**Mental Health Connecticut**
West Hartford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2019 - December 2019   (Data as of Apr 06, 2020)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|---|
| | Unique Clients | 820 | 753 | 9% |
| | Admits | 138 | 137 | 1% |
| | Discharges | 110 | 121 | -9% |
| | Service Hours | 12,224 | 13,560 | -10% |
| | Bed Days | 16,742 | 16,928 | -1% |
| | S.Rehab/PHP/IOP | 5,124 | 5,150 | -1% |

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

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Residential Services | 317 | 34.8% |
| | Social Rehabilitation | 293 | 32.2% |
| | Employment Services | 98 | 10.8% |
| | Case Management | 96 | 10.5% |
| | Recovery Support | 58 | 6.4% |
| | Community Support | 26 | 2.9% |
| | Education Support | 22 | 2.4% |

## Consumer Satisfaction Survey   (Based on 368 FY19 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Access | | 96% | 80% | 88% |
| ✓ | Quality and Appropriateness | | 94% | 80% | 93% |
| ✓ | General Satisfaction | | 93% | 80% | 92% |
| ✓ | Participation in Treatment | | 93% | 80% | 92% |
| ✓ | Overall | | 93% | 80% | 91% |
| ✓ | Respect | | 92% | 80% | 91% |
| ✓ | Outcome | | 81% | 80% | 83% |
| ● | Recovery | | 79% | 80% | 79% |

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

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 40 | 5% | 10% |
| 26-34 | 115 | 14% | 23% |
| 35-44 | 143 | 17% | 22% |
| 45-54 | 178 | 22% | 20% |
| 55-64 | 258 | 31% ▲ | 19% |
| 65+ | 86 | 10% | 7% |

### Gender

| | # | % | State Avg |
|---|---|---|---|
| Male | 494 | 60% | 60% |
| Female | 326 | 40% | 40% |
| Transgender | | | 0% |

### Ethnicity

| | # | % | State Avg |
|---|---|---|---|
| Non-Hispanic | 672 | 82% ▲ | 70% |
| Hispanic-Other | 76 | 9% | 8% |
| Hisp-Puerto Rican | 44 | 5% | 12% |
| Unknown | 27 | 3% | 9% |
| Hispanic-Cuban | 1 | 0% | 0% |
| Hispanic-Mexican | | | 1% |

### Race

| | # | % | State Avg |
|---|---|---|---|
| White/Caucasian | 541 | 66% | 63% |
| Black/African American | 178 | 22% | 17% |
| Other | 70 | 9% | 13% |
| Unknown | 18 | 2% | 5% |
| Multiple Races | 5 | 1% | 1% |
| Am. Indian/Native Alaskan | 4 | 0% | 1% |
| Asian | 4 | 0% | 1% |
| Hawaiian/Other Pacific Islander | | | 0% |

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

**22 Depindeo Ave 24HR-SupvApt 251**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 6 | 5 | 20% | ▲ |
| Admits | 1 | - | | |
| Discharges | 2 | - | | |
| Bed Days | 695 | 920 | -24% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 2 | 100% | 60% | 68% | 40% | ▲ |
| ✓ | Follow-up within 30 Days of Discharge | | 2 | 100% | 90% | 81% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 4 | 67% | 60% | 85% | 7% | |
| ✓ | Stable Living Situation | | 6 | 100% | 95% | 92% | 5% | |
| ● | Employed | | 0 | 0% | 25% | 10% | -25% | ▼ |
| ● | Improved/Maintained Axis V GAF Score | | 0 | 0% | 95% | 62% | -95% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 100% | 53% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 89% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| | MH Screen Complete | 12% | 50% |
| | SA Screen Complete | 12% | 49% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 99% |
| ✓ | Valid Axis V GAF Score | 100% | 94% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 5 | 1,724 days | 0.5 | 76% | 90% | 93% | -14% | ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 17% |
| 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

**22 Depindeo Ave SupvAptDisch 250**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 3 | 2 | 50% | ▲ |
| Admits | 1 | - | | |
| Discharges | - | - | | |
| Bed Days | 430 | 368 | 17% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 53% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 89% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 50% | 50% |
| SA Screen Complete | | 0% | 49% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | ▢ | | | 17% |
| 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 | 60% | 68% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 81% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 2 | 67% | 60% | 85% | 7% | |
| ✓ Stable Living Situation | | 3 | 100% | 95% | 92% | 5% | |
| ● Employed | | 0 | 0% | 25% | 10% | -25% | ▼ |
| ● Improved/Maintained Axis V GAF Score | | 0 | 0% | 95% | 62% | -95% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 2 | 2,393 days | 0.4 | 117% | 90% | 93% | 27% | ▲ |

▢ < 90%   ▢ 90-110%   ▮ >110%

▲ > 10% Over    ▼ < 10% Under

▮ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

**2nd Init-Supv Apts 514-253Y**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 13 | 13 | 0% | |
| Admits | 3 | 2 | 50% | ▲ |
| Discharges | 1 | 1 | 0% | |
| Bed Days | 1,968 | 2,173 | -9% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 98% | 53% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 89% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 79% | 50% |
| ✓ | SA Screen Complete | 71% | 49% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 99% |
| | Valid Axis V GAF Score | 92% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 50% |
| Discharges | | | | | | | 17% |

☐ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 1 | 100% | 60% | 68% | 40% | ▲ |
| ✓ | Follow-up within 30 Days of Discharge | | 1 | 100% | 90% | 81% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 11 | 85% | 60% | 85% | 25% | ▲ |
| ✓ | Stable Living Situation | | 13 | 100% | 95% | 92% | 5% | |
| ● | Employed | | 0 | 0% | 25% | 10% | -25% | ▼ |
| ● | Improved/Maintained Axis V GAF Score | | 0 | 0% | 95% | 62% | -95% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 13 | 1,841 days | 0.6 | 82% | 90% | 93% | -8% |

☐ < 90%   ☐ 90-110%   ☐ >110%

▲ > 10% Over   ▼ < 10% Under

☐ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

**30 Peck Rd ResSup 514-261**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 36 | 47 | -23% | ▼ |
| Admits | 3 | 6 | -50% | ▼ |
| Discharges | 11 | 10 | 10% | |
| Service Hours | 1,062 | 1,427 | -26% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 11 | 100% | 50% | 85% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 36 | 100% | 85% | 98% | 15% | ▲ |
| ✓ | Social Support | | 24 | 67% | 60% | 84% | 7% | |
| ● | Employed | | 4 | 11% | 25% | 11% | -14% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 99% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 98% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 24 | 96% | 90% | 97% | 6% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | ■ | ■ | ■ | | 50% |
| Discharges | ■ | | ■ | ■ | ■ | | 67% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual  | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 25 Active Residential Support Programs

**345 Main St., Supp Apt 514-260**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 55 | 64 | -14% | ▼ |
| Admits | 7 | 8 | -13% | ▼ |
| Discharges | 5 | 10 | -50% | ▼ |
| Service Hours | 925 | 1,244 | -26% | ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 98% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 97% | 94% |
| ✓ | SA Screen Complete | 97% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 94% |
| ✓ | Valid Axis V GAF Score | 100% | 80% |

## Discharge Outcomes

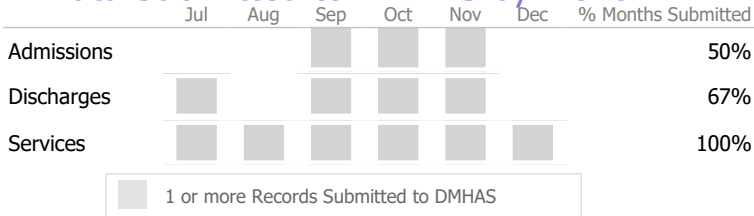| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 5 | 100% | 50% | 85% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 51 | 93% | 60% | 84% | 33% | ▲ |
| ✓ | Stable Living Situation | | 54 | 98% | 85% | 98% | 13% | ▲ |
| ● | Employed | | 5 | 9% | 25% | 11% | -16% | ▼ |
| ● | Improved/Maintained Axis V GAF Score | | 43 | 84% | 95% | 56% | -11% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 50 | 100% | 90% | 97% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 67% |
| Discharges | | | | | | | 83% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 25 Active Residential Support Programs

**345 Main St., Supv Apt 514-252**
Mental Health Connecticut

Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 21 | 22 | -5% | |
| Admits | 4 | 3 | 33% | ▲ |
| Discharges | 3 | 2 | 50% | ▲ |
| Bed Days | 3,626 | 3,587 | 1% | |

## Discharge Outcomes

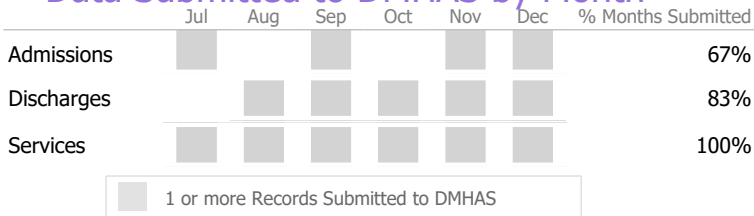| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 3 | 100% | 60% | 68% | 40% | ▲ |
| ✓ Follow-up within 30 Days of Discharge | | 3 | 100% | 90% | 81% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 22 | 100% | 60% | 85% | 40% | ▲ |
| ✓ Stable Living Situation | | 22 | 100% | 95% | 92% | 5% | |
| ● Improved/Maintained Axis V GAF Score | | 17 | 94% | 95% | 62% | -1% | |
| ● Employed | | 1 | 5% | 25% | 10% | -20% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 53% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 89% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 50% |
| ✓ SA Screen Complete | | 100% | 49% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 94% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 20 | 1,179 days | 0.5 | 99% | 90% | 93% | 9% |

■ < 90%   ■ 90-110%   ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ■ | ■ | | ■ | | ■ | 67% |
| 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

**4270 Main St. SupRes 114-252**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 55 | 53 | 4% | |
| Admits | 9 | 4 | 125% | ▲ |
| Discharges | 8 | 5 | 60% | ▲ |
| Service Hours | 1,719 | 2,173 | -21% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 98% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 98% |

## Discharge Outcomes

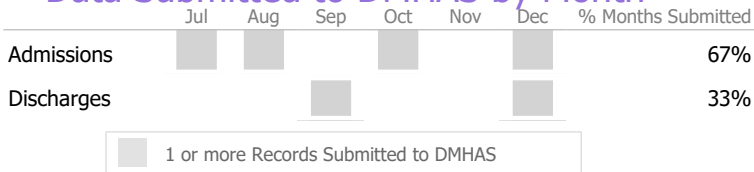| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 8 | 100% | 50% | 85% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 46 | 84% | 60% | 84% | 24% | ▲ |
| ✓ | Stable Living Situation | | 55 | 100% | 85% | 98% | 15% | ▲ |
| ● | Employed | | 2 | 4% | 25% | 11% | -21% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 47 | 100% | 90% | 97% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | | | ▪ | ▪ | 67% |
| 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 25 Active Residential Support Programs

**Bridgeport Residential Supervised - 252**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 18 | 19 | -5% | |
| Admits | 2 | 5 | -60% | ▼ |
| Discharges | 1 | 7 | -86% | ▼ |
| Bed Days | 2,970 | 2,545 | 17% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 95% | 53% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 89% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 58% | 50% |
| ✓ | SA Screen Complete | 53% | 49% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 99% |
| ✓ | Valid Axis V GAF Score | 100% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | ▪ | ▪ | | | 33% |
| Discharges | | ▪ | | | | | 17% |

▪ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

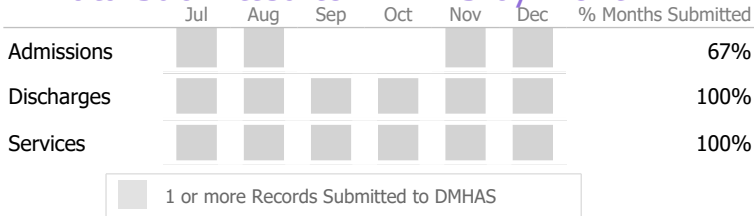| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 1 | 100% | 60% | 68% | 40% | ▲ |
| ● | Follow-up within 30 Days of Discharge | | 0 | 0% | 90% | 81% | -90% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 18 | 100% | 95% | 92% | 5% | |
| ✓ | Social Support | | 11 | 61% | 60% | 85% | 1% | |
| ● | Employed | | 0 | 0% | 25% | 10% | -25% | ▼ |
| ● | Improved/Maintained Axis V GAF Score | | 2 | 12% | 95% | 62% | -83% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 17 | 793 days | 0.5 | 95% | 90% | 93% | 5% |

■ < 90%   ■ 90-110%   ■ >110%
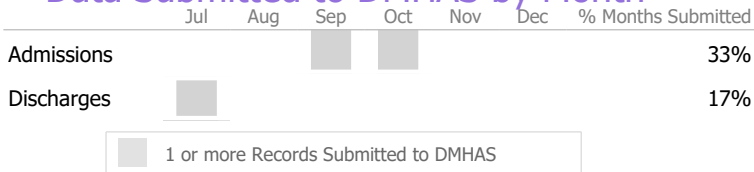
▲ > 10% Over   ▼ < 10% Under

■ Actual   | Goal   ✓ Goal Met   ● Below Goal

\* State Avg based on 80 Active Supervised Apartments Programs

**Bridgeport Supervised Apts 114-250**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 6 | -17% | ▼ |
| Admits | 1 | 1 | 0% | |
| Discharges | 1 | 1 | 0% | |
| Bed Days | 761 | 919 | -17% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 53% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 89% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 60% | 50% |
| SA Screen Complete | | 20% | 49% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 17% |
| Discharges | | | | | | | 17% |

■ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 1 | 100% | 60% | 68% | 40% | ▲ |
| ✓ Follow-up within 30 Days of Discharge | | 1 | 100% | 90% | 81% | 10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 4 | 80% | 60% | 85% | 20% | ▲ |
| ✓ Stable Living Situation | | 5 | 100% | 95% | 92% | 5% | |
| ● Employed | | 0 | 0% | 25% | 10% | -25% | ▼ |
| ● Improved/Maintained Axis V GAF Score | | 1 | 20% | 95% | 62% | -75% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 5 | 735 days | 0.6 | 83% | 90% | 93% | -7% |

■ < 90%    ■ 90-110%    ■ >110%

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

**CAC22 Respite Support 514-250R**
Mental Health Connecticut
Mental Health - Residential Services - Transitional

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 13 | 17 | -24% | ▼ |
| Admits | 6 | 12 | -50% | ▼ |
| Discharges | 5 | 11 | -55% | ▼ |
| Bed Days | 1,365 | 1,268 | 8% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 5 | 100% | 95% | 78% | 5% | |
| ✓ | No Re-admit within 30 Days of Discharge | | 5 | 100% | 85% | 94% | 15% | ▲ |
| ✓ | Follow-up within 30 Days of Discharge | | 5 | 100% | 90% | 80% | 10% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 78% | 96% |

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

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 100% |
| ✓ SA Screen Complete | | 100% | 100% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 97% |
| Valid Axis V GAF Score | | 85% | 92% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Improved/Maintained Axis V GAF Score | | 0 | 0% | 75% | 75% | -75% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 8 | 199 days | 0.4 | 93% | 90% | 85% | 3% |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 67% |
| Discharges | | | | | | | 50% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| ■ Actual | | Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|---|

* State Avg based on 6 Active Transitional Programs

**DHOH Employment Supports**
Mental Health Connecticut
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

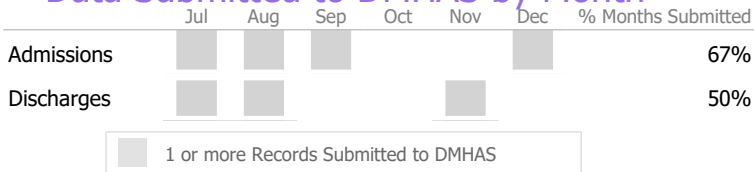| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 9 | 10 | -10% | |
| Admits | - | 1 | -100% | ▼ |
| Discharges | - | 1 | -100% | ▼ |
| Service Hours | 360 | 303 | 19% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 9 | 100% | 35% | 44% | 65% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 9 | 100% | 90% | 95% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 98% | 85% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 0% |
| Discharges | | | | | | | 0% |
| Services | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

☐ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 42 Active Employment Services Programs

**Employ Svs DHOH - R4 614270**
Mental Health Connecticut
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)
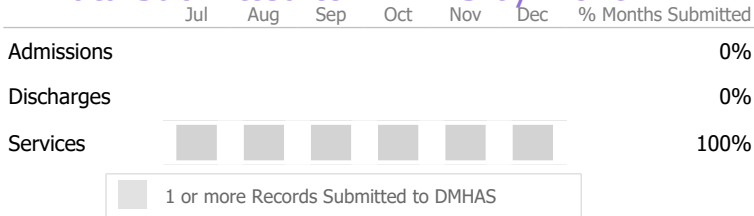
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 25 | 27 | -7% | |
| Admits | 3 | 3 | 0% | |
| Discharges | 1 | 6 | -83% | ▼ |
| Service Hours | 709 | 532 | 33% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 17 | 68% | 35% | 44% | 33% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 24 | 100% | 90% | 95% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 85% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | ▢ | | | | ▢ | 33% |
| Discharges | | | | | | ▢ | 17% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 42 Active Employment Services Programs

**Forensic Supportive Housing - 811556**
Mental Health Connecticut
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)
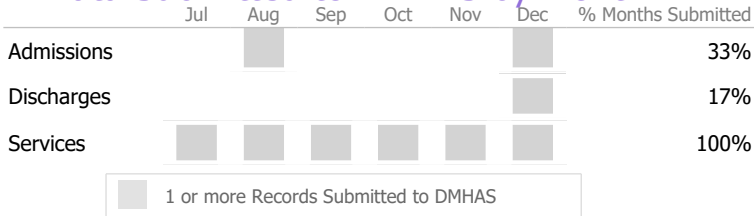
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 9 | 5 | 80% | ▲ |
| Admits | 2 | - | | |
| Discharges | 1 | - | | |
| Service Hours | 247 | 195 | 27% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 8 | 89% | 85% | 89% | 4% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 7 | 88% | 90% | 95% | -2% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 95% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 91% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | ■ | | 17% |
| Discharges | ■ | | | | | | 17% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✓ Goal Met     🔴 Below Goal

* State Avg based on 98 Active Supportive Housing – Scattered Site Programs

**Hayden Hill**
Mental Health Connecticut
Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)
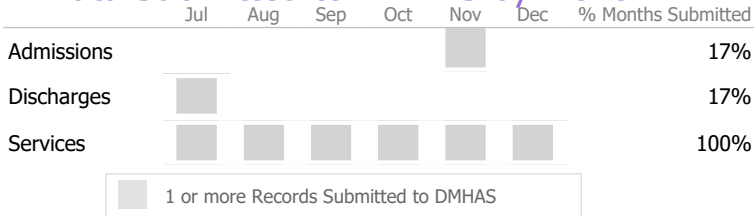
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 4 | 4 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Bed Days | 736 | 736 | 0% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 75% | 69% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 76% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 64% | N/A |

## Data Submission Quality

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

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| ✓ 6 Month Updates | 100% | 87% |

| Co-occurring | Actual | State Avg |
|---|---|---|
| MH Screen Complete | 0% | 88% |
| SA Screen Complete | 0% | 88% |

| Diagnosis | Actual | State Avg |
|---|---|---|
| ✓ Valid Axis I Diagnosis | 100% | 96% |
| ✓ Valid Axis V GAF Score | 100% | 92% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Improved/Maintained Axis V GAF Score | | 0 | 0% | 75% | 49% | -75% ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 4 | 1,615 days | 0.5 | 100% | 90% | 96% | 10% |

■ < 90%    ■ 90-110%    ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % 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 28 Active MH Intensive Res. Rehabilitation Programs

**Hope House 254**
Mental Health Connecticut

Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 10 | 9 | 11% | ▲ |
| Admits | 4 | 3 | 33% | ▲ |
| Discharges | 4 | 4 | 0% | |
| Bed Days | 1,152 | 1,207 | -5% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 95% | 53% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 89% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 93% | 50% |
| ✓ SA Screen Complete | | 93% | 49% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 67% |
| Discharges | | | | | | | 67% |

☐ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 4 | 100% | 60% | 68% | 40% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 3 | 75% | 90% | 81% | -15% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 9 | 90% | 60% | 85% | 30% | ▲ |
| ✓ | Stable Living Situation | | 10 | 100% | 95% | 92% | 5% | |
| 🔴 | Employed | | 0 | 0% | 25% | 10% | -25% | ▼ |
| 🔴 | Improved/Maintained Axis V GAF Score | | 1 | 14% | 95% | 62% | -81% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 7 | 296 days | 0.4 | 89% | 90% | 93% | -1% |
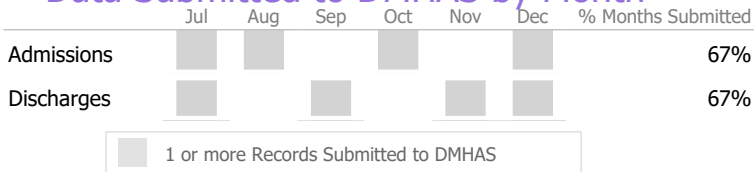
☐ < 90%   ☐ 90-110%   🟥 >110%

▲ > 10% Over   ▼ < 10% Under

🟧 Actual   | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

**Independence Center 21 Church Street Wtbry 514-281**
Mental Health Connecticut
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 293 | 273 | 7% | |
| Admits | 13 | 23 | -43% | ▼ |
| Discharges | 1 | 6 | -83% | ▼ |
| Social Rehab/PHP/IOP Days | 5,124 | 5,150 | -1% | |

## Service Utilization
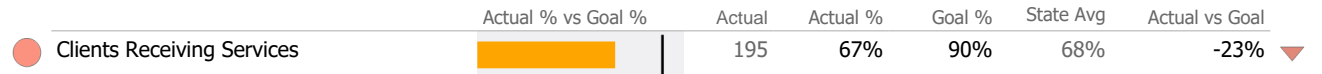
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | ▬▬▬ | 195 | 67% | 90% | 68% | -23% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | | | | ▢ | | | 17% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS
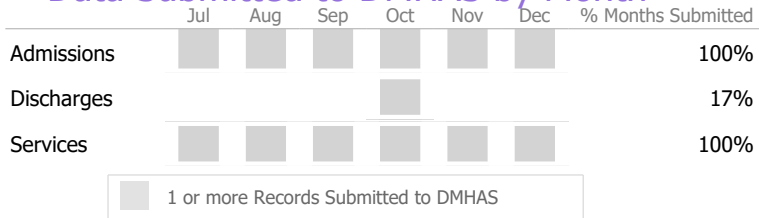
▲ > 10% Over     ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 33 Active Social Rehabilitation Programs

**Main St CVH Trans Res 114-255**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 3 | 3 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 355 | 528 | -33% ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 98% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 94% |
| ✔ SA Screen Complete | | 100% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 94% |
| ✔ Valid Axis V GAF Score | | 100% | 80% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 0% |
| Discharges | | | | | | | 0% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

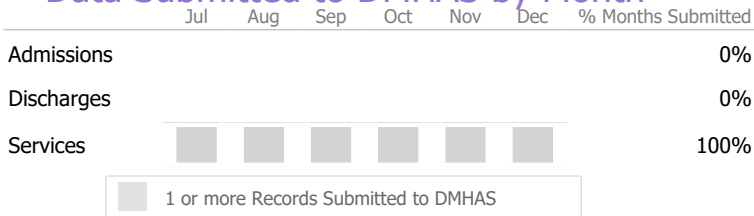| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 85% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 3 | 100% | 85% | 98% | 15% ▲ |
| ✔ Social Support | | 2 | 67% | 60% | 84% | 7% |
| ● Employed | | 0 | 0% | 25% | 11% | -25% ▼ |
| ● Improved/Maintained Axis V GAF Score | | 1 | 33% | 95% | 56% | -62% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 3 | 100% | 90% | 97% | 10% |

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▇ Actual | \| Goal | ✔ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on 25 Active Residential Support Programs

**MHAC Coaching Program 321**
Mental Health Connecticut
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % 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 10 Active Specialing Programs

**MHC/CSP Stamford 114-256**
Mental Health Connecticut
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 26 | 20 | 30% | ▲ |
| Admits | 10 | 6 | 67% | ▲ |
| Discharges | 3 | 4 | -25% | ▼ |
| Service Hours | 326 | 432 | -24% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 72% |

| On-Time Periodic | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 92% |

| Co-occurring | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 80% | 28% |
| ✓ SA Screen Complete | | 66% | 28% |

| Diagnosis | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 98% |
| Valid Axis V GAF Score | | 85% | 96% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | ▢ | ▢ | ▢ | ▢ | ▢ | 83% |
| Discharges | ▢ | ▢ | | | | | 33% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

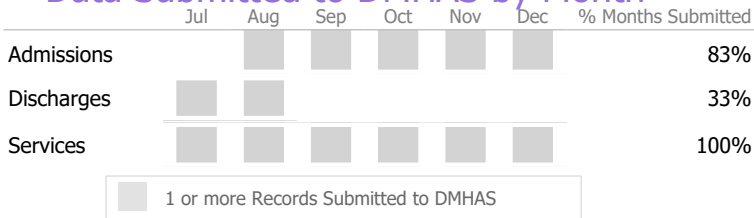| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 3 | 100% | 65% | 60% | 35% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 23 | 88% | 60% | 81% | 28% | ▲ |
| ✓ Stable Living Situation | | 21 | 81% | 80% | 87% | 1% | |
| 🔴 Employed | | 5 | 19% | 20% | 13% | -1% | |
| 🔴 Improved/Maintained Axis V GAF Score | | 0 | 0% | 65% | 63% | -65% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 22 | 96% | 90% | 99% | 6% |

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▮ Actual | ❙ Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|

\* State Avg based on 36 Active CSP Programs

**Next Steps SupportiveHsg514551**
Mental Health Connecticut
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 19 | 18 | 6% | |
| Admits | 2 | 1 | 100% | ▲ |
| Discharges | 2 | 2 | 0% | |
| Service Hours | 238 | 119 | 100% | ▲ |

## Recovery
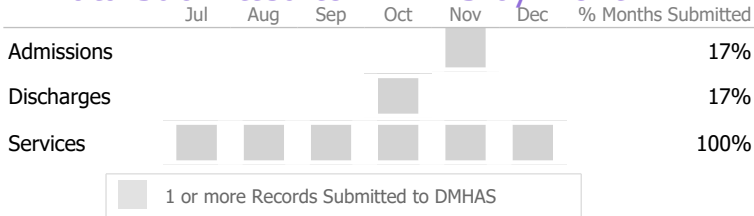
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Stable Living Situation | | 15 | 79% | 85% | 89% | -6% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 17 | 100% | 90% | 95% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 91% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | ◻ | | 17% |
| Discharges | | | | ◻ | | | 17% |
| Services | ◻ | ◻ | ◻ | ◻ | ◻ | ◻ | 100% |

◻ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ◻ Actual | | Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|---|

* State Avg based on 98 Active Supportive Housing – Scattered Site Programs

**NHDTP**
Mental Health Connecticut
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 68 | 3 | 2167% | ▲ |
| Admits | 10 | 2 | 400% | ▲ |
| Discharges | 8 | - | | |
| Service Hours | 54 | - | | |

## Discharge Outcomes

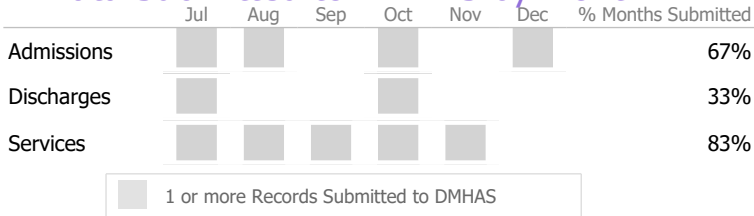| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 8 | 100% | 50% | 55% | 50% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Employed | | 0 | 0% | 20% | 13% | -20% | ▼ |
| ● | Social Support | | 0 | 0% | 60% | 69% | -60% | ▼ |
| ● | Stable Living Situation | | 0 | 0% | 80% | 76% | -80% | ▼ |

## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| Valid NOMS Data | N/A | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ● | 6 Month Updates | 0% | 65% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Clients Receiving Services | | 31 | 52% | 90% | 81% | -38% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 67% |
| Discharges | | | | | | | 33% |
| Services | | | | | | | 83% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 24 Active Standard Case Management Programs

**Res Supp Apts-1st Init114-252X**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 6 | 6 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 810 | 769 | 5% |

## Discharge Outcomes

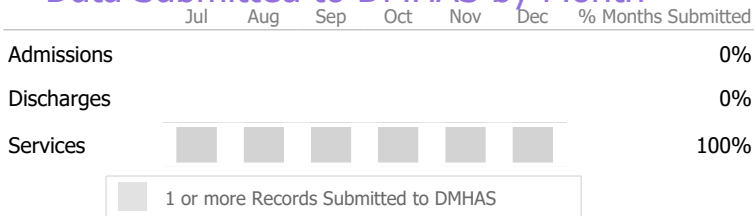| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 85% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Stable Living Situation | | 5 | 83% | 85% | 98% | -2% |
| 🔴 Social Support | | 3 | 50% | 60% | 84% | -10% |
| 🔴 Improved/Maintained Axis V GAF Score | | 5 | 83% | 95% | 56% | -12% 🔻 |
| 🔴 Employed | | 0 | 0% | 25% | 11% | -25% 🔻 |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 90% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 98% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 94% |
| ✓ SA Screen Complete | | 100% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 94% |
| ✓ Valid Axis V GAF Score | | 100% | 80% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 6 | 100% | 90% | 97% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 0% |
| Discharges | | | | | | | 0% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    🔻 < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 25 Active Residential Support Programs

**Robinson House Grp Home 614320**
Mental Health Connecticut
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 11 | 8 | 38% | ▲ |
| Admits | 3 | - | | |
| Discharges | 4 | 1 | 300% | ▲ |
| Bed Days | 1,365 | 1,423 | -4% | |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 97% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 77% | 83% |
| ✓ SA Screen Complete | | 100% | 90% |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▢ | | | | | ▢ | 33% |
| Discharges | ▢ | | ▢ | | | ▢ | 50% |

▢ 1 or more Records Submitted to DMHAS

## Discharge Outcomes

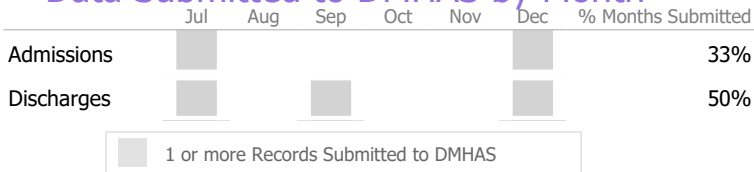| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 4 | 100% | 80% | 88% | 20% | ▲ |
| ● | No Re-admit within 30 Days of Discharge | | 3 | 75% | 85% | 82% | -10% | |
| ✓ | Follow-up within 30 Days of Discharge | | 4 | 100% | 90% | 78% | 10% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 11 | 100% | 60% | 82% | 40% | ▲ |
| ✓ | Stable Living Situation | | 11 | 100% | 90% | 99% | 10% | |
| ● | Improved/Maintained Axis V GAF Score | | 6 | 60% | 95% | 69% | -35% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 8 | 1,090 days | 0.4 | 93% | 90% | 93% | 3% |

■ < 90%   ■ 90-110%   ■ >110%

▲ > 10% Over    ▼ < 10% Under

■ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 24 Active Group Home Programs

**Robinson House Res Supp 614999**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 13 | 10 | 30% | ▲ |
| Admits | 4 | - | | |
| Discharges | 4 | - | | |
| Service Hours | 709 | 620 | 14% | ▲ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 98% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 75% | 94% |
| ✓ SA Screen Complete | | 100% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 94% |
| ✓ Valid Axis V GAF Score | | 100% | 80% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 50% |
| Discharges | | | | | | | 33% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS

## Discharge Outcomes

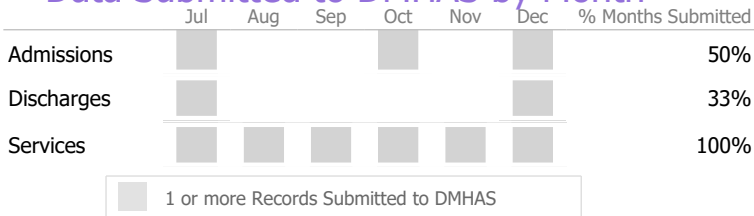| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 4 | 100% | 50% | 85% | 50% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 15 | 100% | 60% | 84% | 40% | ▲ |
| ✓ Employed | | 8 | 53% | 25% | 11% | 28% | ▲ |
| ✓ Stable Living Situation | | 15 | 100% | 85% | 98% | 15% | ▲ |
| ● Improved/Maintained Axis V GAF Score | | 3 | 25% | 95% | 56% | -70% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 11 | 100% | 90% | 97% | 10% | |

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ◼ Actual | │ Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on 25 Active Residential Support Programs

**Specialing, 514-285**
Mental Health Connecticut
Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 13 | -38% | ▼ |
| Admits | 1 | 3 | -67% | ▼ |
| Discharges | - | 4 | -100% | ▼ |
| Service Hours | 290 | 315 | -8% | |

## Data Submitted to DMHAS by Month
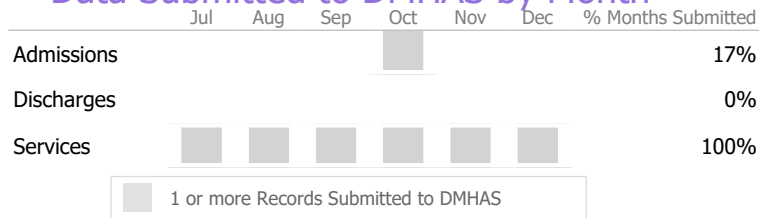
| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | ▢ | | | 17% |
| Discharges | | | | | | | 0% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 10 Active Specialing Programs

**Supported Educ - Reg 5 514271**
Mental Health Connecticut
Mental Health - Education Support - Education Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 22 | 30 | -27% | ▼ |
| Admits | 9 | 9 | 0% | |
| Discharges | 5 | 10 | -50% | ▼ |
| Service Hours | 196 | 238 | -17% | ▼ |

## Recovery

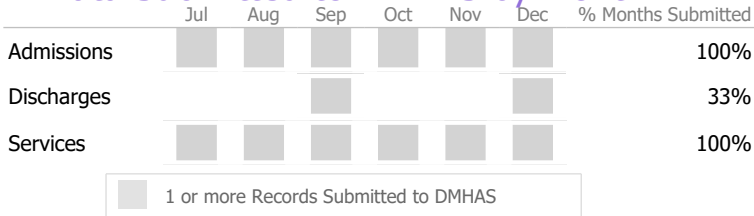| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Enrolled in Educational  Program | | 23 | 100% | 35% | 69% | 65% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 18 | 100% | 90% | 99% | 10% |

## Data Submission Quality

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

| | On-Time Periodic | | Actual | State Avg |
|---|---|---|---|---|
| ✓ | 6 Month Updates | | 100% | 97% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 100% |
| Discharges | | | | | | | 33% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▮ Actual | ❘ Goal | ✓ Goal Met | ⬤ Below Goal |
|---|---|---|---|

* State Avg based on 5 Active Education Support Programs

**TRP Special Supports**
Mental Health Connecticut

Mental Health - Recovery Support - Specialing

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 50 | 43 | 16% | ▲ |
| Admits | 10 | 17 | -41% | ▼ |
| Discharges | 13 | 9 | 44% | ▲ |
| Service Hours | 2,936 | 3,094 | -5% | |

## Data Submitted to DMHAS by Month
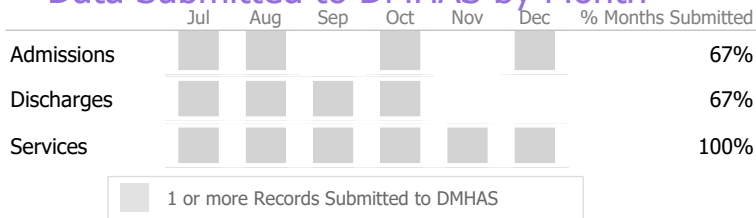
| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | | ▢ | | ▢ | 67% |
| Discharges | ▢ | ▢ | ▢ | ▢ | | | 67% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 10 Active Specialing Programs

**W. Main St. Wtby VocRe 514-270**
Mental Health Connecticut

Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 64 | 64 | 0% | |
| Admits | 23 | 18 | 28% | ▲ |
| Discharges | 18 | 17 | 6% | |
| Service Hours | 524 | 425 | 23% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Employed | | 22 | 34% | 35% | 44% | -1% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 46 | 100% | 90% | 95% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 85% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 94% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % 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 42 Active Employment Services Programs

**West Main St. ResSup 514-262**
Mental Health Connecticut
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 44 | 43 | 2% | |
| Admits | 6 | 6 | 0% | |
| Discharges | 7 | 6 | 17% | ▲ |
| Service Hours | 763 | 1,147 | -34% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 7 | 100% | 50% | 85% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 38 | 86% | 60% | 84% | 26% | ▲ |
| ✓ | Stable Living Situation | | 43 | 98% | 85% | 98% | 13% | ▲ |
| ● | Employed | | 8 | 18% | 25% | 11% | -7% | |
| ● | Improved/Maintained Axis V GAF Score | | 23 | 59% | 95% | 56% | -36% | ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ● | 6 Month Updates | 97% | 98% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 98% | 94% |
| ✓ | SA Screen Complete | 98% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 94% |
| ✓ | Valid Axis V GAF Score | 100% | 80% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 36 | 97% | 90% | 97% | 7% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | | ▢ | | 83% |
| Discharges | ▢ | ▢ | ▢ | ▢ | | | 67% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

Legend:
▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 25 Active Residential Support Programs

**West Main St. SupRes 514-251**
Mental Health Connecticut
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - December 2019  (Data as of Apr 06, 2020)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 11 | 14 | -21% | ▼ |
| Admits | 1 | 4 | -75% | ▼ |
| Discharges | 2 | 4 | -50% | ▼ |
| Bed Days | 1,674 | 1,782 | -6% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 2 | 100% | 60% | 68% | 40% | ▲ |
| ✓ | Follow-up within 30 Days of Discharge | | 2 | 100% | 90% | 81% | 10% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 9 | 82% | 60% | 85% | 22% | ▲ |
| ✓ | Stable Living Situation | | 11 | 100% | 95% | 92% | 5% | |
| ● | Improved/Maintained Axis V GAF Score | | 8 | 80% | 95% | 62% | -15% | ▼ |
| ● | Employed | | 0 | 0% | 25% | 10% | -25% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 53% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 89% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 50% |
| ✓ SA Screen Complete | | 100% | 49% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 94% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 10 | 1,429 days | 0.5 | 91% | 90% | 93% | 1% |

■ < 90%    ■ 90-110%    ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | ■ | 17% |
| 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