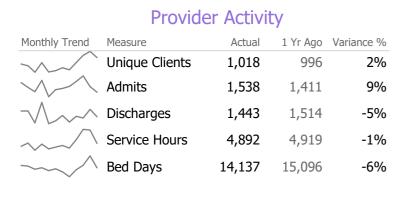
Wellmore

Waterbury, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

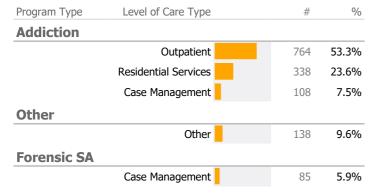
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)



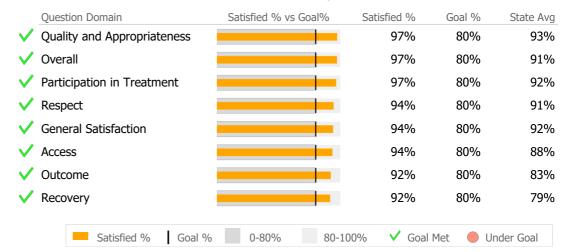
▲ > 10% Over 1 Yr Ago

 \mathbf{v} > 10% Under 1Yr Ago

Clients by Level of Care



Consumer Satisfaction Survey (Based on 612 FY18 Surveys)



Client Demographics

Age

18-25

26-34

35-44

45-54

55-64

65+

Ethnicity Non-Hispanic Hisp-Puerto Rican Hispanic-Other Hispanic-Mexican Hispanic-Cuban Unknown

	#	%	State Avg	Gender		#	%	Sta	ate Avg
	127	13%	12%	Male		784	77%		60%
	332	33%	24%	Female		234	23%	▼	40%
	267	26%	21%	Transgender					0%
	192	19%	20%						
	84	8%	17%						
	13	1%	6%	Race		#	%	St	ate Avg
				White/Caucasian		449	44%	▼	63%
	#	%	State Avg	Black/African American	•	286	28%		17%
ſ	721	71%	70%	Other	•	271	27%		13%
•	226	22%	12%	Am. Indian/Native Alaskan		6	1%		1%
	62	6%	7%	Asian		4	0%		1%
	5	0%	1%	Hawaiian/Other Pacific Islander		2	0%		0%
				Multiple Races					1%
	4	0%	0%	Unknown	1				5%
			10%	I					
	Unique C	lients	State Avg	▲ > 10% Over State Avg	▼ >	> 10% U	nder St	tate /	Avg

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	108	174	-38% 🔻
Admits	97	119	-18% 🔻
Discharges	82	163	-50% 🔻
Service Hours	636	661	-4%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	91%
On-Time Periodic	Actual	State Avg
V 6 Month Updates	100%	50%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Treatment Completed Successfully		79	96%	50%	64%	46%
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Self Help		109	100%	60%	63%	40%
\checkmark	Employed		64	59%	20%	31%	39% 🔺
\checkmark	Stable Living Situation		104	95%	80%	81%	15% 🖌
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Clients Receiving Services		26	96%	90%	86%	6%

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 me	ore Reco	rds Subr	nitted to	DMHAS								

▲ > 10% Over ▼ < 10% Under

* State Avg based on 8 Active Standard Case Management Programs

Program Activity

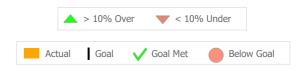
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	32	30	7%	
Admits	29	27	7%	
Discharges	30	27	11% 🔺	
Bed Days	914	908	1%	

Discharge Outcomes



Data Submitted to DMHAS by Month





* State Avg based on 13 Active Recovery House Programs

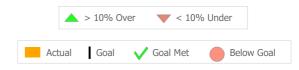
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	216	202	7%
Admits	234	231	1%
Discharges	232	228	2%
Bed Days	3,650	4,246	-14% 🔻

Discharge Outcomes



Data Submitted to DMHAS by Month





* State Avg based on 13 Active Recovery House Programs

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

Cooccurring	Actual	State Avg
MH Screen Complete	N/A	N/A
SA Screen Complete	N/A	N/A

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admission	5												0%
Discharges	5												0%
	1 or m	ore Recor	ds Subn	nitted to	DMHAS								



* State Avg based on 0 Active Integrated Primary Care Programs

Other - Other - Integrated Primary Care

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	138		
Admits	138	-	
Discharges	29	-	
Service Hours	669	-	

Cooccurring	Actual	State Avg
V MH Screen Complete	100%	96%
V SA Screen Complete	100%	99%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	81%
Valid Axis V GAF Score	99%	80%

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admission	S													50%
Discharge	S													33%
Services														42%
	1	or mo	ore Recor	ds Subn	nitted to	DMHAS								

	> 10% 0	ver 💙 < 100	% Under	
Actual	Goal	🗸 Goal Met	Belo	w Goal

* State Avg based on 6 Active Integrated Primary Care Programs

Program Activity



Data Submission Quality

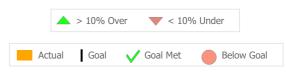
Data Entry	Actual	State Avg
Valid NOMS Data	N/A	94%
Valid TEDS Data	N/A	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	38%
Cooccurring	Actual	State Avg
MH Screen Complete	N/A	82%
SA Screen Complete	N/A	97%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	52%	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%	61%	-55%	
Employed		N/A	N/A	50%	35%	-50%	
Improved/Maintained Axis V GAF Score		N/A	N/A	75%	57%	-75%	
Not Arrested	İ	N/A	N/A	75%	89%	-75%	
Self Help	i	N/A	N/A	60%	32%	-60%	
Stable Living Situation	· ·	N/A	N/A	95%	88%	-95%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admission	S												0%
Discharge	S												0%
	1 or r	more Reco	rds Subr	nitted to	DMHAS								



* State Avg based on 23 Active Buprenorphine Maintenance Programs

Program Activity



Data Submission Quality

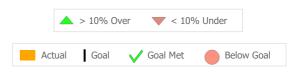
Data Entry		Actual	State Avg
Valid NOMS Data		N/A	80%
Valid TEDS Data		N/A	99%
On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	23%
Cooccurring		Actual	State Avg
MH Screen Complete		N/A	84%
SA Screen Complete		N/A	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	61%	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%	58%	-55%	
Employed		N/A	N/A	50%	21%	-50%	
Improved/Maintained Axis V GAF Score		N/A	N/A	75%	72%	-75%	
Not Arrested	ĺ	N/A	N/A	75%	79%	-75%	
Self Help		N/A	N/A	60%	39%	-60%	
Stable Living Situation	. I	N/A	N/A	95%	81%	-95%	

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admission	S													0%
Discharge	S													0%
	1 (or more	e Record	s Submit	tted to D	MHAS								



* State Avg based on 8 Active Naltrexone Programs

Program Activity

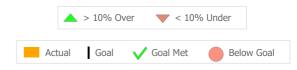
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	105	100	5%
Admits	92	91	1%
Discharges	96	90	7%
Bed Days	7,238	7,588	-5%

Discharge Outcomes



Data Submitted to DMHAS by Month





* State Avg based on 13 Active Recovery House Programs

Forensic SA - Case Management - Standard Case Management

Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	30	27	11% 🔺
Admits	28	23	22% 🔺
Discharges	27	25	8%
Service Hours	184	132	39% 🔺

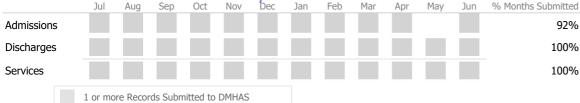
Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	8%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/ Treatment Completed Successfully		23	85%	50%	78%	35%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		27	90%	60%	88%	30%
Employed		12	40%	20%	13%	20%
Stable Living Situation	· · · · · · · · · · · · · · · · · · ·	25	83%	80%	43%	3%
Self Help		17	57%	60%	78%	-3%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		3	100%	90%	83%	10%

Data Submitted to Sep OCt Nov Dec Jan



	> 10% 0	ver 🔍 < 100	% Under	
Actual	Goal	V Goal Met	Belo	w Goal

* State Avg based on 8 Active Standard Case Management Programs

Forensic SA - Case Management - Standard Case Management

Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	83	78	6%	
Admits	72	60	20% 🔺	
Discharges	77	68	13% 🔺	
Service Hours	578	404	43% 🔺	

Data Submission Quality

	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	100%	98%
	On-Time Periodic	Actual	State Avg
\checkmark	6 Month Updates	100%	8%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		74	96%	50%	78%	46%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		64	77%	60%	88%	17%
Self Help		48	58%	60%	78%	-2%
Stable Living Situation	· · · ·	63	76%	80%	43%	-4%
Employed	_	11	13%	20%	13%	-7%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		6	100%	90%	83%	10%

Data Submitted to Sep Oct Nov Dec Jan



	> 10% 0	ver 💙 < 109	% Under	
Actual	Goal	V Goal Met	Belo	w Goal

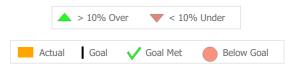
* State Avg based on 8 Active Standard Case Management Programs

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



* State Avg based on 5 Active Peer Based Mentoring Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	764	744	3%
Admits	816	816	0%
Discharges	838	820	2%
Service Hours	2,825	3,482	-19% 🔻

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	88%
Valid TEDS Data	87%	85%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	34%
Cooccurring	Actual	State Avg
V MH Screen Complete	100%	91%
V SA Screen Complete	100%	95%
Diagnosis	Actual	State Avg
	1000/	050/

Diagnosis	Actual	State Avg	
🗸 Valid Axis I Diagnosis	100%	95%	
Valid Axis V GAF Score	100%	98%	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		588	70%	50%	57%	20%	-
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		837	96%	75%	80%	21%	
Abstinence/Reduced Drug Use		500	57%	55%	52%	2%	
Stable Living Situation	· · · · · · · · · · · · · · · · · · ·	786	90%	95%	78%	-5%	
Employed		294	34%	50%	40%	-16%	,
Self Help	<u> </u>	323	37%	60%	30%	-23%	
Improved/Maintained Axis V GAF Score	<u> </u>	396	47%	75%	68%	-28%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	-
Clients Receiving Services		38	100%	90%	76%	10%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
2 or more Services within 30 days		707	98%	75%	67%	23%	
Apr May Jun % Months Submitted							
100%			> 10% Over	V < 10 ⁰	% Under		

Actual

Goal

* State Avg based on 116 Active Standard Outpatient Programs

V Goal Met

Below Goal

Data Submitted to DMHAS by Month



Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

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	37	32	16%	
Admits	32	26	23%	
Discharges	32	28	14%	
Bed Days	2,335	2,354	-1%	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	86%
Valid TEDS Data	98%	84%
	•	
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%
Cooccurring	Actual	State Avg
V MH Screen Complete	100%	77%
V SA Screen Complete	100%	77%

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

Discharge Outcomes

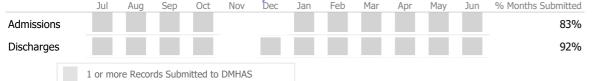
< 90%

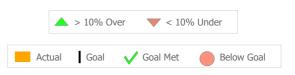
90-110%

>110%

		Actual 9	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/ Treatment Completed	Successfully			23	72%	70%	75%	2%
		Actual	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30	Days of Discharge			28	90%	85%	92%	5%
		Actual	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Da	ays of Discharge			15	65%	90%	68%	-25%
Recovery								
National Recovery Measure	es (NOMS)	Actual 9	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced D	rug Use			32	84%	70%	79%	14%
Improved/Maintained A	axis V GAF Score			29	91%	95%	82%	-4%
Bed Utilizatio	n							
	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate	-televit-100	8	110 days	0.1	80%	90%	94%	-10%

Data Submitted to DMHAS by Month





* State Avg based on 30 Active Intermediate/Long Term Res.Tx 3.5 Programs