**Rushford Center**
Middletown, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2015 - March 2016   (Data as of Jun 15, 2016)
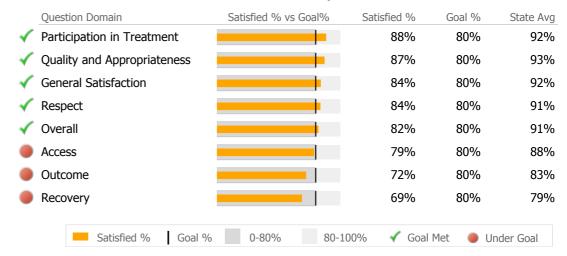
## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 2,826 | 3,276 | -14% | ▼ |
| | Admits | 2,512 | 3,012 | -17% | ▼ |
| | Discharges | 2,515 | 3,063 | -18% | ▼ |
| | Service Hours | 22,875 | 23,751 | -4% | |
| | Bed Days | 20,073 | 26,798 | -25% | ▼ |
| | S.Rehab/PHP/IOP | 3,593 | 1,387 | 159% | ▲ |

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

## Consumer Satisfaction Survey   (Based on 1,257 FY15 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Participation in Treatment | | 88% | 80% | 92% |
| ✓ | Quality and Appropriateness | | 87% | 80% | 93% |
| ✓ | General Satisfaction | | 84% | 80% | 92% |
| ✓ | Respect | | 84% | 80% | 91% |
| ✓ | Overall | | 82% | 80% | 91% |
| 🔴 | Access | | 79% | 80% | 88% |
| 🔴 | Outcome | | 72% | 80% | 83% |
| 🔴 | Recovery | | 69% | 80% | 79% |

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

## Clients by Level of Care

| Program Type / Level of Care Type | | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Outpatient | 1,216 | 32.9% |
| | Community Support | 442 | 11.9% |
| | Crisis Services | 191 | 5.2% |
| | Social Rehabilitation | 159 | 4.3% |
| | Employment Services | 142 | 3.8% |
| | Case Management | 50 | 1.4% |
| | Residential Services | 23 | 0.6% |
| **Addiction** | | | |
| | Residential Services | 844 | 22.8% |
| | Outpatient | 493 | 13.3% |
| | Case Management | 32 | 0.9% |
| **Forensic MH** | | | |
| | Forensics Community-based | 102 | 2.8% |
| | Residential Services | 5 | 0.1% |

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 400 | 14% | 15% |
| 26-34 | 682 | 24% | 24% |
| 35-44 | 526 | 19% | 19% |
| 45-54 | 648 | 23% | 23% |
| 55-64 | 440 | 16% | 15% |
| 65+ | 130 | 5% | 5% |

### Gender

| | # | % | State Avg |
|---|---|---|---|
| Male | 1,759 | 62% | 60% |
| Female | 1,066 | 38% | 40% |
| Transgender | | | 0% |

### Ethnicity

| | # | % | State Avg |
|---|---|---|---|
| Non-Hispanic | 2,154 | 76% | 75% |
| Hisp-Puerto Rican | 494 | 17% | 12% |
| Hispanic-Other | 97 | 3% | 7% |
| Unknown | 50 | 2% | 5% |
| Hispanic-Mexican | 28 | 1% | 1% |
| Hispanic-Cuban | 3 | 0% | 0% |

### Race

| | # | % | | State Avg |
|---|---|---|---|---|
| White/Caucasian | 2,419 | 86% | ▲ | 65% |
| Black/African American | 273 | 10% | | 17% |
| Other | 68 | 2% | ▼ | 13% |
| Unknown | 28 | 1% | | 3% |
| Asian | 18 | 1% | | 1% |
| Am. Indian/Native Alaskan | 13 | 0% | | 0% |
| Multiple Races | 7 | 0% | | 1% |
| Hawaiian/Other Pacific Islander | | | | 0% |

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

**ABI Case Managment Program**
Rushford Center
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

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

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 97% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 71% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 55% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Employed | | N/A | N/A | 20% | 10% | -20% ▼ |
| ● Social Support | | N/A | N/A | 60% | 64% | -60% ▼ |
| ● Stable Living Situation | | N/A | N/A | 80% | 81% | -80% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | N/A | N/A | 90% | 64% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

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

* State Avg based on 32 Active Standard Case Management Programs

**ACCESS Program 303-230**
Rushford Center
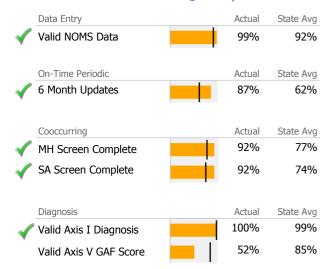Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 978 | 960 | 2% |
| Admits | 410 | 416 | -1% |
| Discharges | 364 | 401 | -9% |
| Service Hours | 9,684 | 8,641 | 12% ▲ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 87% | 62% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 92% | 77% |
| ✔ SA Screen Complete | | 92% | 74% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| Valid Axis V GAF Score | | 52% | 85% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 190 | 52% | 50% | 42% | 2% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Social Support | | 865 | 83% | 60% | 69% | 23% ▲ |
| ✔ Stable Living Situation | | 999 | 95% | 95% | 86% | 0% |
| ● Employed | | 202 | 19% | 30% | 21% | -11% ▼ |
| ● Improved/Maintained Axis V GAF Score | | 515 | 60% | 75% | 52% | -15% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 579 | 85% | 90% | 84% | -5% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 328 | 85% | 75% | 65% | 10% |

## Data Submitted to DMHAS by Month

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

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

**BHH ADULT NAE**
Rushford Center
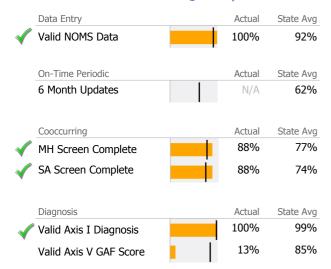Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)
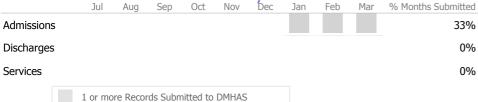
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 8 | | |
| Admits | 8 | - | |
| Discharges | - | - | |
| Service Hours | 5 | - | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 62% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 88% | 77% |
| ✓ SA Screen Complete | | 88% | 74% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| Valid Axis V GAF Score | | 13% | 85% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 42% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 7 | 88% | 60% | 69% | 28% ▲ |
| ✓ Stable Living Situation | | 8 | 100% | 95% | 86% | 5% |
| 🔴 Employed | | 1 | 12% | 30% | 21% | -18% ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | N/A | N/A | 75% | 52% | -75% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 7 | 88% | 90% | 84% | -2% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 5 | 63% | 75% | 65% | -13% ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | ▨ | ▨ | ▨ | 33% |
| 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 93 Active Standard Outpatient Programs

**BHH CHILDREN Program**
Rushford Center
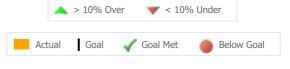Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016   (Data as of Jun 15, 2016)

## Program Activity

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |

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

▲ > 10% Over      ▼ < 10% Under

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

* State Avg based on 38 Active Outreach & Engagement Programs

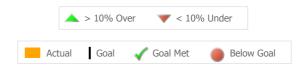**Camp Street MH Intensive Forensic Residential Prog**
Rushford Center
Forensic MH - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 5 | 6 | -17% | ▼ |
| Admits | 3 | 4 | -25% | ▼ |
| Discharges | 2 | 4 | -50% | ▼ |
| Bed Days | 580 | 418 | 39% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 0 | 0% | 75% | 0% | -75% | ▼ |
| ✓ | No Re-admit within 30 Days of Discharge | | 2 | 100% | 85% | 100% | 15% | ▲ |
| | Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | NaN | N/A | |

## Data Submission Quality

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

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

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

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 100% |
| ✓ Valid Axis V GAF Score | | 40% | 40% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Improved/Maintained Axis V GAF Score | | 3 | 100% | 75% | 100% | 25% | ▲ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 6 | 279 days | 0.8 | 35% | 90% | 35% | -55% | ▼ |

■ < 90%   ■ 90-110%   ■ >110%

## Data Submitted to DMHAS by Month

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

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 1 Active MH Intensive Res. Rehabilitation Programs

**Career Development Svs 303-270**
Rushford Center
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 142 | 146 | -3% | |
| Admits | 49 | 49 | 0% | |
| Discharges | 47 | 62 | -24% | ▼ |
| Service Hours | 993 | 903 | 10% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Employed | | 57 | 40% | 35% | 40% | 5% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 76 | 80% | 90% | 96% | -10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 80% | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 79% | 91% |

## Data Submitted to DMHAS by Month

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

☐ 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

**Court Diversion Program303-295**
Rushford Center
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 102 | 169 | -40% | ▼ |
| Admits | 85 | 164 | -48% | ▼ |
| Discharges | 96 | 160 | -40% | ▼ |
| Service Hours | 142 | 12 | | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 9 | 100% | 90% | 45% | 10% |

## Jail Diversion

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Follow-up Service within 48 hours | | 11 | 5% | 0% | 19% | 5% |

## Data Submitted to DMHAS by Month

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

▢ 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

**Crisis/Respite Program 303-200**
Rushford Center
Mental Health - Crisis Services - Respite Bed

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 82 | 98 | -16% | ▼ |
| Admits | 97 | 104 | -7% | |
| Discharges | 100 | 108 | -7% | |
| Bed Days | 1,636 | 2,137 | -23% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | No Re-admit within 30 Days of Discharge | | 86 | 86% | 85% | 91% | 1% | |
| 🔴 | Follow-up within 30 Days of Discharge | | 47 | 73% | 90% | 74% | -17% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 10 | 24 days | 0.1 | 59% | 90% | 86% | -31% | ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 Respite Bed Programs

**Friendship Club 303-280**
Rushford Center
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 159 | 129 | 23% | ▲ |
| Admits | 63 | 47 | 34% | ▲ |
| Discharges | 36 | 50 | -28% | ▼ |
| Service Hours | 50 | 1,349 | -96% | ▼ |
| Social Rehab/PHP/IOP Days | 3,593 | 1,387 | 159% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | ▬▬▬▬▬ | 94 | 75% | 90% | 68% | -15% | ▼ |

## Data Submitted to DMHAS by Month

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

▫ 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

**Homeless Case Management303-294**
Rushford Center
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 4 | 57 | -93% | ▼ |
| Admits | - | 8 | -100% | ▼ |
| Discharges | 4 | 53 | -92% | ▼ |
| Service Hours | - | - | | |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 at least 1 Service within 180 days | | 0 | 0% | 50% | 82% | -50% | ▼ |

## Data Submitted to DMHAS by Month

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

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

☐ Actual   | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 38 Active Outreach & Engagement Programs

**Latino Clinical Prog.OP303-211**
Rushford Center
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 239 | 246 | -3% | |
| Admits | 95 | 109 | -13% | ▼ |
| Discharges | 100 | 94 | 6% | |
| Service Hours | 3,297 | 2,943 | 12% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 97% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 91% | 62% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 86% | 77% |
| ✔ SA Screen Complete | | 86% | 74% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| Valid Axis V GAF Score | | 58% | 85% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 37 | 37% | 50% | 42% | -13% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 197 | 75% | 60% | 69% | 15% | ▲ |
| ✔ Stable Living Situation | | 249 | 95% | 95% | 86% | 0% | |
| 🔴 Improved/Maintained Axis V GAF Score | | 145 | 66% | 75% | 52% | -9% | |
| 🔴 Employed | | 33 | 13% | 30% | 21% | -17% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 154 | 93% | 90% | 84% | 3% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 73 | 86% | 75% | 65% | 11% | ▲ |

## Data Submitted to DMHAS by Month

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

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

**Meriden Independent Lvg303-265**
Rushford Center
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
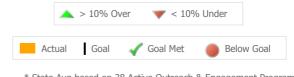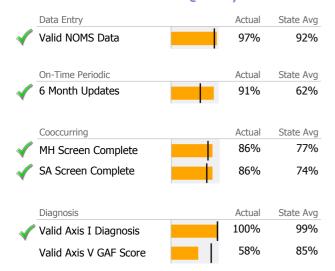Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 23 | 28 | -18% | ▼ |
| Admits | 7 | 6 | 17% | ▲ |
| Discharges | 4 | 13 | -69% | ▼ |
| Bed Days | 4,361 | 4,864 | -10% | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 2 | 50% | 60% | 65% | -10% | ▼ |
| ● Follow-up within 30 Days of Discharge | | 1 | 50% | 90% | 79% | -40% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 16 | 70% | 60% | 88% | 10% | |
| ● Stable Living Situation | | 21 | 91% | 95% | 97% | -4% | |
| ● Employed | | 1 | 4% | 25% | 8% | -21% | ▼ |
| ● Improved/Maintained Axis V GAF Score | | 7 | 39% | 95% | 70% | -56% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 96% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 86% | 88% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 77% | 81% |
| SA Screen Complete | | 62% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 100% |
| Valid Axis V GAF Score | | 48% | 94% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 26 | 1,472 days | 0.5 | 61% | 90% | 93% | -29% | ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | | | ▪ | | | | ▪ | 44% |
| Discharges | ▪ | | ▪ | ▪ | | ▪ | | | | 44% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual   | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 73 Active Supervised Apartments Programs

**MISA Case Management 925721**
Rushford Center
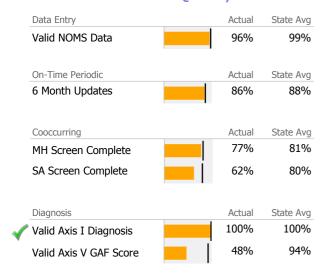Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)
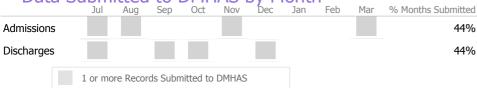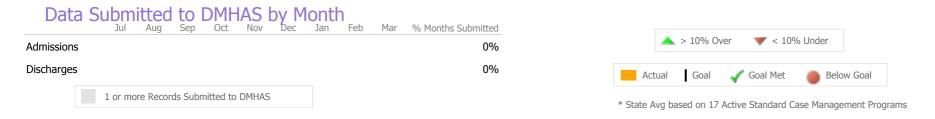
## Program Activity

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 54% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Employed | | N/A | N/A | 20% | 24% | -20% ▼ |
| ● Self Help | | N/A | N/A | 60% | 77% | -60% ▼ |
| ● Stable Living Situation | | N/A | N/A | 80% | 84% | -80% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | N/A | N/A | 90% | 93% | N/A ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 77% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual | Goal ✔ Goal Met ● Below Goal

* State Avg based on 17 Active Standard Case Management Programs

**MISA Outpatient 925200**
Rushford Center
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 6 | 7 | -14% | ▼ |
| Admits | 3 | 8 | -63% | ▼ |
| Discharges | 6 | 7 | -14% | ▼ |
| Service Hours | 33 | 88 | -63% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 96% | 97% |
| ✔ Valid TEDS Data | | 100% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 0% | 57% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 96% |
| ✔ SA Screen Complete | | 100% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 100% |
| Valid Axis V GAF Score | | 83% | 95% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 1 | 17% | 50% | 54% | -33% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Not Arrested | | 7 | 100% | 75% | 90% | 25% | ▲ |
| 🔴 Improved/Maintained Axis V GAF Score | | 5 | 71% | 75% | 67% | -4% | |
| ✔ Stable Living Situation | | 7 | 100% | 95% | 89% | 5% | |
| 🔴 Abstinence/Reduced Drug Use | | 2 | 29% | 55% | 58% | -26% | ▼ |
| 🔴 Employed | | 1 | 14% | 50% | 42% | -36% | ▼ |
| 🔴 Self Help | | 0 | 0% | 60% | 22% | -60% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 1 | 100% | 90% | 82% | 10% |

## Service Engagement

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▪ | ▪ | | | ▪ | | | | | 33% |
| Discharges | | ▪ | ▪ | | | ▪ | ▪ | ▪ | | | 56% |
| Services | | ▪ | ▪ | ▪ | | | | ▪ | | | 44% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual | Goal     ✔ Goal Met     🔴 Below Goal

* State Avg based on 115 Active Standard Outpatient Programs

**Mobile Crisis Program**
Rushford Center
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
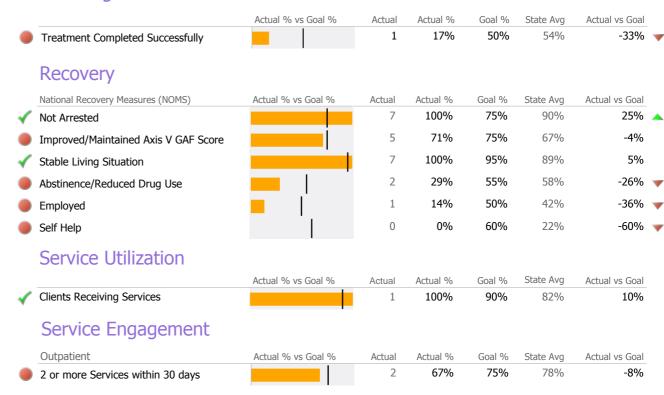Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 136 | 84 | 62% | ▲ |
| Admits | 168 | 96 | 75% | ▲ |
| Discharges | 168 | 96 | 75% | ▲ |
| Service Hours | - | - | | |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Evaluation within 1.5 hours of Request | | 159 | 95% | 75% | 64% | 20% | ▲ |
| 🔴 | Community Location Evaluation | | 56 | 33% | 80% | 59% | -47% | ▼ |
| 🔴 | Follow-up Service within 48 hours | | 33 | 29% | 90% | 51% | -61% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 25 Active Mobile Crisis Team Programs

**Outpatient 925202**
Rushford Center
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 260 | 268 | -3% |
| Admits | 199 | 215 | -7% |
| Discharges | 196 | 195 | 1% |
| Service Hours | 1,636 | 1,583 | 3% |

## Data Submission Quality

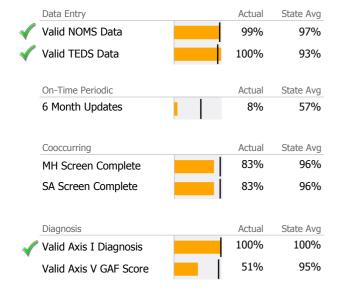| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 97% |
| ✓ Valid TEDS Data | | 100% | 93% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| 6 Month Updates | 8% | 57% |

| Cooccurring | Actual | State Avg |
|---|---|---|
| MH Screen Complete | 83% | 96% |
| SA Screen Complete | 83% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 100% |
| Valid Axis V GAF Score | | 51% | 95% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 138 | 70% | 50% | 54% | 20% | ▲ |

## Recovery

National Recovery Measures (NOMS)

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Abstinence/Reduced Drug Use | | 183 | 66% | 55% | 58% | 11% | ▲ |
| ✓ Not Arrested | | 238 | 85% | 75% | 90% | 10% | |
| ✓ Employed | | 158 | 57% | 50% | 42% | 7% | |
| ● Stable Living Situation | | 263 | 94% | 95% | 89% | -1% | |
| ● Self Help | | 107 | 38% | 60% | 22% | -22% | ▼ |
| ● Improved/Maintained Axis V GAF Score | | 118 | 56% | 75% | 67% | -19% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 70 | 83% | 90% | 82% | -7% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 158 | 84% | 75% | 78% | 9% |

## Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 115 Active Standard Outpatient Programs

**Parker North**
Rushford Center
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
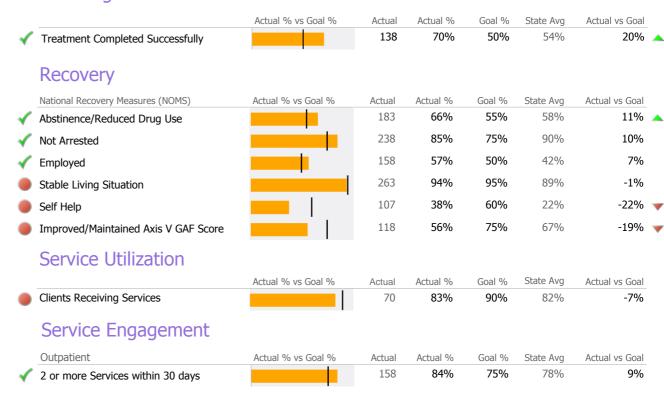Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 65% | N/A |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 79% | N/A |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 88% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 81% |
| SA Screen Complete | | N/A | 80% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Employed | | N/A | N/A | 25% | 8% | -25% ▼ |
| 🔴 Improved/Maintained Axis V GAF Score | | N/A | N/A | 95% | 70% | -95% ▼ |
| 🔴 Social Support | | N/A | N/A | 60% | 88% | -60% ▼ |
| 🔴 Stable Living Situation | | N/A | N/A | 95% | 97% | -95% ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual | Goal  ✓ Goal Met  🔴 Below Goal

* State Avg based on 73 Active Supervised Apartments Programs

**Pilots Program 303-551**
Rushford Center
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 27 | 27 | 0% | |
| Admits | 2 | 2 | 0% | |
| Discharges | 2 | 3 | -33% | ▼ |
| Service Hours | 169 | 1,285 | -87% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Stable Living Situation | | 26 | 96% | 85% | 80% | 11% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 21 | 84% | 90% | 94% | -6% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 93% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 87% | 81% |

## Data Submitted to DMHAS by Month

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

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 71 Active Supportive Housing – Scattered Site Programs

**Res Intensive (CSSD) 92560C**
Rushford Center
Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 140 | 35 | 300% | ▲ |
| Admits | 140 | 32 | 338% | ▲ |
| Discharges | 126 | 32 | 294% | ▲ |
| Bed Days | 2,607 | 640 | 307% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 109 | 87% | 80% | 81% | 7% | |
| ✓ | No Re-admit within 30 Days of Discharge | | 120 | 95% | 85% | 94% | 10% | |
| 🔴 | Follow-up within 30 Days of Discharge | | 56 | 51% | 90% | 63% | -39% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 94% | 96% |
| ✓ Valid TEDS Data | | 100% | 100% |

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 92% | 98% |
| SA Screen Complete | | 92% | 98% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 100% |
| Valid Axis V GAF Score | | 10% | 93% |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Abstinence/Reduced Drug Use | | 87 | 61% | 70% | 63% | -9% | |
| 🔴 | Self Help | | 38 | 27% | 60% | 70% | -33% | ▼ |
| 🔴 | Improved/Maintained Axis V GAF Score | | 14 | 11% | 75% | 87% | -64% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 3 | 21 days | 0.0 | 316% | 90% | 95% | 226% | ▲ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 12 Active SA Intensive Res. Rehabilitation 3.7 Programs

**Res Intensive (DMHAS) 925601**
Rushford Center
Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
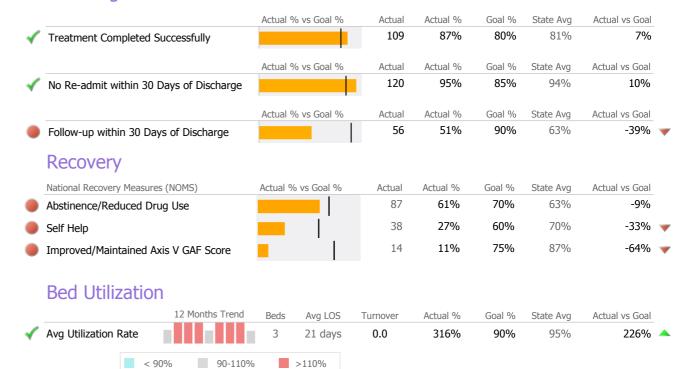Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 199 | 466 | -57% | ▼ |
| Admits | 166 | 445 | -63% | ▼ |
| Discharges | 202 | 457 | -56% | ▼ |
| Bed Days | 3,405 | 4,946 | -31% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs State | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 75% | 96% |
| Valid TEDS Data | | 97% | 100% |

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 98% | 98% |
| ✔ SA Screen Complete | | 99% | 98% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 100% |
| ✔ Valid Axis V GAF Score | | 99% | 93% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 189 | 94% | 80% | 81% | 14% | ▲ |
| ✔ No Re-admit within 30 Days of Discharge | | 184 | 91% | 85% | 94% | 6% | |
| ● Follow-up within 30 Days of Discharge | | 77 | 41% | 90% | 63% | -49% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Improved/Maintained Axis V GAF Score | | 194 | 96% | 75% | 87% | 21% | ▲ |
| ✔ Self Help | | 160 | 79% | 60% | 70% | 19% | ▲ |
| ● Abstinence/Reduced Drug Use | | 111 | 55% | 70% | 63% | -15% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 39 | 20 days | 0.2 | 57% | 90% | 95% | -33% | ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | | | | | | | 33% |
| Discharges | ▪ | ▪ | ▪ | ▪ | ▪ | | | | | 56% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

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

* State Avg based on 12 Active SA Intensive Res. Rehabilitation 3.7 Programs

**Res LTT (CSSD) 92540C**
Rushford Center
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
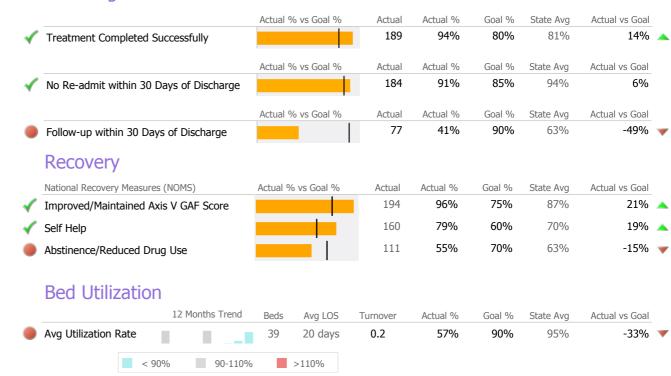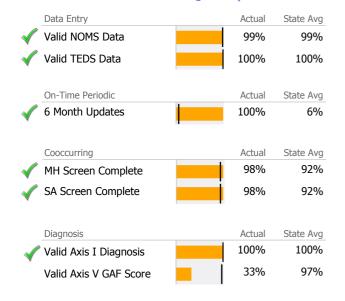Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 49 | 16 | 206% | ▲ |
| Admits | 35 | 15 | 133% | ▲ |
| Discharges | 34 | 6 | 467% | ▲ |
| Bed Days | 3,332 | 1,787 | 86% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 31 | 91% | 70% | 71% | 21% | ▲ |
| ✓ | No Re-admit within 30 Days of Discharge | | 32 | 94% | 85% | 91% | 9% | |
| ● | Follow-up within 30 Days of Discharge | | 23 | 74% | 90% | 61% | -16% | ▼ |

## Data Submission Quality

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

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 98% | 92% |
| ✓ | SA Screen Complete | 98% | 92% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 100% |
| | Valid Axis V GAF Score | 33% | 97% |

## Recovery

National Recovery Measures (NOMS)

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Abstinence/Reduced Drug Use | | 41 | 82% | 70% | 77% | 12% | ▲ |
| ● | Improved/Maintained Axis V GAF Score | | 11 | 31% | 95% | 83% | -64% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ✓ | Avg Utilization Rate | | 5 | 158 days | 0.1 | 242% | 90% | 105% | 152% | ▲ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ☐ | ☐ | | ☐ | ☐ | ☐ | | ☐ | 89% |
| Discharges | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

◻ Actual  | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 40 Active Intermediate/Long Term Res.Tx 3.5 Programs

**Res LTT (DMHAS) 925400**
Rushford Center
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
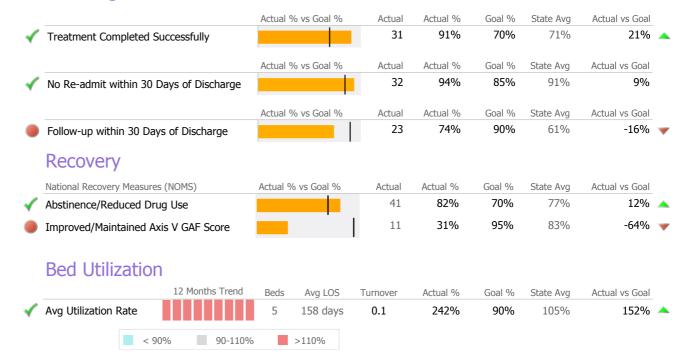Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 13 | 86 | -85% | ▼ |
| Admits | - | 67 | -100% | ▼ |
| Discharges | 13 | 70 | -81% | ▼ |
| Bed Days | 651 | 1,874 | -65% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 80% | 99% |
| Valid TEDS Data | | 98% | 100% |

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 92% |
| SA Screen Complete | | N/A | 92% |

| 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 | | 13 | 100% | 70% | 71% | 30% | ▲ |
| ● | No Re-admit within 30 Days of Discharge | | 10 | 77% | 85% | 91% | -8% | |
| ● | Follow-up within 30 Days of Discharge | | 8 | 62% | 90% | 61% | -28% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Abstinence/Reduced Drug Use | | 13 | 100% | 70% | 77% | 30% | ▲ |
| ✔ | Improved/Maintained Axis V GAF Score | | 13 | 100% | 95% | 83% | 5% | |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 21 | 88 days | 1.6 | 34% | 90% | 105% | -56% | ▼ |

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

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 33% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual  | Goal  ✔ Goal Met  ● Below Goal

* State Avg based on 40 Active Intermediate/Long Term Res.Tx 3.5 Programs

**Resid. Med. Monit. Detox925600**
Rushford Center
Addiction - Residential Services - Medically Monitored Detox 3.7D

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 664 | 855 | -22% | ▼ |
| Admits | 705 | 918 | -23% | ▼ |
| Discharges | 710 | 914 | -22% | ▼ |
| Bed Days | 3,501 | 3,783 | -7% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 640 | 90% | 80% | 80% | 10% | ▲ |
| ✓ | No Re-admit within 30 Days of Discharge | | 646 | 91% | 85% | 85% | 6% | |
| 🔴 | Follow-up within 30 Days of Discharge | | 332 | 52% | 90% | 55% | -38% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 87% | 98% |
| Valid TEDS Data | | 98% | 100% |

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

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 97% | 99% |
| SA Screen Complete | | 97% | 99% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 100% |
| Valid Axis V GAF Score | | 62% | 95% |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 16 | 13 days | 0.0 | 80% | 90% | 86% | -10% |

■ < 90%     ■ 90-110%     ■ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 8 Active Medically Monitored Detox 3.7D Programs

**Rushford Community Support/RP Program**
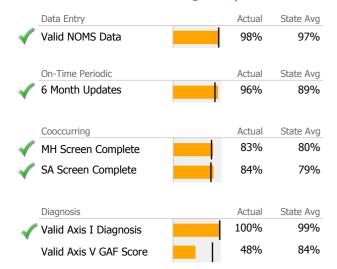Rushford Center
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
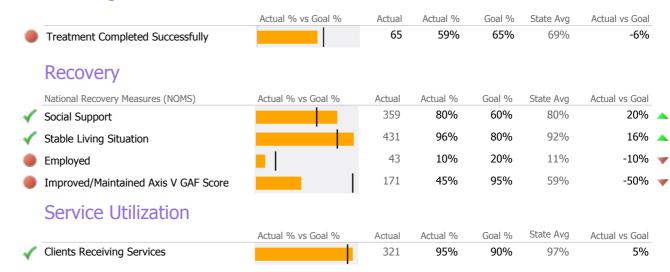Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)
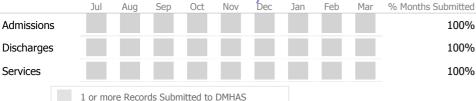
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 442 | 418 | 6% | |
| Admits | 96 | 93 | 3% | |
| Discharges | 110 | 92 | 20% | ▲ |
| Service Hours | 4,912 | 4,756 | 3% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 98% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 96% | 89% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 83% | 80% |
| ✓ SA Screen Complete | | 84% | 79% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| Valid Axis V GAF Score | | 48% | 84% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 65 | 59% | 65% | 69% | -6% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 359 | 80% | 60% | 80% | 20% | ▲ |
| ✓ | Stable Living Situation | | 431 | 96% | 80% | 92% | 16% | ▲ |
| 🔴 | Employed | | 43 | 10% | 20% | 11% | -10% | ▼ |
| 🔴 | Improved/Maintained Axis V GAF Score | | 171 | 45% | 95% | 59% | -50% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 321 | 95% | 90% | 97% | 5% | |

## Data Submitted to DMHAS by Month

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

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 40 Active CSP Programs

**Senior Services**
Rushford Center
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
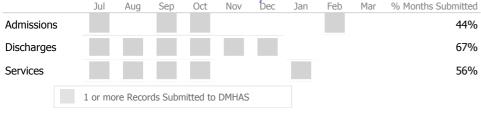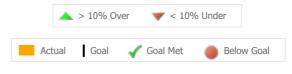Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 32 | 33 | -3% | |
| Admits | 8 | 16 | -50% | ▼ |
| Discharges | 10 | 17 | -41% | ▼ |
| Service Hours | 380 | 372 | 2% | |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ at least 1 Service within 180 days | | 6 | 86% | 50% | 96% | 36% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | | ▢ | ▢ | | | | ▢ | | 44% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | | | 67% |
| Services | ▢ | ▢ | ▢ | ▢ | | | | ▢ | | 56% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

◼ Actual   | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 6 Active Outreach & Engagement Programs

**Shelter Plus Care 303-292**
Rushford Center
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 18 | 21 | -14% | ▼ |
| Admits | 1 | 1 | 0% | |
| Discharges | 2 | 2 | 0% | |
| Service Hours | 22 | 423 | -95% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Stable Living Situation | | 15 | 83% | 85% | 80% | -2% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 9 | 56% | 90% | 94% | -34% ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 94% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 87% | 81% |

## Data Submitted to DMHAS by Month

|  | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | ▪ | | | | | | 11% |
| Discharges | ▪ | | | | ▪ | | | | | 22% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

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

* State Avg based on 71 Active Supportive Housing – Scattered Site Programs

**Turning Point OP 560200**
Rushford Center
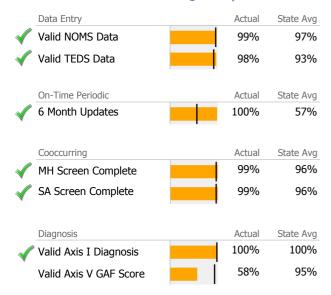Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
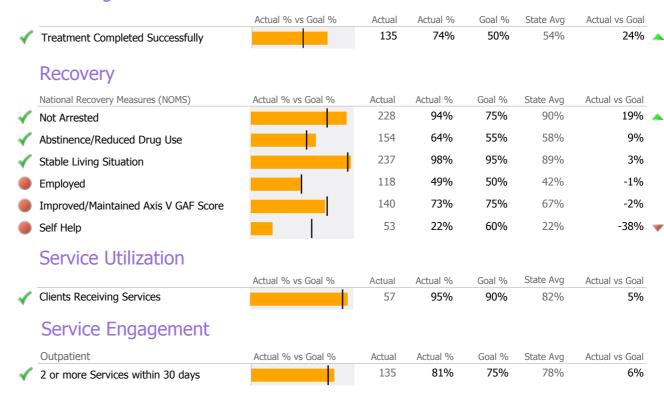Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 229 | 252 | -9% | |
| Admits | 171 | 197 | -13% | ▼ |
| Discharges | 183 | 196 | -7% | |
| Service Hours | 1,553 | 1,397 | 11% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 99% | 97% |
| ✔ | Valid TEDS Data | 98% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ | 6 Month Updates | 100% | 57% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ | MH Screen Complete | 99% | 96% |
| ✔ | SA Screen Complete | 99% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid Axis I Diagnosis | 100% | 100% |
| | Valid Axis V GAF Score | 58% | 95% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 135 | 74% | 50% | 54% | 24% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Not Arrested | | 228 | 94% | 75% | 90% | 19% | ▲ |
| ✔ | Abstinence/Reduced Drug Use | | 154 | 64% | 55% | 58% | 9% | |
| ✔ | Stable Living Situation | | 237 | 98% | 95% | 89% | 3% | |
| ● | Employed | | 118 | 49% | 50% | 42% | -1% | |
| ● | Improved/Maintained Axis V GAF Score | | 140 | 73% | 75% | 67% | -2% | |
| ● | Self Help | | 53 | 22% | 60% | 22% | -38% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 57 | 95% | 90% | 82% | 5% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | 2 or more Services within 30 days | | 135 | 81% | 75% | 78% | 6% |

## Data Submitted to DMHAS by Month

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

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▢ Actual  | Goal  ✔ Goal Met  ● Below Goal

* State Avg based on 115 Active Standard Outpatient Programs

**YAS CM Program**
Rushford Center
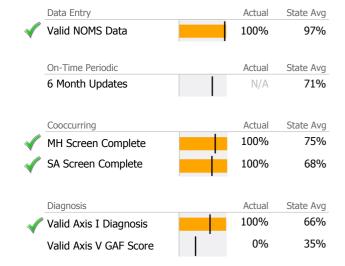Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - March 2016  (Data as of Jun 15, 2016)

## Program Activity

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 55% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 1 | 100% | 20% | 10% | 80% | ▲ |
| ✓ Social Support | | 1 | 100% | 60% | 64% | 40% | ▲ |
| ✓ Stable Living Situation | | 1 | 100% | 80% | 81% | 20% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 71% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 75% |
| ✓ SA Screen Complete | | 100% | 68% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 66% |
| Valid Axis V GAF Score | | 0% | 35% |

## Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▪ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 32 Active Standard Case Management Programs