Wheeler Clinic
Plainville, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2017 - June 2018   (Data as of Sep 18, 2018)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	5,185	7,202	-28%	▼
	Admits	3,021	5,619	-46%	▼
	Discharges	2,597	5,787	-55%	▼
	Service Hours	11,162	38,243	-71%	▼
	S.Rehab/PHP/IOP	328	1,997	-84%	▼

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

Clients by Level of Care

Program Type / Level of Care Type		#	%
Addiction			
	Outpatient	2,930	54.9%
	IOP	71	1.3%
	Case Management	56	1.0%
	Medication Assisted Treatment	30	0.6%
Forensic SA			
	Forensics Community-based	2,178	40.8%
	Case Management	74	1.4%

Consumer Satisfaction Survey   (Based on 664 FY17 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔	Participation in Treatment		93%	80%	92%
✔	Quality and Appropriateness		93%	80%	93%
✔	General Satisfaction		89%	80%	92%
✔	Respect		89%	80%	91%
✔	Overall		89%	80%	91%
✔	Access		85%	80%	88%
🔴	Recovery		78%	80%	79%
🔴	Outcome		77%	80%	83%

▉ Satisfied %		Goal %	▉ 0-80%	▉ 80-100%	✔ Goal Met	🔴 Under Goal

Client Demographics

Age

		#	%	State Avg
18-25		1,129	22%	13%
26-34		1,645	32%	24%
35-44		1,090	21%	20%
45-54		718	14%	21%
55-64		460	9%	16%
65+		125	2%	5%

Gender

		#	%	State Avg
Male		3,371	65%	60%
Female		1,811	35%	40%
Transgender				0%

Ethnicity

		#	%		State Avg
Non-Hispanic		2,924	56%	▼	72%
Hisp-Puerto Rican		1,113	21%		12%
Unknown		889	17%		7%
Hispanic-Other		199	4%		7%
Hispanic-Mexican		41	1%		1%
Hispanic-Cuban		19	0%		0%

Race

		#	%	State Avg
White/Caucasian		2,997	58%	64%
Black/African American		770	15%	17%
Other		763	15%	13%
Multiple Races		436	8%	1%
Unknown		106	2%	4%
Asian		54	1%	1%
Am. Indian/Native Alaskan		38	1%	1%
Hawaiian/Other Pacific Islander		21	0%	0%

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

Bettor Choice 620740
Wheeler Clinic
Addiction - Outpatient - Gambling Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	36	-64%	▼
Admits	1	18	-94%	▼
Discharges	3	28	-89%	▼
Service Hours	30	246	-88%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Treatment Completed Successfully		2	67%	75%	54%	-8%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Clients Receiving Services		6	60%	90%	97%	-30% ▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	92%
✓	Valid TEDS Data	38%	23%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	83%

Cooccurring		Actual	State Avg
✓	MH Screen Complete	100%	93%
✓	SA Screen Complete	100%	93%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%
✓	Valid Axis V GAF Score	100%	100%

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	2 or more Services within 30 days		1	100%	75%	75%	25% ▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions		■											8%
Discharges	■	■	■										25%
Services	■	■	■	■		■		■					50%

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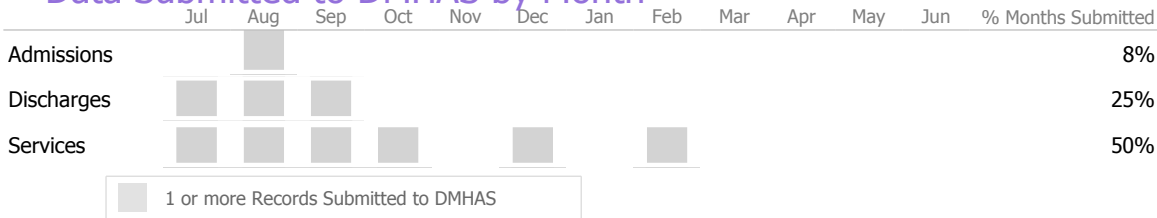
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 8 Active Gambling Outpatient Programs
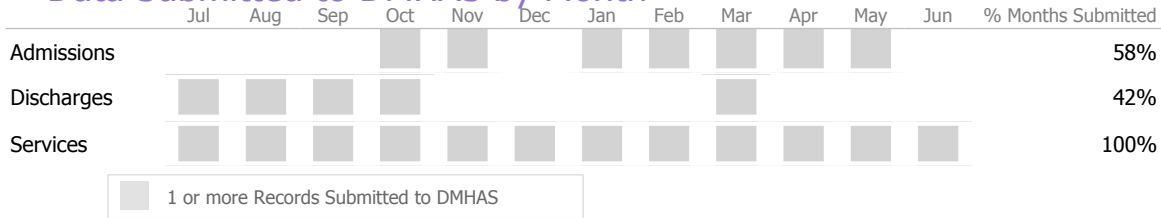
Latino Outreach 620296
Wheeler Clinic
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	29	32	-9%	
Admits	17	12	42%	▲
Discharges	8	21	-62%	▼
Service Hours	597	735	-19%	▼

Service Engagement
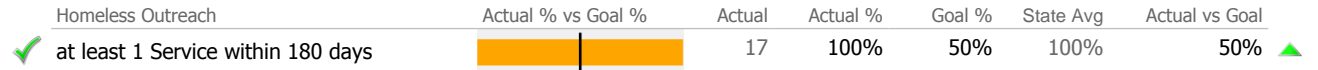
Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ at least 1 Service within 180 days		17	100%	50%	100%	50%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions				▮	▮		▮	▮	▮	▮	▮		58%
Discharges	▮	▮	▮	▮					▮				42%
Services	▮	▮	▮	▮	▮	▮	▮	▮	▮	▮	▮	▮	100%

▮ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 7 Active Outreach & Engagement Programs

Lifeline For Wmn and Chld62030
Wheeler Clinic
Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	71	202	-65%	▼
Admits	37	218	-83%	▼
Discharges	43	205	-79%	▼
Service Hours	34	244	-86%	▼
Social Rehab/PHP/IOP Days	328	1,997	-84%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	94%
✓	Valid TEDS Data	99%	98%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	3%	2%

Cooccurring		Actual	State Avg
✓	MH Screen Complete	100%	93%
✓	SA Screen Complete	100%	93%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%
✓	Valid Axis V GAF Score	100%	100%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		35	81%	50%	68%	31%	▲
●	Follow-up within 30 Days of Discharge		17	49%	90%	63%	-41%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		71	99%	75%	92%	24%	▲
✓	Self Help		50	69%	60%	48%	9%	
✓	Abstinence/Reduced Drug Use		44	61%	55%	66%	6%	
●	Stable Living Situation		64	89%	95%	88%	-6%	
●	Improved/Maintained Axis V GAF Score		46	64%	75%	77%	-11%	▼
●	Employed		21	29%	50%	32%	-21%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		15	52%	90%	69%	-38%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪										25%
Discharges	▪	▪	▪										25%
Services	▪	▪	▪	▪				▪					42%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

◼ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 50 Active Standard IOP Programs

Lifeline for Women and Children - OP
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	95	202	-53%	▼
Admits	35	166	-79%	▼
Discharges	42	154	-73%	▼
Service Hours	260	1,550	-83%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	97%	94%
✔	Valid TEDS Data	92%	92%

On-Time Periodic		Actual	State Avg
	6 Month Updates	4%	24%

Cooccurring		Actual	State Avg
✔	MH Screen Complete	100%	97%
✔	SA Screen Complete	100%	99%

Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	99%
✔	Valid Axis V GAF Score	100%	96%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		33	79%	50%	54%	29%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Not Arrested		90	95%	75%	86%	20%	▲
✔	Abstinence/Reduced Drug Use		60	63%	55%	56%	8%	
✔	Self Help		59	62%	60%	33%	2%	
🔴	Stable Living Situation		81	85%	95%	85%	-10%	
🔴	Employed		35	37%	50%	44%	-13%	▼
🔴	Improved/Maintained Axis V GAF Score		46	48%	75%	59%	-27%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		36	68%	90%	72%	-22%	▼

Service Engagement

	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	2 or more Services within 30 days		32	91%	75%	66%	16%	▲

Data Submitted to DMHAS by Month
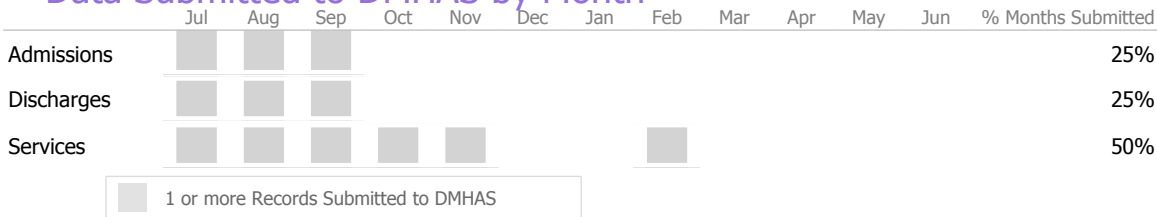
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪										25%
Discharges	▪	▪	▪										25%
Services	▪	▪	▪	▪	▪			▪					50%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

◼ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 113 Active Standard Outpatient Programs
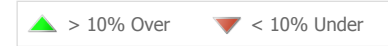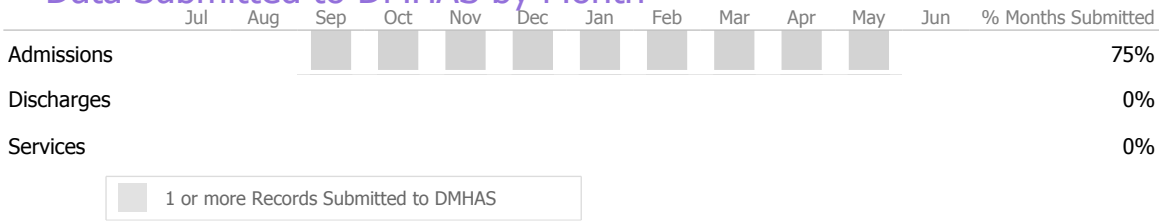
MATx OP
Wheeler Clinic
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	30		
Admits	30	-	
Discharges	-	-	
Service Hours	-	-	

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	92%
Valid TEDS Data		97%	98%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	72%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	88%
✓ SA Screen Complete		100%	99%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		97%	99%
✓ Valid Axis V GAF Score		97%	79%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													75%
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 Buprenorphine Maintenance Programs

NHDTP
Wheeler Clinic
Addiction - Consultation - Consultation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 0 Active Consultation Programs

Post-Release Transitional Forensic Case Management
Wheeler Clinic
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	20	35	-43%	▼
Admits	14	32	-56%	▼
Discharges	7	29	-76%	▼
Service Hours	136	350	-61%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		96%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	11%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		5	71%	50%	73%	21%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Self Help		16	80%	60%	48%	20%	▲
✔	Social Support		16	80%	60%	72%	20%	▲
✔	Employed		6	30%	20%	10%	10%	
✔	Stable Living Situation		17	85%	80%	49%	5%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		9	69%	90%	81%	-21%	▼

Data Submitted to DMHAS by Month
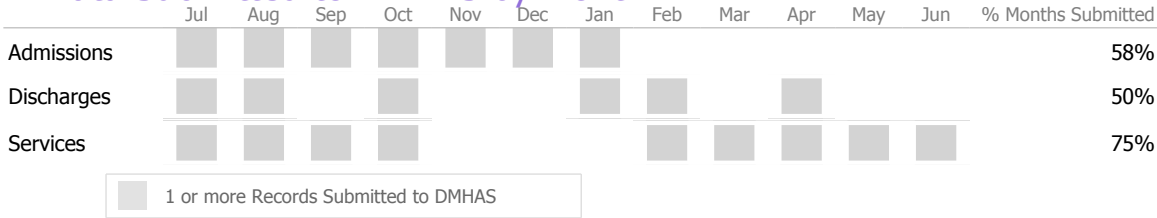
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪		▪	▪	▪						58%
Discharges	▪	▪		▪			▪	▪		▪			50%
Services	▪	▪	▪	▪				▪	▪	▪	▪	▪	75%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

🟧 Actual | Goal ✔ Goal Met 🔴 Below Goal

* State Avg based on 8 Active Standard Case Management Programs

Pre-Release Transitional Forensic Case Management
Wheeler Clinic
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	67	96	-30%	▼
Admits	32	76	-58%	▼
Discharges	52	62	-16%	▼
Service Hours	158	283	-44%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		37	71%	50%	73%	21%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		64	96%	60%	72%	36%	▲
🔴	Employed		8	12%	20%	10%	-8%	
🔴	Self Help		31	46%	60%	48%	-14%	▼
🔴	Stable Living Situation		26	39%	80%	49%	-41%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		98%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	11%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		11	73%	90%	81%	-17%	▼

Data Submitted to DMHAS by Month
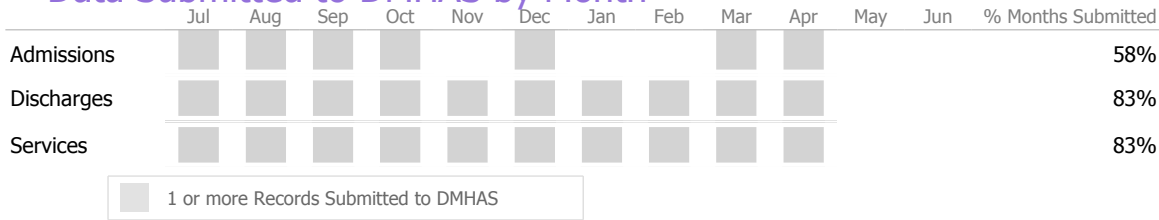
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■	■		■			■	■			58%
Discharges	■	■	■	■	■	■	■	■	■	■			83%
Services	■	■	■	■	■	■	■	■	■	■			83%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 8 Active Standard Case Management Programs

PTIP - 2024 E. Main St. 620713
Wheeler Clinic
Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	874	880	-1%
Admits	580	589	-2%
Discharges	648	602	8%

Data Submitted to DMHAS by Month
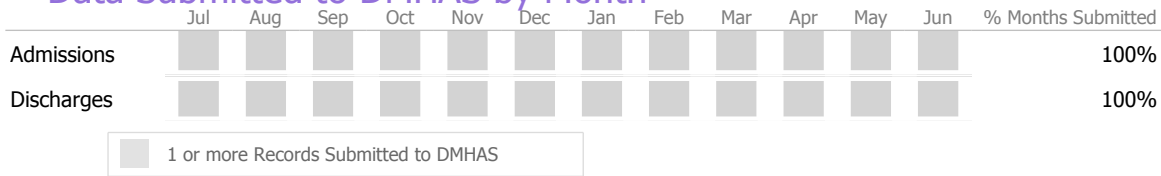
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%

1 or more Records Submitted to DMHAS

> 10% Over   < 10% Under

Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 16 Active Pre-trial Intervention Programs Programs

PTIP-75 N. Mountain Rd. 620707
Wheeler Clinic
Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1,309	1,422	-8%
Admits	703	769	-9%
Discharges	699	813	-14% ▼

Data Submitted to DMHAS by Month
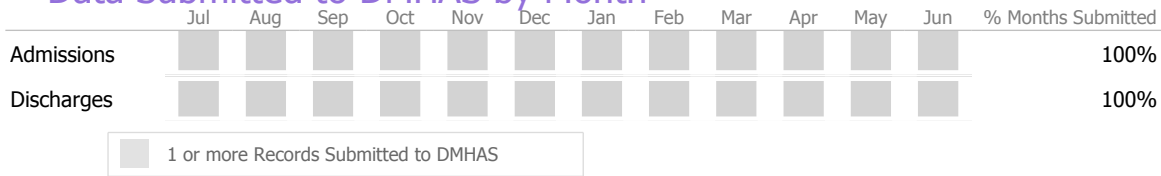
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 16 Active Pre-trial Intervention Programs Programs

SA OP Hartford 620203
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,012	1,896	-47%	▼
Admits	543	1,579	-66%	▼
Discharges	429	1,663	-74%	▼
Service Hours	2,623	11,812	-78%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		98%	94%
Valid TEDS Data		90%	92%

On-Time Periodic		Actual	State Avg
6 Month Updates		3%	24%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	97%
✔ SA Screen Complete		100%	99%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	99%
✔ Valid Axis V GAF Score		100%	96%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		296	69%	50%	54%	19%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Not Arrested		983	94%	75%	86%	19%	▲
🔴 Abstinence/Reduced Drug Use		543	52%	55%	56%	-3%	
🔴 Stable Living Situation		928	89%	95%	85%	-6%	
🔴 Employed		454	44%	50%	44%	-6%	
🔴 Improved/Maintained Axis V GAF Score		473	53%	75%	59%	-22%	▼
🔴 Self Help		306	29%	60%	33%	-31%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		359	59%	90%	72%	-31%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 2 or more Services within 30 days		349	65%	75%	66%	-10%

Data Submitted to DMHAS by Month
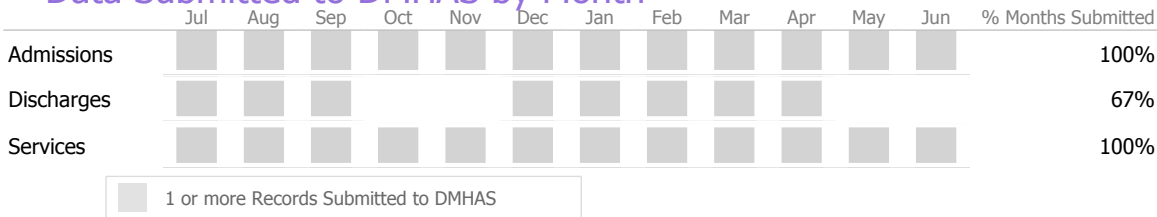
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢		100%
Discharges	▢	▢	▢			▢	▢	▢	▢	▢			67%
Services	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

SA OP Plainville 620200
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,827	2,750	-34%	▼
Admits	1,013	2,119	-52%	▼
Discharges	638	2,164	-71%	▼
Service Hours	7,146	22,221	-68%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		97%	94%
Valid TEDS Data		86%	92%

On-Time Periodic		Actual	State Avg
6 Month Updates		3%	24%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	97%
✔ SA Screen Complete		100%	99%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		99%	99%
✔ Valid Axis V GAF Score		99%	96%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		348	55%	50%	54%	5%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Not Arrested		1,702	90%	75%	86%	15%	▲
✔ Employed		939	50%	50%	44%	0%	
● Stable Living Situation		1,737	92%	95%	85%	-3%	
● Abstinence/Reduced Drug Use		915	48%	55%	56%	-7%	
● Self Help		902	48%	60%	33%	-12%	▼
● Improved/Maintained Axis V GAF Score		718	44%	75%	59%	-31%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		921	74%	90%	72%	-16%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ 2 or more Services within 30 days		758	76%	75%	66%	1%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

Senior Outreach
Wheeler Clinic
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 7 Active Outreach & Engagement Programs

Senior Services
Wheeler Clinic
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	63	-57%	▼
Admits	16	41	-61%	▼
Discharges	28	46	-39%	▼
Service Hours	178	801	-78%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		95%	98%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	28%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		20	71%	50%	70%	21%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Stable Living Situation		26	93%	80%	78%	13%	▲
⬤ Employed		4	14%	20%	24%	-6%	
⬤ Self Help		12	43%	60%	65%	-17%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Clients Receiving Services		1	100%	90%	81%	10%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢							▢	▢	▢	50%
Discharges	▢	▢	▢									▢	33%
Services	▢	▢	▢	▢	▢	▢					▢	▢	67%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

◼ Actual | Goal   ✔ Goal Met   ⬤ Below Goal

* State Avg based on 14 Active Standard Case Management Programs