

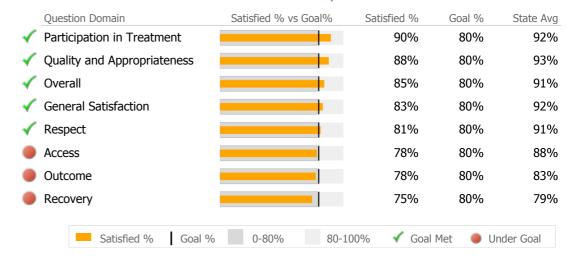




Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	2,589	56.0%
	IOP	339	7.3%
	PHP	96	2.1%
	Case Management	82	1.8%
Forensic SA			
Foren	sics Community-based	1,464	31.7%
	Case Management	55	1.2%

Consumer Satisfaction Survey (Based on 639 FY15 Surveys)



Client Demographics

Age		#	%	State Avg	Gender	#	%	State Avg
18-25	 	1,061	24%	13%	Male	2,816	64%	58%
26-34	•	1,326	30%	22%	Female 📒	1,595	36%	42%
35-44		818	19%	19%				
45-54		718	16%	24%				
55-64	ıİ.	364	8%	17%	Race	#	%	State Avg
65+ <mark> </mark>	•	106	2%	5%	White/Caucasian	2,849	65%	66%
,					Black/African American	702	16%	16%
Ethnicity		#	%	State Avg	Multiple Races	433	10%	1%
Non-Hispanic		2,876	65%	75%	Other	324	7%	13%
Hisp-Puerto Rican		900	20%	12%	Unknown	60	1%	3%
Unknown	•	383	9%	5%	Asian	28	1%	1%
Hispanic-Other		208	5%	6%	Am. Indian/Native Alaskan	12	0%	0%
r iispariic-Ouriei					Hawaiian/Other Pacific Islander	4	0%	0%
Hispanic-Mexican		30	1%	1%	,			
Hispanic-Cuban		15	0%	0%				
	l	Jnique C	lients	State Avg	▲ > 10% Over State Avg	> 10% U	Inder St	ate Avg

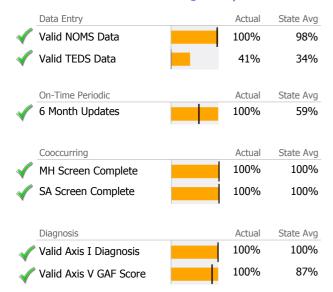
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

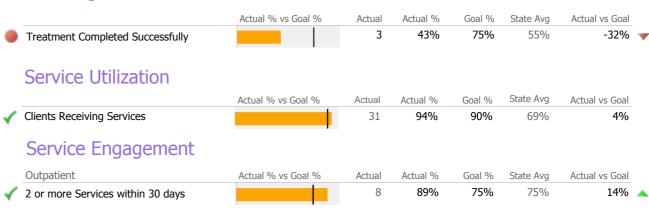
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	40	29	38%	•
Admits	9	8	13%	•
Discharges	7	7	0%	
Service Hours	142	86	65%	•

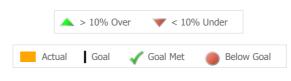
Data Submission Quality



Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted		
Admissions					100%		
Discharges					100%		
Services					100%		
	1 or more Records Submitted to DMHAS						





^{*} State Avg based on 10 Active Gambling Outpatient Programs

Wheeler Clinic

Addiction - IOP - Standard IOP

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	95	109	-13%	\blacksquare
Admits	68	64	6%	
Discharges	63	71	-11%	•
Service Hours	66	60	10%	
Social Rehab/PHP/IOP Days	606	634	-4%	

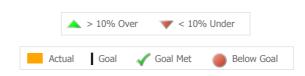
Data Submission Quality

Data	Entry		Actual	State Avg
√ Valid	NOMS Data		100%	97%
Valid	TEDS Data		98%	99%
On-Ti	me Periodic	_	Actual	State Avg
6 Mo	nth Updates		0%	33%
Cooce	u urrin a		A -41	
COOCC	curring		Actual	State Avg
	Screen Complete		100%	96%
≪ MH S				
≪ MH S	Screen Complete		100%	96%
≪ MH S	Screen Complete		100%	96%
MH S SA Se	Screen Complete		100% 100%	96% 96%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted	10116
Admissions				100%	
Discharges				100%	
Services				100%	
	omitted to DMHAS				

		A -t 0/ C 0/	A =h = I	A -hl 0/	C1 0/	Chaha A	A abusal us Casal	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Treatment Completed Successfully		44	70%	50%	61%	20%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		23	52%	90%	51%	-38%	
	Recovery							
	National Bassess Managemen (NOMC)	A -t 0/ C 0/	A =11	A -t 1 0/	G10/	Chaha A	A atrical con Const	
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Not Arrested		85	89%	75%	87%	14%	_
1	Employed		60	62%	50%	34%	12%	_
1	Stable Living Situation		95	99%	95%	88%	4%	
	Abstinence/Reduced Drug Use		45	47%	55%	46%	-8%	
1	Improved/Maintained Axis V GAF Score		59	92%	75%	81%	17%	_
	Self Help	<u> </u>	15	16%	60%	32%	-44%	_
	Convice Utilization							
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		34	92%	90%	74%	2%	



^{*} State Avg based on 50 Active Standard IOP Programs

Addiction - IOP - Standard IOP

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	247	173	43%	•
Admits	154	108	43%	•
Discharges	142	81	75%	•
Service Hours	193	145	34%	•
Social Rehab/PHP/IOP Days	1,224	888	38%	•

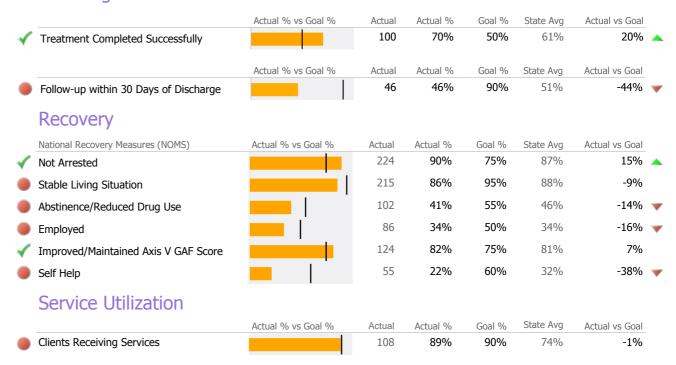
Program Activity

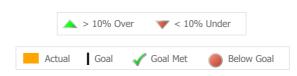
Data Submission Quality

Data Entry	Actual	State Avg
√ Valid NOMS Data	99%	97%
√ Valid TEDS Data	99%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	100%	33%
Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	96%
✓ SA Screen Complete	100%	96%
₹		
Diagnosis	Actual	State Avg
√ Valid Axis I Diagnosis	99%	97%
✓ Valid Axis V GAF Score	100%	97%

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted
Admissions					100%
Discharges					100%
Services					100%
	1	or mo	ore Recor	ds Sub	mitted to DMHAS





^{*} State Avg based on 50 Active Standard IOP Programs

Latino Outreach 620296

Wheeler Clinic

Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

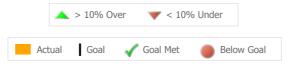
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	38	45	-16%	•
Admits	13	-		
Discharges	1	-		
Service Hours	71	-		

Service Engagement

ictual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	13	100%	50%	96%	50% 🔺
	ctual % vs Goal %	ctual % vs Goal % Actual 13	13 100%	1	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted		
Admissions				100%		
Discharges				33%		
Services				100%		
	1 or more Records Submitted to DMHAS					



^{*} State Avg based on 6 Active Outreach & Engagement Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	96	77	25%	•
Admits	55	54	2%	
Discharges	62	33	88%	•
Service Hours	62	58	8%	
Social Rehab/PHP/IOP Days	459	470	-2%	

Data Submission Quality

Data Entry	Actual	State Avg
√ Valid NOMS Data	99%	98%
√ Valid TEDS Data	98%	97%
On-Time Periodic	Actual	State Avg
√ 6 Month Updates	100%	50%
	•	
Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	73%
✓ SA Screen Complete	100%	73%
4		
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	99%	100%
✓ Valid Axis V GAF Score	100%	100%

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted
Admissions	5				100%
Discharges	6				100%
Services					100%
		1 or mo	ore Recor	ds Subi	mitted to DMHAS

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
√	Treatment Completed Successfully		32	52%	50%	74%	2%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	No Re-admit within 30 Days of Discharge		50	81%	85%	84%	-4%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		9	28%	90%	75%	-62%	_
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Stable Living Situation		84	84%	95%	73%	-11%	_
	Self Help		39	39%	60%	61%	-21%	_
	Employed	<u> </u>	19	19%	50%	14%	-31%	_
	Improved/Maintained Axis V GAF Score		36	55%	75%	81%	-20%	V
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		33	79%	90%	81%	-11%	



^{*} State Avg based on 14 Active Partial Hospitalization Services Programs

Post-Release Transitional Forensic Case Management

Wheeler Clinic

Forensic SA - Case Management - Standard Case Management

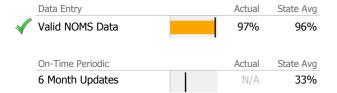
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

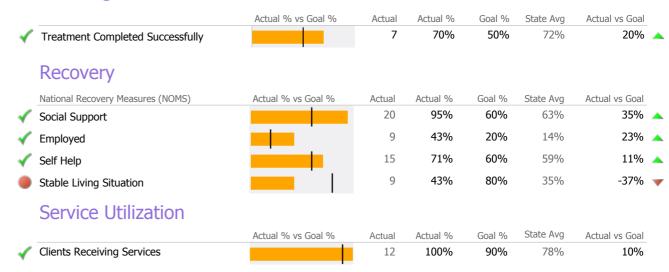
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	21	22	-5%	
Admits	13	14	-7%	
Discharges	10	15	-33% 🔻	
Service Hours	110	126	-13% 🔻	

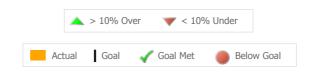
Data Submission Quality



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted			
Admissions				100%			
Discharges				100%			
Services				100%			
	1 or more Records Submitted to DMHAS						





^{*} State Avg based on 8 Active Standard Case Management Programs

Pre-Release Transitional Forensic Case Management

Wheeler Clinic

Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

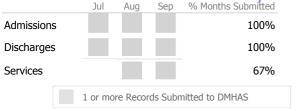
Program Activity

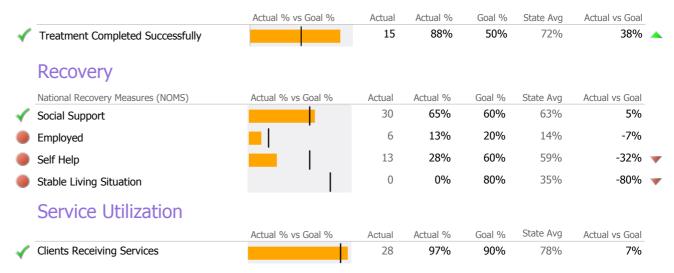
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	46	54	-15%	•
Admits	19	24	-21%	•
Discharges	17	23	-26%	•
Service Hours	81	98	-17%	•

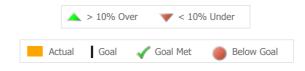
Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	94%	96%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	33%

Data Submitted to DMHAS by Month







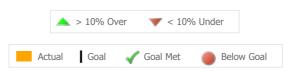
^{*} State Avg based on 8 Active Standard Case Management Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	584	623	-6%	
Admits	192	168	14%	•
Discharges	199	193	3%	

Data Submitted to DMHAS by Month Submitted Month Submitted





^{*} State Avg based on 16 Active Pre-trial Intervention Programs Programs

PTIP-75 N. Mountain Rd. 620707

Wheeler Clinic

Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

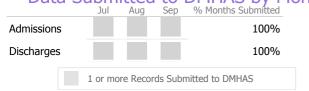
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

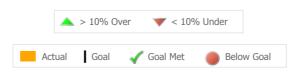
Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	881	902	-2%	
Admits	196	184	7%	
Discharges	308	206	50%	_

Data Submitted to DMHAS by Month Submitted Month Submitted





^{*} State Avg based on 16 Active Pre-trial Intervention Programs Programs

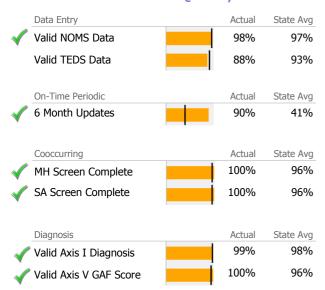
Wheeler Clinic

Addiction - Outpatient - Standard Outpatient

Program Activity

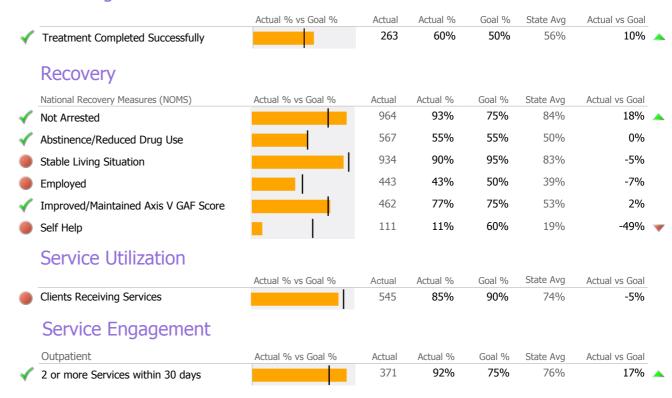
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	995	907	10%	
Admits	410	425	-4%	
Discharges	442	367	20%	•
Service Hours	4,529	3,514	29%	•

Data Submission Quality



Data Submitted to DMHAS by Month

Data	Ju	Jul	Aug	Sep	% Months Submitted	
Admissions					100%	
Discharges					100%	
Services					100%	
	1	or mo	ore Record	ls Sub	omitted to DMHAS	





^{*} State Avg based on 116 Active Standard Outpatient Programs

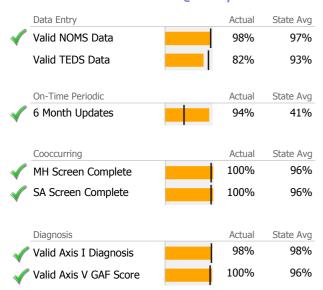
Wheeler Clinic

Addiction - Outpatient - Standard Outpatient

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,585	1,403	13%	•
Admits	569	558	2%	
Discharges	599	471	27%	•
Service Hours	6,636	4,319	54%	•

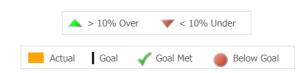
Data Submission Quality



Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted	
Admissions					100%	
Discharges					100%	
Services					100%	
	1	or mo	ore Recor	ds Sub	omitted to DMHAS	

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
1	Treatment Completed Successfully		327	55%	50%	56%	5%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Not Arrested		1,527	94%	75%	84%	19%	_
\checkmark	Employed		857	53%	50%	39%	3%	
	Stable Living Situation		1,504	93%	95%	83%	-2%	
	Abstinence/Reduced Drug Use		807	50%	55%	50%	-5%	
	Improved/Maintained Axis V GAF Score		620	64%	75%	53%	-11%	7
	Self Help	<u> </u>	197	12%	60%	19%	-48%	_
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		862	83%	90%	74%	-7%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
√	2 or more Services within 30 days		537	95%	75%	76%	20%	_



^{*} State Avg based on 116 Active Standard Outpatient Programs

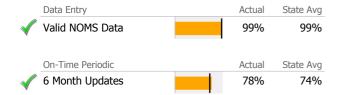
Wheeler Clinic

Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

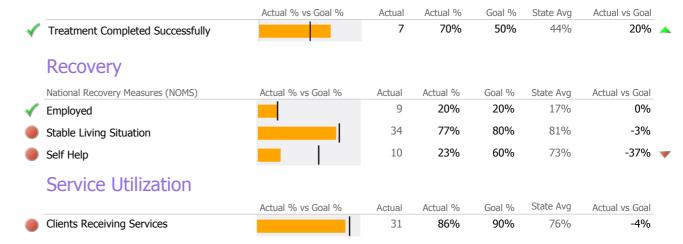
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	44	13	238%	•
Admits	17	4	325%	•
Discharges	10	1	900%	•
Service Hours	350	78		

Data Submission Quality



Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted
Admissions	5				100%
Discharges	6				67%
Services					100%
		1 or mo	ore Recor	ds Subr	nitted to DMHAS





^{*} State Avg based on 17 Active Standard Case Management Programs