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

# **Provider Activity**

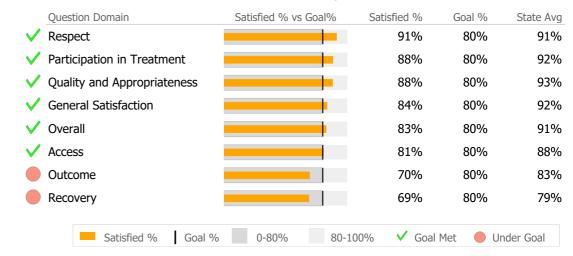




# Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	5,054	60.0%
	Intake	778	9.2%
Medicat	ion Assisted Treatment	191	2.3%
	Case Management	72	0.9%
	Consultation	28	0.3%
	IOP	21	0.2%
Forensic SA			
Forer	nsics Community-based	2,193	26.0%
	Case Management	88	1.0%

## Consumer Satisfaction Survey (Based on 228 FY18 Surveys)



## **Client Demographics**

Age		#	%	State Avg	Gender	#	%	State Avg
18-25		1,624	20%	12%	Male	5,037	62%	60%
26-34		2,374	29%	24%	Female	3,048	38%	40%
35-44		1,738	22%	21%	Transgender			0%
45-54	<u> </u>	1,280	16%	20%				
55-64		815	10%	17%				
65+		247	3%	6%	Race	#	%	State Avg
					White/Caucasian	4,433	55%	63%
<b>Ethnicity</b>		#	%	State Avg	Other	1,427	18%	13%
Unknown		3,513	43%	<b>10%</b>	Black/African American	1,243	15%	17%
Non-Hispanic		2,995	37%	<b>▼</b> 70%	Unknown	612	8%	5%
Hisp-Puerto Rican	_ '	1,299	16%	12%	Multiple Races	190	2%	1%
Hispanic-Other	<b>!</b>	237	3%	7%	Am. Indian/Native Alaskan	78	1%	1%
·					Asian	76	1%	1%
Hispanic-Mexican		41	1%	1%	Hawaiian/Other Pacific Islander	44	1%	0%
Hispanic-Cuban		18	0%	0%	, and the second			
		Jnique C	lients	State Avg	▲ > 10% Over State Avg	> 10% U	Inder St	ate Avg

#### **Access Line**

Wheeler Clinic

Addiction - Intake - Central Intake

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	778		
Admits	927	-	
Discharges	927	-	

Data	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													83%
Discharges													83%
	1 or m	ore Record	ds Sub	mitted to	DMHAS								



<sup>\*</sup> State Avg based on 2 Active Central Intake Programs

#### **Bettor Choice 620740**

Wheeler Clinic

Addiction - Outpatient - Gambling Outpatient

# 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	12	-25%	▼
Admits	2	2	0%	
Discharges	8	6	33%	•
Service Hours	137	132	4%	

# **Data Submission Quality**

Data Entry	Actu	al State Avg
Valid NOMS Data	409	% 95%
✓ Valid TEDS Data	79	6 41%
On-Time Periodic	Actu	al State Avg
✓ 6 Month Updates	100%	% 93%
Cooccurring	Actu	al State Avg
✓ MH Screen Complete	1009	% 100%
✓ SA Screen Complete	1009	6 100%
Diagnosis	Actu	al State Avg
Valid Axis I Diagnosis	33%	6 97%
✓ Valid Axis V GAF Score	100%	6 98%

#### Discharge Outcomes







<sup>\*</sup> State Avg based on 6 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 2018 - June 2019 (Data as of Sep 16, 2019)

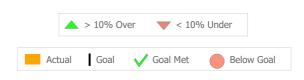
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	72	29	148%	•
Admits	51	17	200%	•
Discharges	5	8	-38%	•
Service Hours	674	597	13%	•

## Service Engagement



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													92%
Discharges													17%
Services													58%
	1 or m	ore Reco	rds Subr	nitted to	DMHAS								



<sup>\*</sup> State Avg based on 16 Active Outreach & Engagement Programs

Data Entry

Addiction - IOP - Standard IOP

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

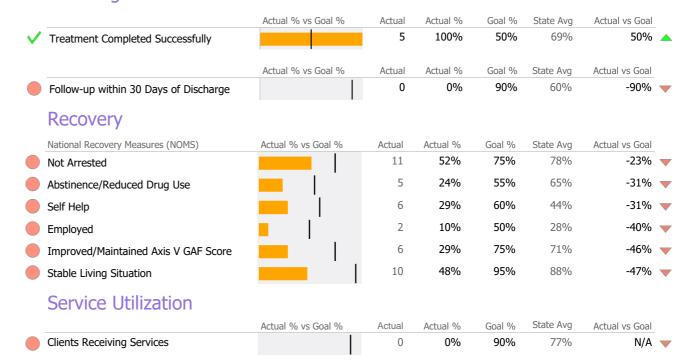
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	21	64	-67%	•
Admits	-	37	-100%	•
Discharges	5	44	-89%	•
Service Hours	-	37	-100%	•
Social Rehab/PHP/IOP Davs	0	332	-100%	▼

# **Data Submission Quality**

Valid NOMS Data	0%	95%
Valid TEDS Data	0%	97%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	0%	0%
Cooccurring	Actual	State Avg
MH Screen Complete	N/A	91%
SA Screen Complete	N/A	91%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	76%	100%
✓ Valid Axis V GAF Score	100%	100%

## **Discharge Outcomes**



# Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													8%
Services													17%
	1 or r	nore Reco	rds Subr	nitted to	DMHAS	;							

State Avg



<sup>\*</sup> State Avg based on 51 Active Standard IOP Programs

Data Entry

# 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	137	90	52%	•
Admits	91	36	153%	•
Discharges	42	44	-5%	
Service Hours	373	266	40%	•

# **Data Submission Quality**

	Valid NOMS Data		74%	88%	
	Valid TEDS Data		60%	85%	
	On-Time Periodic		Actual	State Avg	
	6 Month Updates		4%	34%	
		•			
	Cooccurring		Actual	State Avg	
<b>\</b>	MH Screen Complete		100%	91%	
<b>\</b>	SA Screen Complete		100%	95%	
	Diagnosis		Actual	State Avg	
	Valid Axis I Diagnosis		76%	95%	
<b>/</b>	Valid Axis V GAF Score	i	100%	98%	
•					

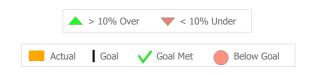
#### **Discharge Outcomes**



## Data Submitted to DMHAS by Month



State Avg



<sup>\*</sup> State Avg based on 116 Active Standard Outpatient Programs

#### **MAT - Naltrexone - Plainville**

Wheeler Clinic

Addiction - Medication Assisted Treatment - Naltrexone

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

State Avo

Actual vs Goal

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

Actual %

# **Program Activity**

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

# **Data Submission Quality**

SA Screen Complete

	200000	-/	
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%

## **Discharge Outcomes**

	Actual 70 VS Goal 70	Actual	Actual 70	Guai 70	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	ĺ	N/A	N/A	50%	21%	-50%	
Improved/Maintained Axis V GAF Score		N/A	N/A	75%	72%	-75%	
Not Arrested	İ	N/A	N/A	75%	79%	-75%	
Self Help		N/A	N/A	60%	39%	-60%	
Stable Living Situation	· 1	N/A	N/A	95%	81%	-95%	

Actual % vs Goal %

Data Submitted to DMHAS by Month
Jul Aug Sep Oct Nov Dec Jan Feb

1 or more Records Submitted to DMHAS

Admissions

Discharges

Oct Nov Dec Jan Feb Mar Apr May Jun % Months Submitted

\*\*O%\*\*

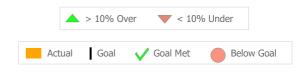
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100%



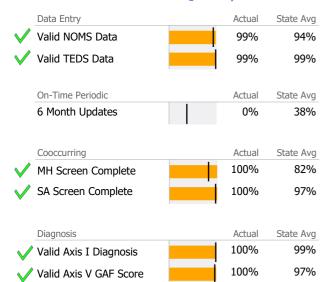
<sup>\*</sup> State Avg based on 8 Active Naltrexone Programs

# Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	191	120	59%	•
Admits	71	119	-40%	•
Discharges	-	-		
Service Hours	_	_		

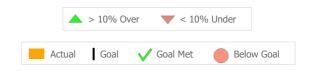
# **Data Submission Quality**



## **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	
<b>/</b>	Not Arrested		181	95%	75%	89%	20%	
	Abstinence/Reduced Drug Use	'	96	50%	55%	61%	-5%	
	Stable Living Situation		168	88%	95%	88%	-7%	
	Employed		81	42%	50%	35%	-8%	
	Self Help	<u> </u>	91	48%	60%	32%	-12%	
	Improved/Maintained Axis V GAF Score	· 1	0	0%	75%	57%	-75%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		0	0%	90%	67%	N/A	

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													92%
Discharges													0%
Services													0%
	1 or more Records Submitted to DMHAS												



<sup>\*</sup> State Avg based on 23 Active Buprenorphine Maintenance Programs

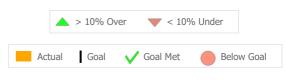
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	28	4	600%	•
Admits	24	4	500%	•
Discharges	4	-		
Service Hours	-	_		

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													67%
Discharges													17%
Services													0%
	1 or mo	ore Recor	ds Subn	nitted to	DMHAS								



<sup>\*</sup> State Avg based on 1 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 2018 - June 2019 (Data as of Sep 16, 2019)

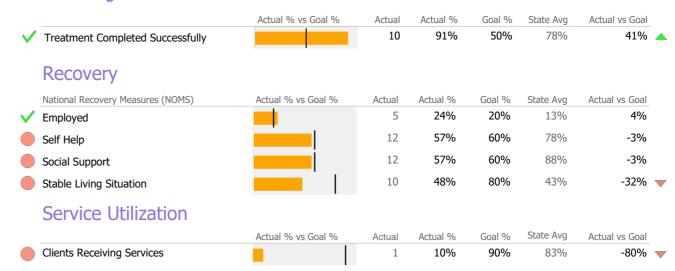
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	21	24	-13%	$\blacksquare$
Admits	7	20	-65%	•
Discharges	11	10	10%	
Service Hours	98	227	-57%	•

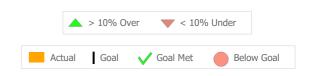
# **Data Submission Quality**

Data Entry	Ac	ctual 9	State Avg
Valid NOMS Data	6	64%	98%
On-Time Periodic	Ac	ctual S	State Avg
6 Month Updates		0%	8%

#### Discharge Outcomes







<sup>\*</sup> 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

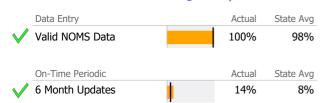
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

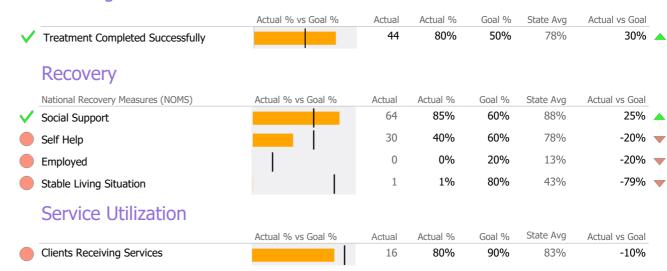
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	75	80	-6%	
Admits	48	45	7%	
Discharges	55	53	4%	
Service Hours	278	222	26% 🔺	_

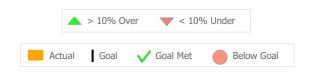
# **Data Submission Quality**



#### **Discharge Outcomes**







<sup>\*</sup> 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

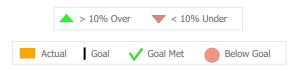
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	873	874	0%
Admits	613	580	6%
Discharges	617	618	0%

Data	Jubili	ILLCU	LU			Dy I	1011ti						
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
	1 or mo	ra Pacar	de Suh	mitted to	2 DMHA	ς							



<sup>\*</sup> State Avg based on 15 Active Pre-trial Intervention Programs Programs

#### PTIP-75 N. Mountain Rd. 620707

Wheeler Clinic

Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

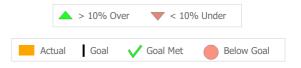
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1,322	1,309	1%
Admits	673	703	-4%
Discharges	668	660	1%

Data	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
	1 or mo	re Record	ds Suh	mitted to	DMHA	ς							



<sup>\*</sup> State Avg based on 15 Active Pre-trial Intervention Programs Programs

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

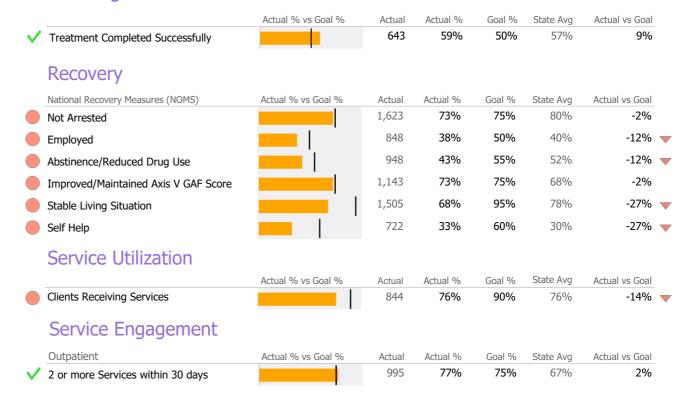
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2,191	1,625	35%	•
Admits	1,314	1,196	10%	
Discharges	1,096	782	40%	•
Service Hours	8,374	7,049	19%	•

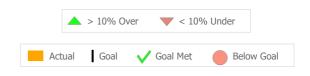
# **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	75%	88%
Valid TEDS Data	65%	85%
On-Time Periodic	Actual	State Avg
6 Month Updates	13%	34%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	91%
✓ SA Screen Complete	100%	95%
•		
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	86%	95%
✓ Valid Axis V GAF Score	100%	98%

#### **Discharge Outcomes**



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													92%
	1 or mo	ore Reco	rds Subn	nitted to	DMHAS								



<sup>\*</sup> State Avg based on 116 Active Standard Outpatient Programs

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

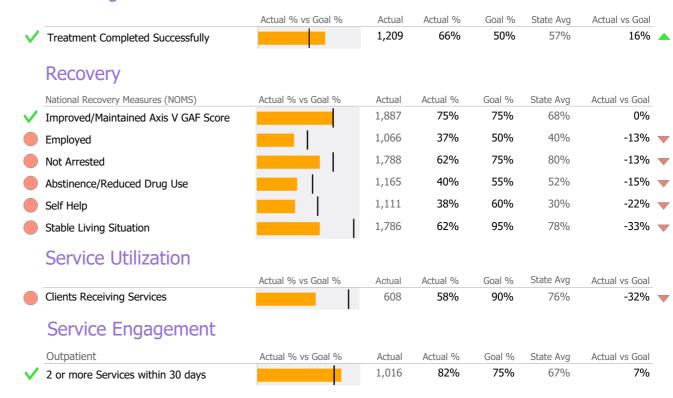
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2,849	2,566	11%	•
Admits	1,268	1,826	-31%	•
Discharges	1,843	1,031	79%	•
Service Hours	9,073	12,178	-26%	•

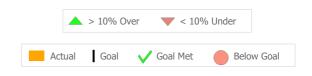
# **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	65%	88%
Valid TEDS Data	51%	85%
On-Time Periodic	Actual	State Avg
6 Month Updates	8%	34%
Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	91%
✓ SA Screen Complete	100%	95%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	78%	95%
✓ Valid Axis V GAF Score	100%	98%

#### **Discharge Outcomes**



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													92%
	1 or mo	ore Reco	rds Subn	nitted to	DMHAS								



<sup>\*</sup> State Avg based on 116 Active Standard Outpatient Programs

#### **SOR - HCWH-Bristol**

Wheeler Clinic

Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

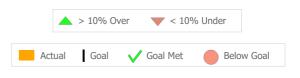
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

# **Program Activity**

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

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													0%
	4	D	C - I	-tra-dra-d	DMILLAC								





<sup>\*</sup> State Avg based on 16 Active Outreach & Engagement Programs