McCall Foundation Inc
Torrington, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	1,206	1,129	7%	
	Admits	1,467	1,290	14%	▲
	Discharges	1,274	1,337	-5%	
	Service Hours	8,026	7,327	10%	
	Bed Days	27,952	17,090	64%	▲

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

Consumer Satisfaction Survey (Based on 690 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ General Satisfaction		96%	80%	92%
✓ Participation in Treatment		96%	80%	92%
✓ Quality and Appropriateness		96%	80%	93%
✓ Overall		95%	80%	91%
✓ Access		93%	80%	88%
✓ Respect		93%	80%	91%
✓ Outcome		91%	80%	83%
✓ Recovery		89%	80%	79%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	721	40.9%
	Residential Services	409	23.2%
	Case Management	276	15.7%
	Medication Assisted Treatment	241	13.7%
	Employment Services	82	4.7%
Mental Health			
	Community Support	15	0.9%
	Residential Services	15	0.9%
	Case Management	4	0.2%

Client Demographics

Age	#	%	State Avg
18-25	99	8%	10%
26-34	358	30%	22%
35-44	336	28%	23%
45-54	205	17%	18%
55-64	162	13%	18%
65+	44	4%	8%

Gender	#	%	State Avg
Male	722	60%	59%
Female	484	40%	41%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	972	81% ▲	68%
Unknown	122	10%	12%
Hispanic-Other	102	8%	9%
Hisp-Puerto Rican	8	1%	11%
Hispanic-Cuban	1	0%	0%
Hispanic-Mexican	1	0%	1%

Race	#	%	State Avg
White/Caucasian	897	74% ▲	61%
Unknown	110	9%	6%
Other	102	8%	13%
Black/African American	79	7%	17%
Am. Indian/Native Alaskan	11	1%	0%
Asian	5	0%	1%
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.

Carnes Weeks
McCall Foundation Inc
Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	298	307	-3%
Admits	308	328	-6%
Discharges	303	324	-6%
Bed Days	6,491	6,834	-5%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	97%	89%
✓ Valid TEDS Data	94%	95%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%

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

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		201	66%	80%	69%	-14% ▼
✓ No Re-admit within 30 Days of Discharge		269	89%	85%	89%	4%
● Follow-up within 30 Days of Discharge		143	71%	90%	64%	-19% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Self Help		221	68%	60%	67%	8%
● Abstinence/Reduced Drug Use		138	42%	70%	42%	-28% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		20	23 days	0.1	89%	90%	91%	-1%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 9 Active SA Intensive Res. Rehabilitation 3.7 Programs

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

Coach 2.0
McCall Foundation Inc
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	62		
Admits	62	-	
Discharges	35	-	
Service Hours	372	-	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	93%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	48%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		19	54%	50%	67%	4%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Employed		26	42%	20%	27%	22% ▲
✓ Stable Living Situation		55	89%	80%	80%	9%
● Self Help		32	52%	60%	53%	-8%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		27	96%	90%	78%	6%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	■	■	■	100%
Discharges			■	■	■	■	■	■	■	■	■	■	83%
Services				■				■	■	■	■	■	50%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 13 Active Standard Case Management Programs

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

Dempsey Center CSSD
McCall Foundation 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 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	22		
Admits	22	-	
Discharges	-	-	
Bed Days	1,997	-	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	94%	86%
✓ Valid TEDS Data	100%	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	36%

Co-occurring	Actual	State Avg
MH Screen Complete	41%	94%
SA Screen Complete	41%	92%

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	Apr	May	Jun	% Months Submitted
Admissions			■		■			■	■	■	■	■	58%
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	70%	66%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	91%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	68%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Abstinence/Reduced Drug Use		13	59%	70%	68%	-11% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		15	137 days	0.4	36%	90%	92%	-54%

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

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 29 Active Intermediate/Long Term Res.Tx 3.5 Programs

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

Dempsey Center DMHAS
McCall Foundation 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 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	33	2	1550%	▲
Admits	31	2	1450%	▲
Discharges	-	-		
Bed Days	4,829	97	4878%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	86%
✓ Valid TEDS Data	100%	93%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	0%	36%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	94%
✓ SA Screen Complete	100%	92%

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	70%	66%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	91%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	68%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Abstinence/Reduced Drug Use		15	45%	70%	68%	-25%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		19	240 days	0.3	70%	90%	92%	-20%	▼

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													92%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 29 Active Intermediate/Long Term Res.Tx 3.5 Programs

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

Dempsey OP
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	41	6	583%	▲
Admits	35	6	483%	▲
Discharges	-	-		
Service Hours	77	12		

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	87%
✓ Valid TEDS Data	100%	84%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	0%	15%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	91%
✓ SA Screen Complete	100%	93%

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		N/A	N/A	50%	48%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		40	98%	75%	77%	23%	▲
● Abstinence/Reduced Drug Use		20	49%	55%	42%	-6%	
● Self Help		18	44%	60%	16%	-16%	▼
● Stable Living Situation		23	56%	95%	76%	-39%	▼
● Employed		3	7%	50%	33%	-43%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		35	85%	90%	58%	-5%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		21	60%	75%	63%	-15%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													75%
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 117 Active Standard Outpatient Programs

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

Glenlunan House
McCall Foundation Inc
Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	-	2	-100% ▼
Discharges	-	-	
Bed Days	1,460	984	48% ▲

Data Submission Quality

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

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

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	92%
SA Screen Complete	N/A	90%

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		N/A	N/A	75%	64%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	81%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	81%	N/A

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		5	1,796 days	0.3	80%	90%	91%	-10%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 30 Active MH Intensive Res. Rehabilitation Programs

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

Hanson House
McCall Foundation 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 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	9		
Admits	9	-	
Discharges	3	-	
Bed Days	130	-	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	86%
Valid TEDS Data	56%	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	36%

Co-occurring	Actual	State Avg
MH Screen Complete	78%	94%
SA Screen Complete	89%	92%

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	67%	70%	66%	-3%
✓ No Re-admit within 30 Days of Discharge		3	100%	85%	91%	15% ▲
✓ Follow-up within 30 Days of Discharge		2	100%	90%	68%	10%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		4	44%	70%	68%	-26% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		7	32 days	0.8	62%	90%	92%	-28%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													25%
Discharges													8%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 29 Active Intermediate/Long Term Res.Tx 3.5 Programs

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

Hotchkiss House CSSD
McCall Foundation Inc
Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	35	33	6%
Admits	25	23	9%
Discharges	21	23	-9%
Bed Days	4,264	3,469	23% ▲

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		14	67%	85%	79%	-18% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		12	187 days	0.2	97%	90%	64%	7%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													83%
Discharges													75%

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.

MAT Naltrexone Main Campus
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	32	34	-6%
Admits	20	35	-43% ▼
Discharges	18	22	-18% ▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	95%	96%
Valid TEDS Data	78%	86%

On-Time Periodic	Actual	State Avg
6 Month Updates	10%	35%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	90%	75%
✓ SA Screen Complete	95%	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		10	56%	50%	45%	6%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Not Arrested		33	100%	75%	90%	25% ▲
✓ Employed		21	64%	50%	50%	14% ▲
✓ Abstinence/Reduced Drug Use		19	58%	55%	65%	3%
● Stable Living Situation		28	85%	95%	84%	-10%
● Self Help		15	45%	60%	35%	-15% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													92%
Discharges													75%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 8 Active Naltrexone Programs

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

MAT Neltrexone Renato
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

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

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	96%
Valid TEDS Data	N/A	86%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	35%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	75%
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		N/A	N/A	50%	45%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		2	100%	55%	65%	45% ▲
✓ Not Arrested		2	100%	75%	90%	25% ▲
✓ Stable Living Situation		2	100%	95%	84%	5%
✓ Employed		1	50%	50%	50%	0%
● Self Help		1	50%	60%	35%	-10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 Naltrexone Programs

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

MATx Main Campus
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	160	208	-23%	▼
Admits	92	120	-23%	▼
Discharges	98	139	-29%	▼
Service Hours	1,370	1,368	0%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	96%	92%
Valid TEDS Data	63%	88%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	76%	26%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	91%	75%
✓ SA Screen Complete	94%	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		48	49%	50%	44%	-1%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		170	99%	75%	68%	24%	▲
● Employed		81	47%	50%	23%	-3%	
● Abstinence/Reduced Drug Use		91	53%	55%	44%	-2%	
● Stable Living Situation		156	91%	95%	64%	-4%	
● Self Help		57	33%	60%	16%	-27%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		73	99%	90%	38%	9%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 22 Active Buprenorphine Maintenance Programs

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

McCall House
McCall Foundation Inc
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	70	71	-1%
Admits	59	58	2%
Discharges	57	59	-3%
Bed Days	6,135	5,044	22% ▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	96%	87%
✓ Valid TEDS Data	87%	86%

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

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

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		28	49%	85%	64%	-36% ▼
✓ No Re-admit within 30 Days of Discharge		49	86%	85%	83%	1%
● Follow-up within 30 Days of Discharge		17	61%	90%	73%	-29% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		55	76%	70%	81%	6%
● Employed		39	54%	60%	38%	-6%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		27	96 days	0.2	112%	90%	85%	22% ▲

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													92%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 9 Active Transitional/Halfway House 3.1 Programs

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

Migeon Pilots Development
McCall Foundation Inc
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	5	-20%	▼
Admits	-	2	-100%	▼
Discharges	1	2	-50%	▼
Service Hours	11	29	-62%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Stable Living Situation		4	100%	85%	95%	15%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		3	100%	90%	98%	10%

Data Submission Quality

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

	On-Time Periodic	Actual	State Avg
●	6 Month Updates	67%	88%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													8%
Services													17%

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.

Rogers House
McCall Foundation Inc
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	2	200%	▲
Admits	4	2	100%	▲
Discharges	-	-		
Bed Days	1,334	184	625%	▲

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
● 6 Month Updates	75%	86%

Co-occurring	Actual	State Avg
MH Screen Complete	75%	88%
SA Screen Complete	75%	95%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	80%	62%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	90%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	72%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		6	100%	60%	87%	40%	▲
✓ Stable Living Situation		6	100%	90%	98%	10%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		6	347 days	0.4	61%	90%	93%	-29%	▼

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													25%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 26 Active Group Home Programs

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

Rogers House CSP
McCall Foundation Inc
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3	2	50%	▲
Admits	1	-		
Discharges	-	-		
Service Hours	103	123	-16%	▼

Data Submission Quality

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

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

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	95%
✓ SA Screen Complete	100%	94%

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	Apr	May	Jun	% Months Submitted
Admissions													8%
Discharges													0%
Services													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	65%	56%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		3	100%	60%	80%	40%	▲
✓ Stable Living Situation		3	100%	80%	87%	20%	▲
✓ Employed		1	33%	20%	14%	13%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		3	100%	90%	98%	10%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 38 Active CSP Programs

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

Senior Outreach
McCall Foundation Inc
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	21	5%	
Admits	14	11	27%	▲
Discharges	8	14	-43%	▼
Service Hours	35	11		

Service Engagement

	Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	at least 1 Service within 180 days		13	100%	50%	86%	50%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions		■					■	■	■	■	■	■	58%
Discharges	■				■			■	■				33%
Services	■							■	■	■	■	■	50%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 22 Active Outreach & Engagement Programs

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

SOR E MAT Renato
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	2	150%	▲
Admits	3	1	200%	▲
Discharges	-	-		

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	92%
✓ Valid TEDS Data	100%	88%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	0%	26%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	75%
✓ SA Screen Complete	100%	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		N/A	N/A	50%	44%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Not Arrested		4	80%	75%	68%	5%
✓ Abstinence/Reduced Drug Use		3	60%	55%	44%	5%
● Self Help		2	40%	60%	16%	-20% ▼
● Employed		1	20%	50%	23%	-30% ▼
● Stable Living Situation		3	60%	95%	64%	-35% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													25%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 22 Active Buprenorphine Maintenance Programs

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

SOR Employment
McCall Foundation Inc
Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	82	72	14%	▲
Admits	61	62	-2%	
Discharges	69	52	33%	▲
Service Hours	179	135	33%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		59	71%	35%	35%	36%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		14	100%	90%	96%	10%

Data Submission Quality

	Data Entry	Actual	State Avg
✓	Valid NOMS Data	98%	86%

	On-Time Periodic	Actual	State Avg
●	6 Month Updates	0%	71%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	■	■	■	100%
Discharges	■	■	■	■	■	■	■	■	■	■	■	■	100%
Services	■		■	■	■		■	■	■	■	■	■	83%

■ 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 Mobile MAT
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	53	15	253%	▲
Admits	43	15	187%	▲
Discharges	16	5	220%	▲
Service Hours	155	10		

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	89%	92%
Valid TEDS Data	60%	88%

On-Time Periodic	Actual	State Avg
6 Month Updates	6%	26%

Co-occurring	Actual	State Avg
MH Screen Complete	70%	75%
SA Screen Complete	77%	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		8	50%	50%	44%	0%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		51	96%	75%	68%	21%	▲
Employed		22	42%	50%	23%	-8%	
Abstinence/Reduced Drug Use		19	36%	55%	44%	-19%	▼
Stable Living Situation		37	70%	95%	64%	-25%	▼
Self Help		10	19%	60%	16%	-41%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		22	58%	90%	38%	-32%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■			■	83%
Discharges	■	■	■		■		■	■		■	■	■	75%
Services			■		■		■	■	■	■	■	■	67%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 22 Active Buprenorphine Maintenance Programs

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

Torrington Case Management
McCall Foundation Inc
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	30	38	-21%	▼
Admits	28	36	-22%	▼
Discharges	21	36	-42%	▼
Service Hours	69	73	-5%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	93%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	0%	48%

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully	5	24%	50%	67%	-26%	▼

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Employed	18	56%	20%	27%	36%	▲
✓ Stable Living Situation	28	88%	80%	80%	8%	
● Self Help	14	44%	60%	53%	-16%	▼

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services	7	64%	90%	78%	-26%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■	■		■	■	■	■	■		■	83%
Discharges		■		■	■	■		■	■	■		■	67%
Services	■		■	■					■	■	■	■	58%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 13 Active Standard Case Management Programs

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

Torrington Main Campus OP
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	677	678	0%
Admits	545	465	17% ▲
Discharges	517	528	-2%
Service Hours	4,907	4,663	5%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	97%	87%
Valid TEDS Data	72%	84%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	66%	15%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	96%	91%
✓ SA Screen Complete	97%	93%

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		302	58%	50%	48%	8%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Not Arrested		701	94%	75%	77%	19% ▲
● Employed		326	44%	50%	33%	-6%
● Abstinence/Reduced Drug Use		354	48%	55%	42%	-7%
● Stable Living Situation		650	87%	95%	76%	-8%
● Self Help		292	39%	60%	16%	-21% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		222	96%	90%	58%	6%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		304	60%	75%	63%	-15% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 117 Active Standard Outpatient Programs

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

Winsted OP
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	23	-4%	
Admits	18	7	157%	▲
Discharges	6	19	-68%	▼
Service Hours	41	55	-25%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	85%	87%
Valid TEDS Data	59%	84%

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

Co-occurring	Actual	State Avg
MH Screen Complete	61%	91%
SA Screen Complete	67%	93%

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		3	50%	50%	48%	0%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		21	95%	75%	77%	20%	▲
✓ Employed		12	55%	50%	33%	5%	
✓ Abstinence/Reduced Drug Use		12	55%	55%	42%	0%	
● Stable Living Situation		14	64%	95%	76%	-31%	▼
● Self Help		1	5%	60%	16%	-55%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		12	75%	90%	58%	-15%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● 2 or more Services within 30 days		2	11%	75%	63%	-64%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions								■	■	■	■	■	42%
Discharges	■				■			■				■	33%
Services	■	■	■		■		■	■	■	■	■	■	83%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 117 Active Standard Outpatient Programs

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

Women's REACH Program
McCall Foundation Inc
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	166	194	-14%	▼
Admits	83	107	-22%	▼
Discharges	101	114	-11%	▼
Service Hours	449	632	-29%	▼

Service Engagement

	Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	at least 1 Service within 180 days		66	80%	50%	86%	30%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	■	■	■	100%
Discharges	■		■	■	■	■	■	■	■	■	■	■	92%
Services	■	■	■		■		■	■	■	■	■	■	83%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 22 Active Outreach & Engagement Programs

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

Wynnewood House
McCall Foundation Inc
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	3	67%	▲
Admits	2	2	0%	
Discharges	-	-		
Bed Days	1,312	478	174%	▲

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
6 Month Updates	67%	86%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	88%
✓ SA Screen Complete	100%	95%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	80%	62%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	90%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	72%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		5	100%	60%	87%	40%	▲
✓ Stable Living Situation		5	100%	90%	98%	10%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization Rate		6	456 days	0.4	60%	90%	93%	-30%	▼

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													17%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 26 Active Group Home Programs

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

Wynnewood House CSP
McCall Foundation Inc
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	10	20%	▲
Admits	2	4	-50%	▼
Discharges	-	-		
Service Hours	259	219	18%	▲

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	92%	83%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	95%
✓ SA Screen Complete	100%	94%

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	Apr	May	Jun	% Months Submitted
Admissions													8%
Discharges													0%
Services													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	65%	56%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		11	92%	60%	80%	32%	▲
✓ Stable Living Situation		12	100%	80%	87%	20%	▲
● Employed		1	8%	20%	14%	-12%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		12	100%	90%	98%	10%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 38 Active CSP Programs

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