BH Care
North Haven, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	2,577	2,581	0%
	Admits	820	1,073	-24% ▼
	Discharges	1,213	1,047	16% ▲
	Service Hours	22,611	23,585	-4%
	Bed Days	12,253	11,125	10%
	S.Rehab/PHP/IOP	2,540	393	546%

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

Consumer Satisfaction Survey (Based on 146 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Quality and Appropriateness		90%	80%	93%
✓ Respect		88%	80%	91%
✓ General Satisfaction		88%	80%	92%
✓ Overall		86%	80%	91%
✓ Participation in Treatment		86%	80%	92%
✓ Access		83%	80%	88%
● Outcome		77%	80%	83%
● Recovery		69%	80%	79%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Outpatient	2,146	61.5%
	Community Support	311	8.9%
	Case Management	183	5.2%
	Employment Services	170	4.9%
	Social Rehabilitation	170	4.9%
	Residential Services	55	1.6%
Forensic MH			
	Forensics Community-based	250	7.2%
Addiction			
	Outpatient	111	3.2%
	Employment Services	26	0.7%
	Medication Assisted Treatment	21	0.6%
Other			
	Other	46	1.3%

Client Demographics

Age	#	%	State Avg
18-25	318	12%	10%
26-34	415	16%	22%
35-44	455	18%	23%
45-54	457	18%	19%
55-64	594	23%	19%
65+	337	13%	8%

Gender	#	%	State Avg
Female	1,335	52% ▲	41%
Male	1,241	48% ▼	59%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	2,248	87% ▲	68%
Hispanic-Other	146	6%	8%
Hisp-Puerto Rican	109	4%	11%
Unknown	64	2%	12%
Hispanic-Mexican	10	0%	1%
Hispanic-Cuban			0%

Race	#	%	State Avg
White/Caucasian	2,061	80% ▲	62%
Black/African American	273	11%	17%
Other	126	5%	13%
Unknown	93	4%	6%
Asian	18	1%	1%
Am. Indian/Native Alaskan	4	0%	0%
Hawaiian/Other Pacific Islander	2	0%	0%
Multiple Races			1%

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.

Bettor Choice Shorline
BH Care
Addiction - Outpatient - Gambling Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6		
Admits	6	-	
Discharges	2	-	
Service Hours	33	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	90%	93%
✓ Valid TEDS Data	25%	24%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	0%	74%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	50%	44%
✓ SA Screen Complete	50%	50%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		2	100%	75%	66%	25% ▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		4	100%	90%	92%	10%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days		5	83%	75%	81%	8%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions			■				■			22%
Discharges						■	■			22%
Services				■	■	■	■	■	■	67%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 7 Active Gambling Outpatient Programs

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

Bettor Choice Valley
BH Care
Addiction - Outpatient - Gambling Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	5		
Admits	5	-	
Discharges	2	-	
Service Hours	12	-	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	93%
✓ Valid TEDS Data	20%	24%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	74%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	44%
✓ SA Screen Complete	100%	50%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions			■		■	■			■	44%
Discharges							■	■		22%
Services							■	■	■	33%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		0	0%	75%	66%	-75% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		3	100%	90%	92%	10%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		2	40%	75%	81%	-35% ▼

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 7 Active Gambling Outpatient Programs

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

BH Care Rental Assistance CT 0062
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	40	35	14%	▲
Admits	6	4	50%	▲
Discharges	5	2	150%	▲
Service Hours	208	151	37%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		35	88%	85%	88%	3%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
●	Clients Receiving Services		31	89%	90%	97%	-1%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	94%	96%

	On-Time Periodic	Actual	State Avg
✓	6 Month Updates	100%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions			■		■				■	33%
Discharges		■				■		■	■	44%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 109 Active Supportive Housing – Scattered Site Programs

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

BHcare Voc Services DMHAS Valley
BH Care
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	92	91	1%	
Admits	28	31	-10%	
Discharges	34	27	26%	▲
Service Hours	539	664	-19%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Employed		58	62%	35%	47%	27%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		55	93%	90%	96%	3%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	97%	92%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	81%	91%

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 39 Active Employment Services Programs

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

BHH ADULT NAE
BH Care
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	236	281	-16%	▼
Admits	37	70	-47%	▼
Discharges	91	83	10%	
Service Hours	277	119	132%	▲

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	86%	88%

On-Time Periodic	Actual	State Avg
6 Month Updates	4%	53%

Co-occurring	Actual	State Avg
MH Screen Complete	65%	90%
SA Screen Complete	62%	90%

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	94%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		11	12%	50%	41%	-38%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		155	66%	60%	61%	6%	
Employed		39	17%	30%	25%	-13%	▼
Stable Living Situation		165	70%	95%	72%	-25%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		105	72%	90%	82%	-18%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		3	8%	75%	78%	-67%	▼

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 74 Active Standard Outpatient Programs

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

BHH CHILDREN Program
BH Care
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1	1	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%	94%	-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 48 Active Outreach & Engagement Programs

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

BOS - 134
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	17	16	6%
Admits	1	-	
Discharges	2	-	
Service Hours	81	104	-22% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		16	94%	85%	88%	9%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		14	93%	90%	97%	3%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	96%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions									■	11%
Discharges					■					11%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 109 Active Supportive Housing – Scattered Site Programs

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

BOS 193 Units Valley/Shoreline
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	20	18	11%	▲
Admits	2	-		
Discharges	2	-		
Service Hours	74	146	-49%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		18	90%	85%	88%	5%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		18	100%	90%	97%	10%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	89%	96%

	On-Time Periodic	Actual	State Avg
✓	6 Month Updates	94%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		■				■				22%
Discharges	■					■				22%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 109 Active Supportive Housing – Scattered Site Programs

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

Coach 2.0
BH Care
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	8		
Admits	8	-	
Discharges	2	-	
Service Hours	22	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	82%	95%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	59%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		0	0%	50%	62%	-50%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		7	88%	60%	72%	28%
Employed		0	0%	20%	17%	-20%
Stable Living Situation		1	12%	80%	75%	-68%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		5	83%	90%	85%	-7%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										22%
Discharges										11%
Services										22%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 30 Active Standard Case Management Programs

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

Harbor House Group Residence
BH Care
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	7	29%	▲
Admits	-	-		
Discharges	-	-		
Bed Days	2,466	1,918	29%	▲

Data Submission Quality

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

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	86%
SA Screen Complete	N/A	95%

Diagnosis	Actual	State Avg
✓ 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	80%	72%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	88%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	67%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		9	100%	60%	82%	40%	▲
✓ Stable Living Situation		9	100%	90%	98%	10%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Avg Utilization Rate		8	1,924 days	0.3	113%	90%	87%	22%	▲

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 24 Active Group Home Programs

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

HARP Supervised Apts
BH Care
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	24	13%	▲
Admits	5	3	67%	▲
Discharges	6	3	100%	▲
Service Hours	436	340	28%	▲
Bed Days	6,250	6,168	1%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	78%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	89%	90%

Co-occurring	Actual	State Avg
MH Screen Complete	67%	98%
SA Screen Complete	67%	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions			■			■		■	■	44%
Discharges	■		■	■				■	■	56%
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	67%	60%	72%	7%	
● Follow-up within 30 Days of Discharge		3	75%	90%	79%	-15%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		24	83%	60%	85%	23%	▲
✓ Stable Living Situation		29	100%	95%	95%	5%	
● Employed		0	0%	25%	12%	-25%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Avg Utilization Rate		21	2,144 days	0.3	109%	90%	92%	19%	▲

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

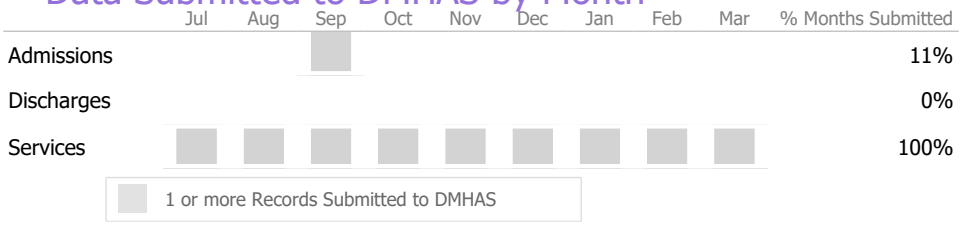
Integrated Behavioral Health - Shoreline
BH Care
Other - Other - Integrated Primary Care

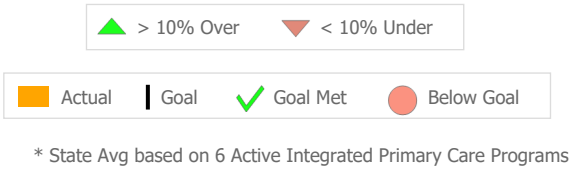
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	40	40	0%	
Admits	1	2	-50%	▼
Discharges	-	1	-100%	▼
Service Hours	1	1	122%	▲

Data Submitted to DMHAS by Month





* State Avg based on 6 Active Integrated Primary Care Programs

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

Integrated Behavioral Health - Valley
BH Care
Other - Other - Integrated Primary Care

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	7	-14%
Admits	-	-	
Discharges	1	1	0%
Service Hours	-	-	

Data Submission Quality

Data Entry	Actual	State Avg

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	78%
SA Screen Complete	N/A	87%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										11%
Services										0%

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.

Options SR
BH Care
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	68	67	1%	
Admits	7	-		
Discharges	18	7	157%	▲
Service Hours	2	-		
Social Rehab/PHP/IOP Days	965	189	411%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		36	72%	90%	72%	-18%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■			■		■	67%
Discharges			■	■	■	■				44%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

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

Options Vocational Program
BH Care
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	81	81	0%	
Admits	22	23	-4%	
Discharges	36	19	89%	▲
Service Hours	127	323	-61%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Employed		37	45%	35%	47%	10%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		38	81%	90%	96%	-9%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	64%	92%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	53%	91%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■				■	■		56%
Discharges	■	■	■	■	■		■	■	■	89%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 39 Active Employment Services Programs

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

Shoreline Crisis-Jail Div 304-341
BH Care
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	183	151	21%	▲
Admits	106	83	28%	▲
Discharges	134	84	60%	▲
Service Hours	501	226	122%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		54	89%	90%	73%	-1%

Jail Diversion

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Follow-up Service within 48 hours		31	89%	0%	61%	89%	▲

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 19 Active Court Liaison-Jail Diversion Programs

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

Shoreline E.Haven OP 368-210
BH Care
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	0	88		▼
Admits	-	11	-100%	▼
Discharges	-	6	-100%	▼
Service Hours	-	839	-100%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	88%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	53%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	90%
SA Screen Complete	N/A	90%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	41%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		N/A	N/A	30%	25%	-30%	▼
Social Support		N/A	N/A	60%	61%	-60%	▼
Stable Living Situation		N/A	N/A	95%	72%	-95%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		N/A	N/A	90%	82%	N/A	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 74 Active Standard Outpatient Programs

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

Shoreline HHS CSP/RP 373X
BH Care
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	127	146	-13%	▼
Admits	23	18	28%	▲
Discharges	40	74	-46%	▼
Service Hours	813	724	12%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	87%	84%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	4%	84%

Co-occurring	Actual	State Avg
MH Screen Complete	79%	96%
SA Screen Complete	79%	95%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	99%	98%

Data Submitted to DMHAS by Month

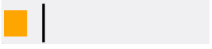
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■	■		■	■	89%
Discharges	■	■	■	■	■	■	■	■	■	100%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

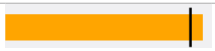
Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		22	55%	65%	57%	-10%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		115	89%	60%	80%	29%	▲
✓ Stable Living Situation		120	93%	80%	87%	13%	▲
● Employed		16	12%	20%	14%	-8%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		85	96%	90%	98%	6%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 36 Active CSP Programs

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

Shoreline N Haven OP 370-210
BH Care
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	98	94	4%	
Admits	10	9	11%	▲
Discharges	16	9	78%	▲
Service Hours	974	1,213	-20%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	88%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	53%

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

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■		■	■	■				56%
Discharges	■	■	■	■			■	■	■	78%
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		14	88%	50%	41%	38%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		96	98%	60%	61%	38%	▲
✓ Employed		35	36%	30%	25%	6%	
✓ Stable Living Situation		95	97%	95%	72%	2%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		82	100%	90%	82%	10%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ 2 or more Services within 30 days		9	90%	75%	78%	15%	▲

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

Shoreline Pilots Support Hsng 304-551
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	14	-43%	▼
Admits	2	-		
Discharges	2	8	-75%	▼
Service Hours	5	68	-92%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		6	75%	85%	88%	-10%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		4	67%	90%	97%	-23%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	93%	96%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■								■	22%
Discharges					■				■	22%
Services	■	■	■		■	■	■			67%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 109 Active Supportive Housing – Scattered Site Programs

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

Shoreline SA Clinic 304725
BH Care
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	100	91	10%
Admits	45	54	-17% ▼
Discharges	52	51	2%
Service Hours	564	622	-9%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	86%	87%
✓ Valid TEDS Data	88%	85%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	50%	15%

Co-occurring	Actual	State Avg
MH Screen Complete	69%	92%
SA Screen Complete	69%	93%

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

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		28	54%	50%	50%	4%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		61	60%	55%	42%	5%
● Employed		42	42%	50%	33%	-8%
● Not Arrested		66	65%	75%	76%	-10%
● Stable Living Situation		83	82%	95%	75%	-13% ▼
● Self Help		32	32%	60%	15%	-28% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		43	86%	90%	58%	-4%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days		34	76%	75%	65%	1%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 108 Active Standard Outpatient Programs

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

Shoreline Sycamore Way -OP Clin 304-211
BH Care
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	947	984	-4%
Admits	184	356	-48%
Discharges	279	301	-7%
Service Hours	6,285	6,472	-3%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	85%	88%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	58%	53%

Co-occurring	Actual	State Avg
MH Screen Complete	73%	90%
SA Screen Complete	72%	90%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		118	42%	50%	41%	-8%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		658	68%	60%	61%	8%
Employed		247	25%	30%	25%	-5%
Stable Living Situation		834	86%	95%	72%	-9%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		662	96%	90%	82%	6%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		113	63%	75%	78%	-12%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

SOR - Employment
BH Care
Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	18	44%	▲
Admits	19	3	533%	▲
Discharges	10	11	-9%	
Service Hours	46	26	77%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		13	50%	35%	34%	15%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		15	94%	90%	91%	4%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	77%	85%

On-Time Periodic	Actual	State Avg
6 Month Updates	25%	84%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										56%
Discharges										67%
Services										78%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 10 Active Employment Services Programs

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

SOR E-MAT
BH Care
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	20	18	11%	▲
Admits	3	9	-67%	▼
Discharges	7	6	17%	▲
Service Hours	230	162	42%	▲

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	86%	92%
Valid TEDS Data	83%	90%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	92%	28%

Co-occurring	Actual	State Avg
MH Screen Complete	67%	76%
SA Screen Complete	67%	93%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		3	43%	50%	44%	-7%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Abstinence/Reduced Drug Use		14	70%	55%	44%	15%	▲
✓ Not Arrested		17	85%	75%	66%	10%	
✓ Stable Living Situation		20	100%	95%	63%	5%	
● Employed		7	35%	50%	22%	-15%	▼
● Self Help		5	25%	60%	15%	-35%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		13	100%	90%	38%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions			■				■	■		33%
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

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

SOR-MAT-Naltrexone
BH Care
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1	4	-75%	▼
Admits	-	1	-100%	▼
Discharges	1	1	0%	
Service Hours	1	15	-94%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	95%
Valid TEDS Data	0%	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	23%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	79%
SA Screen Complete	N/A	91%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		1	100%	50%	54%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		1	100%	75%	92%	25%	▲
✓ Stable Living Situation		1	100%	95%	83%	5%	
● Employed		0	0%	50%	47%	-50%	▼
● Abstinence/Reduced Drug Use		0	0%	55%	65%	-55%	▼
● Self Help		0	0%	60%	38%	-60%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		N/A	N/A	90%	84%	N/A	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges							■			11%
Services	■			■		■				33%

■ 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

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

Valley ABI Residence311165
BH Care
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3	3	0%
Admits	-	-	
Discharges	-	-	
Bed Days	822	822	0%

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
● 6 Month Updates	0%	89%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	86%
SA Screen Complete	N/A	95%

Diagnosis	Actual	State Avg
✓ 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	80%	72%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	88%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	67%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		3	100%	90%	98%	10%
✓ Social Support		2	67%	60%	82%	7%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		3	4,317 days	0.3	100%	90%	87%	10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 24 Active Group Home Programs

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

Valley CSP/RP 311350
BH Care
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	184	231	-20%	▼
Admits	23	40	-43%	▼
Discharges	53	65	-18%	▼
Service Hours	1,911	2,115	-10%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	97%	84%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	78%	84%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	96%
✓ SA Screen Complete	100%	95%

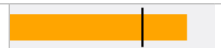
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	98%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■			■	■	■	■	■	78%
Discharges	■	■	■	■	■	■	■	■	■	100%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

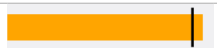
Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		46	87%	65%	57%	22%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		178	96%	60%	80%	36%	▲
✓ Stable Living Situation		170	92%	80%	87%	12%	▲
● Employed		30	16%	20%	14%	-4%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		127	95%	90%	98%	5%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 36 Active CSP Programs

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

Valley Howe Ave. Res. Apts.311-250X
BH Care
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	6	-17%	▼
Admits	-	1	-100%	▼
Discharges	-	1	-100%	▼
Bed Days	1,370	1,230	11%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	96%	78%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	80%	90%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	98%
SA Screen Complete	N/A	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
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%	72%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	79%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		5	100%	60%	85%	40%	▲
✓ Stable Living Situation		5	100%	95%	95%	5%	
● Employed		1	20%	25%	12%	-5%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	2,320 days	0.3	100%	90%	92%	10%

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

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Valley Jail Diversion 311-341
BH Care
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

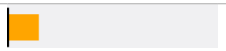
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	67	42	60%	▲
Admits	25	10	150%	▲
Discharges	15	2	650%	▲
Service Hours	57	27	112%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		33	63%	90%	73%	-27%	▼

Jail Diversion

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Follow-up Service within 48 hours		2	15%	0%	61%	15%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■		■	■	■	89%
Discharges	■	■					■	■		44%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

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

Valley Next Steps Dev. 2
BH Care
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	14	23	-39%	▼
Admits	3	1	200%	▲
Discharges	-	13	-100%	▼
Service Hours	53	130	-59%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		12	86%	85%	95%	1%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		13	93%	90%	96%	3%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	92%	99%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		■				■	■			33%
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 65 Active Supportive Housing – Development Programs

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

Valley OP Clinic 311210
BH Care
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,010	997	1%	
Admits	207	315	-34%	▼
Discharges	346	227	52%	▲
Service Hours	7,978	7,263	10%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	97%	88%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	61%	53%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	98%	90%
✓ SA Screen Complete	98%	90%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

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

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully	191	55%	50%	41%	5%

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support	881	86%	60%	61%	26%	▲
✓ Employed	317	31%	30%	25%	1%	
● Stable Living Situation	904	88%	95%	72%	-7%	

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services	667	97%	90%	82%	7%

Service Engagement

Outpatient	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days	165	81%	75%	78%	6%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 74 Active Standard Outpatient Programs

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

Valley Pilots Support.Housing311-551
BH Care
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	21	-67%	▼
Admits	-	2	-100%	▼
Discharges	-	14	-100%	▼
Service Hours	14	86	-84%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		6	86%	85%	88%	1%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		5	71%	90%	97%	-19%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	87%	96%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	71%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% 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 109 Active Supportive Housing – Scattered Site Programs

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

Valley Social Rehabilitation 311-280
BH Care
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	102	109	-6%	
Admits	16	6	167%	▲
Discharges	31	9	244%	▲
Service Hours	14	-		
Social Rehab/PHP/IOP Days	1,575	204	672%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		62	87%	90%	72%	-3%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■		■	■	■	89%
Discharges					■	■		■	■	44%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

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

Valley Young Adults 311-220Y
BH Care
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	41	41	0%	
Admits	11	15	-27%	▼
Discharges	17	14	21%	▲
Service Hours	876	1,084	-19%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	95%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	88%	59%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		10	59%	50%	62%	9%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		41	98%	60%	72%	38%	▲
✓ Stable Living Situation		38	90%	80%	75%	10%	
✓ Employed		10	24%	20%	17%	4%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		24	96%	90%	85%	6%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		■		■	■	■	■	■	■	78%
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 30 Active Standard Case Management Programs

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

Woodbridge House YAS
BH Care
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	11	8	38%	▲
Admits	7	4	75%	▲
Discharges	4	4	0%	
Bed Days	1,345	987	36%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	78%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	90%

Co-occurring	Actual	State Avg
MH Screen Complete	57%	98%
SA Screen Complete	57%	88%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		■		■	■	■			■	56%
Discharges	■		■	■	■					44%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		3	75%	60%	72%	15%	▲

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Follow-up within 30 Days of Discharge		3	100%	90%	79%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		11	100%	60%	85%	40%	▲
● Stable Living Situation		10	91%	95%	95%	-4%	
● Employed		1	9%	25%	12%	-16%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	246 days	0.3	98%	90%	92%	8%

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

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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

Young Adults Shoreline - 556
BH Care
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	24	13%	▲
Admits	8	2	300%	▲
Discharges	5	4	25%	▲
Service Hours	478	664	-28%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	95%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	88%	59%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		4	80%	50%	62%	30%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		25	93%	60%	72%	33%	▲
✓ Employed		11	41%	20%	17%	21%	▲
✓ Stable Living Situation		26	96%	80%	75%	16%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		20	91%	90%	85%	1%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■			■	■	■	■	■		67%
Discharges		■	■		■			■		44%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 30 Active Standard Case Management Programs

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