Ability Beyond
Bethel, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	350	342	2%	
	Admits	189	148	28%	▲
	Discharges	176	177	-1%	
	Service Hours	3,248	2,770	17%	▲
	Bed Days	25,948	26,235	-1%	

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Employment Services	282	76.2%
	Residential Services	88	23.8%

Consumer Satisfaction Survey (Based on 131 FY18 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Participation in Treatment		95%	80%	92%
✓ Respect		94%	80%	91%
✓ Overall		93%	80%	91%
✓ Access		93%	80%	88%
✓ Quality and Appropriateness		91%	80%	93%
✓ General Satisfaction		90%	80%	92%
✓ Outcome		86%	80%	83%
✓ Recovery		85%	80%	79%

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

Client Demographics

Age	#	%	State Avg
18-25	49	14%	12%
26-34	82	23%	24%
35-44	54	15%	21%
45-54	84	24%	20%
55-64	67	19%	17%
65+	14	4%	6%

Gender	#	%	State Avg
Male	209	60%	60%
Female	141	40%	40%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	300	86% ▲	70%
Hispanic-Other	28	8%	7%
Hisp-Puerto Rican	14	4%	12%
Unknown	4	1%	10%
Hispanic-Mexican	3	1%	1%
Hispanic-Cuban	1	0%	0%

Race	#	%	State Avg
White/Caucasian	254	73%	63%
Other	43	12%	13%
Black/African American	40	11%	17%
Asian	8	2%	1%
Multiple Races	4	1%	1%
Am. Indian/Native Alaskan	1	0%	1%
Hawaiian/Other Pacific Islander			0%
Unknown			5%

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

Beecher House ABI/TBI - 165
Ability Beyond
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	4	25%	▲
Admits	1	-		
Discharges	-	-		
Bed Days	1,676	1,460	15%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	86%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	88%
✓ SA Screen Complete	100%	95%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													8%
Discharges													0%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	80%	82%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	88%	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	100%	60%	83%	40%	▲
✓ Stable Living Situation		5	100%	90%	99%	10%	
● Improved/Maintained Axis V GAF Score		2	40%	95%	68%	-55%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	2,283 days	0.3	98%	90%	95%	8%

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

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 24 Active Group Home Programs

Corbin YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3	4	-25%	▼
Admits	-	1	-100%	▼
Discharges	-	1	-100%	▼
Bed Days	1,095	1,088	1%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	84%

Cooccurring	Actual	State Avg
MH Screen Complete	N/A	32%
SA Screen Complete	N/A	31%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	67%	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%	69%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		3	100%	60%	83%	40%	▲
✓ Stable Living Situation		3	100%	95%	96%	5%	
● Employed		0	0%	25%	13%	-25%	▼
● Improved/Maintained Axis V GAF Score		1	33%	95%	65%	-62%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		3	824 days	0.3	100%	90%	93%	10%

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

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 80 Active Supervised Apartments Programs

Employment Svs (YAS)
Ability Beyond
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	7	2	250% ▲
Admits	5	2	150% ▲
Discharges	3	-	
Service Hours	136	11	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		2	29%	35%	42%	-6%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		4	100%	90%	97%	10%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	95%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■		■			■						33%
Discharges		■		■									17%
Services	■	■	■	■	■	■	■	■	■		■	■	92%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 43 Active Employment Services Programs

Employment Svs Reg 1 - 271 (Norwalk)
Ability Beyond
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	99	94	5%	
Admits	48	36	33%	▲
Discharges	46	46	0%	
Service Hours	1,270	1,231	3%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		50	50%	35%	42%	15%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		54	98%	90%	97%	8%

Data Submission Quality

	Data Entry	Actual	State Avg
✓	Valid NOMS Data	100%	95%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	■	■	■	100%
Discharges		■	■	■	■	■	■	■	■	■	■	■	92%
Services	■	■	■	■		■	■	■	■	■	■	■	92%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 43 Active Employment Services Programs

Employment Svs Reg 5 - 270 (Danbury)
Ability Beyond
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	178	167	7%	
Admits	115	83	39%	▲
Discharges	104	101	3%	
Service Hours	1,843	1,528	21%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		97	51%	35%	42%	16%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		85	100%	90%	97%	10%

Data Submission Quality

	Data Entry	Actual	State Avg
✓	Valid NOMS Data	100%	95%

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

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 43 Active Employment Services Programs

Fiduciary for Temp Housing Prog (THP) 252
Ability Beyond
Mental Health - Other - Fiduciary

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

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

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 5 Active Fiduciary Programs

Grand Street YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3	4	-25%	▼
Admits	-	2	-100%	▼
Discharges	2	1	100%	▲
Bed Days	1,030	1,075	-4%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	84%

Cooccurring	Actual	State Avg
MH Screen Complete	N/A	32%
SA Screen Complete	N/A	31%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully	1	50%	60%	67%	-10%	▼

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge	1	100%	90%	69%	10%

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support	3	100%	60%	83%	40%	▲
✓ Employed	1	33%	25%	13%	8%	
✓ Stable Living Situation	3	100%	95%	96%	5%	
● Improved/Maintained Axis V GAF Score	2	67%	95%	65%	-28%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		3	922 days	0.3	94%	90%	93%	4%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													17%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Nicholas Drive YAS - 332
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	11	-18%	▼
Admits	4	2	100%	▲
Discharges	-	6	-100%	▼
Bed Days	2,934	3,082	-5%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	32%
✓ SA Screen Complete	100%	31%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	67%	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%	69%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		9	100%	60%	83%	40%	▲
✓ Stable Living Situation		9	100%	95%	96%	5%	
● Employed		0	0%	25%	13%	-25%	▼
● Improved/Maintained Axis V GAF Score		4	50%	95%	65%	-45%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		9	661 days	0.3	89%	90%	93%	-1%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													33%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Prospect Street 175
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	6	-33%	▼
Admits	-	2	-100%	▼
Discharges	-	2	-100%	▼
Bed Days	1,460	1,418	3%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	32%
✓ SA Screen Complete	100%	31%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	67%	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%	69%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		4	100%	60%	83%	40%	▲
✓ Stable Living Situation		4	100%	95%	96%	5%	
● Improved/Maintained Axis V GAF Score		3	75%	95%	65%	-20%	▼
● Employed		0	0%	25%	13%	-25%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		4	615 days	0.3	100%	90%	93%	10%

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

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 80 Active Supervised Apartments Programs

Sheffield Apartments #1 YAS - 172
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	9	9	0%
Admits	2	2	0%
Discharges	2	2	0%
Bed Days	2,556	2,397	7%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	77%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	32%
✓ SA Screen Complete	100%	31%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		2	100%	60%	67%	40% ▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		2	100%	90%	69%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		8	89%	60%	83%	29% ▲
✓ Stable Living Situation		9	100%	95%	96%	5%
● Employed		0	0%	25%	13%	-25% ▼
● Improved/Maintained Axis V GAF Score		6	86%	95%	65%	-9%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		7	819 days	0.2	100%	90%	93%	10%

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

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Sheffield Apartments #2 YAS
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	8	-25%	▼
Admits	1	3	-67%	▼
Discharges	2	3	-33%	▼
Bed Days	1,820	1,799	1%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	32%
✓ SA Screen Complete	100%	31%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		2	100%	60%	67%	40%	▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		2	100%	90%	69%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		5	83%	60%	83%	23%	▲
✓ Stable Living Situation		6	100%	95%	96%	5%	
● Employed		1	17%	25%	13%	-8%	
● Improved/Maintained Axis V GAF Score		4	80%	95%	65%	-15%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	696 days	0.2	100%	90%	93%	10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													8%
Discharges													17%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Supervised Res Recovery Program 250
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	19	19	0%	
Admits	9	9	0%	
Discharges	10	9	11%	▲
Bed Days	3,038	3,230	-6%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

On-Time Periodic	Actual	State Avg
6 Month Updates	80%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	32%
✓ SA Screen Complete	89%	31%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully	5	50%	60%	67%	-10%	▼

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge	4	80%	90%	69%	-10%

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support	15	79%	60%	83%	19%	▲
✓ Stable Living Situation	18	95%	95%	96%	0%	
Employed	1	5%	25%	13%	-20%	▼
Improved/Maintained Axis V GAF Score	9	60%	95%	65%	-35%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		10	611 days	0.2	83%	90%	93%	-7%

< 90% 90-110% >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions		■	■	■	■			■	■			■	58%
Discharges	■	■	■		■	■		■			■	■	67%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Supervised Res Support Program 251
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	19	20	-5%	
Admits	3	6	-50%	▼
Discharges	5	4	25%	▲
Bed Days	5,476	5,701	-4%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	32%
✓ SA Screen Complete	100%	31%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		5	100%	60%	67%	40%	▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		5	100%	90%	69%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		17	89%	60%	83%	29%	▲
✓ Stable Living Situation		19	100%	95%	96%	5%	
● Employed		3	16%	25%	13%	-9%	
● Improved/Maintained Axis V GAF Score		5	28%	95%	65%	-67%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		16	1,077 days	0.3	94%	90%	93%	4%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions					■	■						■	25%
Discharges			■		■					■		■	33%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Unionville House ABI/TBI - 166
Ability Beyond
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	-	-	
Discharges	1	-	
Bed Days	1,453	1,460	0%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	86%

Cooccurring	Actual	State Avg
MH Screen Complete	N/A	88%
SA Screen Complete	N/A	95%

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

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully	1	100%	80%	82%	20%	▲
● No Re-admit within 30 Days of Discharge	0	0%	85%	88%	-85%	▼
✓ Follow-up within 30 Days of Discharge	1	100%	90%	83%	10%	

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Stable Living Situation	4	100%	90%	99%	10%	
● Social Support	2	50%	60%	83%	-10%	
● Improved/Maintained Axis V GAF Score	2	50%	95%	68%	-45%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		4	3,238 days	0.3	100%	90%	95%	10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													8%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 24 Active Group Home Programs

Woodland House ABI/TBI - 167
Ability Beyond
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	1	-	
Discharges	-	1	-100% ▼
Bed Days	1,225	1,290	-5%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	95%	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	86%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	88%
✓ SA Screen Complete	100%	95%

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		N/A	N/A	80%	82%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	88%	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
✓ Stable Living Situation		4	100%	90%	99%	10%
● Social Support		2	50%	60%	83%	-10%
● Improved/Maintained Axis V GAF Score		1	33%	95%	68%	-62% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		4	1,395 days	0.3	84%	90%	95%	-6%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													8%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 24 Active Group Home Programs

YAS Starr Avenue Supervised Apts 271Y
Ability Beyond
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	7	-14%	▼
Admits	-	-		
Discharges	1	1	0%	
Bed Days	2,185	2,235	-2%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	77%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	84%

Cooccurring	Actual	State Avg
MH Screen Complete	N/A	32%
SA Screen Complete	N/A	31%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	97%
✓ Valid Axis V GAF Score	100%	94%

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully	0	0%	60%	67%	-60%	▼

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge	N/A	N/A	90%	69%	N/A

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support	6	100%	60%	83%	40%	▲
✓ Stable Living Situation	6	100%	95%	96%	5%	
● Employed	1	17%	25%	13%	-8%	
● Improved/Maintained Axis V GAF Score	1	17%	95%	65%	-78%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	1,633 days	0.3	100%	90%	93%	10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													8%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs