Perception Programs Inc
Willimantic, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2019 - March 2020   (Data as of Jul 15, 2020)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	1,327	1,596	-17%	▼
	Admits	967	1,243	-22%	▼
	Discharges	911	1,398	-35%	▼
	Service Hours	8,887	6,803	31%	▲
	Bed Days	4,126	4,776	-14%	▼
	S.Rehab/PHP/IOP	1,616	1,877	-14%	▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	1,112	65.5%
	Case Management	259	15.3%
	IOP	192	11.3%
	Residential Services	72	4.2%
Mental Health			
	Case Management	63	3.7%

Consumer Satisfaction Survey   (Based on 63 FY19 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Overall		94%	80%	91%
✓	Outcome		94%	80%	83%
✓	Quality and Appropriateness		94%	80%	93%
✓	Participation in Treatment		92%	80%	92%
✓	General Satisfaction		89%	80%	92%
✓	Recovery		86%	80%	79%
✓	Respect		83%	80%	91%
✓	Access		81%	80%	88%

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

Client Demographics

Age

Age	#	%	State Avg
18-25	149	12%	11%
26-34	368	28%	23%
35-44	357	28%	22%
45-54	261	20%	20%
55-64	136	11%	18%
65+	23	2%	6%

Gender

Gender	#	%	State Avg
Male	714	54%	60%
Female	613	46%	40%
Transgender			0%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	906	68%	70%
Hisp-Puerto Rican	277	21%	12%
Hispanic-Other	87	7%	8%
Unknown	39	3%	10%
Hispanic-Mexican	14	1%	1%
Hispanic-Cuban	4	0%	0%

Race

Race	#	%		State Avg
White/Caucasian	1,015	76%	▲	62%
Other	158	12%		13%
Black/African American	116	9%		17%
Unknown	23	2%		5%
Am. Indian/Native Alaskan	6	0%		1%
Hawaiian/Other Pacific Islander	6	0%		0%
Asian	2	0%		1%
Multiple Races	1	0%		1%

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

Behavioral Health Center OP Willimantic 026200
Perception Programs Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	786	906	-13% ▼
Admits	500	510	-2%
Discharges	453	659	-31% ▼
Service Hours	5,949	4,034	47% ▲

Data Submission Quality

Data Entry	Actual % vs State	Actual	State Avg
✓ Valid NOMS Data		96%	91%
Valid TEDS Data		85%	90%

On-Time Periodic		Actual	State Avg
● 6 Month Updates		12%	20%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		99%	88%
✓ SA Screen Complete		99%	98%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	99%
✓ Valid Axis V GAF Score		100%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		367	81%	50%	52%	31% ▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		514	58%	55%	51%	3%
✓ Not Arrested		671	75%	75%	82%	0%
● Stable Living Situation		710	80%	95%	82%	-15% ▼
● Employed		239	27%	50%	43%	-23% ▼
● Improved/Maintained Axis V GAF Score		400	58%	75%	58%	-17% ▼
● Self Help		231	26%	60%	26%	-34% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		395	90%	90%	66%	0%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		277	63%	75%	70%	-12% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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
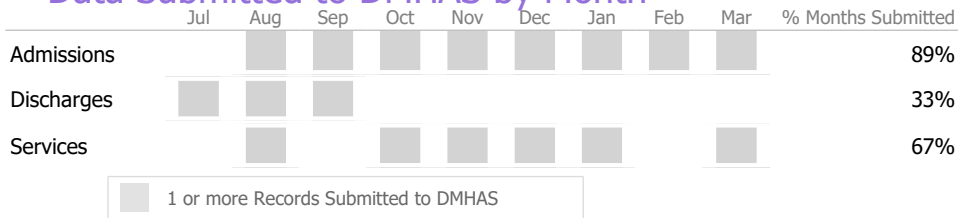
* State Avg based on 115 Active Standard Outpatient Programs

CM Latino Outreach 026721
Perception Programs Inc
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	259	372	-30%	▼
Admits	41	163	-75%	▼
Discharges	3	126	-98%	▼
Service Hours	366	997	-63%	▼

Service Engagement
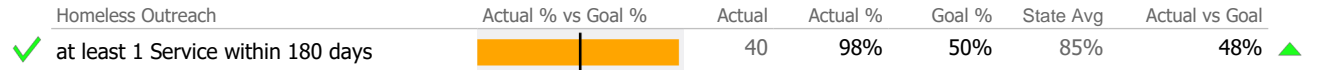
Homeless Outreach		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	at least 1 Service within 180 days		40	98%	50%	85%	48%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		▢	▢	▢	▢	▢	▢	▢	▢	89%
Discharges	▢	▢	▢							33%
Services		▢		▢	▢	▢	▢		▢	67%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✓ Goal Met   ● Below Goal

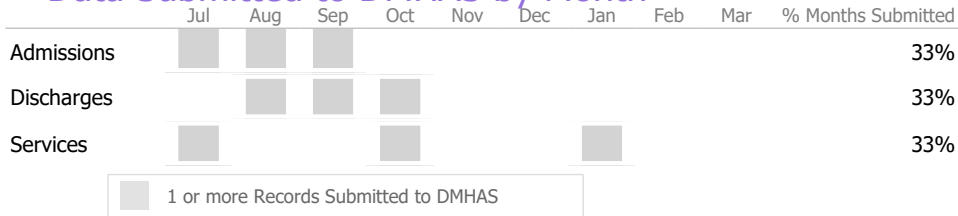* State Avg based on 21 Active Outreach & Engagement Programs

CM Shelter Outreach 850-294
Perception Programs Inc
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	62	62	0%	
Admits	6	26	-77%	▼
Discharges	50	18	178%	▲
Service Hours	29	99	-71%	▼

Service Engagement
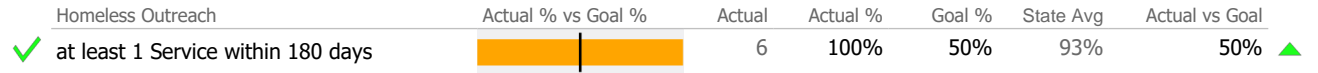
Homeless Outreach		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	at least 1 Service within 180 days		6	100%	50%	93%	50%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▢	▢	▢							33%
Discharges		▢	▢	▢						33%
Services	▢			▢			▢			33%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 46 Active Outreach & Engagement Programs

Danielson-IOP 026736
Perception Programs Inc
Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	45	59	-24%	▼
Admits	35	53	-34%	▼
Discharges	41	50	-18%	▼
Service Hours	61	82	-26%	▼
Social Rehab/PHP/IOP Days	384	428	-10%	

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		99%	94%
Valid TEDS Data		95%	97%

On-Time Periodic		Actual	State Avg
● 6 Month Updates		0%	4%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	92%
✓ SA Screen Complete		100%	92%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		40	98%	50%	56%	48%	▲
●	Follow-up within 30 Days of Discharge		26	65%	90%	63%	-25%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		42	89%	75%	78%	14%	▲
✓	Improved/Maintained Axis V GAF Score		41	91%	75%	72%	16%	▲
●	Abstinence/Reduced Drug Use		25	53%	55%	42%	-2%	
●	Stable Living Situation		41	87%	95%	83%	-8%	
●	Employed		14	30%	50%	35%	-20%	▼
●	Self Help		9	19%	60%	16%	-41%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		4	67%	90%	77%	-23%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										89%
Discharges										100%
Services										100%
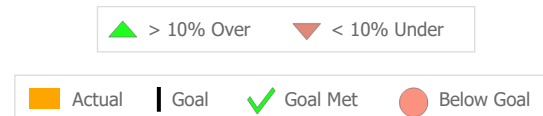
□ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 53 Active Standard IOP Programs

OP Danielson 026203
Perception Programs Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	333	403	-17%	▼
Admits	203	259	-22%	▼
Discharges	187	298	-37%	▼
Service Hours	2,149	1,314	64%	▲

Data Submission Quality

Data Entry	Actual % vs Goal	Actual	State Avg
✓ Valid NOMS Data		99%	91%
Valid TEDS Data		82%	90%

On-Time Periodic		Actual	State Avg
● 6 Month Updates		2%	20%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		99%	88%
✓ SA Screen Complete		99%	98%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	99%
✓ Valid Axis V GAF Score		100%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		177	95%	50%	52%	45%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		300	82%	75%	82%	7%	
● Abstinence/Reduced Drug Use		193	53%	55%	51%	-2%	
● Stable Living Situation		311	85%	95%	82%	-10%	
● Employed		134	37%	50%	43%	-13%	▼
● Improved/Maintained Axis V GAF Score		182	64%	75%	58%	-11%	▼
● Self Help		50	14%	60%	26%	-46%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		173	95%	90%	66%	5%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		117	65%	75%	70%	-10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 115 Active Standard Outpatient Programs

PATH - CM Outreach and Eng
Perception Programs Inc
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3	3	0%
Admits	-	3	-100% ▼
Discharges	-	-	
Service Hours	-	-	

Service Engagement
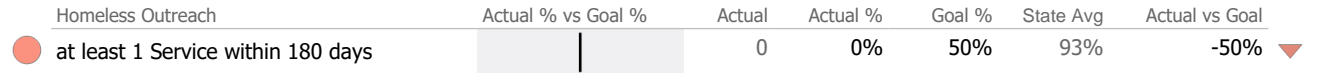
Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● at least 1 Service within 180 days		0	0%	50%	93%	-50% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%
Services										0%

1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

■ Actual		Goal	✓ Goal Met	● Below Goal

* State Avg based on 46 Active Outreach & Engagement Programs

Perception House-CSSD 02640C
Perception Programs Inc
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	35	44	-20%	▼
Admits	27	31	-13%	▼
Discharges	29	32	-9%	
Bed Days	2,131	2,569	-17%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		19	66%	70%	76%	-4%	
✔	No Re-admit within 30 Days of Discharge		27	93%	85%	92%	8%	
🔴	Follow-up within 30 Days of Discharge		15	79%	90%	72%	-11%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	99%	83%
✔	Valid TEDS Data	100%	94%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	40%

Co-occurring		Actual	State Avg
✔	MH Screen Complete	100%	85%
✔	SA Screen Complete	98%	85%

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

Recovery

National Recovery Measures (NOMS)

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Abstinence/Reduced Drug Use		32	89%	70%	71%	19%	▲
✔	Improved/Maintained Axis V GAF Score		29	100%	95%	89%	5%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		10	90 days	0.2	77%	90%	99%	-13%	▼
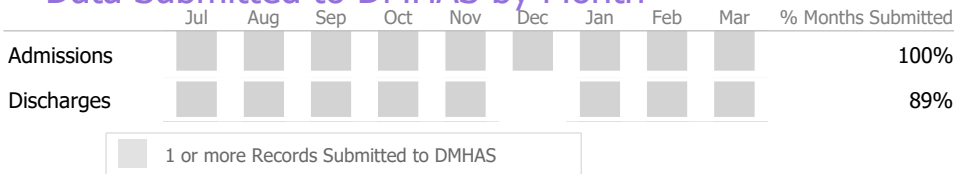
■ < 90% ■ 90-110% ■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%
Discharges	▢	▢	▢	▢	▢		▢	▢	▢	89%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✔ Goal Met 🔴 Below Goal

* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Perception House-DMHAS 026400
Perception Programs Inc
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - March 2020   (Data as of Jul 15, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	37	39	-5%
Admits	29	25	16% ▲
Discharges	29	29	0%
Bed Days	1,995	2,207	-10%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Treatment Completed Successfully		20	69%	70%	76%	-1%
✅	No Re-admit within 30 Days of Discharge		25	86%	85%	92%	1%
🔴	Follow-up within 30 Days of Discharge		17	85%	90%	72%	-5%

Data Submission Quality

Data Entry		Actual	State Avg
✅	Valid NOMS Data	98%	83%
✅	Valid TEDS Data	100%	94%

On-Time Periodic		Actual	State Avg
	6 Month Updates	N/A	40%

Co-occurring		Actual	State Avg
✅	MH Screen Complete	100%	85%
✅	SA Screen Complete	100%	85%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✅	Abstinence/Reduced Drug Use		28	74%	70%	71%	4%
✅	Improved/Maintained Axis V GAF Score		28	97%	95%	89%	2%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Avg Utilization Rate		10	94 days	0.2	73%	90%	99%	-17% ▼

🟦 < 90%	⬜ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%

⬜ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

🟧 Actual	❘ Goal	✅ Goal Met	🔴 Below Goal

* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Willimantic-IOP 026735
Perception Programs Inc
Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	148	215	-31%	▼
Admits	126	173	-27%	▼
Discharges	119	186	-36%	▼
Service Hours	334	277	21%	▲
Social Rehab/PHP/IOP Days	1,232	1,449	-15%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		94%	94%
✔ Valid TEDS Data		96%	97%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		0%	4%

Co-occurring		Actual	State Avg
✔ MH Screen Complete		100%	92%
✔ SA Screen Complete		100%	92%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		100	84%	50%	56%	34%	▲
🔴	Follow-up within 30 Days of Discharge		72	72%	90%	63%	-18%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Abstinence/Reduced Drug Use		116	73%	55%	42%	18%	▲
✔	Improved/Maintained Axis V GAF Score		114	86%	75%	72%	11%	▲
🔴	Not Arrested		114	72%	75%	78%	-3%	
🔴	Stable Living Situation		134	84%	95%	83%	-11%	▼
🔴	Self Help		56	35%	60%	16%	-25%	▼
🔴	Employed		26	16%	50%	35%	-34%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		27	66%	90%	77%	-24%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 53 Active Standard IOP Programs