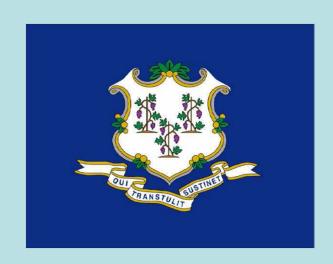# DMHAS EQMI
Provider Quality Reports
Quality Reports Forum
April 8, 2014

James Siemianowski, LICSW, Director, EQMI
Connecticut Department of Mental Health and Addiction Services

Goals for the Meeting:

1. Provider and Program Reports

2. Data Quality Issues

3. Web Posting

Provider Level Agency Report

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2013 - December 2013   (Data as of Mar 20, 2014)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	2,981	2,886	3%
	Admits	945	1,044	-9%
	Discharges	894	1,096	-18% ▼
	Service Hours	28,709	29,143	-1%
	Bed Days	6,340	6,497	-2%
	S.Rehab/PHP/IOP	1,071	904	18% ▲

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

Consumer Satisfaction Survey   (Based on 357 FY13 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Respect		94%	80%	91%
✓ General Satisfaction		91%	80%	92%
✓ Participation in Treatment		87%	80%	92%
✓ Quality and Appropriateness		87%	80%	93%
✓ Overall		85%	80%	91%
✓ Access		85%	80%	88%
● Outcome		74%	80%	83%
● Recovery		66%	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	2,674	68.5%
	Community Support	326	8.3%
	Employment Services	210	5.4%
	Case Management	158	4.0%
	Social Rehabilitation	128	3.3%
	Residential Services	84	2.2%
Forensic MH			
	Forensics Community-based	208	5.3%
Addiction			
	Outpatient	117	3.0%

Client Demographics

Age	#	%	State Avg
18-25	346	12%	15%
26-34	488	16%	22%
35-44	527	18%	19%
45-54	812	27%	24%
55-64	572	19%	15%
65+	234	8%	4%

Gender	#	%	State Avg
Female	1,587	53% ▲	42%
Male	1,394	47% ▼	58%

Race	#	%	State Avg
White/Caucasian	2,479	87% ▲	64%
Other	166	6%	14%
Black/African American	150	5% ▼	17%
Unknown	47	2%	3%
Asian	12	0%	1%
Am. Indian/Native Alaskan	4	0%	1%
Hawaiian/Other Pacific Islander	2	0%	0%
Multiple Races			1%

Ethnicity	#	%	State Avg
Non-Hispanic	2,814	94% ▲	74%
Hisp-Puerto Rican	72	2%	12%
Hispanic-Other	61	2%	6%
Unknown	31	1%	7%
Hispanic-Mexican	2	0%	0%
Hispanic-Cuban	1	0%	0%

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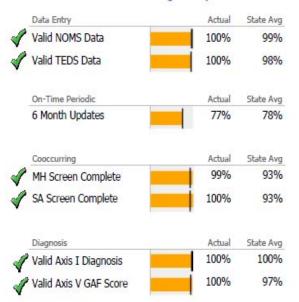
Program Level Report

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2013 - December 2013 (Data as of Mar 20, 2014)

Addiction - Medication Assisted Treatment - Methadone Maintenance

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	477	443	8%	
Admits	101	67	51%	▲
Discharges	84	65	29%	▲
Service Hours	1,365	1,493	-9%	

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	99%
✓ Valid TEDS Data		100%	98%

On-Time Periodic		Actual	State Avg
6 Month Updates		77%	78%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		99%	93%
✓ SA Screen Complete		100%	93%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	100%
✓ Valid Axis V GAF Score		100%	97%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		57	70%	50%	58%	20%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Abstinence/Reduced Drug Use		358	72%	50%	66%	22%	▲
✓ Not Arrested		468	94%	75%	93%	19%	▲
✓ Self Help		338	68%	60%	48%	8%	
✓ Stable Living Situation		484	98%	90%	92%	8%	
✓ Employed		233	47%	40%	38%	7%	
✓ Improved/Maintained Axis V GAF Score		362	87%	75%	66%	12%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		389	94%	90%	91%	4%

Service Engagement

Medication Assisted Treatment	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Length of Stay over 1 Year		324	68%	50%	61%	18%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%
Services							83%

▲ > 10% Over   ▼ < 10% Under
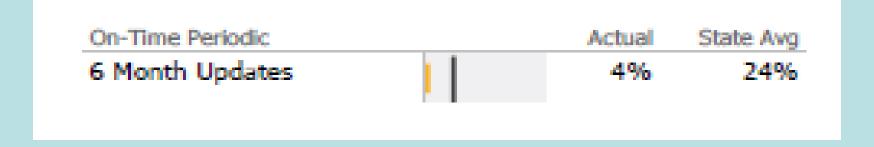
Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 26 Active Methadone Maintenance Programs

Data Quality Issues

- PA 6 Month Updates (Includes all Recovery NOMs):

- Abstinence or Reduced Drug Use (T1 and T2)

- Dx 6 Month Updates (T1 and T2 GAF)

- Treatment Completions (Do not use Other)

- LOS Outliers

- Client with Services

- Extract Errors

Statewide Avg. for PA Updates by LOC

- Addiction OP = 24%

On-Time Periodic		Actual	State Avg
6 Month Updates		4%	24%

- MH Standard Case Management = 45%

On-Time Periodic		Actual	State Avg
6 Month Updates		25%	45%

Program Level Report

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Addiction - Outpatient - Standard Outpatient

Reporting Period: July 2013 - December 2013 (Data as of Mar 20, 2014)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	261	170	54%	▲
Admits	135	119	13%	▲
Discharges	123	73	68%	▲
Service Hours	973	765	27%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		20%	24%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		96%	95%
SA Screen Complete		86%	94%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		96%	99%
✓ Valid Axis V GAF Score		97%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%
Services							67%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		35	29%	50%	53%	-21%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		232	87%	75%	82%	12%	▲
● Abstinence/Reduced Drug Use		108	41%	55%	51%	-14%	▼
● Stable Living Situation		216	81%	95%	79%	-14%	▼
● Self Help		102	38%	60%	23%	-22%	▼
● Employed		73	27%	50%	31%	-23%	▼
● Improved/Maintained Axis V GAF Score		129	69%	75%	45%	-6%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		100	70%	90%	59%	-20%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		93	70%	75%	71%	-5%

> Not Updating the 6 Month PAs will negatively affect Recovery Outcomes

Program Level Report

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Addiction - Outpatient - Standard Outpatient

Reporting Period: July 2013 - December 2013 (Data as of Mar 20, 2014)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	261	170	54%	▲
Admits	135	119	13%	▲
Discharges	123	73	68%	▲
Service Hours	973	765	27%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		20%	22%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		96%	95%
SA Screen Complete		86%	94%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		96%	99%
✔ Valid Axis V GAF Score		97%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%
Services							67%

☐ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
⬤ Treatment Completed Successfully		35	29%	50%	53%	-21%	▼

Recovery

National Recovery Measures (NOMS)

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Not Arrested		232	87%	75%	82%	12%	▲
⬤ Abstinence/Reduced Drug Use		108	41%	55%	51%	-14%	▼
⬤ Stable Living Situation		216	81%	95%	79%	-14%	▼
⬤ Self Help		102	38%	60%	23%	-22%	▼
⬤ Employed		73	27%	50%	31%	-23%	▼
⬤ Improved/Maintained Axis V GAF Score		129	69%	75%	45%	-6%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
⬤ Clients Receiving Services		100	70%	90%	59%	-20%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
⬤ 2 or more Services within 30 days		93	70%	75%	71%	-5%

For this Recovery measure we need a T1 and a T2.
A PA update is the T2.

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	261	170	54%	▲
Admits	135	119	13%	▲
Discharges	123	73	68%	▲
Service Hours	973	765	27%	▲

Data Submission Quality

Data Entry	Actual % vs Goal %	Actual	State Avg
✓ Valid NOMS Data		96%	95%
Valid TEDS Data		78%	95%

On-Time Periodic		Actual	State Avg
6 Month Updates		20%	22%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		96%	95%
SA Screen Complete		86%	94%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		96%	99%
✓ Valid Axis V GAF Score		97%	94%

Data Submitted to DMHAS by Month

Jul Aug Sep Oct Nov Dec % Months Submitted

		% Months Submitted
Admissions		100%
Discharges		100%
Services		67%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		35	29%	50%	53%	-21%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		232	87%	75%	82%	12%	▲
● Abstinence/Reduced Drug Use		108	41%	55%	51%	-14%	▼
● Stable Living Situation		216	81%	95%	79%	-14%	▼
● Self Help		102	38%	60%	23%	-22%	▼
● Employed		73	27%	50%	31%	-23%	▼
● Improved/Maintained Axis V GAF Score		129	69%	75%	45%	-6%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		100	70%	90%	59%	-20%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		93	70%	75%	71%	-5%

Again, we need a T1 and a T2 to calculate this measurement. These data come from the admission Dx, 6 month Dx update and or the discharge Dx.

Program Level Report

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2013 - December 2013 (Data as of Mar 20, 2014)

Addiction - Outpatient - Standard Outpatient

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	261	170	54%	▲
Admits	135	119	13%	▲
Discharges	123	73	68%	▲
Service Hours	973	765	27%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		20%	22%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		96%	95%
SA Screen Complete		86%	94%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		96%	99%
✓ Valid Axis V GAF Score		97%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%
Services							67%

1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🟡	Treatment Completed Successfully		35	29%	50%	53%	-21%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested			232	87%	75%	82%	12%	▲
🔴 Abstinence/Reduced Drug Use			108	41%	55%	51%	-14%	▼
🔴 Stable Living Situation			216	81%	95%	79%	-14%	▼
🔴 Self Help			102	38%	60%	23%	-22%	▼
🔴 Employed			73	27%	50%	31%	-23%	▼
🔴 Improved/Maintained Axis V GAF Score			129	69%	75%	45%	-6%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		100	70%	90%	59%	-20%	▼

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		93	70%	75%	71%	-5%	

We are looking at positive discharge outcomes here. "Other" is not considered positive!

	Provider:	

Provider:

Program:

Program Type:
Addiction

Date Range: 4/7/2014 - 4/7/2014 - All
Active Clients

Level of Care Type: Residential Services

Level of Care Mode: SA Intensive Res.
Rehabilitation 3.7

	Avg Length of Stay (Days)	Total Active	Distinct Clients
	98.4	17	17
	98.4	17	17

Last Name	First Name	Admitted	Discharged	Status	Length of Stay	Click for Detail	
		9/5/2013		Open	214	Admissions	Assessments
		1/15/2014		Open	82	Admissions	Assessments
		2/21/2014		Open	45	Admissions	Assessments
		2/10/2014		Open	56	Admissions	Assessments
		12/29/2013		Open	99	Admissions	Assessments
		2/11/2014		Open	55	Admissions	Assessments
		1/26/2014		Open	71	Admissions	Assessments
		1/28/2014		Open	69	Admissions	Assessments
		12/31/2013		Open	97	Admissions	Assessments
		2/25/2014		Open	41	Admissions	Assessments
		10/15/2013		Open	174	Admissions	Assessment

Statewide Avg. Bed Utilization For Residential LOCs

- Addiction – Residential Intermediate/LT Care Tx 3.5 = 102%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg
✓ Avg Utilization Rate	▮▮▮▮▮▮	6	226 days	0.3	166%	90%	102%

◻ < 90%   ◻ 90-110%   ▮ >110%

- MH – Residential – Supervised = 97%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg
✓ Avg Utilization Rate	▮▮▮▮▮▮	4	670 days	0.5	168%	90%	97%

◻ < 90%   ◻ 90-110%   ▮ >110%

Program ABC

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2013 - December 2013 (Data as of Mar 20, 2014)

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	47	43	9%
Admits	31	33	-6%
Discharges	27	32	-16% ▼
Bed Days	3,236	1,956	65% ▲

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		93%	98%
Valid TEDS Data		97%	100%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		80%	13%

Cooccurring		Actual	State Avg
MH Screen Complete		94%	99%
SA Screen Complete		50%	98%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		98%	100%
Valid Axis V GAF Score		96%	100%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							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	52%	70%	65%	-18% ▼
✓ No Re-admit within 30 Days of Discharge		26	96%	85%	92%	11% ▲
🔴 Follow-up within 30 Days of Discharge		7	50%	90%	49%	-40% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Abstinence/Reduced Drug Use		23	49%	70%	73%	-21% ▼
🔴 Improved/Maintained Axis V GAF Score		27	84%	95%	88%	-11% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		12	142 days	0.3	147%	90%	102%	57% ▲

☐ < 90%	☐ 90-110%	🟥 >110%

Inflated percentage
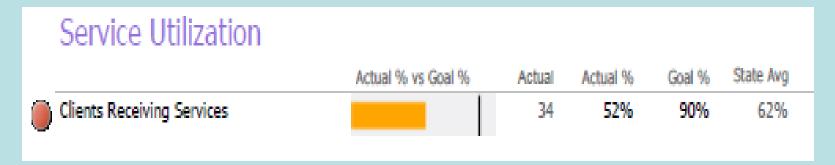
Length of Stay (LOS) Outliers – Need to discharge non-active clients.
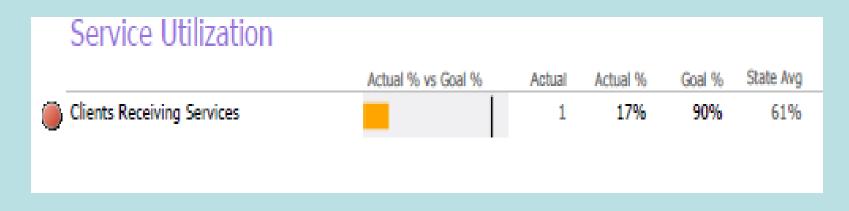If you submit an extract, be sure errors are corrected because you may think you have discharged someone but they errored out and are still on the books.

Statewide Avg. Clients Receiving Services

- Addiction Outpatient = 62%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg
Clients Receiving Services		34	52%	90%	62%

- MH Case Management = 61%

Service Utilization

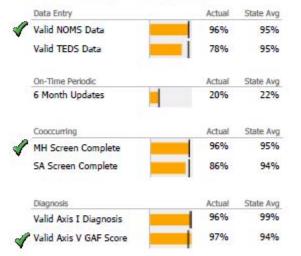|	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg
Clients Receiving Services		1	17%	90%	61%

Program Level Report

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2013 – December 2013 (Data as of Mar 20, 2014)

Addiction - Outpatient - Standard Outpatient

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	261	170	54%	▲
Admits	135	119	13%	▲
Discharges	123	73	68%	▲
Service Hours	973	765	27%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		20%	22%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		96%	95%
SA Screen Complete		86%	94%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		96%	99%
✓ Valid Axis V GAF Score		97%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%
Services							67%

☐ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		35	29%	50%	53%	-21%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		232	87%	75%	82%	12%	▲
● Abstinence/Reduced Drug Use		108	41%	55%	51%	-14%	▼
● Stable Living Situation		216	81%	95%	79%	-14%	▼
● Self Help		102	38%	60%	23%	-22%	▼
● Employed		73	27%	50%	31%	-23%	▼
● Improved/Maintained Axis V GAF Score		129	69%	75%	45%	-6%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		100	70%	90%	62%	-20%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		93	70%	75%	71%	-5%

Why did only 70% of these active clients receive services? And only 62% of active clients state-wide received services? Seems that clients need to be discharged?

Extract Errors

File Error Summary Count

BatchId: 17244
Initial Upload Date: 3/28/2014 2:15:02 PM
Batch File Name   Agency ABC
Total Count   1   Accepted Count   0
Processed Count   1   Error Count   1

Need someone in your agency to fix these extract errors.

PeriodicAssessment

Assessment Date   Assessment date must be equal to the Discharge date.   1

DMHAS Web Posting

- Six Month Provider Quality Reports will be posted just below the annual FY13 reports

- Quarterly Reports going forward

Questions?

- Call or email Jim @ (860) 418-6810 or james.siemianowski@po.state.ct.us

- Or you can call or e-mail Mark @ (860) 418-6843 or mark.mcandrew@po.state.ct.us