Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

Reporting Period: July 2016 - December 2016 (Data as of Mar 21, 2017)

# **Provider Activity**



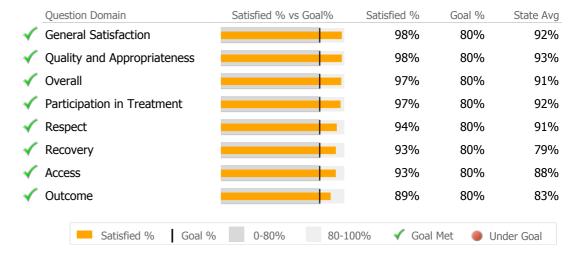


### Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	262	49.2%
	Residential Services	229	43.0%
	Case Management	36	6.8%
Mental Healt	h		
	Case Management	6	1.1%

## Consumer Satisfaction Survey (Based

(Based on 194 FY16 Surveys)



# **Client Demographics**

Age		#	%	State Av	Gender		#	%	State Avg
18-25		56	11%	13'	Male		312	63%	59%
26-34		153	31%	23'	Female		180	37%	41%
35-44	ĺ	100	20%	19	Transgender				0%
45-54		102	21%	22	, O				
55-64		59	12%	17'	0				
65+		22	4%	5	Race		#	%	State Avg
					White/Caucasian		442	90%	<b>▲</b> 65%
<b>Ethnicity</b>		#	%	State Avg	Black/African American	H	26	5%	<b>▼</b> 16%
Non-Hispanic		457	93%	<b>▲</b> 74%	Other	H	13	3%	13%
Hisp-Puerto Rican		22	4%	12%	Am. Indian/Native Alaskan		4	1%	1%
Hispanic-Other		9	2%	7%	Asian		3	1%	1%
Hispanic-Mexican		2	0%	1%	Multiple Races		2	0%	1%
					Unknown		2	0%	3%
Unknown		2	0%	6%	Hawaiian/Other Pacific Islander				0%
Hispanic-Cuban				0%		,			
,	Unio	que C	lients	State Av	→ > 10% Over State Avg	▼ >	> 10% U	nder St	tate Avg

### 221 Migeon-PILOTS Development 562-551

McCall Foundation Inc

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - December 2016 (Data as of Mar 21, 2017)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	-	-	
Discharges	-	-	
Service Hours	49	50	-2%

# Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Stable Living Situation		4	67%	85%	84%	-18%	•
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		4	67%	90%	89%	-23%	_

## **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	80%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	33%	67%

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							50%
	1 or mor						



<sup>\*</sup> State Avg based on 54 Active Supportive Housing – Development Programs

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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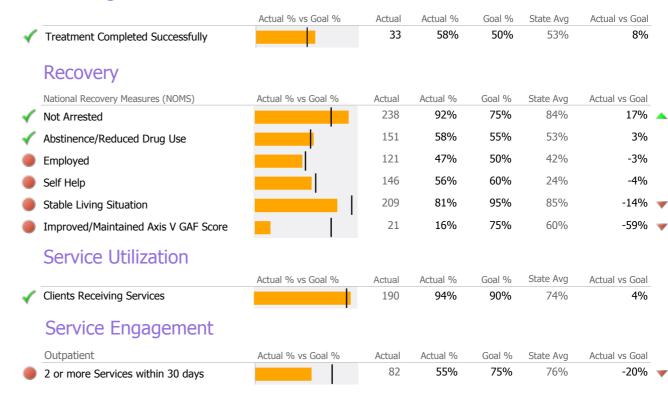
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	256	193	33%	•
Admits	151	116	30%	•
Discharges	57	126	-55%	•
Service Hours	2,721	2,055	32%	•

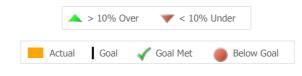
# **Data Submission Quality**

Data Entry	А	ctual	State Avg
Valid NOMS Data	9	91%	96%
Valid TEDS Data		87%	92%
On-Time Periodic	А	ctual	State Avg
√ 6 Month Updates		52%	40%
Cooccurring	А	ctual	State Avg
MH Screen Complete	10	00%	96%
✓ SA Screen Complete		99%	96%
*			
Diagnosis	А	ctual	State Avg
Valid Axis I Diagnosis	Ġ	99%	100%
√ Valid Axis V GAF Score	. 9	99%	94%

## Discharge Outcomes



		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted	
Admissions								100%	
Discharges								100%	
Services								67%	
	1 or more Records Submitted to DMHAS								



<sup>\*</sup> State Avg based on 116 Active Standard Outpatient Programs

### **Carnes Wks Intens Res 940601**

McCall Foundation Inc

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - December 2016 (Data as of Mar 21, 2017)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	171	166	3%
Admits	154	147	5%
Discharges	139	148	-6%
Bed Days	4,450	3,472	28% 🔺

# **Data Submission Quality**

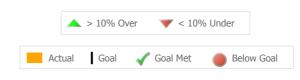
Actual	State Avg
89%	98%
87%	99%
Actual	State Avg
N/A	N/A
Actual	State Avg
100%	95%
100%	96%
Actual	State Avg
100%	100%
100%	99%
	89% 87%  Actual N/A  Actual 100%  Actual 100%

# Data Submitted to DMHAS by Month

Data	Odbiiii	ccca c	.0 01 11 1	<i>,</i> 10 0 , 1	1011011			
	Jul	Aug S	Sep Oct	Nov Dec	% Months Submitted			
Admissions					100%			
Discharges					100%			
	1 or more Records Submitted to DMHAS							

# **Discharge Outcomes**

		Actual <sup>o</sup>	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully			106	76%	80%	79%	-4%	
		Actual <sup>c</sup>	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
1	No Re-admit within 30 Days of Discharge			125	90%	85%	91%	5%	
		Actual <sup>c</sup>	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge			61	58%	90%	62%	-32%	-
	Recovery								
	National Recovery Measures (NOMS)	Actual 9	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Self Help			136	79%	60%	74%	19%	4
$\checkmark$	Abstinence/Reduced Drug Use			126	73%	70%	57%	3%	
1	Improved/Maintained Axis V GAF Score			133	96%	75%	81%	21%	4
	Bed Utilization								
	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Avg Utilization Rate	20	36 days	0.1	121%	90%	114%	31%	4



90-110%

>110%

<sup>\*</sup> State Avg based on 12 Active SA Intensive Res. Rehabilitation 3.7 Programs

### **Hotchkiss House-CSSD 94077D**

McCall Foundation Inc

Addiction - Residential Services - Recovery House

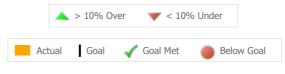
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - December 2016 (Data as of Mar 21, 2017)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	33	-18%	•
Admits	16	20	-20%	•
Discharges	15	22	-32%	•
Bed Days	2,299	2,238	3%	

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							83%
1 or more Records Submitted to DMHAS					S		



<sup>\*</sup> State Avg based on 14 Active Recovery House Programs

Reporting Period: July 2016 - December 2016 (Data as of Mar 21, 2017)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	42	40	5%	
Admits	27	28	-4%	
Discharges	26	27	-4%	
Bed Days	2,836	2,498	14% 🔺	

# **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	90%	97%
Valid TEDS Data	89%	99%
On-Time Periodic	Actual	State Avg
√ 6 Month Updates	0%	0%
Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	95%
✓ SA Screen Complete	100%	96%
Diagnosis	Actual	State Avg
√ Valid Axis I Diagnosis	100%	100%
√ Valid Axis V GAF Score	100%	94%

# Data Submitted to DMHAS by Month

Data	Jul Aug	Sep Oct Nov	Dec % Months Submitted
Admissions			83%
Discharges			83%
	1 or more Record	Is Submitted to DMHA	S

## **Discharge Outcomes**

		Actual 9	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully			15	58%	85%	64%	-27%	_
		Actual 9	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
1	No Re-admit within 30 Days of Discharge			23	88%	85%	75%	3%	
		Actual 9	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge			10	67%	90%	61%	-23%	_
	Recovery								
	National Recovery Measures (NOMS)	Actual %	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Abstinence/Reduced Drug Use			37	88%	70%	88%	18%	_
	Employed			16	38%	60%	34%	-22%	_
1	Improved/Maintained Axis V GAF Score			22	79%	75%	83%	4%	
	Bed Utilization								
	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
<b>√</b>	Avg Utilization Rate	14	108 days	0.2	110%	90%	100%	20%	_



<sup>\*</sup> State Avg based on 11 Active Transitional/Halfway House 3.1 Programs

>110%

90-110%

#### **Senior Services**

McCall Foundation Inc

Addiction - Case Management - Standard Case Management

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - December 2016 (Data as of Mar 21, 2017)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	40	-10%	
Admits	6	6	0%	
Discharges	11	8	38%	•
Service Hours	895	813	10%	

# **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	88%	98%
On-Time Periodic	Actual	State Avg
√ 6 Month Updates	74%	68%

### Discharge Outcomes







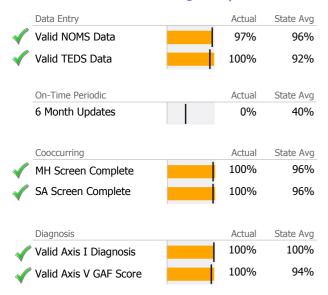
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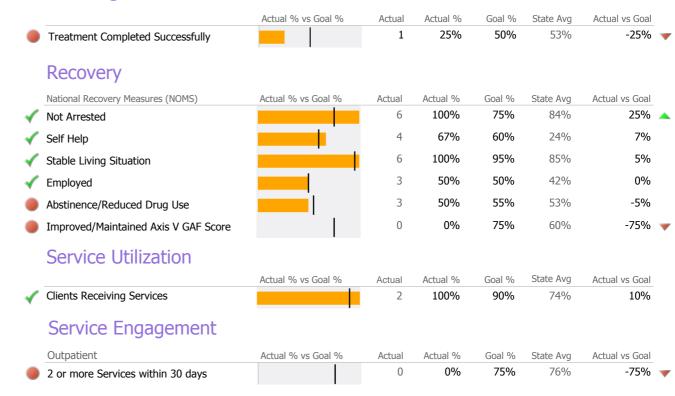
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	22	-73%	•
Admits	1	11	-91%	•
Discharges	4	17	-76%	•
Service Hours	31	163	-81%	•

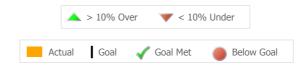
# **Data Submission Quality**



## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 116 Active Standard Outpatient Programs