Wellmore

Waterbury, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

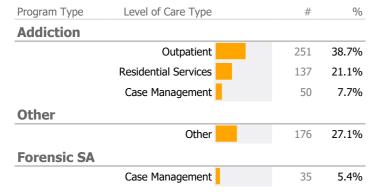
Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)



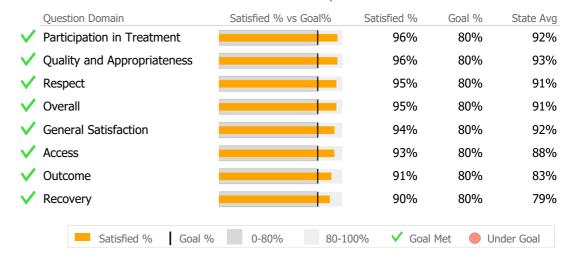
▲ > 10% Over 1 Yr Ago

▼ > 10% Under 1Yr Ago

Clients by Level of Care



Consumer Satisfaction Survey (Based on 544 FY19 Surveys)



Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	46	10%	9%	Male 🗾	387	82%	▲ 59%
26-34	140	30%	22%	Female 📒 📔	83	18%	▼ 41%
35-44	143	30%	21%	Transgender			0%
45-54	94	20%	20%				
55-64	43	9%	▼ 20%				
65+	4	1%	7%	Race	#	%	State Avg
				White/Caucasian	189	40%	▼ 64%
Ethnicity	#	%	State Avg	Black/African American 📙	150	32%	▲ 16%
Non-Hispanic	334	71%	71%	Other 📙	124	26%	▲ 13%
Hisp-Puerto Rican	117	25%	▲ 12%	Am. Indian/Native Alaskan	4	1%	1%
Hispanic-Other	16	3%	7%	Hawaiian/Other Pacific Islander	2	0%	0%
Hispanic-Cuban	2	0%	0%	Asian	1	0%	1%
				Multiple Races			1%
Hispanic-Mexican	1	0%	1%	Unknown			5%
Unknown			9%				
	Unique C	lients	State Avg	▲ > 10% Over State Avg	> 10% L	Inder St	ate Avg

Program Quality Dashboard

Addiction - Case Management - Standard Case Management

Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	50	43	16%	
Admits	23	31	-26%	▼
Discharges	28	10	180%	
Service Hours	153	141	8%	

Data Submission Quality

Data Entry	Actual St	ate Avg
🗸 Valid NOMS Data	100%	99%
	•	
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	53%

Discharge Outcomes

,		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
V	Treatment Completed Successfully		28	100%	50%	79%	50%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Self Help		49	98%	60%	66%	38%	
\checkmark	Employed		29	58%	20%	27%	38%	
\checkmark	Stable Living Situation		47	94%	80%	84%	14%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		20	91%	90%	76%	1%	

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted		
Admission	S				100%		
Discharge	S				100%		
Services					100%		
		1 or more Records Submitted to DMHAS					

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

* State Avg based on 8 Active Standard Case Management Programs

Program Activity

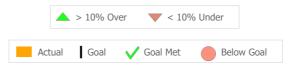
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10	10	0%
Admits	8	7	14% 🔺
Discharges	9	7	29% 🔺
Bed Days	202	217	-7%

Discharge Outcomes



Data Submitted to DMHAS by Month





* State Avg based on 13 Active Recovery House Programs

Program Activity

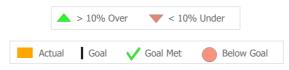
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	73	69	6%
Admits	63	59	7%
Discharges	66	64	3%
Bed Days	1,020	956	7%

Discharge Outcomes



Data Submitted to DMHAS by Month





* State Avg based on 13 Active Recovery House Programs

Other - Other - Integrated Primary Care

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	176		
Admits	67	-	
Discharges	16	-	
Service Hours	366	-	

Data Submission Quality

Pada Entry fieldan State Arg	Data Entry	Actual	State Avg
		Actual	State Avy



Data Submitted to DMHAS by Month





* State Avg based on 6 Active Integrated Primary Care Programs

Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

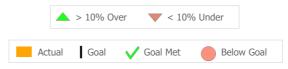
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	50	45	11%	
Admits	34	23	48%	
Discharges	29	26	12%	
Bed Days	1,998	1,806	11%	

Discharge Outcomes



Data Submitted to DMHAS by Month





* State Avg based on 13 Active Recovery House Programs

Forensic SA - Case Management - Standard Case Management

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	8	10	-20%	▼
Admits	5	8	-38%	▼
Discharges	4	5	-20%	▼
Service Hours	59	31	87%	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	6%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted	
Admissions				100%	
Discharges				67%	
Services				100%	
1 or more Records Submitted to DMHAS					

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Treatment Completed Successfully		3	75%	50%	57%	25% 🔺
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Social Support		7	88%	60%	82%	28% 🔺
\checkmark	Self Help		6	75%	60%	83%	15% 🔺
\checkmark	Stable Living Situation		7	88%	80%	31%	8%
	Employed	_ '	1	12%	20%	11%	-8%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Clients Receiving Services		4	100%	90%	57%	10%

	>	10% Ove	er	▼ < 10%	Unde	er	
Actu	al	Goal	\checkmark	Goal Met		Belo	w Goal

* State Avg based on 8 Active Standard Case Management Programs

Forensic SA - Case Management - Standard Case Management

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	32	27	19%	
Admits	26	16	63%	
Discharges	16	20	-20%	▼
Service Hours	148	104	42%	

Data Submission Quality

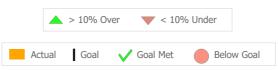
Data Entry	Actual St	tate Avg
Valid NOMS Data	100%	99%
	•	
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	6%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted		
Admissions				100%		
Discharges				100%		
Services				100%		
1 or more Records Submitted to DMHAS						

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V Treatment Completed Successfully		14	88%	50%	57%	38% 🔺
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V Social Support		21	66%	60%	82%	6%
Employed	<u> </u>	6	19%	20%	11%	-1%
Self Help	· ·	18	56%	60%	83%	-4%
Stable Living Situation		14	44%	80%	31%	-36% 🔷
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		15	94%	90%	57%	4%



* State Avg based on 8 Active Standard Case Management Programs

Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

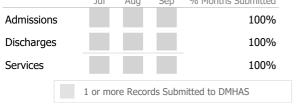
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	251	269	-7%
Admits	221	221	0%
Discharges	188	224	-16% 🔻
Service Hours	686	816	-16% 🔻

Data Submission Quality

Data Entry	Actual S	tate Avg
Valid NOMS Data	100%	92%
Valid TEDS Data	87%	90%
I		
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	31%
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	91%
V SA Screen Complete	100%	97%
, i i i i i i i i i i i i i i i i i i i	1	

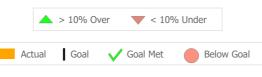
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	100%	97%

Data Submitted to DMHAS by Month



Discharge Outcomes

/s Goal	
21%	
vs Goal	
23%	
-2%	
-3%	
-8%	
-24%	▼
-32%	-
s Goal	
9%	
s Goal	
22%	
	vs Goal 9%



* State Avg based on 113 Active Standard Outpatient Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	14	18	-22% 🔻
Admits	8	12	-33% 🔻
Discharges	7	11	-36% 🔻
Bed Days	677	601	13% 🔺

Data Submission Quality

Data Entry	Actual S	tate Avg
Valid NOMS Data	100%	83%
Valid TEDS Data	100%	90%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	77%
V SA Screen Complete	100%	78%
•		

Diagnosis	Actual	State Avg	
Valid Axis I Diagnosis	100%	98%	
Valid Axis V GAF Score	100%	96%	

Data Submitted to DMHAS by Month

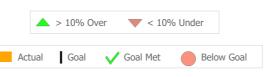
	Jui	Aug	Seb	70 Months Submitted				
Admissions				100%				
Discharges				100%				
	1 or more Records Submitted to DMHAS							

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Com	npleted Successfully		5	71%	70%	76%	1%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit w	ithin 30 Days of Discharge		7	100%	85%	90%	15%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up withi	in 30 Days of Discharge		3	60%	90%	72%	-30%
Recovery	/						
National Recovery	/ Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Red	luced Drug Use		7	50%	70%	64%	-20%
Improved/Main	tained Axis V GAF Score		6	86%	95%	78%	-9%

Bed Utilization

			12	Months	Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Avg Utilization I	Rate				8	89 days	0.6	92%	90%	99%	2%
		<	< 90%		90-110%		>110%					



* State Avg based on 28 Active Intermediate/Long Term Res.Tx 3.5 Programs