | 75 | 11% | ▲ |
| Discharges | 80 | 66 | 21% | ▲ |
| Service Hours | 158 | 147 | 8% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 10 | 83% | 90% | 75% | -7% |

## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| Valid TEDS Data | N/A | N/A |

| Diagnosis | Actual | State Avg |
|---|---|---|
| ✔ Valid Axis I Diagnosis | 100% | 100% |

## Jail Diversion
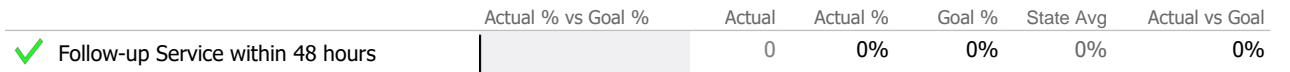
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Follow-up Service within 48 hours | | 0 | 0% | 0% | 0% | 0% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |
| Services | | | | | | | | | | | | | 92% |

☐ 1 or more Records Submitted to DMHAS
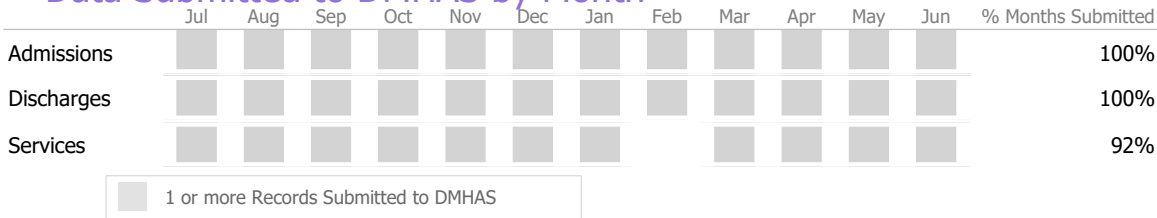
▲ > 10% Over   ▼ < 10% Under

🟧 Actual   | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 4 Active Court Liaison-Jail Diversion Programs

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

**Transitional Housing**
Midwestern CT Council on Alcoholism (MCCA)
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 33 | 25 | 32% | ▲ |
| Admits | 22 | 9 | 144% | ▲ |
| Discharges | 17 | 14 | 21% | ▲ |
| Service Hours | 574 | 661 | -13% | ▼ |

## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| Valid NOMS Data | 97% | 100% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| ✓ 6 Month Updates | 100% | 97% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 9 | 53% | 50% | 67% | 3% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 30 | 91% | 25% | 18% | 66% | ▲ |
| ✓ Social Support | | 27 | 82% | 60% | 84% | 22% | ▲ |
| ⬤ Stable Living Situation | | 27 | 82% | 85% | 95% | -3% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 17 | 100% | 90% | 99% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | | ▪ | ▪ | 83% |
| Discharges | ▪ | ▪ | | ▪ | ▪ | ▪ | | ▪ | ▪ | | ▪ | ▪ | 75% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | | ▪ | 92% |

☐ 1 or more Records Submitted to DMHAS
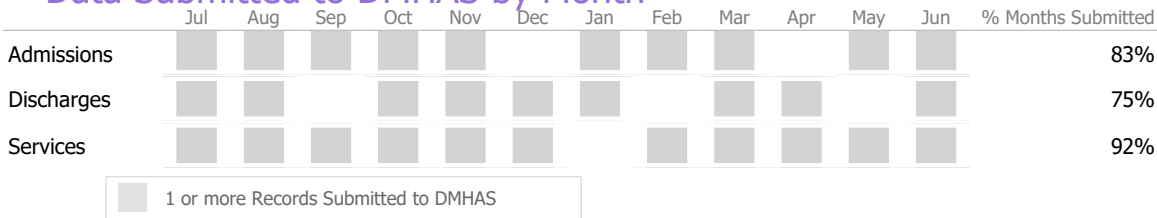
▲ > 10% Over    ▼ < 10% Under

☐ Actual    | Goal    ✓ Goal Met    ⬤ Below Goal

* State Avg based on 24 Active Residential Support Programs

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

**Trinity Glen**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Residential Services - Long Term Care 3.3

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 61 | 92 | -34% | ▼ |
| Admits | 56 | 58 | -3% | |
| Discharges | 53 | 85 | -38% | ▼ |
| Bed Days | 4,199 | 9,901 | -58% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 43 | 81% | 60% | 79% | 21% | ▲ |
| 🔴 | No Re-admit within 30 Days of Discharge | | 32 | 60% | 85% | 66% | -25% | ▼ |
| 🔴 | Follow-up within 30 Days of Discharge | | 27 | 63% | 90% | 62% | -27% | ▼ |

## 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 | N/A | N/A |

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

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Abstinence/Reduced Drug Use | | 52 | 80% | 70% | 86% | 10% | ▲ |
| ✓ | Improved/Maintained Function Score | | 53 | 100% | 75% | 99% | 25% | ▲ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 13 | 80 days | 0.1 | 88% | 90% | 81% | -2% |

■ < 90%   ■ 90-110%   ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 2 Active Long Term Care 3.3 Programs

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

**Trinity Glen (Women's)**
Midwestern CT Council on Alcoholism (MCCA)
Addiction - Residential Services - Long Term Care 3.3

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - June 2024  (Data as of Sep 10, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 42 | 36 | 17% | ▲ |
| Admits | 36 | 25 | 44% | ▲ |
| Discharges | 37 | 27 | 37% | ▲ |
| Bed Days | 2,910 | 3,204 | -9% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 28 | 76% | 60% | 79% | 16% | ▲ |
| ● | No Re-admit within 30 Days of Discharge | | 27 | 73% | 85% | 66% | -12% | ▼ |
| ● | Follow-up within 30 Days of Discharge | | 17 | 61% | 90% | 62% | -29% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 99% | 100% |
| ✔ Valid TEDS Data | | 100% | 100% |

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

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 100% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Abstinence/Reduced Drug Use | | 40 | 89% | 70% | 86% | 19% | ▲ |
| ✔ | Improved/Maintained Function Score | | 36 | 97% | 75% | 99% | 22% | ▲ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 11 | 89 days | 0.2 | 72% | 90% | 81% | -18% | ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 92% |
| Discharges | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 92% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▢ Actual   | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 2 Active Long Term Care 3.3 Programs

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