Positive Directions
Westport, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2019 - September 2019   (Data as of Dec 27, 2019)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	26	16	63%	▲
	Admits	11	9	22%	▲
	Discharges	4	2	100%	▲
	Service Hours	111	90	24%	▲

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Addiction				
	Outpatient		26	100.0%

Consumer Satisfaction Survey   (Based on 3 FY19 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Quality and Appropriateness		100%	80%	93%
✓	Participation in Treatment		100%	80%	92%
✓	General Satisfaction		100%	80%	92%
✓	Overall		100%	80%	91%
✓	Respect		100%	80%	91%
✓	Access		100%	80%	88%
✓	Outcome		100%	80%	83%
✓	Recovery		100%	80%	79%

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

Client Demographics

Age

Age		#	%		State Avg
18-25		3	14%		9%
26-34		3	14%		22%
35-44		2	10%	▼	21%
45-54		4	19%		20%
55-64		7	33%	▲	20%
65+		2	10%		7%

Gender

Gender		#	%		State Avg
Female		15	58%	▲	41%
Male		11	42%	▼	59%
Transgender					0%

Ethnicity

Ethnicity		#	%		State Avg
Non-Hispanic		23	88%	▲	71%
Hispanic-Other		2	8%		7%
Hisp-Puerto Rican		1	4%		12%
Hispanic-Cuban					0%
Hispanic-Mexican					1%
Unknown					9%

Race

Race		#	%		State Avg
White/Caucasian		23	88%	▲	64%
Black/African American		2	8%		16%
Other		1	4%		13%
Am. Indian/Native Alaskan					1%
Asian					1%
Multiple Races					1%
Hawaiian/Other Pacific Islander					0%
Unknown					5%

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

420 Post Road SA OP 790200
Positive Directions
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	16	63%	▲
Admits	11	9	22%	▲
Discharges	4	2	100%	▲
Service Hours	111	90	24%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	99%	92%
✔	Valid TEDS Data	100%	90%

On-Time Periodic		Actual	State Avg
✔	6 Month Updates	91%	31%

Co-occurring		Actual	State Avg
✔	MH Screen Complete	100%	91%
✔	SA Screen Complete	100%	97%

Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	99%
✔	Valid Axis V GAF Score	100%	97%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				67%
Services				67%

1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Treatment Completed Successfully		0	0%	50%	54%	-50%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Not Arrested		24	92%	75%	79%	17%	▲
✔ Employed		16	62%	50%	40%	12%	▲
● Abstinence/Reduced Drug Use		14	54%	55%	48%	-1%	
● Stable Living Situation		22	85%	95%	78%	-10%	
● Self Help		8	31%	60%	28%	-29%	▼
● Improved/Maintained Axis V GAF Score		3	20%	75%	47%	-55%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Clients Receiving Services		21	95%	90%	59%	5%	

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		7	64%	75%	67%	-11%	▼

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 113 Active Standard Outpatient Programs