

Quality Directors' Meeting Agenda

Tuesday, April 28th at 3PM

Via Teams link

Thursday, April 30th 9AM

Via Teams link

EQMI Data Quality

- Meetings will be recorded for minutes, then deleted
- Functional Assessments – DLA-20 trainings- reach out to Elizabeth.Feder@ct.gov Standing item for staff needing DLA 20 basic training reach out to Liz Feder or Meagan McGuire. If staff is interested in the train-the-trainer series, they need to have this basic DLA training first. Offered monthly rotating between Monday, Wednesday and Friday. If you have a large group at your agency, EQMI can do an individualized training in person or virtually.
 - Only staff who have successfully completed the training can administer DLA
 - Ensure staff have Certificate of Completion Only staff who have received a formal Certificate of Completion can complete the assessment. Make sure staff submit their certificate as there has been limited follow up from participants who did not pass the initial phase of the training
 - Must use anchors, not just EHR descriptions People completing the assessment must use the anchors; if they do not have anchors or are confused by the reference, please refer them back to Liz or Meagan
 - Updated materials available – reach out to Liz or Meagan
 - Individual agency training – 10 or more folx
- *Data Corrections – EQMI:*
 - Wei (A-K) – Wei.Wei@ct.gov
 - Jordon (L-Z) – Jordon.Vassell@ct.gov

Consumer Satisfaction

- FY26 Consumer Satisfaction materials are on EQMI website CSS close June 30th, 2026
 - [EQMI Website Consumer Survey](#)
 - Adding real time data CSS completion rates, totals due and other agency level information can be found on the website.
 - Contact Tricia.Lang@ct.gov or Kristen.Miller@ct.gov with questions or concerns
- Provider Alert sent
 - See [Provider Guidance document](#) for details including exceptions CSS Provider Alert was sent to all those noted to receive “Alerts” and/or communication related to CSS. If your agency or program is on the exceptions list, please disregard the Provider Alert or reach out to EQMI with questions/clarifications.

Quarterly Quality Dashboards

- Data due by 15th of the following month (ex. May 15th for April data)
- Dashboard metrics updates with Provider Alert to follow with Dashboard Guide: [Reviewed updates to the Quarterly Quality Dashboard metrics and review guide](#). A Provider Alert will be issued with the completed Guide and overview of updated metrics (noted below).
 - Data Submitted to DMHAS *for*Month metric changed so that data reported is associated with the date of the service rather than the date that the service was uploaded to DDaP
 - Discharge Outcomes

- Treatment Completed Successfully → null “Eval Only” and “Death”
 - Updated EDW report name, labels/descriptors metric will no longer count “Eval Only” and “Death” as a negative outcome. Report to be renamed and relabeled to “Discharge Outcomes” and align with the metric language
 - Recovery
 - Functional Score → 6 months metric logic looks for Functional Scores that are 6 months apart. EQMI recommends that the DLA is done in 6 month intervals but does not mandate this. Reorganizing metrics under “Recovery” heading
 - Remain under “Recovery” as separate item from NOMS measures
 - Self Help and Social Support → show for all Program Types but will only be scored for associated Program Type (ex. Self Help for Addictions; Social Support for MH)
 - Stable Living Situation → added to Dependent Living: #47 “Temporarily Housed (temporarily with friends/family sleeping on couch, no designated space of their own)”
 - Employed → updated NOMS Values report to clearly identify “Not in Labor Force”
 - Service Engagement
 - Homeless Outreach → 180 days does *not* include services on day of admission
 - Bed Utilization → removed turnover

Commented [MM1]: Update language

Commented [MM2R1]: UPDATED 4.9.26

File Upload

- New E.H.R./other issues- reach out to Meagan.McGuire@ct.gov If you have a new EHR or one in the works and concerns about file uploads or other data quality concerns, let us know and we can work with you all to troubleshoot file uploads and/or direct data entry to DDaP

Critical Incident Reporting

- Real time review of CI – may receive inquiries about updates or changes to CI reports EQMI working on real time review of Critical Incidents so your agency may receive questions about specific incidents that need clarification
 - Need contacts for CI reporting
- EDW: Critical Incident Overdue report Closures are due within 60 days of submission to DDaP. There is an Overdue Critical Incident EDW report that measures the 60 days from reported entry in DDaP rather than the reported incident date. Coordinate with SO LMHA or OOC contact to report, submit and close CI.
 - Wei and Jordon will be reaching out
 - Closures due in 60 days from report

Monthly Quality Directors Calls Schedule:

Tuesdays at 3:00 PM	Thursdays at 9:00 AM
May 26 th , 2026	May 28 th , 2026
June 23 rd , 2026	June 25 th , 2026

Monthly Training Schedule:

May 29th, 2026	9:30 – 11 a.m. Direct Data Entry	11-1 p.m. EDW Reports	2-3 p.m. CI
June 26th, 2026	9:30 – 11 a.m. Direct Data Entry	11-1 p.m. EDW Reports	2-3 p.m. CI

Monthly DLA-20 Training Schedule:

May 15th, 2026	Friday 8:30am-12:30pm	Meagan McGuire
June 17th, 2026	Wednesday 8:30am-12:30pm	Liz Feder

Click here to access our website: [EQMI - Home Page \(ct.gov\)](#)

Click here to access EQMI training calendar: [EQMI FY 2026 Training Calendar](#)
[EQMI FY 2027 Training Calendar](#)