Wellmore
Waterbury, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	368	417	-12% ▼
	Admits	241	277	-13% ▼
	Discharges	271	291	-7%
	Service Hours	709	1,013	-30% ▼
	Bed Days	3,478	2,919	19% ▲

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

Consumer Satisfaction Survey (Based on 224 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Overall		98%	80%	91%
✓ Respect		97%	80%	91%
✓ Quality and Appropriateness		96%	80%	93%
✓ Participation in Treatment		96%	80%	92%
✓ Access		95%	80%	88%
✓ General Satisfaction		94%	80%	92%
✓ Recovery		92%	80%	79%
✓ Outcome		92%	80%	83%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	159	32.7%
	Residential Services	93	19.1%
	Case Management	18	3.7%
Other			
	Other	193	39.7%
Forensic SA			
	Case Management	23	4.7%

Client Demographics

Age	#	%	State Avg
18-25	27	7%	9%
26-34	107	29%	20%
35-44	112	30%	23%
45-54	71	19%	19%
55-64	46	13%	20%
65+	5	1%	9%

Gender	#	%	State Avg
Male	295	80% ▲	58%
Female	73	20% ▼	42%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	254	69%	69%
Hisp-Puerto Rican	100	27% ▲	12%
Hispanic-Other	8	2%	8%
Hispanic-Mexican	6	2%	0%
Hispanic-Cuban			0%
Unknown		▼	11%

Race	#	%	State Avg
White/Caucasian	165	45% ▼	63%
Black/African American	113	31% ▲	17%
Other	88	24% ▲	13%
Am. Indian/Native Alaskan	2	1%	1%
Asian			1%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%
Unknown			5%

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

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

Case Management 931480
Wellmore
Addiction - Case Management - Standard Case Management

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	18	50	-64%	▼
Admits	1	27	-96%	▼
Discharges	15	27	-44%	▼
Service Hours	58	124	-53%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	95%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	61%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		15	100%	50%	74%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Self Help		18	100%	60%	55%	40%	▲
✓ Employed		8	44%	20%	27%	24%	▲
✓ Stable Living Situation		18	100%	80%	82%	20%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		6	100%	90%	76%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions	■			33%
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 11 Active Standard Case Management Programs

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

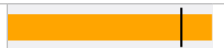
Emergency Shelter-CSSD 93145
Wellmore
Addiction - Residential Services - Recovery House

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	7	4	75%	▲
Admits	6	3	100%	▲
Discharges	5	3	67%	▲
Bed Days	154	87	77%	▲

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		5	100%	85%	82%	15%	▲

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization Rate		3	30 days	0.4	56%	90%	65%	-34%	▼

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 12 Active Recovery House Programs

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

Emergency Shelter-DMHAS 931450
Wellmore
Addiction - Residential Services - Recovery House

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	47	39	21%	▲
Admits	35	32	9%	
Discharges	39	33	18%	▲
Bed Days	741	806	-8%	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		35	90%	85%	82%	5%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		15	21 days	0.3	54%	90%	65%	-36% ▼

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 12 Active Recovery House Programs

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

Integrated Primary & BH Care - PIC
Wellmore
Other - Other - Integrated Primary Care

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	193	194	-1%	
Admits	36	46	-22%	▼
Discharges	58	34	71%	▲
Service Hours	124	193	-36%	▼

Data Submission Quality

Data Entry	Actual	State Avg

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	67%
✓ SA Screen Complete	100%	75%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	93%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 6 Active Integrated Primary Care Programs

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

Morris House-DMHAS 931404
Wellmore
Addiction - Residential Services - Recovery House

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	39	38	3%	
Admits	19	21	-10%	
Discharges	18	22	-18%	▼
Bed Days	2,033	1,726	18%	▲

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		12	67%	85%	82%	-18%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		23	122 days	0.6	96%	90%	65%	6%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 12 Active Recovery House Programs

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

Post-Release Transitional Forensic Case Management
Wellmore
Forensic SA - Case Management - Standard Case Management

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	13	7	86%	▲
Admits	6	3	100%	▲
Discharges	9	4	125%	▲
Service Hours	36	54	-33%	▼

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	11%

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	
✓ Treatment Completed Successfully		7	78%	50%	69%	28%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		13	100%	60%	74%	40%	▲
✓ Employed		6	46%	20%	25%	26%	▲
✓ Self Help		10	77%	60%	60%	17%	▲
✓ Stable Living Situation		12	92%	80%	52%	12%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		4	100%	90%	60%	10%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 8 Active Standard Case Management Programs

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

Pre-Release Transitional Forensic Case Management
Wellmore
Forensic SA - Case Management - Standard Case Management

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	11	3	267%	▲
Admits	8	-		
Discharges	4	3	33%	▲
Service Hours	31	6		

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	11%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		4	100%	50%	69%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Self Help		10	91%	60%	60%	31%	▲
✓ Social Support		10	91%	60%	74%	31%	▲
● Employed		2	18%	20%	25%	-2%	
● Stable Living Situation		4	36%	80%	52%	-44%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		7	100%	90%	60%	10%

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 8 Active Standard Case Management Programs

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

Waterbury Outpatient 931204
Wellmore
Addiction - Outpatient - Standard Outpatient

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	159	206	-23%	▼
Admits	128	141	-9%	
Discharges	121	159	-24%	▼
Service Hours	460	636	-28%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	87%
Valid TEDS Data	85%	88%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	25%

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

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%

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	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully	79	65%	50%	50%	15%	▲

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested	145	90%	75%	69%	15%	▲
● Abstinence/Reduced Drug Use	81	50%	55%	37%	-5%	
● Stable Living Situation	133	82%	95%	67%	-13%	▼
● Employed	56	35%	50%	25%	-15%	▼
● Self Help	39	24%	60%	13%	-36%	▼

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services	45	100%	90%	50%	10%

Service Engagement

Outpatient	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ 2 or more Services within 30 days	122	97%	75%	62%	22%	▲

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 106 Active Standard Outpatient Programs

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

Women/Children InterRes 931405
Wellmore
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

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	8	8	0%
Admits	2	4	-50% ▼
Discharges	2	6	-67% ▼
Bed Days	550	300	83% ▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	84%
✓ Valid TEDS Data	100%	96%

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

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	94%
✓ SA Screen Complete	100%	90%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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		1	50%	70%	66%	-20% ▼
✓ No Re-admit within 30 Days of Discharge		2	100%	85%	91%	15% ▲
✓ Follow-up within 30 Days of Discharge		1	100%	90%	72%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Abstinence/Reduced Drug Use		3	38%	70%	62%	-32% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		8	240 days	1.0	75%	90%	92%	-15% ▼

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 25 Active Intermediate/Long Term Res.Tx 3.5 Programs

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