SCADD
Lebanon, 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	1,894	2,030	-7%
	Admits	2,786	2,874	-3%
	Discharges	2,958	2,930	1%
	Service Hours	2,320	3,034	-24% ▼
	Bed Days	50,768	50,839	0%
	S.Rehab/PHP/IOP	2,718	2,883	-6%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Residential Services	1,444	66.6%
	Outpatient	418	19.3%
	IOP	107	4.9%
	Medication Assisted Treatment	46	2.1%
Forensic SA			
	Case Management	115	5.3%
	Forensics Community-based	37	1.7%

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

Age	#	%	State Avg
18-25	92	5%	9%
26-34	467	25%	20%
35-44	604	32%	25%
45-54	380	20%	18%
55-64	304	16%	18%
65+	47	2%	9%

Gender

Gender	#	%		State Avg
Male	1,483	79%	▲	60%
Female	405	21%	▼	40%
Transgender				0%

Ethnicity

Ethnicity	#	%		State Avg
Non-Hispanic	1,478	78%	▲	64%
Hisp-Puerto Rican	231	12%		10%
Hispanic-Other	127	7%		11%
Unknown	53	3%	▼	15%
Hispanic-Mexican	4	0%		1%
Hispanic-Cuban	1	0%		0%

Race

Race	#	%	State Avg
White/Caucasian	1,279	68%	58%
Black/African American	330	17%	17%
Other	223	12%	12%
Unknown	28	1%	9%
Am. Indian/Native Alaskan	16	1%	1%
Asian	10	1%	1%
Hawaiian/Other Pacific Islander	6	0%	0%
Multiple Races	2	0%	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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	54	49	10%	▲
Admits	45	42	7%	
Discharges	46	43	7%	
Bed Days	3,470	3,528	-2%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		37	80%	85%	70%	-5%	
✓	No Re-admit within 30 Days of Discharge		39	85%	85%	88%	0%	
🔴	Follow-up within 30 Days of Discharge		32	86%	90%	69%	-4%	

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	100%	90%
✓	Valid TEDS Data	100%	99%

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	96%	70%	86%	26%	▲
🔴	Employed		29	54%	60%	46%	-6%	
✓	Improved/Maintained Function Score		35	76%	75%	78%	1%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		10	81 days	0.1	95%	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 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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	48	42	14%	▲
Admits	39	35	11%	▲
Discharges	40	33	21%	▲
Bed Days	3,764	3,470	8%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		32	80%	85%	70%	-5%	
✓	No Re-admit within 30 Days of Discharge		38	95%	85%	88%	10%	
🔴	Follow-up within 30 Days of Discharge		22	69%	90%	69%	-21%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	90%
✓	Valid TEDS Data	100%	99%

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		43	88%	70%	86%	18%	▲
✓	Improved/Maintained Function Score		33	82%	75%	78%	7%	
🔴	Employed		24	49%	60%	46%	-11%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		11	107 days	0.1	93%	90%	92%	3%

🟦 < 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 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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1,039	994	5%
Admits	1,414	1,439	-2%
Discharges	1,410	1,439	-2%
Bed Days	6,426	5,947	8%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Treatment Completed Successfully		1,046	74%	80%	76%	-6%
🔴 No Re-admit within 30 Days of Discharge		1,158	82%	85%	78%	-3%
🔴 Follow-up within 30 Days of Discharge		554	53%	90%	52%	-37% ▼

Data Submission Quality

Data Entry	Actual	State Avg
✅ Valid NOMS Data	97%	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		20	5 days	0.0	88%	90%	82%	-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 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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	616	594	4%
Admits	576	555	4%
Discharges	581	546	6%
Bed Days	32,508	29,919	9%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	92%
✓ Valid TEDS Data		100%	94%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	20%

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		446	77%	70%	75%	7%
✓	No Re-admit within 30 Days of Discharge		530	91%	85%	90%	6%
●	Follow-up within 30 Days of Discharge		230	52%	90%	56%	-38% ▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Abstinence/Reduced Drug Use		558	84%	70%	78%	14% ▲
●	Improved/Maintained Function Score		536	92%	95%	92%	-3%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		97	65 days	0.1	92%	90%	75%	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
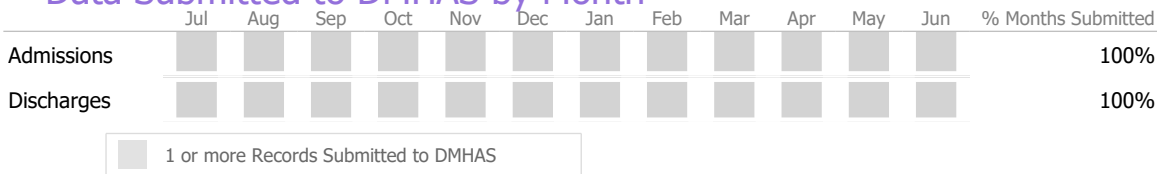
▲ > 10% Over   ▼ < 10% Under

■ Actual   │ Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	78	83	-6%
Admits	67	70	-4%
Discharges	67	71	-6%
Bed Days	4,600	4,386	5%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Treatment Completed Successfully		55	82%	85%	70%	-3%
✅	No Re-admit within 30 Days of Discharge		59	88%	85%	88%	3%
🔴	Follow-up within 30 Days of Discharge		47	85%	90%	69%	-5%

Data Submission Quality

Data Entry		Actual	State Avg
✅	Valid NOMS Data	99%	90%
✅	Valid TEDS Data	100%	99%

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		74	94%	70%	86%	24% ▲
✅	Improved/Maintained Function Score		56	84%	75%	78%	9%
🔴	Employed		31	39%	60%	46%	-21% ▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✅	Avg Utilization Rate		13	72 days	0.1	97%	90%	92%	7%

🟦 < 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 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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	107	126	-15%	▼
Admits	108	120	-10%	
Discharges	108	123	-12%	▼
Service Hours	75	69	8%	
Social Rehab/PHP/IOP Days	2,718	2,883	-6%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		71	66%	50%	54%	16%	▲
🔴	Follow-up within 30 Days of Discharge		35	49%	90%	54%	-41%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		113	95%	75%	81%	20%	▲
✓	Self Help		75	63%	60%	35%	3%	
✓	Improved/Maintained Function Score		96	89%	75%	76%	14%	▲
🔴	Employed		52	44%	50%	28%	-6%	
🔴	Stable Living Situation		103	87%	95%	84%	-8%	
🔴	Abstinence/Reduced Drug Use		50	42%	55%	58%	-13%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	86%
✓	Valid TEDS Data	100%	85%

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

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

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		11	100%	90%	59%	10%

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 60 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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	418	475	-12%	▼
Admits	371	390	-5%	
Discharges	408	439	-7%	
Service Hours	1,686	2,301	-27%	▼

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		260	64%	50%	53%	14%	▲

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		436	96%	75%	61%	21%	▲
✓	Self Help		321	71%	60%	18%	11%	▲
✓	Abstinence/Reduced Drug Use		301	66%	55%	34%	11%	▲
✓	Improved/Maintained Function Score		383	93%	75%	52%	18%	▲
✓	Employed		235	52%	50%	32%	2%	
●	Stable Living Situation		403	89%	95%	62%	-6%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Clients Receiving Services		38	83%	90%	45%	-7%

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	2 or more Services within 30 days		261	76%	75%	47%	1%

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.

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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	23	44	-48%	▼
Admits	23	29	-21%	▼
Discharges	12	44	-73%	▼
Service Hours	190	351	-46%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		99%	100%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	0%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Treatment Completed Successfully		6	50%	50%	72%	0%

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Self Help		22	96%	60%	68%	36%	▲
✓	Social Support		21	91%	60%	90%	31%	▲
✓	Employed		10	43%	20%	31%	23%	▲
✓	Stable Living Situation		21	91%	80%	73%	11%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		11	100%	90%	89%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions								▪	▪	▪	▪	▪	42%
Discharges								▪	▪	▪	▪	▪	42%
Services		▪							▪	▪	▪	▪	42%

▪ 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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	112	74	51%	▲
Admits	96	66	45%	▲
Discharges	87	59	47%	▲
Service Hours	87	202	-57%	▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		0%	0%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		85	98%	50%	72%	48%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Self Help		113	100%	60%	68%	40%	▲
✓	Social Support		112	99%	60%	90%	39%	▲
✓	Employed		34	30%	20%	31%	10%	
●	Stable Living Situation		68	60%	80%	73%	-20%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		15	58%	90%	89%	-32%	▼

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 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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	46	45	2%	
Admits	30	20	50%	▲
Discharges	37	28	32%	▲
Service Hours	203	96	112%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	97%
✔ Valid TEDS Data		99%	64%

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		15	41%	50%	50%	-9%	

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Abstinence/Reduced Drug Use		43	88%	55%	55%	33%	▲
✔	Not Arrested		49	100%	75%	72%	25%	▲
✔	Self Help		40	82%	60%	25%	22%	▲
✔	Improved/Maintained Function Score		36	80%	75%	36%	5%	
🔴	Stable Living Situation		45	92%	95%	66%	-3%	
🔴	Employed		18	37%	50%	30%	-13%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Clients Receiving Services		12	100%	90%	59%	10%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Discharges	▪	▪	▪	▪				▪	▪	▪	▪	▪	92%
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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1	6	-83%	▼
Admits	-	3	-100%	▼
Discharges	1	5	-80%	▼
Service Hours	-	15	-100%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	100%	99%
✔	Valid TEDS Data	100%	92%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	17%

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		0	0%	50%	43%	-50%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Self Help		1	100%	60%	45%	40%	▲
✔	Improved/Maintained Function Score		1	100%	75%	32%	25%	▲
✔	Not Arrested		1	100%	75%	71%	25%	▲
🔴	Employed		0	0%	50%	38%	-50%	▼
🔴	Abstinence/Reduced Drug Use		0	0%	55%	45%	-55%	▼
🔴	Stable Living Situation		0	0%	95%	62%	-95%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		N/A	N/A	90%	46%	N/A	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges	▪												8%
Services	▪		▪										17%

▪ 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 - June 2024 (Data as of Sep 10, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	37	52	-29%	▼
Admits	17	48	-65%	▼
Discharges	37	36	3%	
Service Hours	79	1		

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		N/A	N/A	90%	93%	N/A	▼

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	▪	▪	▪	▪									33%
Discharges	▪	▪	▪	▪	▪	▪	▪						58%
Services	▪	▪	▪	▪	▪	▪	▪					▪	67%

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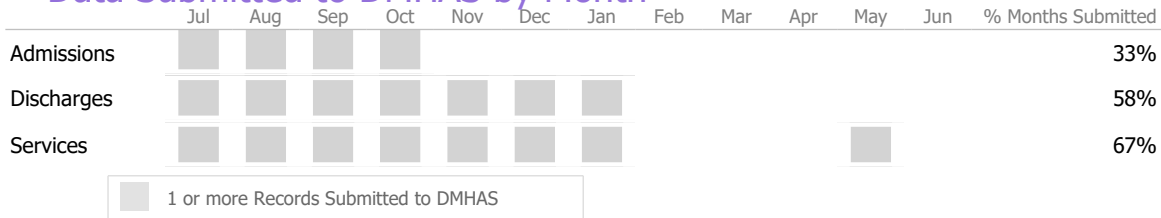
▲ > 10% Over   ▼ < 10% Under

■ 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.