#### **Wheeler Clinic**

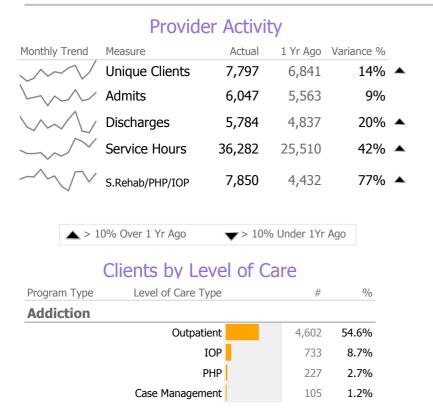
Plainville, CT

**Forensic SA** 

Forensics Community-based

Case Management

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)



2,646

117

31.4%

1.4%

#### **Consumer Satisfaction Survey** (Based on 439 FY14 Surveys) Question Domain Goal % Satisfied % vs Goal% Satisfied % State Avg Participation in Treatment 88% 80% 92% Respect 86% 80% 91% Quality and Appropriateness 86% 80% 93% 84% 80% 91% Overall General Satisfaction 80% 92% 81% Recovery 80% 80% 79% Access 78% 80% 88% Outcome 78% 80% 83% Satisfied % Goal % 0-80% 80-100% 🖌 Goal Met Under Goal

#### **Client Demographics**

Age

18-25

26-34

35-44

45-54

55-64

65+

**Ethnicity** 

Non-Hispanic

Unknown

Hisp-Puerto Rican

Hispanic-Other

Hispanic-Mexican

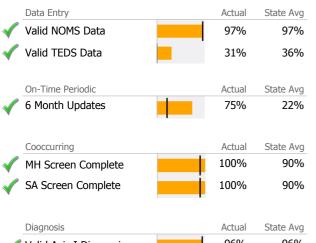
Hispanic-Cuban

# % State Avg Gender	#	%	State Avg
17 27% 🔺 16% Male	5,149	66%	60%
94 30% 24% Female	2,643	34%	40%
13 <b>18% 19%</b>			
<b>16% 23%</b>			
67 7% 14% <b>Race</b>	#	%	State Avg
46 2% 4% White/Caucasian	5,013	64%	66%
Black/African American	1,352	17%	17%
# % State Avg Other	619	8%	13%
54 66% 75% Multiple Races	596	8%	1%
44 19% 12% Unknown	125	2%	3%
09 9% 6% Asian	53	1%	1%
Am. Indian/Native Alaskan	21	0%	1%
Hawaiian/Other Pacific Islander	Male       5,149       66%       609         Female       2,643       34%       409         Race       #       %       State Av         White/Caucasian       5,013       64%       669         Black/African American       1,352       17%       179         Other       619       8%       139         Multiple Races       596       8%       19         Unknown       125       2%       39         Asian       53       1%       19         m. Indian/Native Alaskan       21       0%       19	0%	
25 <b>0% 0%</b>			

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	52	55	-5%	
Admits	27	31	-13%	•
Discharges	17	38	-55%	•
Service Hours	466	398	17%	

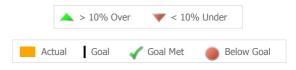
### Data Submission Quality



🗸 Valid Axis I Diagnosis	96%	96%
Valid Axis V GAF Score	100%	78%

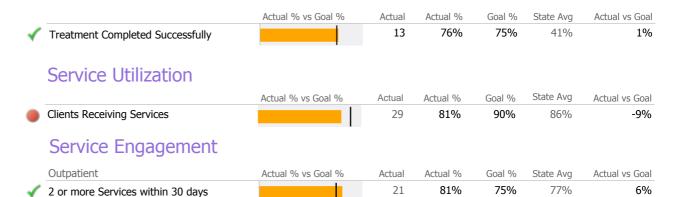
#### Data Submitted to DMHAS by Month

Dutu	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													75%
Discharges													83%
Services													100%
	1 or r	more Recor	ds Subr	nitted to	DMHAS	5							



\* State Avg based on 10 Active Gambling Outpatient Programs

#### Discharge Outcomes



#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	253	193	31%	
Admits	223	195	14%	
Discharges	219	152	44%	
Service Hours	245	273	-10%	
Social Rehab/PHP/IOP Days	2,222	1,532	45%	

#### Data Submission Quality

Data Entry	Ac	tual	State Avg
🗸 Valid NOMS Data	9	6%	96%
Valid TEDS Data	9	5%	99%
On-Time Periodic	Ac	tual	State Avg
6 Month Updates		0%	14%
Cooccurring	Ac	ctual	State Avg
🖌 MH Screen Complete	10	0%	96%
🖌 SA Screen Complete	10	0%	96%
*			
Diagnosis	Ac	tual	State Ava

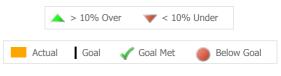
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	92%	98%
🞻 Valid Axis V GAF Score	100%	98%

#### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		165	75%	50%	55%	25%	4
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		96	58%	90%	52%	-32%	4
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Not Arrested		230	82%	75%	93%	7%	
	Abstinence/Reduced Drug Use	·	162	58%	55%	65%	3%	
/	Employed		139	50%	50%	31%	0%	
	Improved/Maintained Axis V GAF Score		191	81%	75%	83%	6%	
	Stable Living Situation		233	84%	95%	90%	-11%	
	Self Help	<b>—</b>   '	61	22%	60%	51%	-38%	,
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		48	80%	90%	80%	-10%	

#### Data Submitted to DMHAS by Month





\* State Avg based on 50 Active Standard IOP Programs

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	490	278	76%	
Admits	440	250	76%	
Discharges	362	198	83%	
Service Hours	573	352	63%	
Social Rehab/PHP/IOP Days	3,985	1,798	122%	

#### Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	93%	96%
Valid TEDS Data	93%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	13%	14%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	96%
SA Screen Complete	100%	96%

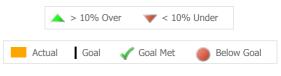
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	91%	98%
🞻 Valid Axis V GAF Score	100%	98%

#### Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		187	52%	50%	55%	2%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		87	47%	90%	52%	-43%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		428	81%	75%	93%	6%	
Abstinence/Reduced Drug Use		254	48%	55%	65%	-7%	
Improved/Maintained Axis V GAF Score		308	72%	75%	83%	-3%	
Employed		163	31%	50%	31%	-19%	,
Stable Living Situation		402	76%	95%	90%	-19%	,
Self Help		141	27%	60%	51%	-33%	4
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		137	81%	90%	80%	-9%	

#### Data Submitted to DMHAS by Month





\* State Avg based on 50 Active Standard IOP Programs

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	66	53	25% 🔺
Admits	21	27	-22% 🔻
Discharges	45	8	463% 🔺
Service Hours	103	58	77% 🔺

#### Service Engagement



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													33%
Discharges													8%
Services													25%
	1 or 1	nore Reco	rds Subr	nitted to	DMHAS								

	▲ > 10% O	ver 🛛 🔻 < 100	% Under
Actua	Goal	🖌 Goal Met	Below Goal

\* State Avg based on 6 Active Outreach & Engagement Programs

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	227	170	34%	
Admits	203	161	26%	
Discharges	166	145	14%	
Service Hours	260	278	-6%	
Social Rehab/PHP/IOP Days	1,643	1,102	49%	

#### Data Submission Quality

Data Entry     Actual     State       Valid NOMS Data     94%	te Avg 97% 97%
Valid NOMS Data 94%	
	97%
Valid TEDS Data 91%	
On-Time Periodic Actual Stat	te Avg
✓ 6 Month Updates 10%	10%
Cooccurring Actual Sta	te Avg
MH Screen Complete 100%	76%
SA Screen Complete 100%	76%
Ŷ.	
Diagnosis Actual Sta	te Avg

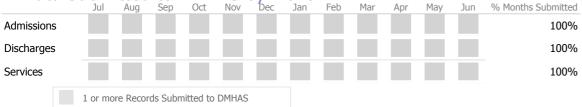
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	89%	96%
Valid Axis V GAF Score	100%	100%

 $\triangleleft$ 

#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		71	43%	50%	70%	-7%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
No Re-admit within 30 Days of Discharge		146	88%	85%	88%	3%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		29	41%	90%	85%	-49%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Improved/Maintained Axis V GAF Score		134	68%	75%	88%	-7%	
Stable Living Situation		179	73%	95%	62%	-22%	
Employed	<b>—</b>   .	53	22%	50%	14%	-28%	4
Self Help		72	29%	60%	68%	-31%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		58	73%	90%	80%	-18%	. 4

#### Data Submitted to DMHAS by Month





\* State Avg based on 14 Active Partial Hospitalization Services Programs

Forensic SA - Case Management - Standard Case Management

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	47	52	-10%
Admits	38	39	-3%
Discharges	37	42	-12% 🔻
Service Hours	463	438	6%

#### Data Submission Quality

	Data Entry	Actual	State Avg
$\checkmark$	Valid NOMS Data	92%	86%
	On-Time Periodic	Actual	State Avg
$\checkmark$	6 Month Updates	25%	22%

#### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		27	73%	50%	76%	23%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		40	80%	60%	55%	20%	<b></b>
<b>«</b>	Employed	·	20	40%	20%	15%	20%	
	Self Help		28	56%	60%	57%	-4%	
	Stable Living Situation		24	48%	80%	44%	-32%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		9	69%	90%	81%	-21%	-

## Data Submitted to Sep OCt Nov Dec Jan



	> 10% 0	ver 🔻 < 10	% Under	
Actual	Goal	🖌 Goal Met	Belo	w Goal

\* State Avg based on 8 Active Standard Case Management Programs

Forensic SA - Case Management - Standard Case Management

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	105	102	3%
Admits	71	75	-5%
Discharges	73	69	6%
Service Hours	260	69	

#### Data Submission Quality

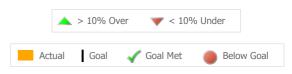
Data Entry	Actual	State Avg
Valid NOMS Data	68%	86%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	22%

#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		72	99%	50%	76%	49%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		27	26%	20%	15%	6%
Social Support		20	19%	60%	55%	-41%
Self Help	<b>–</b> i	14	13%	60%	57%	-47%
Stable Living Situation		1	1%	80%	44%	-79%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		27	82%	90%	81%	-8%

## Data Submitted to DMHAS by Month



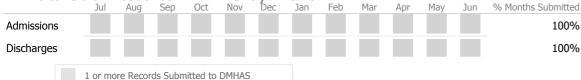


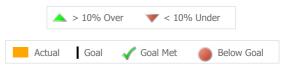
\* State Avg based on 8 Active Standard Case Management Programs

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1,121	1,147	-2%
Admits	683	710	-4%
Discharges	800	693	15% 🔺

#### Data Submitted to DMHAS by Month



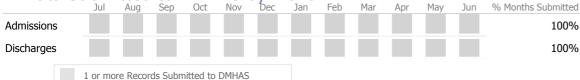


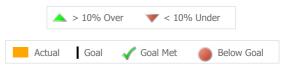
\* State Avg based on 16 Active Pre-trial Intervention Programs Programs

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,529	1,329	15% 🔺	
Admits	821	739	11% 🔺	
Discharges	930	616	51% 🔺	

#### Data Submitted to DMHAS by Month





\* State Avg based on 16 Active Pre-trial Intervention Programs Programs

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,985	1,736	14%	
Admits	1,586	1,400	13%	
Discharges	1,454	1,333	9%	
Service Hours	14,177	10,245	38%	

#### Data Submission Quality

Data Entry	Act	tual State	Ανα
Valid NOMS Data	I		5%
Valid TEDS Data	80	)% 9	2%
On-Time Periodic	Act	tual State	Avg
🧹 6 Month Updates	52	2% 3	3%
Cooccurring	Act	tual State	Avg
MH Screen Complete	100	0% 9	7%
🗸 SA Screen Complete	100	0% 9	6%
Diagnosis	Act	tual State	Aug
Diagnosis Valid Axis I Diagnosis			7%

# Valid Axis I Diagnosis 88% 97% Valid Axis V GAF Score 100% 95%

Oct

Nov

Dec

Jan

Feb

Data Submitted to DMHAS by Month

Sep

Jul

Admissions

Discharges

Services

Aug

#### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
<b>√</b>	Treatment Completed Successfully		779	54%	50%	51%	4%
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Not Arrested		1,801	82%	75%	86%	7%
(	Abstinence/Reduced Drug Use		1,325	60%	55%	58%	5%
1	Improved/Maintained Axis V GAF Score		1,414	83%	75%	62%	8%
	Employed		864	39%	50%	40%	-11%
	Stable Living Situation		1,679	76%	95%	85%	-19%
	Self Help	· · ·	141	6%	60%	26%	-54%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Clients Receiving Services		613	80%	90%	81%	-10%
	Clients Receiving Services		015	0070	5070	0170	-10 %
	Service Engagement		015	0070	5070	0170	-10 %
	-	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal

Actual

100%

Goal

\* State Avg based on 116 Active Standard Outpatient Programs

🖌 Goal Met

Below Goal

1 or more Records Submitted to DMHAS

Goal %

50%

State Avg

51%

Actual vs Goal

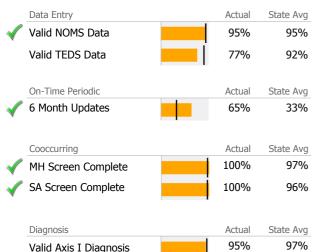
2%

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2,639	2,293	15%	
Admits	1,903	1,920	-1%	
Discharges	1,667	1,528	9%	
Service Hours	19,261	13,170	46%	

#### Data Submission Quality

Valid Axis V GAF Score



## Recovery

**Discharge Outcomes** 

Treatment Completed Successfully

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
P	Not Arrested		2,474	86%	75%	86%	11%	
	Employed		1,398	49%	50%	40%	-1%	
	Abstinence/Reduced Drug Use		1,440	50%	55%	58%	-5%	
	Stable Living Situation		2,460	85%	95%	85%	-10%	
	Improved/Maintained Axis V GAF Score		1,592	72%	75%	62%	-3%	
	Self Help	<b>–</b> I <sup>†</sup>	353	12%	60%	26%	-48%	-
	Service Utilization							

Actual % vs Goal %

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		1,014	83%	90%	81%	-7%

Actual

871

Actual %

52%

#### Service Engagement

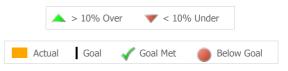
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		1,332	75%	75%	73%	0%

#### Data Submitted to DMHAS by Month

100%



95%



\* State Avg based on 116 Active Standard Outpatient Programs

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	39	22	77% 🔺	
Admits	31	16	94% 🔺	
Discharges	14	15	-7%	
Service Hours	474	229	106% 🔺	

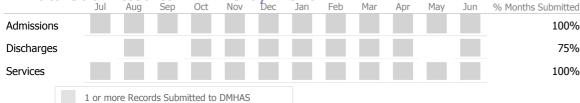
#### Data Submission Quality

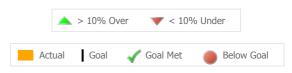
Data Entry	ata Entry		
Valid NOMS Data		96%	99%
On-Time Periodic		Actual	State Avg
6 Month Updates		88%	56%

#### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
<b>√</b>	Treatment Completed Successfully		8	57%	50%	48%	7%
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
(	Stable Living Situation		33	80%	80%	84%	0%
	Employed	• I	3	7%	20%	14%	-13%
	Self Help	<u> </u>	6	15%	60%	66%	-45%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
(	Clients Receiving Services		25	93%	90%	90%	3%

## Data Submitted to DMHAS by Month





\* State Avg based on 17 Active Standard Case Management Programs