Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

## **Provider Activity**



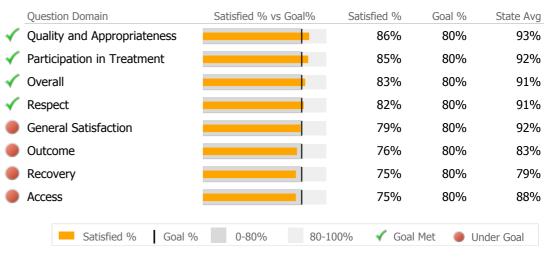


#### Clients by Level of Care

| Program Type | Level of Care Type  | #     | %     |
|--------------|---------------------|-------|-------|
| Addiction    |                     |       |       |
|              | Outpatient          | 3,997 | 56.9% |
|              | IOP                 | 884   | 12.6% |
|              | Case Management     | 85    | 1.2%  |
| Forensic SA  |                     |       |       |
| Forens       | ics Community-based | 1,976 | 28.1% |
|              | Case Management     | 81    | 1.2%  |

#### Consumer Satisfaction Survey (Based on Consumer Satisfaction Survey)

(Based on 675 FY16 Surveys)



#### **Client Demographics**

| Age               | #        | %      | State Avg  | Gender                          |     | #       | %        | State Avg  |
|-------------------|----------|--------|------------|---------------------------------|-----|---------|----------|------------|
| 18-25             | 1,496    | 23%    | 14%        | Male                            |     | 4,110   | 64%      | 60%        |
| 26-34             | 2,007    | 31%    | 24%        | Female                          |     | 2,306   | 36%      | 40%        |
| 35-44             | 1,266    | 20%    | 20%        | Transgender                     |     |         |          | 0%         |
| 45-54             | 961      | 15%    | 22%        |                                 |     |         |          |            |
| 55-64             | 540      | 8%     | 16%        |                                 |     |         |          |            |
| 65+               | 139      | 2%     | 5%         | Race                            |     | #       | %        | State Avg  |
|                   |          |        |            | White/Caucasian                 |     | 3,735   | 58%      | 65%        |
| <b>Ethnicity</b>  | #        | %      | State Avg  | Black/African American          |     | 1,097   | 17%      | 17%        |
| Non-Hispanic      | 4,152    | 65%    | 74%        | Multiple Races                  |     | 949     | 15%      | <b>1</b> % |
| Hisp-Puerto Rican | 1,523    | 24%    | <b>12%</b> | Other                           |     | 471     | 7%       | 13%        |
| Unknown           | 520      | 8%     | 6%         | Unknown                         |     | 62      | 1%       | 3%         |
| Hispanic-Other    | 158      | 2%     | 7%         | Am. Indian/Native Alaskan       |     | 51      | 1%       | 1%         |
| ·                 |          |        |            | Asian                           |     | 46      | 1%       | 1%         |
| Hispanic-Mexican  | 51       | 1%     | 1%         | Hawaiian/Other Pacific Islander |     | 17      | 0%       | 0%         |
| Hispanic-Cuban    | 24       | 0%     | 0%         | '                               |     |         |          |            |
| ·<br>             | Unique C | lients | State Avg  | ▲ > 10% Over State Avg          | ▼ : | > 10% U | Inder St | tate Avg   |

#### **Bettor Choice 620740**

Wheeler Clinic

Addiction - Outpatient - Gambling Outpatient

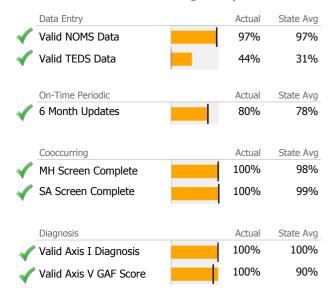
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

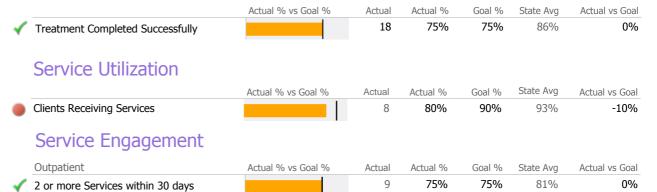
## **Program Activity**

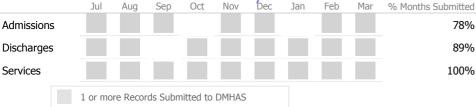
| Measure        | Actual | 1 Yr Ago | Variance % |                |
|----------------|--------|----------|------------|----------------|
| Unique Clients | 32     | 48       | -33%       | $\blacksquare$ |
| Admits         | 13     | 18       | -28%       | •              |
| Discharges     | 24     | 22       | 9%         |                |
| Service Hours  | 187    | 392      | -52%       | •              |

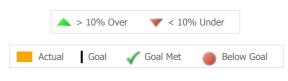
## **Data Submission Quality**



#### **Discharge Outcomes**







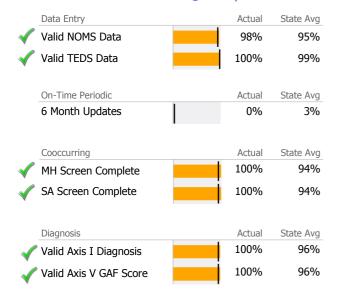
<sup>\*</sup> State Avg based on 9 Active Gambling Outpatient Programs

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

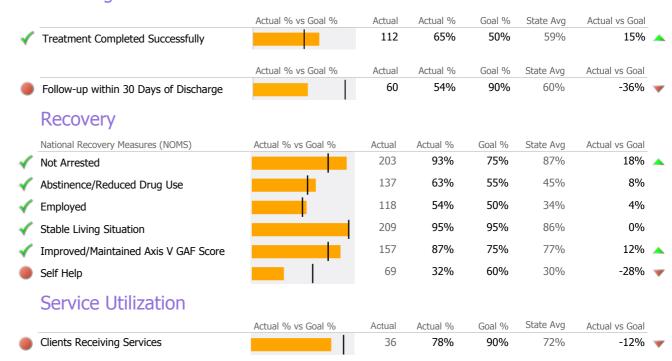
# **Program Activity**

| Measure                      | Actual | 1 Yr Ago | Variance %    |
|------------------------------|--------|----------|---------------|
| Unique Clients               | 206    | 205      | 0%            |
| Admits                       | 181    | 197      | -8%           |
| Discharges                   | 173    | 201      | -14% <b>▼</b> |
| Service Hours                | 140    | 186      | -25% <b>▼</b> |
| Social Rehab/PHP/IOP<br>Days | 1,676  | 1,812    | -8%           |

## **Data Submission Quality**



#### **Discharge Outcomes**







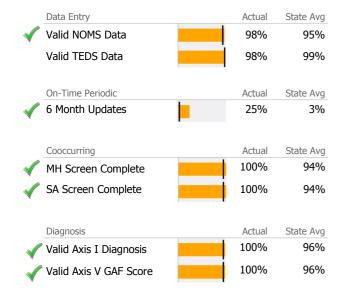
<sup>\*</sup> State Avg based on 51 Active Standard IOP Programs

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

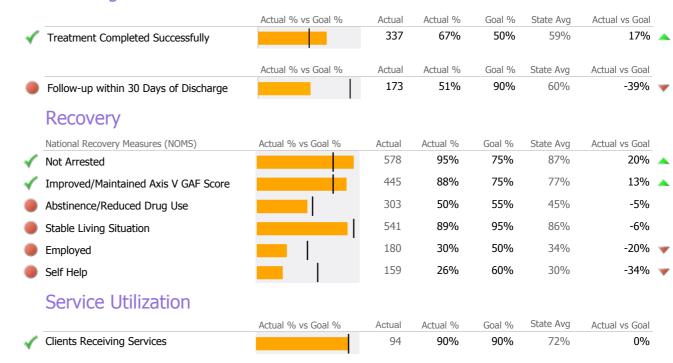
## **Program Activity**

| Measure                      | Actual | 1 Yr Ago | Variance % |   |
|------------------------------|--------|----------|------------|---|
| Unique Clients               | 533    | 503      | 6%         |   |
| Admits                       | 519    | 454      | 14%        | • |
| Discharges                   | 502    | 458      | 10%        |   |
| Service Hours                | 518    | 563      | -8%        |   |
| Social Rehab/PHP/IOP<br>Days | 4,281  | 3,683    | 16%        | • |

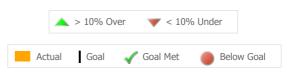
# **Data Submission Quality**



#### **Discharge Outcomes**



|            |                                      | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|--------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions |                                      |     |     |     |     |     |     |     |     |     | 100%               |
| Discharges |                                      |     |     |     |     |     |     |     |     |     | 100%               |
| Services   |                                      |     |     |     |     |     |     |     |     |     | 100%               |
|            | 1 or more Records Submitted to DMHAS |     |     |     |     |     |     |     |     |     |                    |



<sup>\*</sup> State Avg based on 51 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 2016 - March 2017 (Data as of Jun 08, 2017)

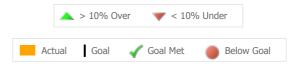
# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 32     | 56       | -43%       | • |
| Admits         | 12     | 34       | -65%       | • |
| Discharges     | 18     | 46       | -61%       | • |
| Service Hours  | 582    | 234      | 149%       | • |

#### Service Engagement



|            | Jul     | Aug      | Sep     | Oct       | Nov   | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|---------|----------|---------|-----------|-------|-----|-----|-----|-----|--------------------|
| Admissions |         |          |         |           |       |     |     |     |     | 89%                |
| Discharges |         |          |         |           |       |     |     |     |     | 89%                |
| Services   |         |          |         |           |       |     |     |     |     | 89%                |
|            | 1 or mo | ore Reco | ds Subn | nitted to | DMHAS |     |     |     |     |                    |



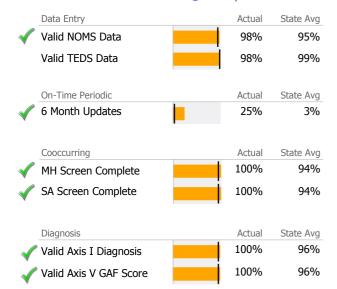
<sup>\*</sup> State Avg based on 6 Active Outreach & Engagement Programs

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

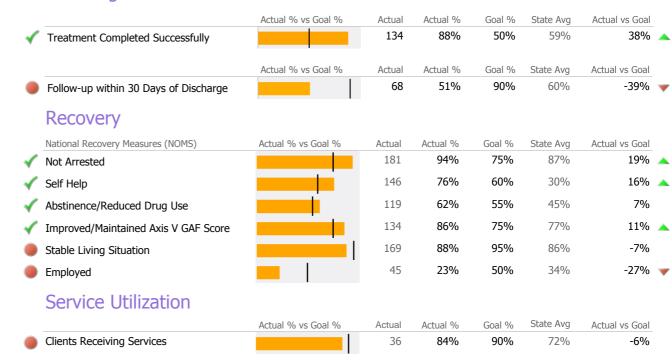
## **Program Activity**

| Measure                      | Actual | 1 Yr Ago | Variance % |                |
|------------------------------|--------|----------|------------|----------------|
| Unique Clients               | 165    | 199      | -17%       | $\blacksquare$ |
| Admits                       | 171    | 178      | -4%        |                |
| Discharges                   | 152    | 198      | -23%       | •              |
| Service Hours                | 189    | 194      | -3%        |                |
| Social Rehab/PHP/IOP<br>Days | 1,525  | 1,504    | 1%         |                |

## **Data Submission Quality**



#### Discharge Outcomes







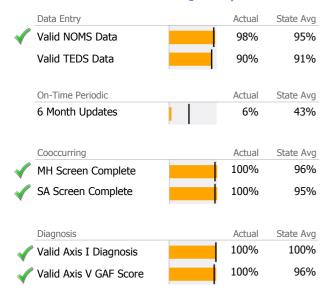
<sup>\*</sup> State Avg based on 51 Active Standard IOP Programs

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

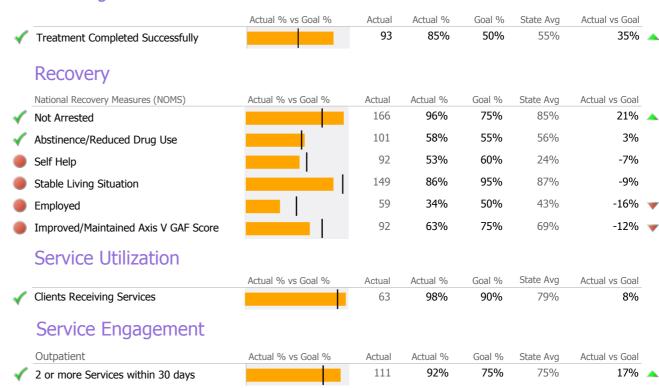
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 166    | 1        | 16500%     | • |
| Admits         | 125    | -        |            |   |
| Discharges     | 110    | 1        | 10900%     | • |
| Service Hours  | 1 265  | _        |            |   |

# **Data Submission Quality**



#### **Discharge Outcomes**



|            |   | Jul    | Aug      | Sep      | Oct       | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|---|--------|----------|----------|-----------|-----|-----|-----|-----|-----|--------------------|
| Admission  | S |        |          |          |           |     |     |     |     |     | 100%               |
| Discharges | S |        |          |          |           |     |     |     |     |     | 100%               |
| Services   |   |        |          |          |           |     |     |     |     |     | 100%               |
|            |   | 1 or m | ore Reco | rds Subn | nitted to |     |     |     |     |     |                    |



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

#### **Post-Release Transitional Forensic Case Management**

Wheeler Clinic

Forensic SA - Case Management - Standard Case Management

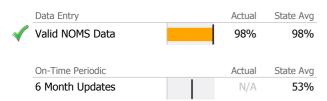
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

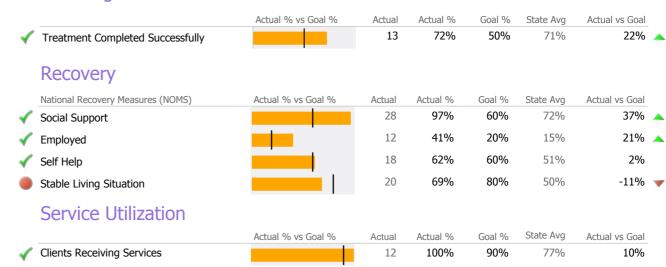
#### **Program Activity**

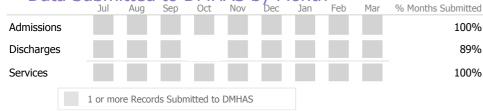
| Measure        | Actual | 1 Yr Ago | Variance % |                |
|----------------|--------|----------|------------|----------------|
| Unique Clients | 29     | 36       | -19%       | $\blacksquare$ |
| Admits         | 26     | 28       | -7%        |                |
| Discharges     | 18     | 31       | -42%       | •              |
| Service Hours  | 271    | 230      | 18%        | •              |

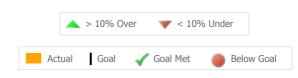
## **Data Submission Quality**



#### Discharge Outcomes







<sup>\*</sup> 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 2016 - March 2017 (Data as of Jun 08, 2017)

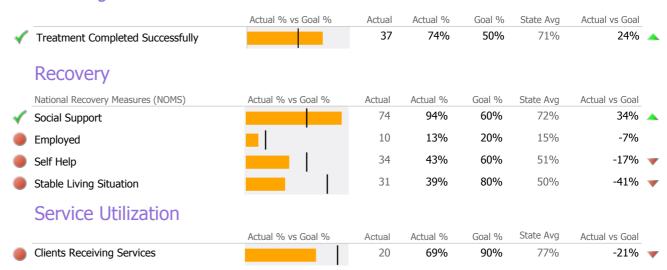
#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 78     | 97       | -20%       | • |
| Admits         | 58     | 70       | -17%       | • |
| Discharges     | 50     | 62       | -19%       | • |
| Service Hours  | 217    | 254      | -14%       | • |

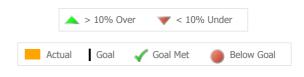
## **Data Submission Quality**

| Data Entry       | Actual | State Avg |
|------------------|--------|-----------|
| Valid NOMS Data  | 97%    | 98%       |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates  | 25%    | 53%       |

#### Discharge Outcomes







<sup>\*</sup> State Avg based on 8 Active Standard Case Management Programs

#### PTIP - 2024 E. Main St. 620713

Wheeler Clinic

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

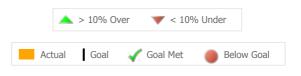
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 739    | 857      | -14%       | • |
| Admits         | 450    | 512      | -12%       | • |
| Discharges     | 501    | 554      | -10%       |   |

| Data       | Jubili  | itteu      | LU     | וויוט     |      | Dy I. | IUIIU |     |     |                    |
|------------|---------|------------|--------|-----------|------|-------|-------|-----|-----|--------------------|
|            | Jul     | Aug        | Sep    | Oct       | Nov  | Dec   | Jan   | Feb | Mar | % Months Submitted |
| Admissions |         |            |        |           |      |       |       |     |     | 100%               |
| Discharges |         |            |        |           |      |       |       |     |     | 100%               |
|            | 1 or mo | ore Record | ls Sub | mitted to | DMHA | S     |       |     |     |                    |



<sup>\*</sup> 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

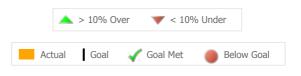
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 1,238  | 1,327    | -7%        |
| Admits         | 593    | 633      | -6%        |
| Discharges     | 700    | 660      | 6%         |

| Data       | Jubili  | itteu     | LU     | וויוט     |      | Dy I. | IUI IU | 11  |     |                    |
|------------|---------|-----------|--------|-----------|------|-------|--------|-----|-----|--------------------|
|            | Jul     | Aug       | Sep    | Oct       | Nov  | Dec   | Jan    | Feb | Mar | % Months Submitted |
| Admissions |         |           |        |           |      |       |        |     |     | 100%               |
| Discharges |         |           |        |           |      |       |        |     |     | 100%               |
|            | 1 or mo | re Record | ds Sub | mitted to | DMHA | S     |        |     |     |                    |



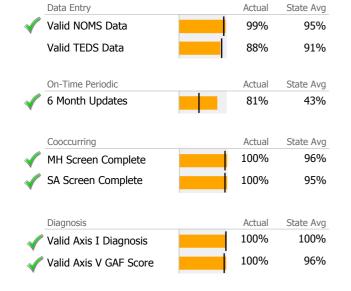
<sup>\*</sup> State Avg based on 16 Active Pre-trial Intervention Programs Programs

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

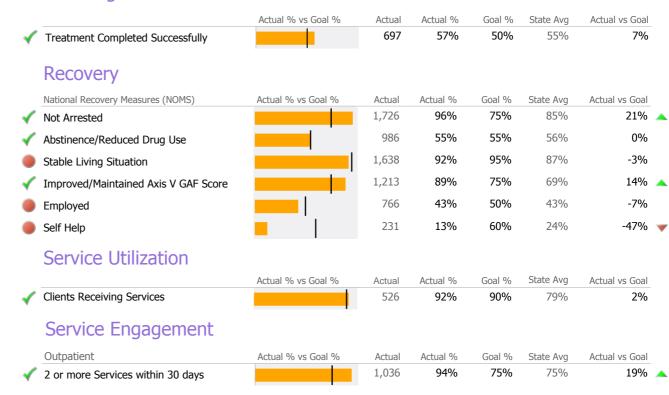
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 1,605  | 1,662    | -3%        |
| Admits         | 1,203  | 1,223    | -2%        |
| Discharges     | 1,219  | 1,213    | 0%         |
| Service Hours  | 9,211  | 13,511   | -32%       |

# **Data Submission Quality**



#### Discharge Outcomes



|           |   | Jul     | Aug      | Sep      | Oct       | Nov   | Dec | Jan | Feb | Mar | % Months Submitted |
|-----------|---|---------|----------|----------|-----------|-------|-----|-----|-----|-----|--------------------|
| Admission | S |         |          |          |           |       |     |     |     |     | 100%               |
| Discharge | S |         |          |          |           |       |     |     |     |     | 100%               |
| Services  |   |         |          |          |           |       |     |     |     |     | 100%               |
|           |   | 1 or mo | ore Reco | rds Subn | nitted to | DMHAS |     |     |     |     |                    |



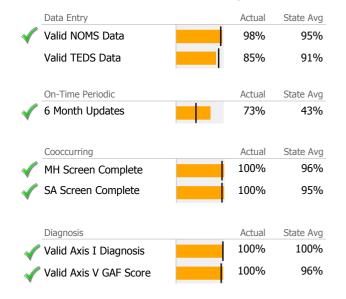
<sup>\*</sup> State Avg based on 116 Active Standard Outpatient Programs

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

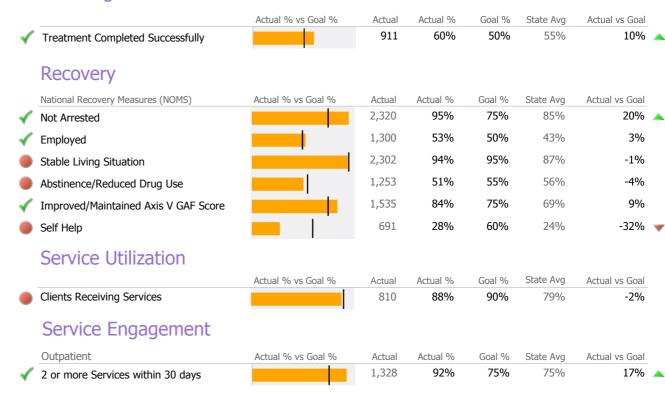
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 2,271  | 2,505    | -9%        |
| Admits         | 1,526  | 1,675    | -9%        |
| Discharges     | 1,528  | 1,657    | -8%        |
| Service Hours  | 17,041 | 21,153   | -19%       |

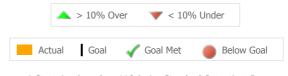
# **Data Submission Quality**



#### **Discharge Outcomes**



|            |   | Jul    | Aug      | Sep      | Oct       | Nov   | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|---|--------|----------|----------|-----------|-------|-----|-----|-----|-----|--------------------|
| Admission  | S |        |          |          |           |       |     |     |     |     | 100%               |
| Discharges | 5 |        |          |          |           |       |     |     |     |     | 100%               |
| Services   |   |        |          |          |           |       |     |     |     |     | 100%               |
|            |   | 1 or m | ore Reco | rds Subr | nitted to | DMHAS | 5   |     |     |     |                    |



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

Addiction - Case Management - Standard Case Management

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

Reporting Period: July 2016 - March 2017 (Data as of Jun 08, 2017)

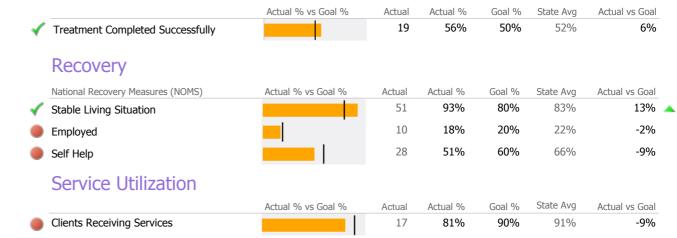
#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 54     | 62       | -13%       | • |
| Admits         | 28     | 36       | -22%       | • |
| Discharges     | 34     | 39       | -13%       | • |
| Service Hours  | 620    | 823      | -25%       | • |

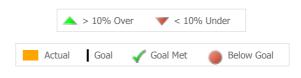
# **Data Submission Quality**

| Data Entry       | Actual | State Avg |
|------------------|--------|-----------|
| Valid NOMS Data  | 97%    | 98%       |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates  | 75%    | 64%       |

#### Discharge Outcomes



|            |                                      | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|--------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | 5                                    |     |     |     |     |     |     |     |     |     | 100%               |
| Discharges | 6                                    |     |     |     |     |     |     |     |     |     | 89%                |
| Services   |                                      |     |     |     |     |     |     |     |     |     | 100%               |
|            | 1 or more Records Submitted to DMHAS |     |     |     |     |     |     |     |     |     |                    |



<sup>\*</sup> State Avg based on 17 Active Standard Case Management Programs