

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	466	455	2%
	Admits	382	342	12% ▲
	Discharges	362	356	2%
	Service Hours	287	337	-15% ▼
	Bed Days	1,274	1,171	9%

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

Consumer Satisfaction Survey

(Based on 252 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Overall		92%	80%	91%
✓ Quality and Appropriateness		92%	80%	93%
✓ Respect		91%	80%	91%
✓ General Satisfaction		91%	80%	92%
✓ Participation in Treatment		89%	80%	92%
✓ Access		88%	80%	88%
✓ Outcome		87%	80%	83%
✓ Recovery		85%	80%	79%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction	Residential Services	328	70.2%
	Medication Assisted Treatment	126	27.0%
Mental Health	Case Management	13	2.8%

Client Demographics

Age	#	%	State Avg
18-25	10	2%	9%
26-34	110	24%	20%
35-44	142	31%	23%
45-54	99	21%	19%
55-64	90	19%	20%
65+	14	3%	9%

Gender	#	%	State Avg
Male	321	69%	▲ 58%
Female	145	31%	▼ 42%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	397	85%	▲ 69%
Hisp-Puerto Rican	38	8%	12%
Hispanic-Other	27	6%	8%
Unknown	3	1%	11%
Hispanic-Mexican	1	0%	0%
Hispanic-Cuban			0%

Race	#	%	State Avg
White/Caucasian	337	72%	63%
Black/African American	88	19%	17%
Other	35	8%	13%
Am. Indian/Native Alaskan	2	0%	1%
Unknown	2	0%	5%
Asian	1	0%	1%
Multiple Races	1	0%	1%
Hawaiian/Other Pacific Islander			0%

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

Variations in data may be indicative of operational adjustments related to the pandemic.

Arrest Diversion - New Haven

Cornell Scott-Hill Health Corporation

Forensic SA - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0	15	▼
Admits	-	2	-100% ▼
Discharges	-	15	-100% ▼
Service Hours	-	13	-100% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 0 Active Outreach & Engagement Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	3	33% ▲
Admits	1	-	
Discharges	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	93%
Valid TEDS Data	100%	100%
On-Time Periodic		
6 Month Updates	50%	10%
Co-occurring		
MH Screen Complete	100%	77%
SA Screen Complete	100%	92%
Diagnosis		
Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	62%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested		4	100%	75%	85%	25% ▲
Abstinence/Reduced Drug Use		3	75%	55%	69%	20% ▲
Stable Living Situation		4	100%	95%	83%	5%
Employed		2	50%	50%	46%	0%
Self Help		2	50%	60%	40%	-10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				33%
Discharges				0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal Goal Met Below Goal

* State Avg based on 6 Active Naltrexone Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	13	0%
Admits	-	-	
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%	84%	-50% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 43 Active Outreach & Engagement Programs

Program Activity

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 8 Active Peer Based Mentoring Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	328	316	4%
Admits	362	332	9%
Discharges	357	331	8%
Bed Days	1,274	1,171	9%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	83%
Valid TEDS Data	100%	98%
On-Time Periodic		
6 Month Updates	N/A	N/A
Co-occurring		
MH Screen Complete	100%	97%
SA Screen Complete	100%	96%
Diagnosis		
Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		298	83%	80%	69%	3%
● No Re-admit within 30 Days of Discharge		264	74%	85%	78%	-11%
● Follow-up within 30 Days of Discharge		176	59%	90%	59%	-31%

Bed Utilization

	12 Months Trend			Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate				24	4 days	0.1	58%	90%	74%	-32%

■ < 90%
 ■ 90-110%
 ■ > 110%

Data Submitted to DMHAS by Month

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

▲ > 10% Over
 ▼ < 10% Under

■ Actual
 | Goal
 ✓ Goal Met
 ● Below Goal

* State Avg based on 7 Active Medically Monitored Detox 3.7D Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	122	111	10%
Admits	19	8	138% ▲
Discharges	5	9	-44% ▼
Service Hours	287	324	-11% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	92%
Valid TEDS Data	100%	94%
On-Time Periodic		
6 Month Updates	99%	23%
Co-occurring		
MH Screen Complete	100%	76%
SA Screen Complete	100%	92%
Diagnosis		
Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		3	60%	50%	54%	10% ▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		101	83%	55%	40%	28% ▲
✓ Not Arrested		117	96%	75%	58%	21% ▲
✓ Employed		73	60%	50%	19%	10%
✓ Stable Living Situation		118	97%	95%	56%	2%
○ Self Help		12	10%	60%	13%	-50% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		115	98%	90%	39%	8%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
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 20 Active Buprenorphine Maintenance Programs

Variations in data may be indicative of operational adjustments related to the pandemic.