**BH Care**
North Haven, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2025 -September 2025   (Data as of Dec 16, 2025)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 2,591 | 2,485 | 4% | |
| | Admits | 525 | 533 | -2% | |
| | Discharges | 479 | 501 | -4% | |
| | Service Hours | 12,225 | 11,633 | 5% | |
| | Bed Days | 3,864 | 5,801 | -33% | ▼ |
| | S.Rehab/PHP/IOP | 2,186 | 1,938 | 13% | ▲ |

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

## Consumer Satisfaction Survey   (Based on 282 FY25 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Participation in Treatment | | 93% | 80% | 92% |
| ✓ | Access | | 93% | 80% | 88% |
| ✓ | Overall | | 93% | 80% | 91% |
| ✓ | General Satisfaction | | 93% | 80% | 92% |
| ✓ | Respect | | 93% | 80% | 91% |
| ✓ | Quality and Appropriateness | | 92% | 80% | 93% |
| ● | Outcome | | 75% | 80% | 83% |

Satisfied %   | Goal %   ▨ 0-80%   ▨ 80-100%   ✓ Goal Met   ● Under Goal

## Clients by Level of Care

| Program Type / Level of Care Type | # | % |
|---|---|---|
| **Mental Health** | | |
| Outpatient | 2,171 | 63.6% |
| Community Support | 270 | 7.9% |
| Case Management | 199 | 5.8% |
| Social Rehabilitation | 154 | 4.5% |
| Employment Services | 87 | 2.5% |
| ICS | 61 | 1.8% |
| Residential Services | 43 | 1.3% |
| **Addiction** | | |
| Outpatient | 99 | 2.9% |
| Medication Assisted Treatment | 67 | 2.0% |
| Employment Services | 20 | 0.6% |
| **Forensic MH** | | |
| Forensics Community-based | 149 | 4.4% |
| **Other** | | |
| Other | 92 | 2.7% |

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 315 | 12% | 9% |
| 26-34 | 399 | 15% | 18% |
| 35-44 | 466 | 18% | 25% |
| 45-54 | 436 | 17% | 18% |
| 55-64 | 557 | 21% | 19% |
| 65+ | 425 | 16% | 11% |

### Gender

| | # | % | State Avg |
|---|---|---|---|
| Female | 1,322 | 51% | 41% |
| Male | 1,279 | 49% | 58% |
| Transgender/Other | 3 | 0% | 0% |

### Race

| | # | | % | State Avg |
|---|---|---|---|---|
| White/Caucasian | 2,013 | ▲ | 77% | 59% |
| Black/African American | 301 | | 12% | 17% |
| Other | 166 | | 6% | 12% |
| Unknown | 56 | | 2% | 8% |
| Asian | 34 | | 1% | 1% |
| Am. Indian/Native Alaskan | 17 | | 1% | 1% |
| Multiple Races | 13 | | 0% | 1% |
| Hawaiian/Other Pacific Islander | 4 | | 0% | 0% |

### Ethnicity

| | # | | % | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 2,072 | ▲ | 80% | 64% |
| Hispanic-Other | 224 | | 9% | 12% |
| Hisp-Puerto Rican | 182 | | 7% | 10% |
| Unknown | 108 | | 4% | 13% |
| Hispanic-Mexican | 14 | | 1% | 1% |
| Hispanic-Cuban | 4 | | 0% | 0% |

Unique Clients   | State Avg   ▲ > 10% Over State Avg   ▼ > 10% Under State Avg

**Bettor Choice Shorline**
BH Care
Addiction - Outpatient - Gambling Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 17 | 8 | 113% | ▲ |
| Admits | 4 | - | | |
| Discharges | 2 | 1 | 100% | ▲ |
| Service Hours | 61 | 24 | 158% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 0 | 0% | 75% | 60% | -75% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 13 | 100% | 90% | 88% | 10% |

## Service Engagement

| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | 2 or more Services within 30 days | | 2 | 50% | 75% | 68% | -25% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 80% | 94% |
| Valid TEDS Data | | 50% | 25% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 57% | 70% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 99% |
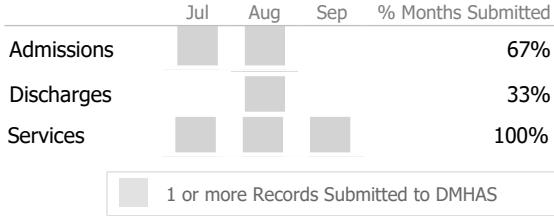
## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 33% |
| 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 Gambling Outpatient Programs

**Bettor Choice Valley**
BH Care
Addiction - Outpatient - Gambling Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 1 | 4 | -75% | ▼ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | - | - | | |
| Service Hours | 1 | 6 | -85% | ▼ |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 75% | 60% | N/A |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 1 | 100% | 90% | 88% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | N/A | N/A | 75% | 68% | N/A ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 94% |
| Valid TEDS Data | | N/A | 25% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 0% | 70% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 99% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | | | | 67% |

1 or more Records Submitted to DMHAS

▲ > 10% Over        ▼ < 10% Under

■ Actual        | Goal        ✓ Goal Met        ● Below Goal

* State Avg based on 8 Active Gambling Outpatient Programs

**BH Care Rental Assistance CT 0062**
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 31 | 30 | 3% |
| Admits | 3 | - | |
| Discharges | 1 | 1 | 0% |
| Service Hours | 138 | 28 | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 27 | 87% | 85% | 85% | 2% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 28 | 100% | 90% | 96% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 100% | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 100% | 81% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| Discharges | | | | 33% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

Actual | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 120 Active Supportive Housing – Scattered Site Programs

**BHcare Voc Services DMHAS Valley**
BH Care
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 41 | 48 | -15% | ▼ |
| Admits | 5 | 12 | -58% | ▼ |
| Discharges | 3 | 5 | -40% | ▼ |
| Service Hours | 119 | 136 | -12% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Employed | | 18 | 44% | 35% | 42% | 9% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 35 | 97% | 90% | 98% | 7% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 99% | 91% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 89% | 96% |

## Data Submitted to DMHAS for Month
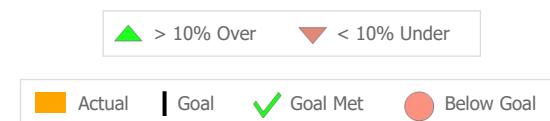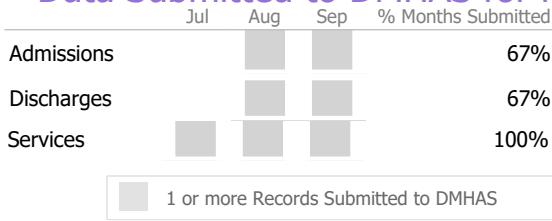
| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | ▓ | ▓ | 67% |
| Discharges | | ▓ | ▓ | 67% |
| Services | | ▓ | ▓ | 100% |

▓ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

🟧 Actual     | Goal     ✓ Goal Met     🔴 Below Goal

* State Avg based on 36 Active Employment Services Programs

**BHH ADULT NAE**
BH Care
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 59 | 67 | -12% | ▼ |
| Admits | 7 | 14 | -50% | ▼ |
| Discharges | 7 | 8 | -13% | ▼ |
| Service Hours | 41 | 55 | -24% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 92% | 89% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 7% | 50% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 98% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 1 | 14% | 50% | 45% | -36% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Social Support | | 26 | 44% | 60% | 55% | -16% | ▼ |
| ● | Employed | | 7 | 12% | 30% | 28% | -18% | ▼ |
| ● | Improved/Maintained Function Score | | 22 | 43% | 75% | 34% | -32% | ▼ |
| ● | Stable Living Situation | | 23 | 39% | 95% | 69% | -56% | ▼ |
| | Self Help | | 0 | 0% | N/A | 21% | N/A | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 51 | 98% | 90% | 88% | 8% |

## Service Engagement

| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | 2 or more Services within 30 days | | 2 | 29% | 75% | 75% | -46% | ▼ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | ▢ | 67% |
| 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 76 Active Standard Outpatient Programs

**Harbor House Group Residence**
BH Care
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025 (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 7 | 8 | -13% | ▼ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | - | 1 | -100% | ▼ |
| Bed Days | 644 | 628 | 3% | |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 100% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 0% | 81% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 80% | 93% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 100% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 79% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 7 | 100% | 60% | 85% | 40% ▲ |
| ✓ Stable Living Situation | | 7 | 100% | 90% | 99% | 10% |
| ● Improved/Maintained Function Score | | 6 | 86% | 95% | 50% | -9% |
| Self Help | | 1 | 14% | N/A | 63% | N/A |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 8 | 2,947 days | 1.1 | 88% | 90% | 88% | -2% |

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

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |

| 1 or more Records Submitted to DMHAS |
|---|

▲ > 10% Over    ▼ < 10% Under

| ■ Actual | │ Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on 22 Active Group Home Programs

**HARP Supervised Apts**
BH Care
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 22 | 21 | 5% | |
| Admits | 1 | - | | |
| Discharges | - | - | | |
| Service Hours | 228 | 162 | 41% | ▲ |
| Bed Days | 2,002 | 3,885 | -48% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 99% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 100% | 95% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 100% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 60% | N/A |

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 83% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 19 | 86% | 60% | 86% | 26% | ▲ |
| ✓ Stable Living Situation | | 22 | 100% | 95% | 95% | 5% | |
| 🔴 Employed | | 3 | 14% | 25% | 16% | -11% | ▼ |
| 🔴 Improved/Maintained Function Score | | 14 | 70% | 95% | 54% | -25% | ▼ |
| Self Help | | 0 | 0% | N/A | 58% | N/A | |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 22 | 2,203 days | 1.0 | 99% | 90% | 91% | 9% |

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

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| Discharges | | | | 0% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual  | Goal  ✓ Goal Met  🔴 Below Goal

* State Avg based on 63 Active Supervised Apartments Programs

**HERO - Region 2**
BH Care
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

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

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 65% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 70% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Employed | | N/A | N/A | 20% | 12% | -20% ▼ |
| Self Help | | N/A | N/A | N/A | 35% | N/A |
| ● Social Support | | N/A | N/A | 60% | 66% | -60% ▼ |
| ● Stable Living Situation | | N/A | N/A | 80% | 71% | -80% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | N/A | N/A | 90% | 80% | N/A ▼ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 22 Active Standard Case Management Programs

**Homeless to Housing Services**
BH Care
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 107 | 61 | 75% | ▲ |
| Admits | 38 | 23 | 65% | ▲ |
| Discharges | 26 | 20 | 30% | ▲ |
| Service Hours | 109 | 50 | 118% | ▲ |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ at least 1 Service within 180 days | | 36 | 95% | 50% | 92% | 45% | ▲ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | 100% |

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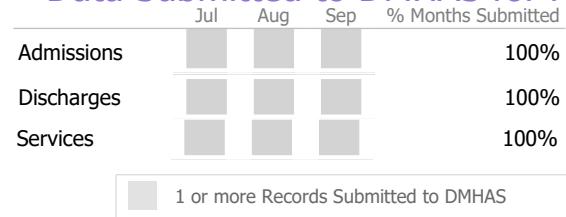
▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 53 Active Outreach & Engagement Programs

**HUD BOS 134**
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 16 | 15 | 7% |
| Admits | - | - | |
| Discharges | 1 | 1 | 0% |
| Service Hours | 74 | 22 | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 16 | 100% | 85% | 85% | 15% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 16 | 100% | 90% | 96% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 100% | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 100% | 81% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 33% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual  | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 120 Active Supportive Housing – Scattered Site Programs

**HUD BOS 193**
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 19 | 17 | 12% | ▲ |
| Admits | 1 | - | | |
| Discharges | 1 | - | | |
| Service Hours | 79 | 16 | | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Stable Living Situation | | 16 | 84% | 85% | 85% | -1% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 18 | 100% | 90% | 96% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 100% | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 100% | 81% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| Discharges | | | | 33% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual   │ Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 120 Active Supportive Housing – Scattered Site Programs

**Integrated Behavioral Health - Shoreline**
BH Care
Other - Other - Integrated Primary Care

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025   (Data as of Dec 16, 2025)
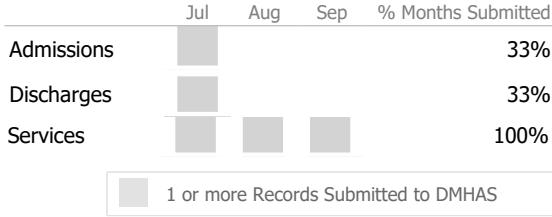
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 75 | 80 | -6% | |
| Admits | 6 | 7 | -14% | ▼ |
| Discharges | 7 | 7 | 0% | |
| Service Hours | 21 | 19 | 12% | ▲ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % 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 5 Active Integrated Primary Care Programs

**Integrated Behavioral Health - Valley**

BH Care

Other - Other - Integrated Primary Care

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)
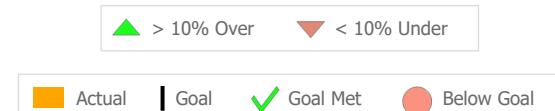
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 17 | 37 | -54% | ▼ |
| Admits | - | - | | |
| Discharges | - | 1 | -100% | ▼ |
| Service Hours | - | 3 | -100% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 87% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 5 Active Integrated Primary Care Programs

**Options SR**
BH Care
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 55 | 38 | 45% | ▲ |
| Admits | 7 | 2 | 250% | ▲ |
| Discharges | 8 | 1 | 700% | ▲ |
| Service Hours | 4 | 4 | -6% | |
| Social Rehab/PHP/IOP Days | 638 | 446 | 43% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 42 | 86% | 90% | 83% | -4% |

## Data Submitted to DMHAS for Month
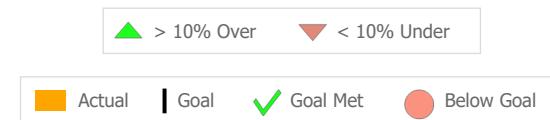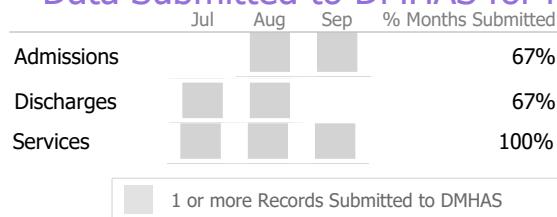
| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | ▪ | ▪ | 67% |
| Discharges | ▪ | ▪ | | 67% |
| Services | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

**Options Vocational Program**
BH Care
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 46 | 50 | -8% | |
| Admits | 16 | 6 | 167% | ▲ |
| Discharges | 7 | 6 | 17% | ▲ |
| Service Hours | 147 | 165 | -11% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Employed | | 20 | 43% | 35% | 42% | 8% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 30 | 100% | 90% | 98% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 63% | 91% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 75% | 96% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % 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 36 Active Employment Services Programs

**Shoreline Crisis-Jail Div 304-341**
BH Care
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 85 | 103 | -17% | ▼ |
| Admits | 32 | 42 | -24% | ▼ |
| Discharges | 37 | 48 | -23% | ▼ |
| Service Hours | 135 | 179 | -25% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 55 | 100% | 90% | 87% | 10% |

## Jail Diversion

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Follow-up Service within 48 hours | | 9 | 60% | 0% | 71% | 60% ▲ |

## Data Submitted to DMHAS for Month
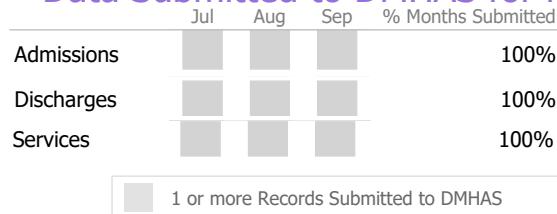
| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

**Shoreline HHS CSP/RP 373X**
BH Care
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 139 | 150 | -7% | |
| Admits | 18 | 27 | -33% | ▼ |
| Discharges | 20 | 34 | -41% | ▼ |
| Service Hours | 557 | 422 | 32% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 86% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 75% | 90% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 99% | 100% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 6 | 30% | 65% | 54% | -35% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 127 | 91% | 60% | 81% | 31% | ▲ |
| ✓ Employed | | 39 | 28% | 20% | 20% | 8% | |
| ✓ Improved/Maintained Function Score | | 97 | 94% | 65% | 58% | 29% | ▲ |
| ✓ Stable Living Situation | | 116 | 83% | 80% | 90% | 3% | |
| Self Help | | 14 | 10% | N/A | 45% | N/A | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 119 | 98% | 90% | 98% | 8% |

## Data Submitted to DMHAS for Month
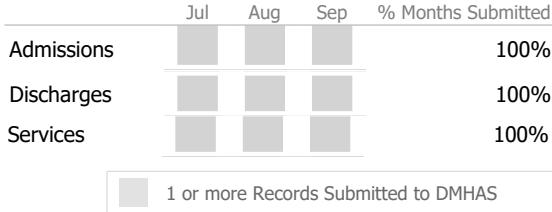
| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| 🟧 Actual | | Goal | ✓ Goal Met | 🔴 Below Goal |

\* State Avg based on 33 Active CSP Programs

**Shoreline N Haven OP 370-210**
BH Care
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 99 | 86 | 15% | ▲ |
| Admits | 3 | 2 | 50% | ▲ |
| Discharges | 2 | 2 | 0% | |
| Service Hours | 382 | 316 | 21% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 100% | 89% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 99% | 50% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 98% |
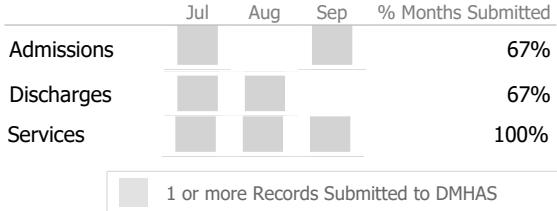
## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 0 | 0% | 50% | 45% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 97 | 98% | 60% | 55% | 38% | ▲ |
| ✓ | Employed | | 57 | 58% | 30% | 28% | 28% | ▲ |
| ✓ | Stable Living Situation | | 98 | 99% | 95% | 69% | 4% | |
| | Self Help | | 0 | 0% | N/A | 21% | N/A | |
| 🔴 | Improved/Maintained Function Score | | 0 | 0% | 75% | 34% | -75% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 93 | 97% | 90% | 88% | 7% | |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 3 | 100% | 75% | 75% | 25% | ▲ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 67% |
| Services | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| 🟧 Actual | ❘ Goal | ✓ Goal Met | 🔴 Below Goal |

\* State Avg based on 76 Active Standard Outpatient Programs

**Shoreline PILOTS & Next Steps**
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 6 | 6 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 13 | 4 | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 6 | 100% | 85% | 85% | 15% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 6 | 100% | 90% | 96% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 100% | 81% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

◼ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 120 Active Supportive Housing – Scattered Site Programs

**Shoreline SA Clinic 304725**
BH Care
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 81 | 68 | 19% | ▲ |
| Admits | 25 | 32 | -22% | ▼ |
| Discharges | 17 | 24 | -29% | ▼ |
| Service Hours | 230 | 195 | 18% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 86% | 92% |
| Valid TEDS Data | | 80% | 47% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 27% | 7% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 98% | 99% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 8 | 47% | 50% | 54% | -3% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| | Social Support | | 64 | 78% | N/A | 28% | N/A |
| ✅ | Employed | | 42 | 51% | 50% | 20% | 1% |
| 🔴 | Stable Living Situation | | 75 | 91% | 95% | 36% | -4% |
| 🔴 | Not Arrested | | 52 | 63% | 75% | 37% | -12% ▼ |
| 🔴 | Abstinence/Reduced Drug Use | | 35 | 43% | 55% | 19% | -12% ▼ |
| 🔴 | Self Help | | 31 | 38% | 60% | 11% | -22% ▼ |
| ✅ | Improved/Maintained Function Score | | 40 | 95% | 75% | 16% | 20% ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✅ | Clients Receiving Services | | 55 | 96% | 90% | 50% | 6% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✅ | 2 or more Services within 30 days | | 23 | 92% | 75% | 63% | 17% ▲ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | 100% |

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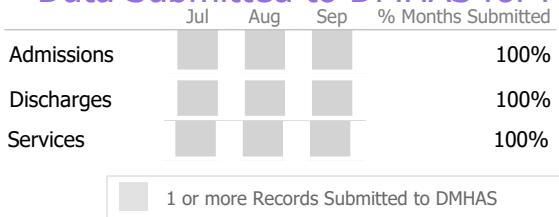
▲ > 10% Over   ▼ < 10% Under

🟧 Actual   | Goal   ✅ Goal Met   🔴 Below Goal

* State Avg based on 107 Active Standard Outpatient Programs

**Shoreline Sycamore Way -OP Clin 304-211**
BH Care
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 1,145 | 1,028 | 11% | ▲ |
| Admits | 205 | 168 | 22% | ▲ |
| Discharges | 176 | 158 | 11% | ▲ |
| Service Hours | 4,140 | 3,480 | 19% | ▲ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 88% | 89% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 35% | 50% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 99% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 100 | 57% | 50% | 45% | 7% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 459 | 39% | 30% | 28% | 9% | |
| ✓ Social Support | | 746 | 64% | 60% | 55% | 4% | |
| ✓ Improved/Maintained Function Score | | 845 | 90% | 75% | 34% | 15% | ▲ |
| ● Stable Living Situation | | 886 | 76% | 95% | 69% | -19% | ▼ |
| Self Help | | 180 | 15% | N/A | 21% | N/A | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 954 | 99% | 90% | 88% | 9% | |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 198 | 99% | 75% | 75% | 24% | ▲ |

## Data Submitted to DMHAS for Month
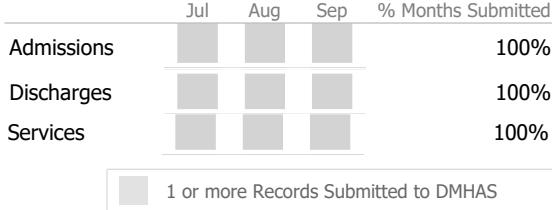
| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| Actual | Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on 76 Active Standard Outpatient Programs

**SOR - Employment**
BH Care
Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 20 | 22 | -9% | |
| Admits | 4 | 3 | 33% | ▲ |
| Discharges | 1 | 19 | -95% | ▼ |
| Service Hours | 34 | 4 | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | ▬ | 100% | 91% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | ▬ | 100% | 60% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Employed | | 1 | 5% | 35% | 29% | -30% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 14 | 88% | 90% | 88% | -2% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 33% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual  | Goal  ✔ Goal Met  ● Below Goal

* State Avg based on 10 Active Employment Services Programs

**SOR E-MAT**
BH Care
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 67 | 72 | -7% | |
| Admits | 9 | 9 | 0% | |
| Discharges | 6 | 12 | -50% | ▼ |
| Service Hours | 161 | 226 | -29% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 96% | 96% |
| Valid TEDS Data | | 95% | 74% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 98% | 79% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 99% | 99% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 2 | 33% | 50% | 43% | -17% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| Social Support | | 66 | 99% | N/A | 77% | N/A | |
| ✓ Abstinence/Reduced Drug Use | | 56 | 84% | 55% | 67% | 29% | ▲ |
| ✓ Not Arrested | | 61 | 91% | 75% | 86% | 16% | ▲ |
| ✓ Employed | | 44 | 66% | 50% | 42% | 16% | ▲ |
| ✓ Self Help | | 49 | 73% | 60% | 50% | 13% | ▲ |
| ✓ Stable Living Situation | | 67 | 100% | 95% | 83% | 5% | |
| ✓ Improved/Maintained Function Score | | 53 | 96% | 75% | 28% | 21% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 57 | 98% | 90% | 85% | 8% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 67% |
| Services | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal
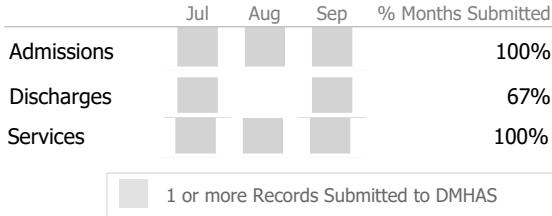
* State Avg based on 21 Active Buprenorphine Maintenance Programs

**SOR-MAT-Naltrexone**
BH Care
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

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

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 100% |
| Valid TEDS Data | | N/A | 80% |

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 0% | 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% | 16% | -55% ▼ |
| Employed | | N/A | N/A | 50% | 19% | -50% ▼ |
| Improved/Maintained Function Score | | N/A | N/A | 75% | 0% | -75% ▼ |
| Not Arrested | | N/A | N/A | 75% | 31% | -75% ▼ |
| Self Help | | N/A | N/A | 60% | 19% | -60% ▼ |
| Social Support | | N/A | N/A | N/A | 25% | N/A |
| Stable Living Situation | | N/A | N/A | 95% | 34% | -95% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Clients Receiving Services | | N/A | N/A | 90% | 28% | N/A ▼ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 8 Active Naltrexone Programs

**Valley ABI Residence311165**
BH Care
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 3 | 3 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Bed Days | 276 | 276 | 0% |

## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| Valid NOMS Data | N/A | 100% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| 6 Month Updates | 100% | 81% |

| Diagnosis | Actual | State Avg |
|---|---|---|
| Valid MH/SU Diagnosis | 100% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 80% | 93% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 100% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 79% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 3 | 100% | 90% | 99% | 10% |
| ✓ Social Support | | 2 | 67% | 60% | 85% | 7% |
| Self Help | | 0 | 0% | N/A | 63% | N/A |
| ● Improved/Maintained Function Score | | 1 | 33% | 95% | 50% | -62% ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 3 | 5,596 days | 1.0 | 100% | 90% | 88% | 10% |

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

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |

| | 1 or more Records Submitted to DMHAS |
|---|---|

▲ > 10% Over      ▼ < 10% Under

| ▨ Actual | | Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|---|

\* State Avg based on 22 Active Group Home Programs

**Valley CSP/RP 311350**
BH Care
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 130 | 150 | -13% | ▼ |
| Admits | 3 | 10 | -70% | ▼ |
| Discharges | 10 | 14 | -29% | ▼ |
| Service Hours | 951 | 1,011 | -6% | |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 99% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 88% | 90% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 99% | 100% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 8 | 80% | 65% | 54% | 15% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 116 | 89% | 60% | 81% | 29% | ▲ |
| ✓ | Improved/Maintained Function Score | | 119 | 95% | 65% | 58% | 30% | ▲ |
| ✓ | Stable Living Situation | | 127 | 97% | 80% | 90% | 17% | ▲ |
| ✓ | Employed | | 28 | 21% | 20% | 20% | 1% | |
| | Self Help | | 9 | 7% | N/A | 45% | N/A | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 128 | 100% | 90% | 98% | 10% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | | 67% |
| 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 33 Active CSP Programs

**Valley Howe Ave. Res. Apts.311-250X**
BH Care
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 5 | 5 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Bed Days | 460 | 460 | 0% |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 100% | 95% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 100% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 60% | N/A |

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 83% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 4 | 80% | 60% | 86% | 20% ▲ |
| ✓ Stable Living Situation | | 5 | 100% | 95% | 95% | 5% |
| ✓ Improved/Maintained Function Score | | 4 | 100% | 95% | 54% | 5% |
| 🔴 Employed | | 0 | 0% | 25% | 16% | -25% ▼ |
| Self Help | | 0 | 0% | N/A | 58% | N/A |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 5 | 2,699 days | 1.0 | 100% | 90% | 91% | 10% |

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

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual | Goal  ✓ Goal Met  🔴 Below Goal

\* State Avg based on 63 Active Supervised Apartments Programs

**Valley Jail Diversion 311-341**
BH Care
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 64 | 57 | 12% | ▲ |
| Admits | 9 | 13 | -31% | ▼ |
| Discharges | 21 | 4 | 425% | ▲ |
| Service Hours | 30 | 79 | -62% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Clients Receiving Services | | 48 | 86% | 90% | 87% | -4% | |

## Jail Diversion

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Follow-up Service within 48 hours | | 4 | 80% | 0% | 71% | 80% | ▲ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % 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 19 Active Court Liaison-Jail Diversion Programs

**Valley Next Steps II**
BH Care
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 17 | 17 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 88 | 36 | 143% ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 16 | 94% | 85% | 86% | 9% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 17 | 100% | 90% | 94% | 10% |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 100% | 83% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 69 Active Supportive Housing – Development Programs

**Valley OP Clinic 311210**
BH Care
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025 (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 872 | 925 | -6% |
| Admits | 112 | 123 | -9% |
| Discharges | 101 | 111 | -9% |
| Service Hours | 3,444 | 4,045 | -15% ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 98% | 89% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 27% | 50% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 56 | 55% | 50% | 45% | 5% |

## Recovery

National Recovery Measures (NOMS)

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 635 | 72% | 60% | 55% | 12% ▲ |
| ✓ Employed | | 320 | 36% | 30% | 28% | 6% |
| ✓ Improved/Maintained Function Score | | 696 | 96% | 75% | 34% | 21% ▲ |
| ● Stable Living Situation | | 673 | 76% | 95% | 69% | -19% ▼ |
| Self Help | | 112 | 13% | N/A | 21% | N/A |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 767 | 100% | 90% | 88% | 10% |

## Service Engagement

Outpatient

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 108 | 96% | 75% | 75% | 21% ▲ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % 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 76 Active Standard Outpatient Programs

**Valley PILOTS & Next Steps**
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 4 | 5 | -20% ▼ |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 29 | 4 | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 4 | 100% | 85% | 85% | 15% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 4 | 100% | 90% | 96% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 100% | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 100% | 81% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

▬ Actual  |  Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 120 Active Supportive Housing – Scattered Site Programs

**Valley Social Rehabilitation 311-280**
BH Care
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025 (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 97 | 122 | -20% | ▼ |
| Admits | 3 | 24 | -88% | ▼ |
| Discharges | 12 | 19 | -37% | ▼ |
| Service Hours | - | 4 | -100% | ▼ |
| Social Rehab/PHP/IOP Days | 1,548 | 1,492 | 4% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | ▭ | 90 | 95% | 90% | 83% | 5% |

## Data Submitted to DMHAS for Month
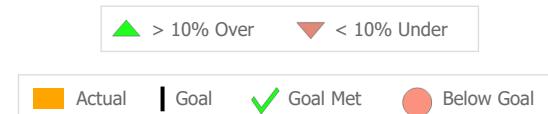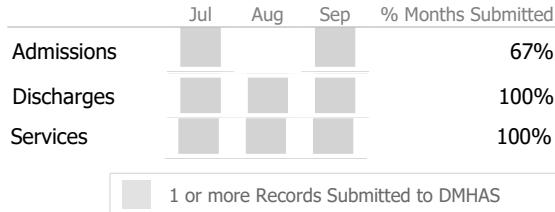
| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▭ | | ▭ | 67% |
| Discharges | ▭ | ▭ | ▭ | 100% |
| Services | ▭ | ▭ | ▭ | 100% |

▭ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

▭ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

**Valley Young Adults 311-220Y**
BH Care
Mental Health - ICS - Intensive Community Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 37 | 33 | 12% | ▲ |
| Admits | 5 | 6 | -17% | ▼ |
| Discharges | 10 | 1 | 900% | ▲ |
| Service Hours | 583 | 578 | 1% | |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 100% | 88% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 94% | 86% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 97% | 99% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 7 | 70% | 60% | 47% | 10% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 35 | 95% | 60% | 82% | 35% | ▲ |
| ✓ Stable Living Situation | | 34 | 92% | 60% | 91% | 32% | ▲ |
| ✓ Employed | | 14 | 38% | 30% | 34% | 8% | |
| ✓ Improved/Maintained Function Score | | 26 | 100% | 75% | 49% | 25% | ▲ |
| Self Help | | 1 | 3% | N/A | 73% | N/A | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 30 | 94% | 90% | 98% | 4% |

## Data Submitted to DMHAS for Month
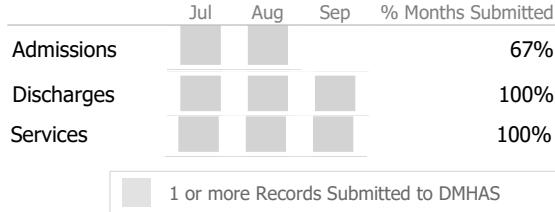
| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▪ | ▪ | | 67% |
| Discharges | ▪ | ▪ | ▪ | 100% |
| Services | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| Actual | Goal | ✓ Goal Met | ● Below Goal |

* State Avg based on 19 Active Intensive Community Services Programs

**YAS Transitional Housing Program**
BH Care
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 6 | 6 | 0% |
| Admits | 2 | - | |
| Discharges | - | - | |
| Bed Days | 482 | 552 | -13% ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 100% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 100% | 95% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 100% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 60% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 83% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 5 | 83% | 60% | 86% | 23% ▲ |
| ✓ Stable Living Situation | | 6 | 100% | 95% | 95% | 5% |
| ● Employed | | 0 | 0% | 25% | 16% | -25% ▼ |
| Self Help | | 0 | 0% | N/A | 58% | N/A |
| ✓ Improved/Maintained Function Score | | 1 | 100% | 95% | 54% | 5% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 6 | 243 days | 1.0 | 87% | 90% | 91% | -3% |

■ < 90%    ■ 90-110%    ■ >110%

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 0% |

| | 1 or more Records Submitted to DMHAS |
|---|---|

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 63 Active Supervised Apartments Programs

**Young Adults Shoreline - 556**
BH Care
Mental Health - ICS - Intensive Community Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 16, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 24 | 16 | 50% | ▲ |
| Admits | 7 | 5 | 40% | ▲ |
| Discharges | 3 | - | | |
| Service Hours | 428 | 349 | 23% | ▲ |

## Data Submission Quality

| Data Entry | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 100% | 88% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 79% | 86% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 99% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 2 | 67% | 60% | 47% | 7% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 24 | 100% | 60% | 91% | 40% | ▲ |
| ✓ | Social Support | | 23 | 96% | 60% | 82% | 36% | ▲ |
| 🔴 | Employed | | 7 | 29% | 30% | 34% | -1% | |
| ✓ | Improved/Maintained Function Score | | 17 | 100% | 75% | 49% | 25% | ▲ |
| | Self Help | | 0 | 0% | N/A | 73% | N/A | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 16 | 94% | 90% | 98% | 4% | |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 67% |
| 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 Intensive Community Services Programs