Waterbury, CT

Reporting Period: July 2023 - June 2024 (Data as of Sep 10, 2024)

Provider Activity



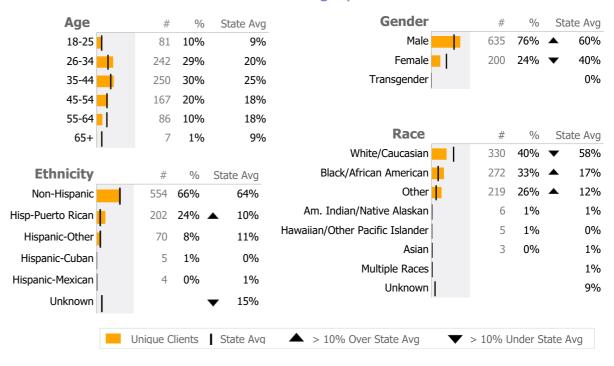


Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|--------------|----------------------|-----|-------|
| Addiction | | | |
| | Outpatient | 490 | 43.7% |
| | Residential Services | 144 | 12.8% |
| | Case Management | 110 | 9.8% |
| Other | | | |
| | Other | 250 | 22.3% |
| Forensic SA | | | |
| | Case Management | 128 | 11.4% |

Consumer Satisfaction Survey (Based on 206 FY23 Surveys) Question Domain Satisfied % vs Goal% Satisfied % Goal % State Avg Quality and Appropriateness 95% 80% 93% Overall 94% 80% 91% Respect 93% 80% 91% Participation in Treatment 92% 93% 80% General Satisfaction 90% 80% 92% Access 90% 80% 88% Recovery 86% 80% 79% Outcome 83% 80% 83% ✓ Goal Met Satisfied % Goal % 0-80% 80-100% Under Goal

Client Demographics



Case Management (Waterbury)

Wellmore

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)

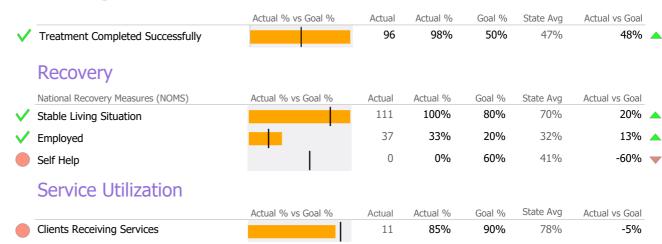
Program Activity

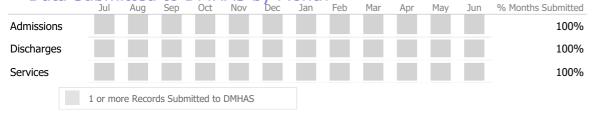
| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 110 | 89 | 24% | • |
| Admits | 94 | 80 | 18% | • |
| Discharges | 98 | 73 | 34% | • |
| Service Hours | 252 | 93 | 171% | • |

Data Submission Quality

| Data Entry | A | ctual | State Avg |
|-------------------|---|--------|-----------|
| ✓ Valid NOMS Data | | 100% | 95% |
| On-Time Periodic | | Actual | State Avg |
| 6 Month Updates | | 0% | 28% |

Discharge Outcomes







^{*} State Avg based on 8 Active Standard Case Management 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 | 24 | 26 | -8% |
| Admits | 23 | 23 | 0% |
| Discharges | 22 | 24 | -8% |
| Bed Days | 1,009 | 971 | 4% |

Discharge Outcomes



| | Ju | | Sep | | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|-----------|------|-----------|---------|------------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admission | S | | | | | | | | | | | | 100% |
| Discharge | 5 | | | | | | | | | | | | 92% |
| | 1 or | more Reco | rds Sub | omitted to | DMHAS | 5 | | | | | | | |



^{*} State Avg based on 12 Active Recovery House Programs

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)

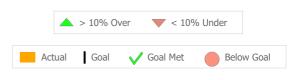
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 78 | 53 | 47% | • |
| Admits | 72 | 54 | 33% | • |
| Discharges | 72 | 55 | 31% | • |
| Bed Days | 2,501 | 1,710 | 46% | • |

Discharge Outcomes



| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|--------|------------|---------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |
| | 1 or m | nore Recor | ds Subi | mitted to | DMHAS | 5 | | | | | | | |



^{*} State Avg based on 12 Active Recovery House Programs

Other - Other - Integrated Primary Care

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

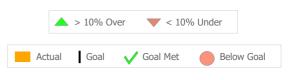
| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 250 | 242 | 3% | |
| Admits | 144 | 110 | 31% | • |
| Discharges | 101 | 131 | -23% | • |
| Service Hours | 131 | 148 | -11% | • |

Data Submission Quality

| | Data Entr | Actual | State Avg |
|--|-----------|--------|-----------|
|--|-----------|--------|-----------|



| | | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|-----------|---|---------|----------|----------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admission | S | | | | | | | | | | | | | 100% |
| Discharge | S | | | | | | | | | | | | | 100% |
| Services | | | | | | | | | | | | | | 100% |
| | | 1 or mo | ore Reco | rds Subn | nitted to | DMHAS | | | | | | | | |



^{*} State Avg based on 5 Active Integrated Primary Care Programs

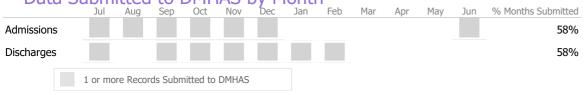
Reporting Period: July 2023 - June 2024 (Data as of Sep 10, 2024)

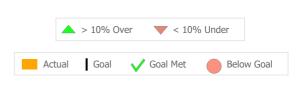
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 28 | 71 | -61% | • |
| Admits | 20 | 56 | -64% | • |
| Discharges | 25 | 65 | -62% | • |
| Bed Days | 1,780 | 4,369 | -59% | • |

Discharge Outcomes







^{*} State Avg based on 12 Active Recovery House Programs

Post-Release Transitional Forensic Case Management

Wellmore

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)

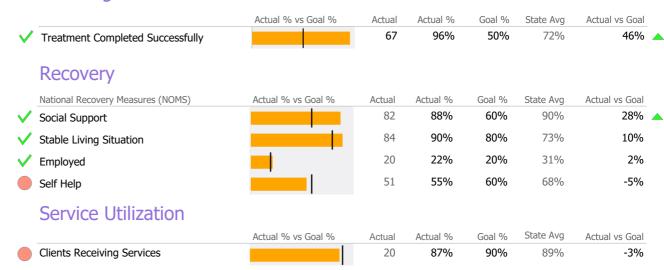
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 91 | 55 | 65% | • |
| Admits | 91 | 50 | 82% | • |
| Discharges | 70 | 53 | 32% | • |
| Service Hours | 245 | 88 | 179% | • |

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







^{*} State Avg based on 8 Active Standard Case Management Programs

Pre-Release Transitional Forensic Case Management

Wellmore

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)

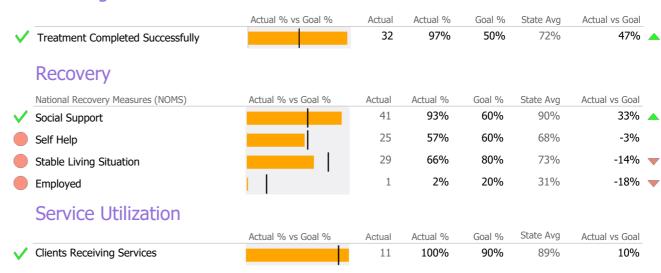
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 44 | 24 | 83% | • |
| Admits | 39 | 22 | 77% | • |
| Discharges | 33 | 20 | 65% | • |
| Service Hours | 167 | 74 | 127% | • |

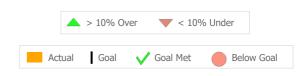
Data Submission Quality

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

Discharge Outcomes







^{*} State Avg based on 8 Active Standard Case Management Programs

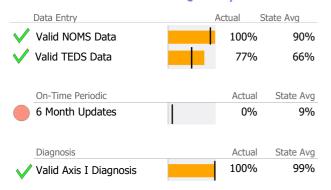
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2023 - June 2024 (Data as of Sep 10, 2024)

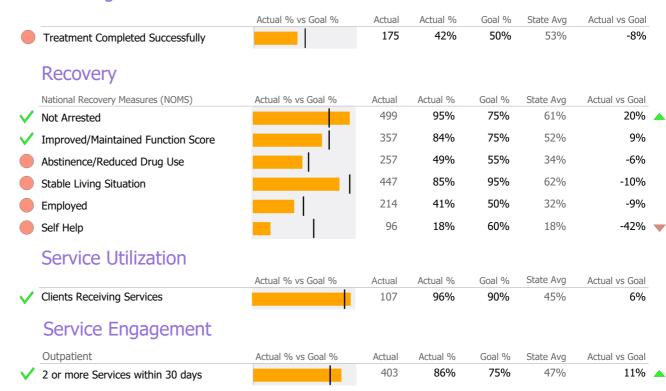
Program Activity

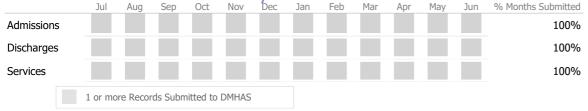
| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 490 | 481 | 2% | |
| Admits | 492 | 486 | 1% | |
| Discharges | 412 | 489 | -16% | • |
| Service Hours | 2,314 | 1,955 | 18% | • |

Data Submission Quality



Discharge Outcomes







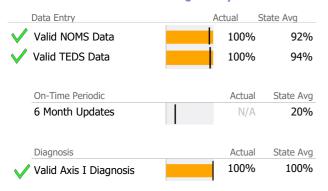
^{*} State Avg based on 104 Active Standard Outpatient Programs

Reporting Period: July 2023 - June 2024 (Data as of Sep 10, 2024)

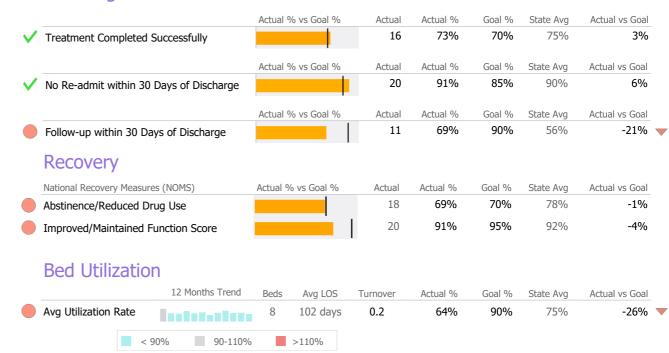
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|----------------|
| Unique Clients | 26 | 43 | -40% | \blacksquare |
| Admits | 21 | 40 | -48% | • |
| Discharges | 22 | 39 | -44% | • |
| Bed Days | 1,882 | 1,499 | 26% | • |

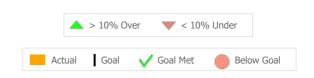
Data Submission Quality



Discharge Outcomes



| | Jul | | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|--------|-----------|----------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | | | | 83% |
| Discharges | | | | | | | | | | | | | 92% |
| | 1 or r | more Reco | rds Subr | nitted to | DMHAS | 5 | | | | | | | |



^{*} State Avg based on 19 Active Intermediate/Long Term Res.Tx 3.5 Programs