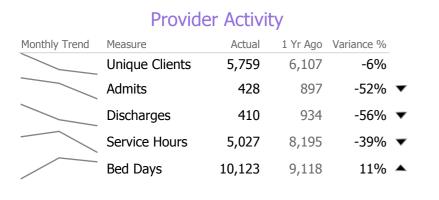
#### **Connection Inc.**

Middletown, CT

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

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)



🔺 > 10% Over 1 Yr Ago

▼> 10% Under 1Yr Ago

#### Clients by Level of Care

Program Type	Level of Care Type	 #	%
Forensic SA			
Foren	sics Community-based	4,602	79.2%
Addiction			
	Outpatient	558	9.6%
	Residential Services	133	2.3%
	Recovery Support	23	0.4%
Mental Healt	h		
	Case Management	203	3.5%
	Outpatient	140	2.4%
	Residential Services	112	1.9%
Forensic MH			
Foren	sics Community-based	29	0.5%
	Residential Services	9	0.2%

#### Consumer Satisfaction Survey (Based on 405 FY18 Surveys)



#### **Client Demographics**

Age 18-25

26-34

35-44

45-54

55-64 <mark>|</mark> 65+ |

Ethnicity Non-Hispanic

Hisp-Puerto Rican

Hispanic-Mexican

Hispanic-Cuban

Unknown

	#	%	State Avg	Gender		#	%	State Avg	
•	682	13%	10%	Male		3,703	69%	▲ 58%	
	1,573	30%	22%	Female		1,636	31%	41%	
Í	1,100	21%	20%	Transgender				0%	
	904	17%	21%						
	745	14%	19%						
Ĺ	199	4%	7%	Race		#	%	State Avg	
				White/Caucasian		3,329	58%	63%	
	#	%	State Avg	Unknown 📘		864	15%	5%	
	3,469	60%	<b>v</b> 71%	Other		755	13%	13%	
	1,574	27%	▲ 8%	Black/African American		691	12%	16%	
	310	5%	7%	Asian		44	1%	1%	
l	276	5%	13%	Multiple Races		35	1%	1%	
I				Am. Indian/Native Alaskan		32	1%	1%	
	120	2%	1%	Hawaiian/Other Pacific Islander		9	0%	0%	
	10	0%	0%						
	Unique C	lients	State Avg	> 10% Over State Avg	▼ :	> 10% U	Inder S	tate Avg	

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	32	35	-9%	
Admits	2	4	-50%	▼
Discharges	1	4	-75%	▼
Service Hours	4	42	-90%	▼

## Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	73%	94%
Valid TEDS Data	67%	90%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	19%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	96%
SA Screen Complete	100%	100%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%

5		5
🞻 Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	34%	96%

## Data Submitted to DMHAS by Month

			33%		
			33%		
			67%		
1 or more Records Submitted to DMHAS					
	1 or mo	1 or more Recor	1 or more Records Subr		

#### **Discharge Outcomes**

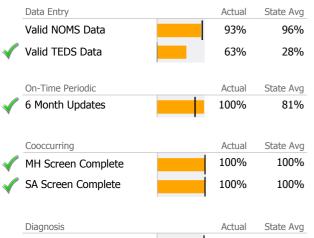
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		0	0%	50%	53%	-50%	-
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		3	9%	55%	46%	-46%	-
Employed	i i	1	3%	50%	39%	-47%	-
Self Help	· ·	2	6%	60%	28%	-54%	-
Not Arrested	<u> </u>	6	19%	75%	80%	-56%	-
Improved/Maintained Axis V GAF Score		0	0%	75%	37%	-75%	-
Stable Living Situation	· · ·	4	12%	95%	77%	-83%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Clients Receiving Services		1	3%	90%	48%	-87%	-
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		2	100%	75%	64%	25%	



\* State Avg based on 113 Active Standard Outpatient Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	31	81	-62%	▼
Admits	7	7	0%	
Discharges	6	59	-90%	▼
Service Hours	204	302	-32%	▼

## Data Submission Quality



🞻 Valid Axis I Diagnosis	100%	100%
🞸 Valid Axis V GAF Score	100%	100%

## Data Submitted to DMHAS by Month

	Jui	Aug	JCP	70 Pionens Submitteeu		
Admissions				100%		
Discharges				67%		
Services				100%		
1 or more Records Submitted to DMHAS						

#### Discharge Outcomes





\* State Avg based on 8 Active Gambling Outpatient Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	52	50	4%	
Admits	3	50	-94%	▼
Discharges	4	4	0%	
Service Hours	389	120		

## Data Submission Quality

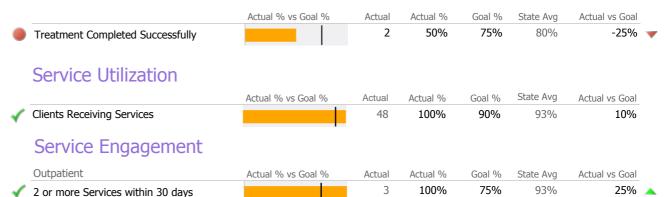
Data Entry	Actual	State Avg
Valid NOMS Data	93%	96%
< Valid TEDS Data	27%	28%
On-Time Periodic	Actual	State Avg
🧹 6 Month Updates	100%	81%
Commission	A stored	Charles Aver
Cooccurring	Actual	State Avg
√ MH Screen Complete	100%	100%
🞻 SA Screen Complete	100%	100%
Diagnosis	Actual	State Avg

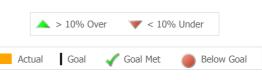
√ Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	100%	100%

## Data Submitted to DMHAS by Month

67%
07%
67%
100%

#### Discharge Outcomes





\* State Avg based on 8 Active Gambling Outpatient Programs

-17% 💗

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	11	9	22% 🔺	
Admits	1	1	0%	
Discharges	1	-		
Bed Days	906	760	19% 🔺	

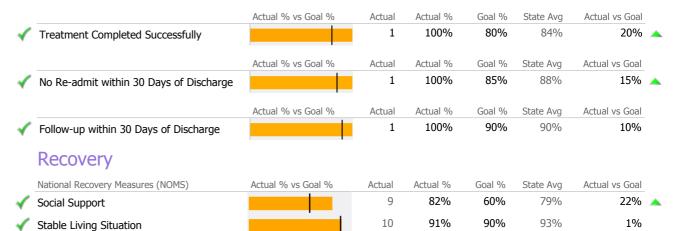
## Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	88%	88%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	91%
SA Screen Complete	100%	91%
Diagnosis	Actual	State Avg
🞻 Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	100%	99%

## Data Submitted to DMHAS by Month

	Jui	Aug	Sep	% Month's Submitted
Admissions				33%
Discharges				33%
	1 or mo	re Recor	ds Subr	nitted to DMHAS

#### Discharge Outcomes



#### **Bed Utilization**

Improved/Maintained Axis V GAF Score

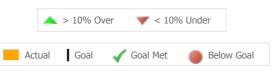


7

78%

95%

64%



\* State Avg based on 24 Active Group Home Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	29	32	-9%
Admits	7	9	-22% 🔻
Discharges	7	14	-50% 🔻
Service Hours	1,256	1,304	-4%

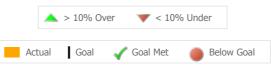
## Data Submission Quality

 $\triangleleft$ 

Data Entry	A	Actual	State Avg
Valid NOMS Data		N/A	NaN
On-Time Periodic	A	Actual	State Avg
🖉 6 Month Updates		0%	0%

## Data Submitted to DMHAS by Month





\* State Avg based on 1 Active Day Reporting Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	52	53	-2%
Admits	30	24	25% 🔺
Discharges	24	25	-4%
Bed Days	2,518	2,547	-1%





\* State Avg based on 4 Active Shelter Programs

#### Groton Pilots 813-552

Connection Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	12	13	-8%
Admits	-	-	
Discharges	2	-	
Service Hours	38	46	-18% 🔻

#### Recovery

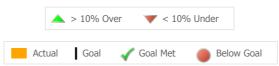
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Stable Living Situation		12	100%	85%	85%	15%	<b>^</b>
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		9	90%	90%	94%	0%	

#### Data Submission Quality



#### Data Submitted to DMHAS by Month

	Ju	l Aug	Sep	% Months Submitted
Admissions	5			0%
Discharges				33%
Services				67%
	1 or	more Reco	ords Subi	mitted to DMHAS



\* State Avg based on 74 Active Supportive Housing – Scattered Site Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	189	223	-15%	▼
Admits	-	34	-100%	▼
Discharges	-	30	-100%	▼
Service Hours	-	678	-100%	▼

## Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	94%
Valid TEDS Data	ĺ	N/A	90%
On-Time Periodic		Actual	State Avg
6 Month Updates		0%	19%
Cooccurring		Actual	State Avg
MH Screen Complete		N/A	96%
SA Screen Complete		N/A	100%
		Actual	

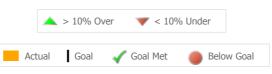
🞻 Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	81%	96%

## Data Submitted to DMHAS by Month

		1							
Admissions	i	0%							
Discharges		0%							
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		N/A	N/A	50%	53%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		14	7%	50%	39%	-43%	-
Abstinence/Reduced Drug Use	i i	22	12%	55%	46%	-43%	-
Not Arrested	<b>–</b> '	40	21%	75%	80%	-54%	-
Self Help		10	5%	60%	28%	-55%	-
Improved/Maintained Axis V GAF Score	· · ·	0	0%	75%	37%	-75%	-
Stable Living Situation	· · · ·	26	14%	95%	77%	-81%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	48%	N/A	-
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		0	0%	75%	64%	-75%	-



\* State Avg based on 113 Active Standard Outpatient Programs

Connection Inc. Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5 Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	9	33%	
Admits	3	1	200%	
Discharges	3	4	-25%	▼
Bed Days	779	705	10%	

## Data Submission Quality

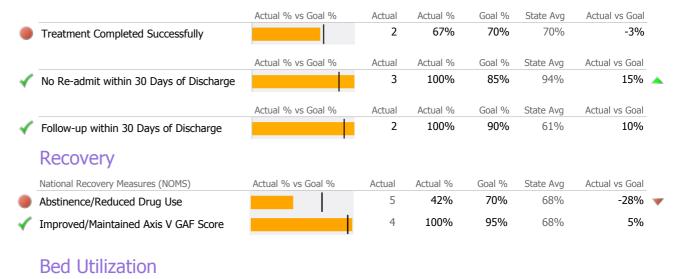
Data Entry	Actual	State Avg
🗸 Valid NOMS Data	100%	95%
🗸 Valid TEDS Data	100%	100%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	3%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	94%
🖌 SA Screen Complete	100%	94%
Diagnosis	Actual	State Avg

## ✓ Valid Axis I Diagnosis 100% 99% ✓ Valid Axis V GAF Score 100% 98%

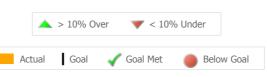
## Data Submitted to DMHAS by Month

	Jui	Aug	JCP	70 PIONUIS Submitted
Admissions				33%
Discharges				67%
	1 or mo	re Recor	ds Subr	nitted to DMHAS

#### Discharge Outcomes



		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Avg Utilization Rate		8	157 days	0.7	106%	90%	99%	16%	
	< 90	90-110%		>110%						



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

#### Jefferson Commons

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### Program Quality Dashboard

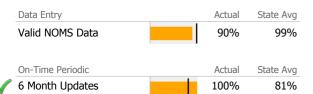
#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	8	8	0%
Admits	-	-	
Discharges	-	-	
Service Hours	31	49	-36%

#### Recovery

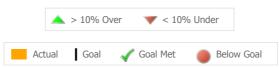
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
<b>«</b>	Stable Living Situation		7	88%	85%	92%	3%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Clients Receiving Services		8	100%	90%	95%	10%

## Data Submission Quality



#### Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted				
Admissions					0%				
Discharges					0%				
Services					67%				
	1 or more Records Submitted to DMHAS								



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

#### Lagano Place

Connection Inc. Mental Health - Case Management - Standard Case Management Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	33	-33% 🔻	
Admits	4	6	-33% 🔻	
Discharges	4	10	-60% 🔻	
Service Hours	92	175	-47% 🔻	

## Data Submission Quality

	Data Entry	Actual	State Avg
$\checkmark$	Valid NOMS Data	97%	95%
÷			
	On-Time Periodic	Actual	State Avg
$\checkmark$	6 Month Updates	100%	63%

## Data Submitted to DMHAS by Month

	Jui	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				67%
Services				67%
	1 or m	ore Reco	ds Subr	nitted to DMHAS

#### Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		0	0%	50%	42%	-50%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		22	100%	60%	63%	40%	١,
Employed		9	41%	20%	9%	21%	
Stable Living Situation		20	91%	80%	76%	11%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		18	100%	90%	69%	10%	-

## ▲ > 10% Over ▼ < 10% Under Actual Goal ✓ Goal Met ● Below Goal

\* State Avg based on 30 Active Standard Case Management Programs

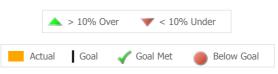
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

#### Data Submission Quality

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

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
	1 or mo	re Recor	ds Subn	nitted to DMHAS



\* State Avg based on 0 Active Naltrexone Programs

#### Middlesex PILOTS Dev. 813-553

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	10	-20% 🔻	
Admits	-	-		
Discharges	-	1	-100% 🔻	
Service Hours	45	59	-25% 🔻	

#### Recovery

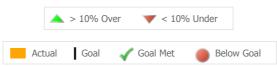
	'							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
V	Stable Living Situation		8	100%	85%	92%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		8	100%	90%	95%	10%	

#### Data Submission Quality



#### Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted
Admission	5				0%
Discharges	5				0%
Services					67%
1 or more Records Submitted to DMHAS					nitted to DMHAS



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

#### Middletown Pilots 813-551

Connection Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	23	23	0%
Admits	1	-	
Discharges	-	1	-100% 🔻
Service Hours	168	108	56% 🔺

#### Recovery

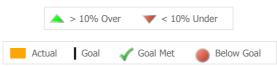
	/							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Stable Living Situation		22	96%	85%	85%	11% 🔺	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		23	100%	90%	94%	10%	

#### Data Submission Quality



#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				33%
Discharges				0%
Services				67%
1 or more Records Submitted to DMHAS				



\* State Avg based on 74 Active Supportive Housing – Scattered Site Programs

#### Milestone Apartments

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### Program Quality Dashboard

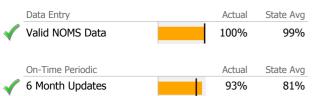
#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16	16	0%
Admits	-	-	
Discharges	1	-	
Service Hours	131	125	4%

#### Recovery

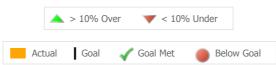
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Stable Living Situation		16	100%	85%	92%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		14	93%	90%	95%	3%	

## Data Submission Quality



#### Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted
Admission	S				0%
Discharge	5				33%
Services					67%
		1 or mo	re Recor	ds Subr	nitted to DMHAS



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

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	10	20%	
Admits	5	2	150%	
Discharges	4	3	33%	
Bed Days	630	650	-3%	

## Data Submission Quality

Data Entry	Actual	State Avg
🞻 Valid NOMS Data	98%	95%
√ Valid TEDS Data	100%	100%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	3%
Cooccurring	Actual	State Avg
🞻 MH Screen Complete	100%	94%
🞻 SA Screen Complete	100%	94%
Diagnosis	Actual	State Avg

🞻 Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	100%	98%

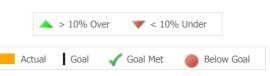
## Data Submitted to DMHAS by Month



#### Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		3	75%	70%	70%	5%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
No Re-admit within 30 Days of Discharge		4	100%	85%	94%	15%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		3	100%	90%	61%	10%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		7	58%	70%	68%	-12%	-
/ Improved/Maintained Axis V GAF Score		4	100%	95%	68%	5%	
Bed Utilization							
12 Months Trend	Beds Ava LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		8	138 days	0.7	86%	90%	99%	-4%
< 90	90-110%		>110%					



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

#### Next Step Supportive Hsg813555

Connection Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10	9	11% 🔺
Admits	-	-	
Discharges	-	-	
Service Hours	117	139	-15% 🔻

#### Recovery

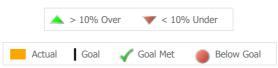
	· ·						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
K	Stable Living Situation		9	90%	85%	85%	5%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Clients Receiving Services		10	100%	90%	94%	10%

#### Data Submission Quality



#### Data Submitted to DMHAS by Month

	Ju	il Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
Services				67%
	1 or	more Rec	ords Subi	mitted to DMHAS



\* State Avg based on 74 Active Supportive Housing – Scattered Site Programs

Connection Inc.

Mental Health - Residential Services - Residential Support

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	39	35	11%	
Admits	12	6	100%	
Discharges	5	2	150%	
Service Hours	1,225	1,138	8%	

## Data Submission Quality

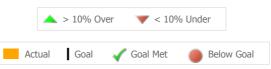
Data Entry	Actual	State Avg
🗸 Valid NOMS Data	100%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	100%	94%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	95%
🞻 SA Screen Complete	100%	92%
Diagnosis	Actual	State Avg
🞻 Valid Axis I Diagnosis	100%	95%
🞻 Valid Axis V GAF Score	100%	94%

#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		3	60%	50%	73%	10%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		37	95%	85%	95%	10%
Social Support		26	67%	60%	83%	7%
Employed	<b>I</b>	4	10%	25%	12%	-15%
Improved/Maintained Axis V GAF Score		22	96%	95%	63%	1%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		34	100%	90%	98%	10%

## Data Submitted to DMHAS by Month

Jui	Aug	Sep	70 MOITUIS SUDITILLEU
			100%
			100%
			67%
1 or mo	re Recor	rds Subr	-
			1 or more Records Subr



\* State Avg based on 39 Active Residential Support Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	140	144	-3%	
Admits	16	18	-11%	•
Discharges	14	14	0%	
Service Hours	171	736	-77%	•

## Data Submission Quality

Data Entry	Actu	ual State Avg
Valid NOMS Data	69	% 96%
On-Time Periodic	Actu	ual State Avg
6 Month Updates	5	% 65%
Cooccurring	Actu	ual State Avg
🞸 MH Screen Complete	100	% 91%
🖌 SA Screen Complete	100	% 91%
*		
Diagnosis	Actu	ual State Avg
🞻 Valid Axis I Diagnosis	100	% 96%

#### **Discharge Outcomes**

		Astual Of the Carl Of	A should	A - h 1 0/	C L O/	Chatta Auro	Astuslass Carl	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		0	0%	50%	55%	-50%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Employed		9	6%	30%	22%	-24%	-
	Social Support		40	29%	60%	65%	-31%	-
	Stable Living Situation		45	32%	95%	82%	-63%	-
	Improved/Maintained Axis V GAF Score		0	0%	75%	42%	-75%	-
	Service Utilization							
	Service Othization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		49	39%	90%	79%	-51%	-
	Service Engagement							
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	2 or more Services within 30 days		14	88%	75%	68%	13%	

## Data Submitted to DMHAS by Month

29%

89%

	Jui	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				67%

Valid Axis V GAF Score

	> 10% 0	ver 🔻 < 10%	6 Under	
Actual	Goal	🞻 Goal Met	Below Goa	I

\* State Avg based on 93 Active Standard Outpatient Programs

Connection Inc.

Mental Health - Case Management - Outreach & Engagement

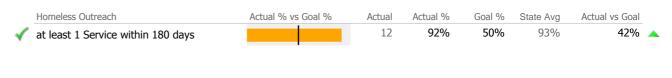
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

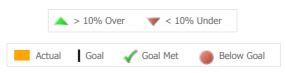
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	45	44	2%
Admits	13	15	-13% 🔻
Discharges	9	10	-10%
Service Hours	232	854	-73% 🔻

#### Service Engagement



## Data Submitted to DMHAS by Month





\* State Avg based on 39 Active Outreach & Engagement Programs

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	15	14	7%
Admits	-	-	
Discharges	-	-	
Bed Days	1,380	1,288	7%

## Data Submission Quality

	Data Entry	Actual	State Avg
$\checkmark$	Valid NOMS Data	100%	98%
	On-Time Periodic	Actual	State Avg
$\checkmark$	6 Month Updates	93%	91%
×			
	Cooccurring	Actual	State Avg
	MH Screen Complete	N/A	92%
	SA Screen Complete	N/A	95%
		•	
	Diagnosis	Actual	State Avg
$\checkmark$	Valid Axis I Diagnosis	100%	96%
√	Valid Axis V GAF Score	100%	93%

## Data Submitted to DMHAS by Month

	Jui	Aug	JCP	70 PIOTICIS Submitted
Admissions				0%
Discharges				0%
	1 or mo	re Recoi	rds Subn	nitted to DMHAS

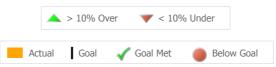
#### Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	75%	43%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	86%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	70%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
		0	0%	75%	47%	-75%

#### **Bed Utilization**

(

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
∢	Avg Utilization Rate		15	1,286 days	1.0	100%	90%	93%	10%
	< 90	90-110%		>110%					



\* State Avg based on 21 Active MH Intensive Res. Rehabilitation Programs

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	11	13	-15%	▼
Admits	1	1	0%	
Discharges	1	4	-75%	▼
Bed Days	926	914	1%	

## Data Submission Quality

	Data Entry	Actual	State Avg
$\checkmark$	Valid NOMS Data	100%	99%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	43%	80%
	Cooccurring	Actual	State Avg
$\checkmark$	MH Screen Complete	100%	87%
$\checkmark$	SA Screen Complete	100%	86%
	Diagnosis	Actual	State Avg
$\checkmark$	Valid Axis I Diagnosis	100%	96%
<i></i>	Valid Axis V GAF Score	100%	93%

## Data Submitted to DMHAS by Month

	J	ui	Aug	Sep	70 MONUS SUDINILLEU
Admissions					33%
Discharges					33%
	1 0	r mo	ore Recor	ds Subr	nitted to DMHAS

#### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
~	Treatment Completed Successfully		1	100%	60%	63%	40% 🔺	•
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Follow-up within 30 Days of Discharge		1	100%	90%	80%	10%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Stable Living Situation		10	91%	95%	92%	-4%	
	Social Support		5	45%	60%	80%	-15% 🔻	٣
	Employed		0	0%	25%	11%	-25% 🔻	٣
	Improved/Maintained Axis V GAF Score		5	62%	95%	59%	-33% 💗	٢

#### Bed Utilization

	12	Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rat	te		12	639 days	1.1	84%	90%	95%	-6%
	< 90%	90-110%		>110%					



\* State Avg based on 62 Active Supervised Apartments Programs

Connection Inc.

Mental Health - Residential Services - Residential Support

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	37	37	0%	
Admits	2	18	-89%	▼
Discharges	3	3	0%	
Service Hours	172	471	-63%	▼

## Data Submission Quality

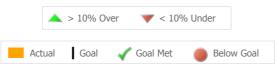
	Data Entry	Actual	State Avg
	Valid NOMS Data	98%	99%
	On-Time Periodic	Actual	State Avg
V	6 Month Updates	97%	94%
	Cooccurring	Actual	State Avg
$\checkmark$	MH Screen Complete	100%	95%
$\checkmark$	SA Screen Complete	100%	92%
		•	
	Diagnosis	Actual	State Avg
$\checkmark$	Valid Axis I Diagnosis	100%	95%
	Valid Axis V GAF Score	100%	94%

## Data Submitted to DMHAS by Month

Admissions	33%
Discharges	33%
Services	67%

#### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		1	33%	50%	73%	-17%	•
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Stable Living Situation		35	95%	85%	95%	10%	
$\checkmark$	Social Support		25	68%	60%	83%	8%	
	Employed		3	8%	25%	12%	-17%	-
	Improved/Maintained Axis V GAF Score	I	27	82%	95%	63%	-13%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		33	97%	90%	98%	7%	



\* State Avg based on 39 Active Residential Support Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4,602	4,941	-7%
Admits	266	580	-54% 🔻
Discharges	269	644	-58% 🔻

# Data Submitted to DMHAS by Month Jul Aug Sep % Months Submitted Admissions 100% Discharges 100% 1 or more Records Submitted to DMHAS

	<b></b>	→ 10% Ove	er	▼ <	< 10%	Unde	r		
Ac	tual	Goal	<b>«</b>	Goal M	let		Belo	w Goal	

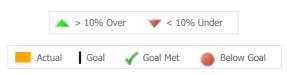
\* State Avg based on 16 Active Pre-trial Intervention Programs Programs

Connection Inc. Addiction - Residential Services - Recovery House

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	58	47	23% 🔺
Admits	33	27	22% 🔺
Discharges	31	25	24% 🔺
Bed Days	2,483	2,011	23% 🔺

Data	Subr		d to	DMHAS by Month % Months Submitted		
Admissions				100%		
Discharges				100%		
	1 or more Records Submitted to DMHAS					



\* State Avg based on 16 Active Recovery House Programs

#### RuoppSupSvs-SupHsgPilots904551

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	14	-7%	
Admits	-	1	-100%	▼
Discharges	1	1	0%	
Service Hours	189	314	-40%	•

#### Recovery

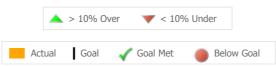
	/							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Stable Living Situation		13	100%	85%	92%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		12	100%	90%	95%	10%	

## Data Submission Quality



#### Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted			
Admission	S				0%			
Discharge	5				33%			
Services					67%			
		1 or more Records Submitted to DMHAS						



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

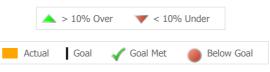
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	9	2	350% 🔺
Admits	6	-	
Discharges	3	1	200% 🔺
Bed Days	501	116	332% 🔺

#### Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	89%	91%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	100%

## Data Submitted to DMHAS by Month





\* State Avg based on 2 Active Transitional Programs

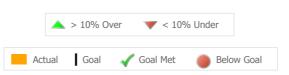
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

#### Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	94%
Valid TEDS Data	Ì	N/A	100%
On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	39%
Cooccurring		Actual	State Avg
MH Screen Complete		N/A	86%
SA Screen Complete	' I	N/A	100%

## Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
	1 or mo	re Recor	ds Subr	nitted to DMHAS



\* State Avg based on 5 Active Buprenorphine Maintenance Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	130	128	2%	
Admits	10	37	-73% 🔻	
Discharges	6	30	-80% 🔻	
Service Hours	190	409	-53% 🔻	

## Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	78%	94%
Valid TEDS Data	75%	90%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	19%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	96%
SA Screen Complete	100%	100%
Diagnosis	Actual	State Avg
	1000/	

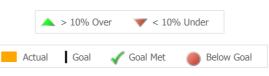
√ Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	56%	96%

## Data Submitted to DMHAS by Month

	Jui	Aug	Seb	70 MONUIS Submitted
Admissions				67%
Discharges				67%
Services				67%
	1 or mo	re Recor	ds Subn	nitted to DMHAS

#### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Treatment Completed Successfully		5	83%	50%	53%	33%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Not Arrested		73	56%	75%	80%	-19%	
Employed		39	30%	50%	39%	-20%	
Abstinence/Reduced Drug Use	<u> </u>	29	22%	55%	46%	-33%	
Stable Living Situation	· · · ·	65	50%	95%	77%	-45%	
Self Help	<b>–</b> 1 <sup>–</sup>	19	15%	60%	28%	-45%	
Improved/Maintained Axis V GAF Score		0	0%	75%	37%	-75%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		37	30%	90%	48%	-60%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
2 or more Services within 30 days		9	90%	75%	64%	15%	-



\* State Avg based on 113 Active Standard Outpatient Programs

#### West Village 904-554

#### Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### Program Quality Dashboard

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	41	-12% 🔻	
Admits	-	-		
Discharges	-	2	-100% 🔻	
Service Hours	193	274	-30% 🔻	

#### Recovery

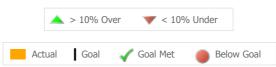
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Stable Living Situation		31	86%	85%	92%	1%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Clients Receiving Services		32	89%	90%	95%	-1%

#### Data Submission Quality



#### Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitte			
Admission	5				09			
Discharges	5				00			
Services					67%			
	1 or more Records Submitted to DMHAS							



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

#### WolfeSupSvs-NxtStpSupHsg904552

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10	9	11% 🔺
Admits	-	-	
Discharges	1	1	0%
Service Hours	70	320	-78% 🔻

#### Recovery

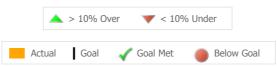
	,						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Stable Living Situation		9	90%	85%	92%	5%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Clients Receiving Services		9	100%	90%	95%	10%

## Data Submission Quality



#### Data Submitted to DMHAS by Month

	Ju	l Aug	Sep	% Months Submitted				
Admissions	5			0%				
Discharges				33%				
Services				67%				
	1 or more Records Submitted to DMHAS							



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

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	23	25	-8%
Admits	5	6	-17% 🔻
Discharges	5	8	-38% 🔻

## Data Submitted<br/>JultoDMHAS by MonthsAdmissionsImage: Comparison of the submitted67%DischargesImage: Comparison of the submitted67%

1 or more Records Submitted to DMHAS

	> 10% 0	/er	▼ < 100	% Under	
Actual	Goal	-	Goal Met	🔵 Be	low Goal

\* State Avg based on 1 Active Other Programs

#### Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	124	138	-10%	▼
Admits	1	48	-98%	▼
Discharges	4	32	-88%	▼
Service Hours	93	510	-82%	▼

## Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	56%	94%
Valid TEDS Data	40%	90%
On-Time Periodic	Actual	State Avg
6 Month Updates	4%	19%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	96%
SA Screen Complete	100%	100%
Diagnosis	Actual	State Avg

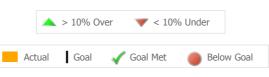
🗸 Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	65%	96%

## Data Submitted to DMHAS by Month

	Jui	Aug	Sep	70 MONUS Submitted		
Admissions				33%		
Discharges				67%		
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		0	0%	50%	53%	-50%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested		76	61%	75%	80%	-14%
Abstinence/Reduced Drug Use		46	37%	55%	46%	-18%
Employed		38	31%	50%	39%	-19%
Stable Living Situation		72	58%	95%	77%	-37%
Self Help	<b>•</b> • •	15	12%	60%	28%	-48%
Improved/Maintained Axis V GAF Score	_ '	0	0%	75%	37%	-75%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		22	18%	90%	48%	-72%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		1	100%	75%	64%	25%



\* State Avg based on 113 Active Standard Outpatient Programs