

Quality Directors' Meeting Agenda

Tuesday, May 26th at 3PM

Via Teams link

Thursday, May 28th at 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
 - Due 6.30.2026 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

Quarterly Quality Dashboards

- Data due by 15th of the following month (ex. May 15th for April data)
- Dashboard Drafts sent out
 - Review and contact Meagan, Wei or Jordon with data corrections or concerns
Feedback, review and/or updates before planned finals 6/5/26
- Dashboard metrics updates with Provider Alert to follow with Dashboard Guide:
 - Discharge Outcomes
 - Treatment Completed Successfully → null “Eval Only” and “Death” 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
 - Remain under “Recovery” as separate item from NOMS measures 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.
- 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) metric logic and images updated; if the metric does not apply to the Program Type, then the benchmark will read “N/A” and there will not be an indicator (green circle or red check) next to the measure.
- Stable Living Situation → added to Dependent Living: #47 “Temporarily Housed (temporarily with friends/family sleeping on couch, no designated space of their own)” Metric calculation will remain the same on the dashboard. There will be an additional row for percentages related to employment that will parse out the percent of “Not In Labor Force” values (ex. SSI/SSDI; Homemaker; Retired, etc)
- Service Engagement
 - Homeless Outreach → 180 days does *not* include services on day of admission

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
 - Need contacts for CI reporting EQMI working on real time review of Critical Incidents so your agency may receive questions about specific incidents that need clarification
- 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
June 30th, 2026	June 25th, 2026
July 28th, 2026	July 30th, 2026

Monthly Training Schedule:

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

June 17th, 2026	Wednesday 8:30am-12:30pm	Liz Feder
July 13th, 2026	Monday 8:30am-12:30pm	Meagan McGuire

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](#)

Quality Dashboard Updates 2026

Discharge Outcomes

- Treatment Completed Successfully → null “Eval Only” and “Death”

Discharge Outcomes

(Data as of May 16, 2026)

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		3	100%	50%	53%	50% ▲

Recovery → functional score; alphabetical order; Self Help and Social Support

- Functional Score → 6 months
 - 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)

Program Type: Mental Health

Recovery

Function Score	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Improved/Maintained Function Score		17	30%	85%	49%	-55% ▼
National Recovery Measure (NOMS)						
✓ Employed		10	15%	15%	8%	0%
Self Help		27	41%	N/A	67%	N/A
✓ Social Support		54	82%	60%	71%	22% ▲
✓ Stable Living Situation		64	97%	60%	89%	37% ▲

Program Type: Addiction

Recovery


Function Score	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Improved/Maintained Function Score		12	19%	75%	36%	-56% ▼
National Recovery Measure (NOMS)						
✓ Abstinence/Reduced Drug Use		60	83%	55%	70%	28% ▲
✓ Employed		46	64%	50%	39%	14% ▲
✓ Not Arrested		70	97%	75%	88%	22% ▲
● Self Help		41	57%	60%	49%	-3%
Social Support		69	96%	N/A	81%	N/A
● Stable Living Situation		68	94%	95%	85%	-1%

Recovery cont'd → NOMS update

Periodic Assessment: Update to Living Situation

- Stable Living Situation → added to Dependent Living: #47 “Temporarily Housed (temporarily with friends/family sleeping on couch, no designated space of their own)”

Recovery

National Recovery Measure (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		15	71%	80%	71%	-9%

Living Situation

Private residence, client owns or holds lease.

- Private residence, client owns or holds lease.
- Private residence, friend or relative owns the residence or holds lease.
- Single Room Occupancy (Hotel, YMCA, Rooming House)
- Private residence, Community agency owns or holds lease.
- Residential Care Home/ Board and Care
- Congregate Residential Care (24-hour supervision, group setting)
- Respite Bed
- Skilled Nursing Facility/Intermediate Care Facility /Nursing Home
- Psychiatric/SA/Medical Inpatient
- Temporarily Housed (temporarily with friends/family sleeping on couch, no designated space of their own)**
- Correctional Facility
- Homeless Shelter
- Homeless (including on street)
- Private Residence, Unspecified ** Use only for Conversion**
- Dependent Living, Unspecified ** Use only for Conversion**
- Other
- Unknown

Service Engagement: Homeless Outreach

- Homeless Outreach → 180 days does *not* include services on day of admission

Service Engagement

Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ at least 1 Service within 180 days		13	100%	50%	59%	50% ▲