Wheeler Clinic Plainville, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

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



Program Type	Level of Care Type	Level of Care Type		
Addiction				
	Outpatient		3,303	67.1%
Medicatio	n Assisted Treatment		139	2.8%
	Intake		121	2.5%
	Case Management		36	0.7%
	IOP		29	0.6%
Forensic SA				
Forens	ics Community-based		1,246	25.3%
	Case Management		49	1.0%

Consumer Satisfaction Survey (Based on 228 FY18 Surveys) Question Domain Satisfied % vs Goal% Satisfied % Goal % State Avg Respect 80% 91% 91% \checkmark Participation in Treatment 88% 80% 92% Quality and Appropriateness 88% 80% 93% General Satisfaction 80% 92% 84% Overall 80% 91% 83% 80% 88% Access 81% 70% 80% 83% Outcome Recovery 69% 80% 79% 🗸 Goal Met Goal % 0-80% 80-100% Satisfied % Under Goal

Client Demographics

Age 18-25 26-34 35-44 45-54 55-64 65+

Ethnicity Non-Hispanic Unknown

Hisp-Puerto Rican Hispanic-Other Hispanic-Mexican Hispanic-Cuban

	#	%	State Avg	Gender		#	%	State Avg
	852	18%	10%	Male		2,935	62%	58%
	1,445	30%	22%	Female		1,831	38%	41%
	1,063	22%	20%	Transgender				0%
	737	15%	21%					
	509	11%	19%					
	152	3%	7%	Race		#	%	State Avg
•				White/Caucasian		2,697	57%	63%
	#	%	State Avg	Black/African American		717	15%	16%
	1,840	39%	v 71%	Other		666	14%	13%
	1,813	38%	▲ 8%	Unknown		297	6%	5%
ī.	916	19%	13%	Multiple Races		285	6%	1%
1	160	3%	7%	Asian		48	1%	1%
l				Am. Indian/Native Alaskan		37	1%	1%
	28	1%	1%	Hawaiian/Other Pacific Islander		22	0%	0%
	12	0%	0%	1				
	Unique C	lients	State Avg	▲ > 10% Over State Avg	▼ :	> 10% U	nder St	ate Avg

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	121		
Admits	122	-	
Discharges	120	-	

Data	Submi	tted Aug	to _{Sep}	DMHAS by Month % Months Submitted
Admissions				33%
Discharges				33%
	1 or more	e Record	ls Sub	omitted to DMHAS

	> 10% 0	ver 🔻 < 109	% Under	
Actual	Goal	🞻 Goal Met	Below (Goal

* State Avg based on 0 Active Central Intake Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	10	13	-23%	▼
Admits	-	1	-100%	▼
Discharges	-	3	-100%	▼
Service Hours	-	30	-100%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	96%
Valid TEDS Data	N/A	28%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	81%
Cooccurring	Actual	State Avg
MH Screen Complete	N/A	100%
SA Screen Complete	N/A	100%
Diagnosis	Actual	State Avo

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

Data Submitted to DMHAS by Month

Admissions	0%
Discharges	0%
Services	0%

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	75%	80%	N/A
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		0	0%	90%	93%	N/A
Service Engagement						

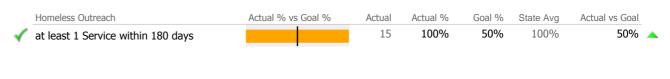
Outpatient	Actual % vs Goal %	6	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days			0	0%	75%	93%	-75%	/

		10% Ove	r	▼ < 10	% Unde	er	
Act	ual	Goal	«	Goal Met		Belo	w Goal

* State Avg based on 8 Active Gambling Outpatient Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	12	200%	▲
Admits	15	-		
Discharges	-	4	-100%	•
Service Hours	206	98	111%	▲

Service Engagement





	> 10% 0	ver 🛛 🔻 < 10%	6 Under	
Actual	Goal	🖌 Goal Met	Belov	w Goal

* State Avg based on 7 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	29	71	-59%	▼
Admits	-	37	-100%	▼
Discharges	-	43	-100%	▼
Service Hours	-	36	-100%	•
Social Rehab/PHP/IOP Days	0	328	-100%	▼

Data Submission Quality

۲

Data Entry	Ac	tual	State Avg
Valid NOMS Data		N/A	95%
Valid TEDS Data		N/A	97%
On-Time Periodic	Ac	tual	State Avg
6 Month Updates		0%	0%
Cooccurring	Ac	tual	State Avg
MH Screen Complete		N/A	91%
SA Screen Complete		N/A	91%
Diagnosis	Ac	tual	State Ava

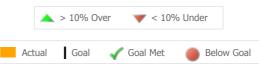
Diagnosis	Actual	State Avg
🞻 Valid Axis I Diagnosis	100%	100%
🗸 Valid Axis V GAF Score	100%	100%

Data Submitted to DMHAS by Month

		Jui	Aug	Seb	70 MONUS Submitted
Admission	S				0%
Discharge	5				0%
Services					33%
		1 or mo	re Reco	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	50%	52%	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%	67%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested		16	55%	75%	82%	-20%
Self Help		7	24%	60%	42%	-36%
Employed		4	14%	50%	22%	-36%
Abstinence/Reduced Drug Use		5	17%	55%	47%	-38%
Stable Living Situation	· · · ·	13	45%	95%	80%	-50%
Improved/Maintained Axis V GAF Score	• I '	2	7%	75%	46%	-68%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		0	0%	90%	34%	N/A



* State Avg based on 50 Active Standard IOP Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	53	95	-44%	▼
Admits	-	35	-100%	▼
Discharges	-	42	-100%	▼
Service Hours	-	260	-100%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	94%
Valid TEDS Data	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%
Diagnosis	Actual	State Avg

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

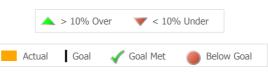
Data Submitted to DMHAS by Month

	· · ·	
Admissions		0%
Discharges		0%
Services		0%

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	
Abstinence/Reduced Drug Use		13	25%	55%	46%	-30%	
Not Arrested		23	43%	75%	80%	-32%	
Employed		9	17%	50%	39%	-33%	
Self Help	<u> </u>	13	25%	60%	28%	-35%	
Stable Living Situation		22	42%	95%	77%	-53%	
Improved/Maintained Axis V GAF Score	• I [·]	3	6%	75%	37%	-69%	
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

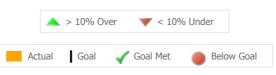
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

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 Subr	nitted to DMHAS



* State Avg based on 0 Active Naltrexone Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	139	6	2217%	
Admits	29	5	480%	
Discharges	-	-		
Service Hours	-	-		

Data Submission Quality

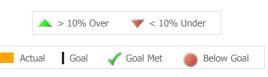
	Data Entry		Actual	State Avg
\checkmark	Valid NOMS Data		100%	94%
	Valid TEDS Data		99%	100%
	On-Time Periodic		Actual	State Avg
	6 Month Updates		0%	39%
		•		
	Cooccurring		Actual	State Avg
\checkmark	MH Screen Complete		100%	86%
\checkmark	SA Screen Complete		100%	100%
J				
	Diagnosis		Actual	State Avg

🞻 Valid Axis I Diagnosis	99%	99%
Valid Axis V GAF Score	99%	93%

Data Submitted to DMHAS by Month

	Jui	Aug	JCP	70 FIORITIS Submitted
Admissions				100%
Discharges				0%
Services				0%

1 or more Records Submitted to DMHAS



* State Avg based on 5 Active Buprenorphine Maintenance Programs

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

Data	Submitted	to	DMHAS	hv	Month
Dutu	Submitted			U y	

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
	1 or mo	ore Reco	rds Subr	nitted to DMHAS



* State Avg based on 0 Active Consultation Programs

Forensic SA - Case Management - Standard Case Management

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	14	86%	
Admits	7	8	-13%	▼
Discharges	2	3	-33%	▼
Service Hours	59	58	1%	

Data Submission Quality

Data Entry	Actual	State Avg
√ Valid NOMS Data	100%	100%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	21%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted		
Admissions				100%		
Discharges				67%		
Services				33%		
1 or more Records Submitted to DMHAS						

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		2	100%	50%	85%	50%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🗸 Social Support		22	85%	60%	69%	25%	
Self Help		15	58%	60%	54%	-2%	
Employed		4	15%	20%	9%	-5%	
Stable Living Situation		16	62%	80%	36%	-18%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		8	33%	90%	71%	-57%	-

	^ >	10% Ove	r	▼ < 10%	0 Unde	er	
Actu	al	Goal	«	Goal Met		Belov	w Goal

* State Avg based on 8 Active Standard Case Management Programs

Forensic SA - Case Management - Standard Case Management

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	30	54	-44%	▼
Admits	3	19	-84%	▼
Discharges	15	21	-29%	▼
Service Hours	59	72	-17%	•

Data Submission Quality

Data Entry	Actua	I State Avg
√ Valid NOMS Data	100%	b 100%
On-Time Periodic	Actua	I State Avg
6 Month Updates	0%	5 21%

Data Submitted to DMHAS by Month

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
V	Treatment Completed Successfully		15	100%	50%	85%	50%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		25	83%	60%	69%	23%	
	Self Help		13	43%	60%	54%	-17%	-
	Employed		0	0%	20%	9%	-20%	-
	Stable Living Situation		0	0%	80%	36%	-80%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		11	73%	90%	71%	-17%	-

4	>	10% Over	▼ <	10% Unde	r
Actua	al	Goal	🧹 Goal Me	t 🔵	Below Goal

* State Avg based on 8 Active Standard Case Management Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	430	453	-5%
Admits	161	142	13% 🔺
Discharges	181	174	4%

Data Submitted to DMHAS by Month Jul Aug Sep % Months Submitted Admissions 100% Discharges 100%

1 or more	Records	Submitted	to	DMHAS	

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

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

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	818	769	6%
Admits	171	153	12% 🔺
Discharges	187	143	31% 🔺

Data Submitted to DMHAS by Month Jul Aug Sep % Months Submitted Admissions 100% Discharges 100%

es		100%	
	1 or more Records Submitted to DMH	AS	

	> 10% 0	/er	▼ < 109	% Under	
Actual	Goal	\checkmark	Goal Met	Belo	w Goal

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

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,242	800	55%	
Admits	246	318	-23%	▼
Discharges	142	390	-64%	▼
Service Hours	1,793	2,060	-13%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		93%	94%
Valid TEDS Data		81%	90%
On-Time Periodic		Actual	State Avg
6 Month Updates		2%	19%
Cooccurring		Actual	State Avg
MH Screen Complete		100%	96%
SA Screen Complete		100%	100%
Diagnosis	•	Actual	State Avg

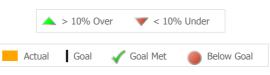
🗸 Valid Axis I Diagnosis	99%	99%
🖋 Valid Axis V GAF Score	99%	96%

Data Submitted to DMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		66	46%	50%	53%	-4%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested		1,042	84%	75%	80%	9%
Employed		462	37%	50%	39%	-13%
Abstinence/Reduced Drug Use	İ	501	40%	55%	46%	-15%
Stable Living Situation		944	76%	95%	77%	-19%
Self Help	· · ·	316	25%	60%	28%	-35%
Improved/Maintained Axis V GAF Score	— ·	183	22%	75%	37%	-53%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		402	37%	90%	48%	-53%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		209	85%	75%	64%	10%



* State Avg based on 113 Active Standard Outpatient Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2,015	1,332	51%	
Admits	328	505	-35%	▼
Discharges	180	465	-61%	▼
Service Hours	2,537	4,415	-43%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	93%	94%
Valid TEDS Data	73%	90%
On-Time Periodic	 Actual	State Avg
6 Month Updates	3%	19%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	96%
SA Screen Complete	100%	100%
Diagnosis	 Actual	State Avg

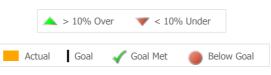
🞻 Valid Axis I Diagnosis	100%	99%
Valid Axis V GAF Score	100%	96%

Data Submitted to DMHAS by Month

	Jul	riag	ocp	70 TIONENS Submitteeu
Admissions				100%
Discharges				100%
Services				100%
	1 or mo	re Reco	rds Subn	nitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		114	63%	50%	53%	13%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		1,491	74%	75%	80%	-1%	
Employed		829	41%	50%	39%	-9%	
Stable Living Situation	· · ·	1,508	75%	95%	77%	-20%	-
Abstinence/Reduced Drug Use	— 1 [·]	677	34%	55%	46%	-21%	-
Self Help		715	35%	60%	28%	-25%	-
Improved/Maintained Axis V GAF Score	—	251	16%	75%	37%	-59%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		535	29%	90%	48%	-61%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		287	88%	75%	64%	13%	



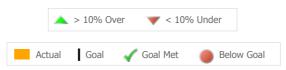
* State Avg based on 113 Active Standard Outpatient Programs

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

Data	Subm	itted	to	DMHAS by Month
	Jul	Aug	Sep	% Months Submitted
ducioniana				00/

Admissions		0%
Discharges		0%
	1 or more Records Submitted to DMHAS	

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* State Avg based on 7 Active Outreach & Engagement Programs