**Southeastern Mental Health Authority**
Norwich, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2014 - June 2015   (Data as of Sep 17, 2015)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 1,519 | 1,786 | -15% | ▼ |
| | Admits | 1,654 | 1,209 | 37% | ▲ |
| | Discharges | 1,532 | 1,817 | -16% | ▼ |
| | Service Hours | 32,344 | | - | |
| | Bed Days | 4,192 | 4,258 | -2% | |

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

## Clients by Level of Care

| Program Type / Level of Care Type | | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Outpatient | 478 | 20.4% |
| | Intake | 353 | 15.1% |
| | Crisis Services | 299 | 12.8% |
| | Community Support | 222 | 9.5% |
| | ACT | 207 | 8.8% |
| | Employment Services | 122 | 5.2% |
| | Case Management | 120 | 5.1% |
| | Residential Services | 107 | 4.6% |
| | Other | 47 | 2.0% |
| | Social Rehabilitation | 16 | 0.7% |
| **Forensic MH** | | | |
| | Forensics Community-based | 371 | 15.8% |

## Consumer Satisfaction Survey   (Based on 172 FY14 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Participation in Treatment | | 92% | 80% | 92% |
| ✓ | Quality and Appropriateness | | 91% | 80% | 93% |
| ✓ | General Satisfaction | | 90% | 80% | 92% |
| ✓ | Overall | | 90% | 80% | 91% |
| ✓ | Respect | | 88% | 80% | 91% |
| ✓ | Access | | 85% | 80% | 88% |
| 🔴 | Outcome | | 77% | 80% | 83% |
| 🔴 | Recovery | | 74% | 80% | 79% |

Legend: ▮ Satisfied %  | Goal %  ▮ 0-80%  ▮ 80-100%  ✓ Goal Met  🔴 Under Goal

## Client Demographics

### Age
| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 271 | 18% | 16% |
| 26-34 | 279 | 19% | 24% |
| 35-44 | 284 | 19% | 19% |
| 45-54 | 340 | 23% | 23% |
| 55-64 | 226 | 15% | 14% |
| 65+ | 76 | 5% | 4% |

### Gender
| | # | % | State Avg |
|---|---|---|---|
| Male | 927 | 61% | 60% |
| Female | 589 | 39% | 40% |

### Race
| | # | % | State Avg |
|---|---|---|---|
| White/Caucasian | 1,082 | 75% | 66% |
| Black/African American | 194 | 13% | 17% |
| Other | 103 | 7% | 13% |
| Unknown | 24 | 2% | 3% |
| Am. Indian/Native Alaskan | 13 | 1% | 1% |
| Asian | 12 | 1% | 1% |
| Multiple Races | 10 | 1% | 1% |
| Hawaiian/Other Pacific Islander | 9 | 1% | 0% |

### Ethnicity
| | # | % | State Avg |
|---|---|---|---|
| Non-Hispanic | 1,133 | 75% | 75% |
| Unknown | 245 | 16% | 6% |
| Hispanic-Other | 68 | 4% | 6% |
| Hisp-Puerto Rican | 68 | 4% | 12% |
| Hispanic-Mexican | 3 | 0% | 1% |
| Hispanic-Cuban | 2 | 0% | 0% |

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

**ACCESS**
Southeastern Mental Health Authority
Mental Health - ACT - Assertive Community Treatment

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 118 | 104 | 13% | ▲ |
| Admits | 52 | 47 | 11% | ▲ |
| Discharges | 47 | 36 | 31% | ▲ |
| Service Hours | 7,272 | - | | |

## Data Submission Quality

| Data Entry | Actual % vs State Avg | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 91% | 95% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 96% | 71% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 79% |
| ✓ SA Screen Complete | | 97% | 76% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 95% | 97% |
| Valid Axis V GAF Score | | 45% | 86% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 17 | 36% | 65% | 54% | -29% | ▼ |
| ✓ | No Re-admit within 30 Days of Discharge | | 42 | 98% | 85% | 89% | 13% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 14 | 82% | 90% | 48% | -8% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 100 | 82% | 60% | 89% | 22% | ▲ |
| 🔴 | Social Support | | 63 | 52% | 60% | 73% | -8% | |
| 🔴 | Employed | | 3 | 2% | 15% | 9% | -13% | ▼ |
| 🔴 | Improved/Maintained Axis V GAF Score | | 25 | 25% | 85% | 54% | -60% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 74 | 99% | 90% | 98% | 9% |

## Data Submitted to DMHAS by Month
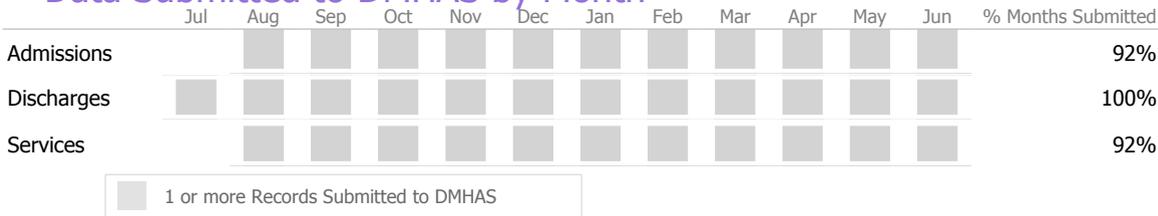
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | 92% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | 92% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 10 Active Assertive Community Treatment Programs

**CIT-401 W.Thames St**
Southeastern Mental Health Authority
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 40 | 131 | -69% | ▼ |
| Admits | 36 | 124 | -71% | ▼ |
| Discharges | 40 | 129 | -69% | ▼ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Evaluation within 1.5 hours of Request | | 8 | 18% | 75% | 57% | -57% | ▼ |
| ✔️ | Community Location Evaluation | | 42 | 95% | 80% | 61% | 15% | ▲ |
| 🔴 | Follow-up Service within 48 hours | | 2 | 29% | 90% | 46% | -61% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ■ | ■ | ■ | ■ | ■ | ■ | ■ | | | | | | 58% |
| Discharges | ■ | ■ | ■ | ■ | ■ | ■ | ■ | | | | | | 58% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

| Actual | | Goal | ✔️ Goal Met | 🔴 Below Goal |

\* State Avg based on 25 Active Mobile Crisis Team Programs

**CORP Post-Release**
Southeastern Mental Health Authority
Forensic MH - Forensics Community-based - Re-entry Programs

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 7 | 3 | 133% | ▲ |
| Admits | 5 | 3 | 67% | ▲ |
| Discharges | 4 | 1 | 300% | ▲ |
| Service Hours | - | - | | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▪ | | ▪ | ▪ | | ▪ | | | | | 33% |
| Discharges | ▪ | | ▪ | | | | | | | | | ▪ | 25% |
| Services | | | | | | | | | | | | | 0% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| Actual | | Goal | ✔ Goal Met | ● Below Goal |
|---|---|---|---|---|

* State Avg based on 2 Active Re-entry Programs Programs

**CRS (Community Residential Services)**
Southeastern Mental Health Authority
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 120 | 94 | 28% | ▲ |
| Admits | 43 | 17 | 153% | ▲ |
| Discharges | 28 | 18 | 56% | ▲ |
| Service Hours | 5,349 | - | | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 10 | 36% | 50% | 54% | -14% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 109 | 91% | 80% | 91% | 11% | ▲ |
| 🔴 Social Support | | 57 | 48% | 60% | 73% | -12% | ▼ |
| 🔴 Employed | | 4 | 3% | 20% | 12% | -17% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 96% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 85% | 72% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 92 | 100% | 90% | 95% | 10% |

## Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS
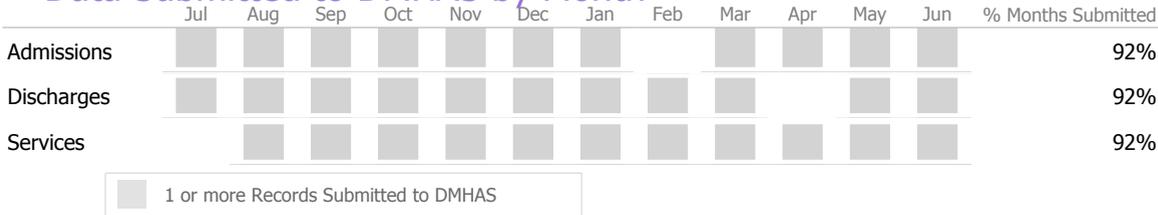
| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| Actual | Goal | ✔ Goal Met | 🔴 Below Goal |
|---|---|---|---|

* State Avg based on 30 Active Standard Case Management Programs

**HOAP (Homeless Outreach Adv. Program)**
Southeastern Mental Health Authority
Mental Health - Other - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---------|--------|----------|------------|---|
| Unique Clients | 24 | 35 | -31% | ▼ |
| Admits | 24 | 15 | 60% | ▲ |
| Discharges | 24 | 35 | -31% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|---------------------|
| Admissions | | | ▢ | ▢ | ▢ | ▢ | ▢ | | | | | | 42% |
| Discharges | | | ▢ | ▢ | ▢ | ▢ | ▢ | | | | | | 42% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✔ Goal Met     ● Below Goal
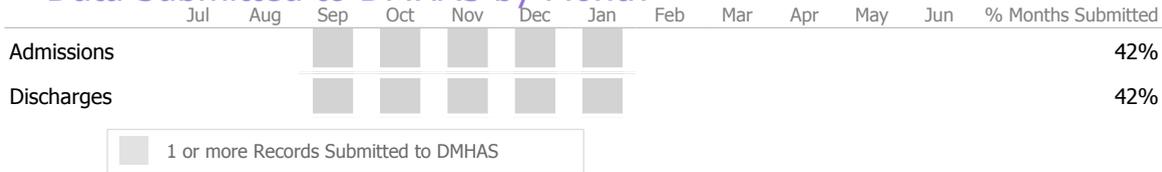
* State Avg based on 2 Active Outreach & Engagement Programs

**SMHA Crisis**
Southeastern Mental Health Authority
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 262 | 859 | -69% | ▼ |
| Admits | 284 | 172 | 65% | ▲ |
| Discharges | 265 | 845 | -69% | ▼ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Evaluation within 1.5 hours of Request | | 136 | 51% | 75% | 57% | -24% | ▼ |
| ✔ | Community Location Evaluation | | 235 | 87% | 80% | 61% | 7% | |
| 🔴 | Follow-up Service within 48 hours | | 19 | 33% | 90% | 46% | -57% | ▼ |

## Data Submitted to DMHAS by Month
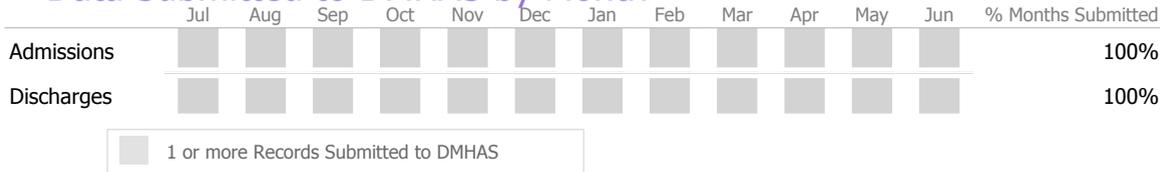
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |

1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| 🟧 Actual | ❘ Goal | ✔ Goal Met | 🔴 Below Goal |
|---|---|---|---|

\* State Avg based on 25 Active Mobile Crisis Team Programs

**SMHA Employment Services Program**
Southeastern Mental Health Authority
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 122 | 70 | 74% | ▲ |
| Admits | 59 | 35 | 69% | ▲ |
| Discharges | 32 | 7 | 357% | ▲ |
| Service Hours | 1,414 | - | | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Employed | | 25 | 20% | 35% | 39% | -15% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 80 | 89% | 90% | 96% | -1% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 96% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 68% | 93% |

## Data Submitted to DMHAS by Month

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

▢ 1 or more Records Submitted to DMHAS
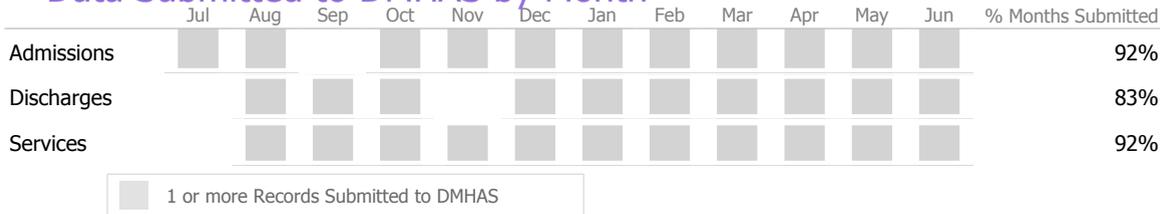
▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 40 Active Employment Services Programs

**SMHA Forensics**
Southeastern Mental Health Authority
Forensic MH - Forensics Community-based - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 28 | 19 | 47% | ▲ |
| Admits | 18 | 8 | 125% | ▲ |
| Discharges | 8 | 9 | -11% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | | ▢ | | | ▢ | ▢ | ▢ | ▢ | 75% |
| Discharges | | ▢ | | | | ▢ | ▢ | | ▢ | ▢ | ▢ | | 50% |

▢ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▧ Actual | ▮ Goal | ✔ Goal Met | ⬤ Below Goal |
|---|---|---|---|

* State Avg based on 1 Active Outreach & Engagement Programs

**SMHA Hsing Asst**
Southeastern Mental Health Authority
Mental Health - Housing Services - Housing Assistance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

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

## 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 1 Active Housing Assistance Programs

**SMHA Intake Unit**
Southeastern Mental Health Authority
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 353 | 24 | 1371% | ▲ |
| Admits | 355 | 20 | 1675% | ▲ |
| Discharges | 344 | 14 | 2357% | ▲ |
| Service Hours | 177 | - | | |

## 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 | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 92% |

▢ 1 or more Records Submitted to DMHAS
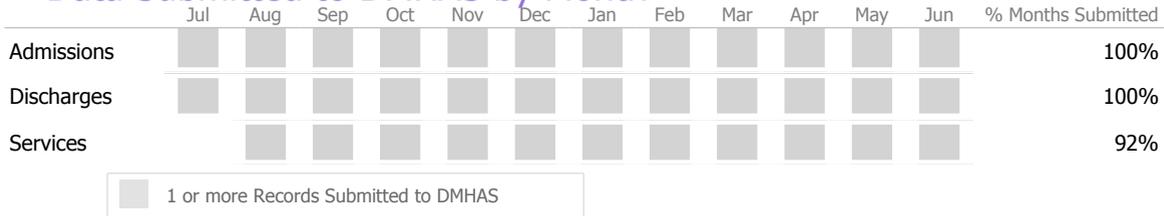
▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 10 Active Central Intake Programs

**SMHA Jail Diversion**
Southeastern Mental Health Authority
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

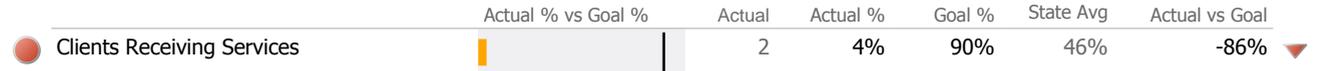Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 259 | 296 | -13% | ▼ |
| Admits | 224 | 264 | -15% | ▼ |
| Discharges | 238 | 250 | -5% | |
| Service Hours | 5 | - | | |

## Service Utilization
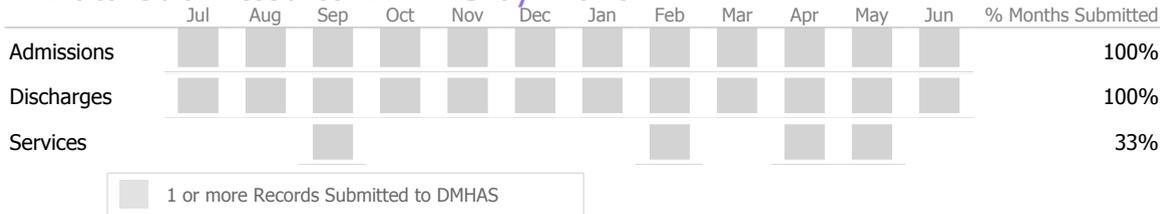
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 2 | 4% | 90% | 46% | -86% | ▼ |

## Jail Diversion

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Follow-up Service within 48 hours | | 24 | 14% | 0% | 20% | 14% | ▲ |

## 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 | | | ☐ | | | | | ☐ | | ☐ | | | 33% |

☐ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▮ Actual | ❘ Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|

* State Avg based on 18 Active Court Liaison-Jail Diversion Programs

**SMHA Liaison**
Southeastern Mental Health Authority
Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 6 | | |
| Admits | 6 | - | |
| Discharges | 3 | - | |
| Service Hours | - | - | |

## Data Submitted to DMHAS by Month

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

| | 1 or more Records Submitted to DMHAS |
|---|---|

▲ > 10% Over     ▼ < 10% Under

| Actual | | Goal | ✔ Goal Met | ● Below Goal |
|---|---|---|---|---|

* State Avg based on 13 Active Other Programs

**SMHA Sub-Acute BCP**
Southeastern Mental Health Authority
Mental Health - Residential Services - Sub-Acute

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 107 | 115 | -7% |
| Admits | 126 | 131 | -4% |
| Discharges | 127 | 131 | -3% |
| Bed Days | 4,192 | 4,258 | -2% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 94% | 94% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| | 6 Month Updates | N/A | 100% |

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

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 96% | 96% |
| ✓ | Valid Axis V GAF Score | 62% | 58% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 108 | 85% | 95% | 85% | -10% ▼ |
| 🔴 No Re-admit within 30 Days of Discharge | | 106 | 83% | 85% | 80% | -2% |
| ✓ Follow-up within 30 Days of Discharge | | 108 | 100% | 90% | 97% | 10% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Improved/Maintained Axis V GAF Score | | 24 | 19% | 95% | 21% | -76% ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 15 | 61 days | 0.1 | 77% | 90% | 77% | -13% ▼ |

Legend: ▨ < 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 2 Active Sub-Acute Programs

**SMHA/OUTPT CLINICAL**
Southeastern Mental Health Authority
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 478 | 427 | 12% | ▲ |
| Admits | 232 | 192 | 21% | ▲ |
| Discharges | 198 | 178 | 11% | ▲ |
| Service Hours | 3,613 | - | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 90% | 94% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 62% | 66% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 67% |
| ✓ SA Screen Complete | | 99% | 62% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 98% | 98% |
| Valid Axis V GAF Score | | 87% | 92% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 39 | 20% | 50% | 40% | -30% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 376 | 76% | 60% | 66% | 16% | ▲ |
| 🔴 Stable Living Situation | | 441 | 90% | 95% | 85% | -5% | |
| 🔴 Employed | | 71 | 14% | 30% | 21% | -16% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 214 | 54% | 75% | 57% | -21% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 293 | 99% | 90% | 86% | 9% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 176 | 77% | 75% | 69% | 2% |

## 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 | | | | | | | | | | | | | 92% |

1 or more Records Submitted to DMHAS
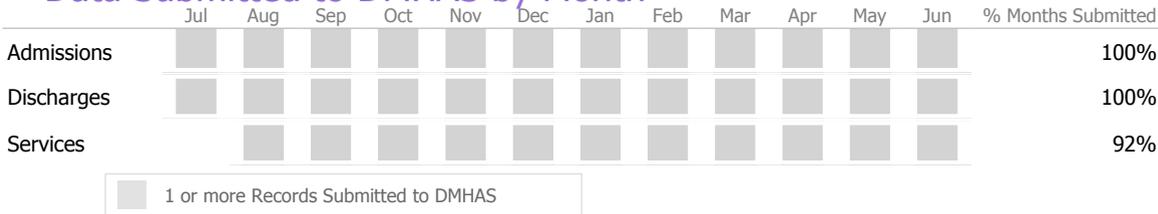
▲ > 10% Over    ▼ < 10% Under

Actual   | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Veterans Jail Diversion Initiative**
Southeastern Mental Health Authority
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

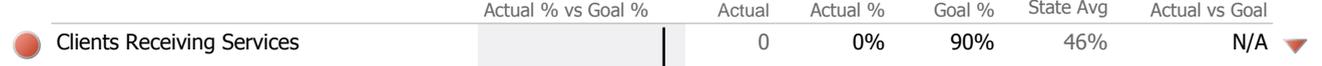Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 82 | 131 | -37% | ▼ |
| Admits | 65 | 118 | -45% | ▼ |
| Discharges | 73 | 117 | -38% | ▼ |
| Service Hours | - | - | | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Clients Receiving Services | | 0 | 0% | 90% | 46% | N/A | ▼ |

## Jail Diversion

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Follow-up Service within 48 hours | | 0 | 0% | 0% | 20% | 0% |

## 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 | | | | | | | | | | | | | 0% |

▢ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| 🟧 Actual | ❘ Goal | ✔ Goal Met | 🔴 Below Goal |
|---|---|---|---|

* State Avg based on 18 Active Court Liaison-Jail Diversion Programs

**Work Readiness/ Recovery Cafe**
Southeastern Mental Health Authority
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 16 | | |
| Admits | 16 | - | |
| Discharges | 4 | - | |
| Service Hours | 185 | - | |
| Social Rehab/PHP/IOP Days | 0 | 0 | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 11 | 92% | 90% | 75% | 2% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | ▓ | ▓ | ▓ | ▓ | ▓ | 42% |
| Discharges | | | | | | | | | | ▓ | ▓ | ▓ | 25% |
| Services | | | | | | | | | ▓ | ▓ | ▓ | ▓ | 33% |

▓ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

� Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 39 Active Social Rehabilitation Programs

**WRAP 1 (CSP- Wellness Recovery Adv. Prgm.)**
Southeastern Mental Health Authority
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 159 | 115 | 38% | ▲ |
| Admits | 62 | 35 | 77% | ▲ |
| Discharges | 49 | 16 | 206% | ▲ |
| Service Hours | 4,689 | - | | |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 67% |
| ✔ SA Screen Complete | | 99% | 65% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 96% | 97% |
| Valid Axis V GAF Score | | 74% | 93% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 11 | 22% | 65% | 70% | -43% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 147 | 91% | 80% | 92% | 11% | ▲ |
| ✔ Social Support | | 97 | 60% | 60% | 76% | 0% | |
| 🔴 Employed | | 16 | 10% | 20% | 11% | -10% | ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | 51 | 40% | 95% | 61% | -55% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 110 | 98% | 90% | 96% | 8% |

## Data Submitted to DMHAS by Month
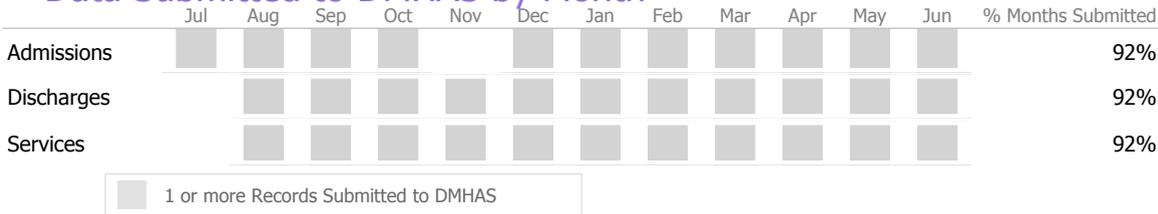
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 92% |
| Discharges | | | | | | | | | | | | | 92% |
| Services | | | | | | | | | | | | | 92% |

1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

Actual | Goal | ✔ Goal Met | 🔴 Below Goal

* State Avg based on 40 Active CSP Programs

**WRAP 2 (CSP - Wellness Recovery Adv. Prgm.)**
Southeastern Mental Health Authority
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 63 | 72 | -13% | ▼ |
| Admits | - | 4 | -100% | ▼ |
| Discharges | 6 | 9 | -33% | ▼ |
| Service Hours | 3,108 | - | | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 2 | 33% | 65% | 70% | -32% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 62 | 98% | 80% | 92% | 18% | ▲ |
| ✓ | Social Support | | 39 | 62% | 60% | 76% | 2% | |
| 🔴 | Employed | | 6 | 10% | 20% | 11% | -10% | ▼ |
| 🔴 | Improved/Maintained Axis V GAF Score | | 25 | 40% | 95% | 61% | -55% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 57 | 100% | 90% | 96% | 10% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 96% | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 74% | 92% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 67% |
| SA Screen Complete | | N/A | 65% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 98% | 97% |
| Valid Axis V GAF Score | | 87% | 93% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | | | | 42% |
| Services | | | | | | | | | | | | | 92% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

\* State Avg based on 40 Active CSP Programs

**YAS Pre-Admit**
Southeastern Mental Health Authority
Mental Health - Other - Other

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 17 | 1 | 1600% | ▲ |
| Admits | 16 | 1 | 1500% | ▲ |
| Discharges | 14 | - | | |
| Service Hours | 18 | - | | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▮ | ▮ | ▮ | | ▮ | | ▮ | ▮ | ▮ | ▮ | | 67% |
| Discharges | | ▮ | ▮ | ▮ | | ▮ | ▮ | ▮ | | ▮ | ▮ | | 67% |
| Services | | ▮ | ▮ | ▮ | | | ▮ | | | | | | 33% |

�ढ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 13 Active Other Programs

**Young Adult Services**
Southeastern Mental Health Authority
Mental Health - ACT - Assertive Community Treatment

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2014 - June 2015  (Data as of Sep 17, 2015)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 89 | 80 | 11% | ▲ |
| Admits | 31 | 23 | 35% | ▲ |
| Discharges | 28 | 22 | 27% | ▲ |
| Service Hours | 6,513 | - | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 93% | 95% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 52% | 71% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 79% |
| ✔ SA Screen Complete | | 100% | 76% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 98% | 97% |
| Valid Axis V GAF Score | | 56% | 86% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 7 | 25% | 65% | 54% | -40% | ▼ |
| ✔ | No Re-admit within 30 Days of Discharge | | 28 | 100% | 85% | 89% | 15% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 4 | 57% | 90% | 48% | -33% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Stable Living Situation | | 79 | 89% | 60% | 89% | 29% | ▲ |
| ✔ | Social Support | | 58 | 65% | 60% | 73% | 5% | |
| ✔ | Employed | | 17 | 19% | 15% | 9% | 4% | |
| 🔴 | Improved/Maintained Axis V GAF Score | | 38 | 51% | 85% | 54% | -34% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 61 | 100% | 90% | 98% | 10% |

## Data Submitted to DMHAS by Month

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

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    │ Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 10 Active Assertive Community Treatment Programs