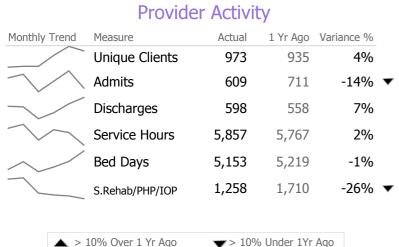
#### Chemical Abuse Services Agency (CASA) Bridgeport, CT

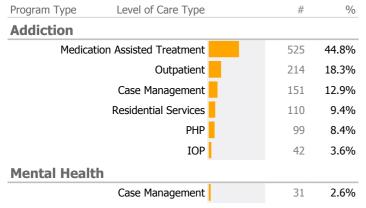
Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)



▲ > 10% Over 1 Yr Ago

#### Clients by Level of Care



#### Question Domain Satisfied % vs Goal% Satisfied % Goal % State Avg 92% General Satisfaction 94% 80% Quality and Appropriateness 93% 80% 93% Overall 92% 80% 91% Participation in Treatment 80% 92% 92% 80% 91% Respect 91% Access 88% 88% 80% Outcome 88% 80% 83% Recovery 86% 80% 79% 0-80% 80-100% Satisfied % Goal % ✓ Goal Met Under Goal

#### **Client Demographics**

Age

18-25

26-34

35-44

45-54

55-64

65+

**Ethnicity** 

Non-Hispanic Hisp-Puerto Rican Hispanic-Other Hispanic-Mexican

> Unknown Hispanic-Cuban

|    | #        | %      | State Avg    | Gender                          |                   | #       | %       | State Avg    |
|----|----------|--------|--------------|---------------------------------|-------------------|---------|---------|--------------|
|    | 45       | 5%     | 12%          | Male                            |                   | 669     | 69%     | 59%          |
|    | 249      | 26%    | 23%          | Female                          |                   | 304     | 31%     | 41%          |
| ,  | 250      | 26%    | 20%          | Transgender                     |                   |         |         | 0%           |
| 1  | 267      | 28%    | 22%          |                                 |                   |         |         |              |
|    | 128      | 13%    | 18%          |                                 |                   |         |         |              |
|    | 19       | 2%     | 6%           | Race                            |                   | #       | %       | State Avg    |
| •  |          |        |              | White/Caucasian                 |                   | 412     | 42%     | ▼ 65%        |
|    | #        | %      | State Avg    | Other                           |                   | 379     | 39%     | <b>▲</b> 13% |
|    | 543      | 56%    | ▼ 74%        | Black/African American          |                   | 166     | 17%     | 16%          |
|    | 353      | 36%    | <b>▲</b> 13% | Am. Indian/Native Alaskan       |                   | 5       | 1%      | 1%           |
| Ē. | 61       | 6%     | 7%           | Unknown                         |                   | 5       | 1%      | 3%           |
|    | 8        | 1%     | 1%           | Asian                           |                   | 3       | 0%      | 1%           |
|    |          |        |              | Multiple Races                  |                   | 2       | 0%      | 1%           |
|    | 6        | 1%     | 6%           | Hawaiian/Other Pacific Islander |                   | 1       | 0%      | 0%           |
|    | 2        | 0%     | 0%           |                                 |                   |         |         |              |
|    |          |        |              |                                 |                   |         |         |              |
|    | Unique C | lients | State Avg    | > 10% Over State Avg            | $\mathbf{\nabla}$ | > 10% U | Inder S | tate Avg     |

#### **Consumer Satisfaction Survey** (Based on 547 FY17 Surveys)

#### Areyto Apts PILOTS Dev.124-551

Chemical Abuse Services Agency (CASA) Mental Health - Case Management - Supportive Housing – Development Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Quality Dashboard

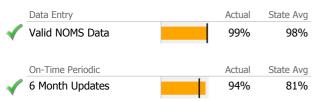
#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 20     | 20       | 0%         |
| Admits         | 1      | -        |            |
| Discharges     | 1      | 2        | -50% 🔻     |
| Service Hours  | 165    | 202      | -18% 🔻     |

#### Recovery

| /                                 |   |  |   |  |  |  |   |
|-----------------------------------|---|--|---|--|--|--|---|
| National Recovery Measures (NOMS) | Actual % vs Goal %                          | Actual   | Actual %  | Goal %   | State Avg  | Actual vs Goal   |   |
| Stable Living Situation           |   | 20   | 100%  | 85%  | 90%  | 15%  | <b></b>   |
| Service Utilization               |   |  |   |  |  |  |   |
|                                   | Actual % vs Goal %                          | Actual   | Actual %  | Goal %   | State Avg  | Actual vs Goal   |   |
| Clients Receiving Services        |   | 19   | 100%  | 90%  | 93%  | 10%  |   |
|                                   | Stable Living Situation Service Utilization | Stable Living Situation Service Utilization Actual % vs Goal % | Stable Living Situation       20         Service Utilization       Actual % vs Goal % | Stable Living Situation     20     100%       Service Utilization     Actual % vs Goal %     Actual % Actual % | Stable Living Situation     20     100%     85%       Service Utilization     Actual % vs Goal %     Actual % Goal % | Stable Living Situation       20       100%       85%       90%         Service Utilization       Actual % vs Goal %       Actual % Goal %       State Avg | Stable Living Situation       20       100%       85%       90%       15%         Service Utilization         Actual % vs Goal %       Actual %       Goal %       State Avg       Actual vs Goal |

#### Data Submission Quality



#### Data Submitted to DMHAS by Month

|            | Jul     | Aug       | Sep     | Oct       | Nov   | Dec | % Months Submitted |
|------------|---------|-----------|---------|-----------|-------|-----|--------------------|
| Admissions |         |           |         |           |       |     | 17%                |
| Discharges |         |           |         |           |       |     | 17%                |
| Services   |         |           |         |           |       |     | 100%               |
|            | 1 or me | ore Recor | ds Subn | nitted to | DMHAS |     |                    |

|        | > 10% Ov | ver      | ▼ < 10   | )% Under |        |
|--------|----------|----------|----------|----------|--------|
| Actual | Goal     | <b>«</b> | Goal Met | Belo     | w Goal |

\* State Avg based on 52 Active Supportive Housing – Development Programs

#### **CASA Harrison Pilots 989732**

Chemical Abuse Services Agency (CASA) Mental Health - Case Management - Supportive Housing – Development Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

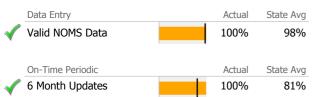
#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 6      | 6        | 0%         |
| Admits         | -      | -        |            |
| Discharges     | 1      | -        |            |
| Service Hours  | 40     | 50       | -19% 🔻     |

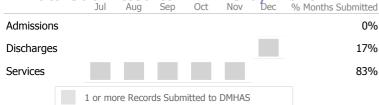
#### Recovery

|              | '                                 |                    |        |          |        |           |                |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
|              | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|              | Stable Living Situation           |                    | 5      | 83%      | 85%    | 90%       | -2%            |
|              | Service Utilization               |                    |        |          |        |           |                |
|              |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| $\checkmark$ | Clients Receiving Services        |                    | 5      | 100%     | 90%    | 93%       | 10%            |

#### Data Submission Quality



#### Data Submitted to DMHAS by Month



| 4     | <b>^</b> > | 10% Ove | r | -      | < 10% | Unde | er   |        |
|-------|------------|---------|---|--------|-------|------|------|--------|
| Actua | al         | Goal    | < | Goal I | Met   |      | Belo | w Goal |

\* State Avg based on 52 Active Supportive Housing – Development Programs

Chemical Abuse Services Agency (CASA) Addiction - Outpatient - Standard Outpatient

#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 9      | 10       | -10%       |
| Admits         | 6      | 7        | -14% 🔻     |
| Discharges     | 5      | 5        | 0%         |
| Service Hours  | 52     | 47       | 11% 🔺      |

#### Data Submission Quality

| Data Entry               | Actual | State Avg |
|--------------------------|--------|-----------|
| Valid NOMS Data          | 100%   | 94%       |
| 🞻 Valid TEDS Data        | 100%   | 93%       |
|                          |        |           |
| On-Time Periodic         | Actual | State Avg |
| 6 Month Updates          | N/A    | 27%       |
|                          |        |           |
| Cooccurring              | Actual | State Avg |
| 🞻 MH Screen Complete     | 100%   | 99%       |
| 🞻 SA Screen Complete     | 100%   | 99%       |
| Ŧ                        |        |           |
| Diagnosis                | Actual | State Avg |
| / Valid Avia I Disanasia | 100%   | 00%       |

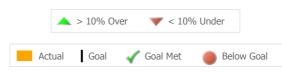


#### **Discharge Outcomes**

|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| Treatment Completed Successfully     |                    | 2      | 40%      | 50%    | 51%       | -10%           |   |
| Recovery                             |                    |        |          |        |           |                |   |
| National Recovery Measures (NOMS)    | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | _ |
| Abstinence/Reduced Drug Use          |                    | 9      | 100%     | 55%    | 54%       | 45%            | 4 |
| Not Arrested                         |                    | 9      | 100%     | 75%    | 84%       | 25%            |   |
| Stable Living Situation              | · · ·              | 8      | 89%      | 95%    | 83%       | -6%            |   |
| Employed                             | · · ·              | 3      | 33%      | 50%    | 41%       | -17%           | 4 |
| Self Help                            |                    | 3      | 33%      | 60%    | 33%       | -27%           |   |
| Improved/Maintained Axis V GAF Score | ·                  | 2      | 40%      | 75%    | 53%       | -35%           | 4 |
| Service Utilization                  |                    |        |          |        |           |                |   |
|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Clients Receiving Services           |                    | 3      | 75%      | 90%    | 69%       | -15%           | 4 |
| Service Engagement                   |                    |        |          |        |           |                |   |
| Outpatient                           | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| 2 or more Services within 30 days    |                    | 5      | 83%      | 75%    | 71%       | 8%             |   |

## Data Submitted to DMHAS by Month





#### **Casa Hostos Intermediate Res**

Chemical Abuse Services Agency (CASA) Addiction - Residential Services - Transitional/Halfway House 3.1 Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

#### **Program Activity**

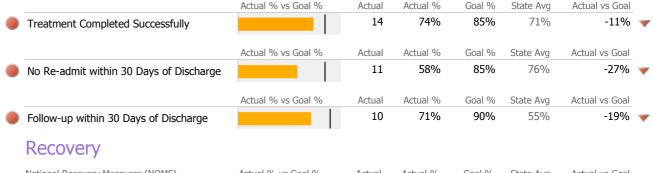
| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 22     | 27       | -19%       | ▼ |
| Admits         | 18     | 28       | -36%       | ▼ |
| Discharges     | 19     | 21       | -10%       |   |
| Bed Days       | 672    | 704      | -5%        |   |

#### Data Submission Quality

| Data Entry                  | Actual | State Avg |
|-----------------------------|--------|-----------|
| 🞻 Valid NOMS Data           | 100%   | 99%       |
| √ Valid TEDS Data           | 100%   | 100%      |
|                             |        |           |
| On-Time Periodic            | Actual | State Avg |
| 6 Month Updates             | N/A    | 0%        |
|                             |        |           |
| Cooccurring                 | Actual | State Avg |
| MH Screen Complete          | 100%   | 96%       |
| 🞻 SA Screen Complete        | 100%   | 97%       |
| ,                           |        |           |
| Diagnosis                   | Actual | State Avg |
| 🖉 Malial Arria T Dia amania | 100%   | 100%      |

| 🞻 Valid Axis I Diagnosis | 100% | 100% |
|--------------------------|------|------|
| Valid Axis V GAF Score   | 100% | 88%  |

# Discharge Outcomes



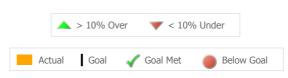
#### National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 22 100% 70% 94% 30% 🔺 Abstinence/Reduced Drug Use 19 100% 75% 72% 25% Improved/Maintained Axis V GAF Score -55% 💗 1 5% 60% 39% Employed

#### **Bed Utilization**



#### Data Submitted to DMHAS by Month





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

#### Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

#### **Program Activity**

| Measure                      | Actual | 1 Yr Ago | Variance % |   |
|------------------------------|--------|----------|------------|---|
| Unique Clients               | 48     | 51       | -6%        |   |
| Admits                       | 39     | 44       | -11%       | ▼ |
| Discharges                   | 43     | 47       | -9%        |   |
| Service Hours                | 670    | 544      | 23%        |   |
| Social Rehab/PHP/IOP<br>Days | 0      | 0        |            |   |

#### Data Submission Quality

| Data Entry         | Actual | State Avg |
|--------------------|--------|-----------|
| √ Valid NOMS Data  | 100%   | 97%       |
| 🞻 Valid TEDS Data  | 100%   | 96%       |
|                    |        |           |
| On-Time Periodic   | Actual | State Avg |
| 6 Month Updates    | N/A    | 50%       |
| Cooccurring        | Actual | State Avg |
| MH Screen Complete | 100%   | 80%       |
| SA Screen Complete | 100%   | 80%       |
| Diagnosis          | Actual | State Avg |

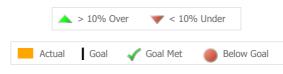
| Diagnosis                | ACLUAI | State Avg |
|--------------------------|--------|-----------|
| 🞻 Valid Axis I Diagnosis | 100%   | 100%      |
| Valid Axis V GAF Score   | 100%   | 100%      |

#### Data Submitted to DMHAS by Month

|            |   | Jul     | Aug      | Sep     | Oct       | Nov   | Dec | % Months Submitted |
|------------|---|---------|----------|---------|-----------|-------|-----|--------------------|
| Admission  | 5 |         |          |         |           |       |     | 100%               |
| Discharges | 5 |         |          |         |           |       |     | 100%               |
| Services   |   |         |          |         |           |       |     | 100%               |
|            |   | 1 or mo | re Recor | ds Subr | nitted to | DMHAS |     |                    |

#### Discharge Outcomes

|   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully        |                    | 24     | 56%      | 50%    | 63%       | 6%             |
|   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| No Re-admit within 30 Days of Discharge |                    | 36     | 84%      | 85%    | 92%       | -1%            |
|   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Follow-up within 30 Days of Discharge   |                    | 14     | 58%      | 90%    | 50%       | -32%           |
| Recovery                                |                    |        |          |        |           |                |
| National Recovery Measures (NOMS)       | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Improved/Maintained Axis V GAF Score    |                    | 40     | 93%      | 75%    | 92%       | 18%            |
| Stable Living Situation                 |                    | 48     | 94%      | 95%    | 90%       | -1%            |
| Employed                                | <u> </u>           | 17     | 33%      | 50%    | 22%       | -17%           |
| Self Help                               |                    | 16     | 31%      | 60%    | 57%       | -29%           |
| Service Utilization                     |                    |        |          |        |           |                |
|   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Clients Receiving Services              |                    | 5      | 63%      | 90%    | 79%       | -28%           |



\* State Avg based on 13 Active Partial Hospitalization Services Programs

#### Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

#### **Program Activity**

| Measure                      | Actual | 1 Yr Aqo | Variance % |   |
|------------------------------|--------|----------|------------|---|
| Unique Clients               | 42     | 63       | -33%       | • |
| Admits                       | 28     | 55       | -49%       | • |
| Discharges                   | 36     | 42       | -14%       | • |
| Service Hours                | 20     | 13       | 49%        |   |
| Social Rehab/PHP/IOP<br>Days | 540    | 560      | -4%        |   |

#### Data Submission Quality

| Data Entry           | Actual | State Avg |
|----------------------|--------|-----------|
| 🗸 Valid NOMS Data    | 100%   | 95%       |
| 🗸 Valid TEDS Data    | 100%   | 99%       |
|                      |        |           |
| On-Time Periodic     | Actual | State Avg |
| 6 Month Updates      | N/A    | 0%        |
|                      |        |           |
| Cooccurring          | Actual | State Avg |
| MH Screen Complete   | 100%   | 97%       |
| 🗸 SA Screen Complete | 100%   | 97%       |
|                      |        |           |
| Diagnosis            | Actual | State Avg |

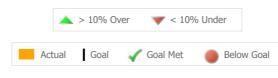
| Diagnosis                | Actual | State Avg |
|--------------------------|--------|-----------|
| 🞻 Valid Axis I Diagnosis | 100%   | 100%      |
| Valid Axis V GAF Score   | 100%   | 100%      |

#### Data Submitted to DMHAS by Month

|                                      |   | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|--------------------------------------|---|-----|-----|-----|-----|-----|-----|--------------------|
| Admission                            | S |     |     |     |     |     |     | 100%               |
| Discharge                            | 5 |     |     |     |     |     |     | 100%               |
| Services                             |   |     |     |     |     |     |     | 67%                |
| 1 or more Records Submitted to DMHAS |   |     |     |     |     |     |     |                    |

#### Discharge Outcomes

|                                       | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|---------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| Treatment Completed Successfully      |                    | 19     | 53%      | 50%    | 63%       | 3%             | - |
|                                       | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Follow-up within 30 Days of Discharge |                    | 13     | 68%      | 90%    | 60%       | -22%           |   |
| Recovery                              |                    |        |          |        |           |                |   |
| National Recovery Measures (NOMS)     | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Self Help                             |                    | 39     | 85%      | 60%    | 43%       | 25%            |   |
| Not Arrested                          |                    | 45     | 98%      | 75%    | 92%       | 23%            |   |
| Improved/Maintained Axis V GAF Score  |                    | 34     | 94%      | 75%    | 84%       | 19%            |   |
| Stable Living Situation               |                    | 45     | 98%      | 95%    | 88%       | 3%             |   |
| Abstinence/Reduced Drug Use           | i                  | 19     | 41%      | 55%    | 66%       | -14%           | 4 |
| Employed                              | <u> </u>           | 9      | 20%      | 50%    | 33%       | -30%           | 4 |
| Service Utilization                   |                    |        |          |        |           |                |   |
|                                       | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Clients Receiving Services            |                    | 10     | 100%     | 90%    | 83%       | 10%            | - |



\* State Avg based on 50 Active Standard IOP Programs

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 117    | 156      | -25%       | • |
| Admits         | 72     | 137      | -47%       | • |
| Discharges     | 104    | 42       | 148%       | ▲ |
| Service Hours  | 462    | 594      | -22%       | • |

#### Service Engagement





1 or more Records Submitted to DMHAS

|     | <b>^</b> > | 10% Ove | r        | ▼ <     | 10% l | Jnder |        |     |
|-----|------------|---------|----------|---------|-------|-------|--------|-----|
| Act | cual       | Goal    | <b>√</b> | Goal Me | et    | Be    | elow G | oal |

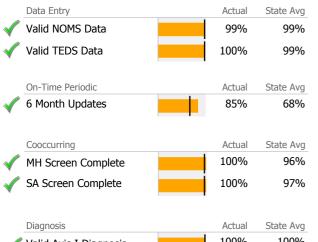
Chemical Abuse Services Agency (CASA) Addiction - Medication Assisted Treatment - Methadone Maintenance

Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |  |
|----------------|--------|----------|------------|--|
| Unique Clients | 525    | 473      | 11%        |  |
| Admits         | 143    | 152      | -6%        |  |
| Discharges     | 107    | 112      | -4%        |  |
| Service Hours  | 2,198  | 1,922    | 14%        |  |

#### Data Submission Quality



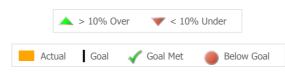
| Diagnosis                | Actual | State Avg |
|--------------------------|--------|-----------|
| 🞻 Valid Axis I Diagnosis | 100%   | 100%      |
| Valid Axis V GAF Score   | 100%   | 100%      |
|                          |        |           |

#### **Discharge Outcomes**

|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goa  |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully     |                    | 62     | 58%      | 50%    | 47%       | 8%             |
| Recovery                             |                    |        |          |        |           |                |
| National Recovery Measures (NOMS)    | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Abstinence/Reduced Drug Use          |                    | 441    | 82%      | 50%    | 71%       | 32%            |
| Self Help                            |                    | 465    | 86%      | 60%    | 51%       | 26%            |
| Not Arrested                         | · ·                | 535    | 99%      | 75%    | 94%       | 24%            |
| Improved/Maintained Axis V GAF Score |                    | 417    | 97%      | 75%    | 85%       | 22%            |
| Stable Living Situation              | · · · ·            | 493    | 91%      | 90%    | 93%       | 1%             |
| Employed                             | <mark></mark>      | 175    | 32%      | 40%    | 44%       | -8%            |
| Service Utilization                  |                    |        |          |        |           |                |
|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Clients Receiving Services           |                    | 423    | 98%      | 90%    | 76%       | 8%             |
| Service Engagement                   |                    |        |          |        |           |                |
| Medication Assisted Treatment        | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Length of Stay over 1 Year           |                    | 309    | 59%      | 50%    | 68%       | 9%             |

#### Data Submitted to DMHAS by Month





\* State Avg based on 27 Active Methadone Maintenance Programs

#### CASA MAAS OP NonMethMn 989202

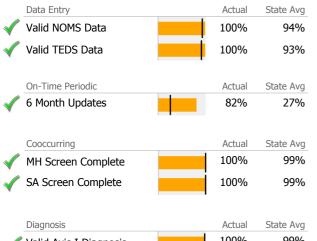
Chemical Abuse Services Agency (CASA)

Addiction - Outpatient - Standard Outpatient

#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 145    | 139      | 4%         |
| Admits         | 80     | 94       | -15% 🔻     |
| Discharges     | 103    | 87       | 18% 🔺      |
| Service Hours  | 1,074  | 1,313    | -18% 🔻     |

#### Data Submission Quality

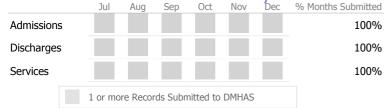


|                          |      | 5   |
|--------------------------|------|-----|
| 🞻 Valid Axis I Diagnosis | 100% | 99% |
| Valid Axis V GAF Score   | 100% | 95% |

#### **Discharge Outcomes**

|              |                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
|--------------|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| $\checkmark$ | Treatment Completed Successfully     |                    | 74     | 72%      | 50%    | 51%       | 22%            |  |
|              | Recovery                             |                    |        |          |        |           |                |  |
|              | National Recovery Measures (NOMS)    | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
| $\checkmark$ | Abstinence/Reduced Drug Use          |                    | 128    | 85%      | 55%    | 54%       | 30%            |  |
| $\checkmark$ | Not Arrested                         |                    | 151    | 100%     | 75%    | 84%       | 25%            |  |
| $\checkmark$ | Self Help                            |                    | 125    | 83%      | 60%    | 33%       | 23%            |  |
| $\checkmark$ | Improved/Maintained Axis V GAF Score |                    | 112    | 98%      | 75%    | 53%       | 23%            |  |
|              | Stable Living Situation              | · · ·              | 141    | 93%      | 95%    | 83%       | -2%            |  |
|              | Employed                             | ·                  | 73     | 48%      | 50%    | 41%       | -2%            |  |
|              | Service Utilization                  |                    |        |          |        |           |                |  |
|              |                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
| $\checkmark$ | Clients Receiving Services           |                    | 45     | 94%      | 90%    | 69%       | 4%             |  |
|              | Service Engagement                   |                    |        |          |        |           |                |  |
|              | Outpatient                           | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
| $\checkmark$ | 2 or more Services within 30 days    |                    | 72     | 94%      | 75%    | 71%       | 19%            |  |
|              |                                      |                    |        |          |        |           |                |  |

#### Data Submitted to DMHAS by Month





| Measure                      | Actual | 1 Yr Ago | Variance % |
|------------------------------|--------|----------|------------|
| Unique Clients               | 51     | 57       | -11% 🔻     |
| Admits                       | 34     | 51       | -33% 🔻     |
| Discharges                   | 40     | 45       | -11% 🔻     |
| Service Hours                | 357    | 402      | -11% 🔻     |
| Social Rehab/PHP/IOP<br>Days | 718    | 1,150    | -38% 🔻     |

#### Data Submission Quality

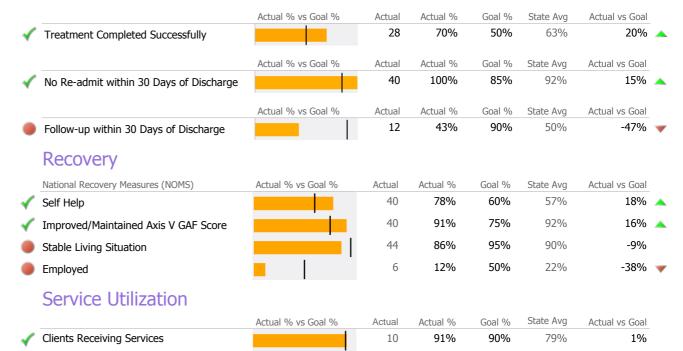
| Data Entry           | Actual | State Avg |
|----------------------|--------|-----------|
| √ Valid NOMS Data    | 100%   | 97%       |
| 🗸 Valid TEDS Data    | 100%   | 96%       |
|                      |        |           |
| On-Time Periodic     | Actual | State Avg |
| 🧹 6 Month Updates    | 50%    | 50%       |
|                      |        |           |
| Cooccurring          | Actual | State Avg |
| 🖌 MH Screen Complete | 100%   | 80%       |
| 🖌 SA Screen Complete | 100%   | 80%       |
|                      |        |           |
| Diagnosis            | Actual | State Avg |

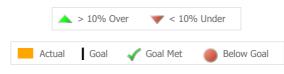
| Diagnosis                | Actual | State Avg |
|--------------------------|--------|-----------|
| 🞻 Valid Axis I Diagnosis | 100%   | 100%      |
| Valid Axis V GAF Score   | 100%   | 100%      |

#### Data Submitted to DMHAS by Month

|                                      |   | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|--------------------------------------|---|-----|-----|-----|-----|-----|-----|--------------------|
| Admission                            | S |     |     |     |     |     |     | 100%               |
| Discharge                            | 5 |     |     |     |     |     |     | 100%               |
| Services                             |   |     |     |     |     |     |     | 83%                |
| 1 or more Records Submitted to DMHAS |   |     |     |     |     |     |     |                    |

#### Discharge Outcomes





\* State Avg based on 13 Active Partial Hospitalization Services Programs

#### **CASA Recovery PILOTS 989255**

Chemical Abuse Services Agency (CASA)

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 5      | 8        | -38%       | ▼ |
| Admits         | 1      | 5        | -80%       | • |
| Discharges     | -      | 6        | -100%      | • |
| Service Hours  | -      | 17       | -100%      | • |

#### Recovery

| ·                                 |                    |        |          |        |           |                |   |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Stable Living Situation           |                    | 4      | 80%      | 85%    | 90%       | -5%            |   |
| Service Utilization               |                    |        |          |        |           |                |   |
|                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Clients Receiving Services        |                    | 0      | 0%       | 90%    | 93%       | N/A            | - |

#### Data Submission Quality

| Data Entry        | Act | ual State Avg |
|-------------------|-----|---------------|
| 🞻 Valid NOMS Data | 100 | 98%           |
|                   |     |               |
| On-Time Periodic  | Act | ual State Avg |
| 6 Month Updates   | 0   | 0% 81%        |

#### Data Submitted to DMHAS by Month

|            | Jul     | Aug       | Sep     | Oct       | Nov   | Dec | % Months Submitted |
|------------|---------|-----------|---------|-----------|-------|-----|--------------------|
| Admissions |         |           |         |           |       |     | 17%                |
| Discharges |         |           |         |           |       |     | 0%                 |
| Services   |         |           |         |           |       |     | 0%                 |
|            | 1 or mo | ore Recor | ds Subr | nitted to | DMHAS |     |                    |

|        | > 10% 0 | ver 🔻 < 100 | % Under    |
|--------|---------|-------------|------------|
| Actual | Goal    | 🧹 Goal Met  | Below Goal |

\* State Avg based on 52 Active Supportive Housing – Development Programs

Chemical Abuse Services Agency (CASA) Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7 Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Goal %

State Avg

Actual vs Goal

Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Actual %

Actua 30

#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 70     | 70       | 0%         |
| Admits         | 62     | 65       | -5%        |
| Discharges     | 61     | 66       | -8%        |
| Bed Days       | 1,487  | 1,574    | -6%        |

#### Data Submission Quality

| Data Entry           | Actual | State Avg |
|----------------------|--------|-----------|
| 🖌 Valid NOMS Data    | 100%   | 98%       |
| 🖌 Valid TEDS Data    | 100%   | 100%      |
|                      |        |           |
| On-Time Periodic     | Actual | State Avg |
| 6 Month Updates      | N/A    | N/A       |
|                      |        |           |
| Cooccurring          | Actual | State Avg |
| 🖌 MH Screen Complete | 100%   | 98%       |
| 🖌 SA Screen Complete | 100%   | 98%       |
|                      | ·      |           |
| Diagnosis            | Actual | State Avg |
|                      |        |           |

| 🞻 Valid Axis I Diagnosis | 100% | 100% |
|--------------------------|------|------|
| Valid Axis V GAF Score   | 100% | 100% |

### Treatment Completed Successfully

**Discharge Outcomes** 

|              | Treatment Completed Successfully        |                    | 39     | 64%      | 80%    | 77%       | -16%           | • |
|--------------|---|--------------------|--------|----------|--------|-----------|----------------|---|
|              |   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| V            | No Re-admit within 30 Days of Discharge |                    | 58     | 95%      | 85%    | 92%       | 10%            |   |
|              |   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| $\checkmark$ | Follow-up within 30 Days of Discharge   |                    | 36     | 92%      | 90%    | 60%       | 2%             |   |
|              | Recovery                                |                    |        |          |        |           |                |   |
|              | National Recovery Measures (NOMS)       | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| $\checkmark$ | Self Help                               |                    | 60     | 83%      | 60%    | 78%       | 23%            |   |
| $\checkmark$ | Improved/Maintained Axis V GAF Score    |                    | 59     | 97%      | 75%    | 84%       | 22%            |   |
| $\checkmark$ | Abstinence/Reduced Drug Use             |                    | 54     | 75%      | 70%    | 61%       | 5%             |   |

Actual % vs Goal %

#### **Bed Utilization**

|                   |      | 12 M | onths Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|-------------------|------|------|-------------|------|---------|----------|----------|--------|-----------|----------------|
| Avg Utilization I | Rate |      |             | 10   | 25 days | 0.1      | 81%      | 90%    | 102%      | -9%            |
|                   | < 9  | 0%   | 90-110%     |      | >110%   |          |          |        |           |                |

#### Data Submitted to DMHAS by Month



|        | > 10% 0 | ver 🔻 < 109 | % Under    |
|--------|---------|-------------|------------|
| Actual | Goal    | 🖌 Goal Met  | Below Goal |

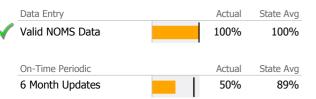
\* State Avg based on 12 Active SA Intensive Res. Rehabilitation 3.7 Programs

Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

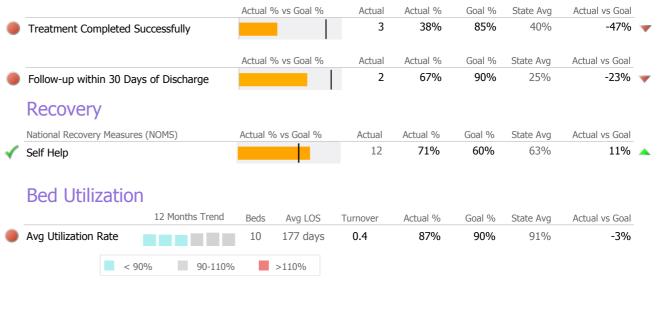
#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 15     | 15       | 0%         |
| Admits         | 8      | 9        | -11% 🔻     |
| Discharges     | 8      | 6        | 33% 🔺      |
| Bed Days       | 1,609  | 1,373    | 17% 🔺      |

#### Data Submission Quality



#### **Discharge Outcomes**



# Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec % Months Submitted Admissions Image: Constraints Image: Constraints Image: Constraints 83% Discharges Image: Constraints Image: Constraints Image: Constraints 83% Image: Image: Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Image: Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Image: Image: Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Image: Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Constraints Image: Image: Constraints Image: Constraints Image: Constraints

|     | <b>^</b> > | 10% Ove | er       | ▼ <    | 10% | Unde | r     |        |
|-----|------------|---------|----------|--------|-----|------|-------|--------|
| Act | tual       | Goal    | <b>«</b> | Goal M | et  |      | Belov | w Goal |

\* State Avg based on 3 Active AIDS Residential Programs

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 51     |          |            |
| Admits         | 51     | -        |            |
| Discharges     | -      | -        |            |
| Service Hours  | 129    | -        |            |
|                |        |          |            |

#### Service Engagement





|            | Jul     | Aug       | Sep      | Oct       | Nov   | Dec | % Months Submitted |
|------------|---------|-----------|----------|-----------|-------|-----|--------------------|
| Admissions |         |           |          |           |       |     | 67%                |
| Discharges |         |           |          |           |       |     | 0%                 |
| Services   |         |           |          |           |       |     | 17%                |
|            | 1 or mo | ore Recor | ds Subrr | nitted to | DMHAS |     |                    |

|      | <b>▲</b> > | 10% Ove | r        | ▼ < 10%  | Unde | er         |
|------|------------|---------|----------|----------|------|------------|
| Actu | ual        | Goal    | <b>√</b> | Goal Met |      | Below Goal |

| 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 | % Months Submitted |
|------------|---|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | 6 |     |     |     |     |     |     | 0%                 |
| Discharges | ; |     |     |     |     |     |     | 0%                 |
|            |   |     |     |     |     |     |     |                    |

|        | > 10% 0 | ver 🛛 🔻 < 10% | 6 Under |      |
|--------|---------|---------------|---------|------|
| Actual | Goal    | 🞻 Goal Met    | Below   | Goal |

Chemical Abuse Services Agency (CASA) Addiction - Outpatient - Standard Outpatient

#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 22     | 42       | -48%       | ▼ |
| Admits         | 10     | 18       | -44%       | ▼ |
| Discharges     | 19     | 29       | -34%       | ▼ |
| Service Hours  | 363    | 481      | -25%       | ▼ |

#### Data Submission Quality

| Data Entry           |   | Actual | State Avg |
|----------------------|---|--------|-----------|
| 🗸 Valid NOMS Data    |   | 100%   | 94%       |
| 🞸 Valid TEDS Data    | i | 100%   | 93%       |
|                      |   |        |           |
| On-Time Periodic     |   | Actual | State Avg |
| 6 Month Updates      |   | N/A    | 27%       |
|                      |   |        |           |
| Cooccurring          |   | Actual | State Avg |
| MH Screen Complete   |   | 100%   | 99%       |
| 🞻 SA Screen Complete |   | 100%   | 99%       |
|                      |   |        |           |
| Diagnosis            |   | Actual | State Avg |
| <b>A</b>             |   | 1000/  | 000/      |

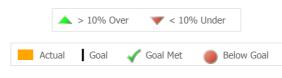
| Diagnosis                | Actual | State Avg |
|--------------------------|--------|-----------|
| 🞻 Valid Axis I Diagnosis | 100%   | 99%       |
| Valid Axis V GAF Score   | 100%   | 95%       |

#### **Discharge Outcomes**

|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| Treatment Completed Successfully     |                    | 13     | 68%      | 50%    | 51%       | 18%            | - |
| Recovery                             |                    |        |          |        |           |                |   |
| National Recovery Measures (NOMS)    | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Abstinence/Reduced Drug Use          |                    | 20     | 87%      | 55%    | 54%       | 32%            |   |
| Employed                             |                    | 15     | 65%      | 50%    | 41%       | 15%            | 4 |
| Not Arrested                         |                    | 21     | 91%      | 75%    | 84%       | 16%            | 4 |
| Stable Living Situation              |                    | 22     | 96%      | 95%    | 83%       | 1%             |   |
| Improved/Maintained Axis V GAF Score |                    | 13     | 68%      | 75%    | 53%       | -7%            |   |
| Self Help                            |                    | 9      | 39%      | 60%    | 33%       | -21%           |   |
| Service Utilization                  |                    |        |          |        |           |                |   |
|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Clients Receiving Services           |                    | 4      | 100%     | 90%    | 69%       | 10%            |   |
| Service Engagement                   |                    |        |          |        |           |                |   |
| Outpatient                           | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| 2 or more Services within 30 days    |                    | 9      | 100%     | 75%    | 71%       | 25%            |   |

## Data Submitted to DMHAS by Month





| Measure        | Actual | 1 Yr Ago | Variance % |  |
|----------------|--------|----------|------------|--|
| Unique Clients | 38     | 33       | 15%        |  |
| Admits         | 32     | 20       | 60%        |  |
| Discharges     | 30     | 22       | 36%        |  |
| Service Hours  | 328    | 184      | 79%        |  |

#### Data Submission Quality

| Data Entry           |   | Actual | State Avg |
|----------------------|---|--------|-----------|
| √ Valid NOMS Data    |   | 100%   | 94%       |
| 🞸 Valid TEDS Data    | i | 100%   | 93%       |
| On-Time Periodic     |   | Actual | State Avg |
| 6 Month Updates      |   | N/A    | 27%       |
|                      |   |        |           |
| Cooccurring          |   | Actual | State Avg |
| 🞻 MH Screen Complete |   | 100%   | 99%       |
| 🞻 SA Screen Complete |   | 100%   | 99%       |
|                      |   |        |           |
| Diagnosis            |   | Actual | State Avg |
|                      |   |        |           |

| Blaghoolo                | 710001011 | otate / try |
|--------------------------|-----------|-------------|
| 🞻 Valid Axis I Diagnosis | 100%      | 99%         |
| Valid Axis V GAF Score   | 100%      | 95%         |

#### **Discharge Outcomes**

|              |                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|--------------|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| $\checkmark$ | Treatment Completed Successfully     |                    | 21     | 70%      | 50%    | 51%       | 20%            |   |
|              | Recovery                             |                    |        |          |        |           |                |   |
|              | National Recovery Measures (NOMS)    | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| <b>«</b>     | Self Help                            |                    | 35     | 90%      | 60%    | 33%       | 30%            |   |
| <b>«</b>     | Abstinence/Reduced Drug Use          |                    | 32     | 82%      | 55%    | 54%       | 27%            |   |
| $\checkmark$ | Not Arrested                         |                    | 38     | 97%      | 75%    | 84%       | 22%            |   |
|              | Stable Living Situation              | · · · ·            | 36     | 92%      | 95%    | 83%       | -3%            |   |
| <b>«</b>     | Improved/Maintained Axis V GAF Score | ·                  | 23     | 77%      | 75%    | 53%       | 2%             |   |
|              | Employed                             | <b>—</b>   `       | 7      | 18%      | 50%    | 41%       | -32%           | - |
|              | Service Utilization                  |                    |        |          |        |           |                |   |
| _            |                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| $\checkmark$ | Clients Receiving Services           |                    | 9      | 100%     | 90%    | 69%       | 10%            |   |
|              | Service Engagement                   |                    |        |          |        |           |                |   |
|              | Outpatient                           | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| <b>«</b>     | 2 or more Services within 30 days    |                    | 28     | 88%      | 75%    | 71%       | 13%            |   |

## Data Submitted to DMHAS by Month





| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 31     | 32       | -3%        |
| Admits         | 24     | 26       | -8%        |
| Discharges     | 21     | 26       | -19% 🔻     |
| Bed Days       | 1,385  | 1,568    | -12% 🔻     |



|        | > 10% 0\ | ver 🛛 🔻 < 10% | 6 Under    |  |
|--------|----------|---------------|------------|--|
| Actual | Goal     | 🞻 Goal Met    | Below Goal |  |

\* State Avg based on 13 Active Recovery House Programs

| 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 | % Months Submittee | d |
|------------|---|--------|----------|----------|-----------|-------|-----|--------------------|---|
| Admissions | ; |        |          |          |           |       |     | 0%                 | ó |
| Discharges |   |        |          |          |           |       |     | 0%                 | ó |
|            | 1 | or mor | e Record | ls Submi | tted to I | OMHAS |     |                    |   |

|        | > 10% 0 | ver 🛛 🔻 < 10% | 6 Under |      |
|--------|---------|---------------|---------|------|
| Actual | Goal    | 🞻 Goal Met    | Below   | Goal |