Wellmore
Waterbury, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	805	816	-1%
	Admits	1,138	1,077	6%
	Discharges	1,072	1,153	-7%
	Service Hours	3,357	3,762	-11% ▼
	Bed Days	10,473	11,236	-7%

▲ > 10% Over 1 Yr Ago ▼ > 10% Under 1Yr Ago

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	629	56.7%
	Residential Services	266	24.0%
	Case Management	88	7.9%
Forensic SA			
	Case Management	76	6.9%
Other			
	Other	50	4.5%

Consumer Satisfaction Survey

(Based on 612 FY18 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Quality and Appropriateness		97%	80%	93%
✓ Overall		97%	80%	91%
✓ Participation in Treatment		97%	80%	92%
✓ Respect		94%	80%	91%
✓ General Satisfaction		94%	80%	92%
✓ Access		94%	80%	88%
✓ Outcome		92%	80%	83%
✓ Recovery		92%	80%	79%

Satisfied % | Goal % | 0-80% | 80-100% | ✓ Goal Met | Under Goal

Client Demographics

Age	#	%	State Avg
18-25	91	11%	12%
26-34	264	33%	24%
35-44	209	26%	21%
45-54	153	19%	20%
55-64	72	9%	17%
65+	12	1%	6%

Gender	#	%	State Avg
Male	626	78% ▲	60%
Female	179	22% ▼	40%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	575	71%	71%
Hisp-Puerto Rican	173	21%	13%
Hispanic-Other	48	6%	7%
Hispanic-Mexican	6	1%	1%
Hispanic-Cuban	3	0%	0%
Unknown			9%

Race	#	%	State Avg
White/Caucasian	364	45% ▼	63%
Black/African American	228	28% ▲	16%
Other	204	25% ▲	14%
Am. Indian/Native Alaskan	5	1%	1%
Asian	3	0%	1%
Hawaiian/Other Pacific Islander	1	0%	0%
Multiple Races			1%
Unknown			5%

Unique Clients | State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

Case Management 931480
Wellmore
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	88	164	-46%	▼
Admits	77	109	-29%	▼
Discharges	64	133	-52%	▼
Service Hours	494	536	-8%	

Data Submission Quality

	Data Entry	Actual	State Avg
✓	Valid NOMS Data	100%	90%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	50%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		62	97%	50%	61%	47%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Employed		53	60%	20%	29%	40%	▲
✓	Self Help		89	100%	60%	61%	40%	▲
✓	Stable Living Situation		85	96%	80%	78%	16%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		25	100%	90%	81%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 8 Active Standard Case Management Programs

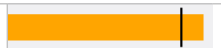
Emergency Shelter-CSSD 93145
Wellmore
Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	25	23	9%	
Admits	22	20	10%	
Discharges	24	20	20%	▲
Bed Days	702	675	4%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		23	96%	85%	80%	11%	▲

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
●	Avg Utilization Rate		3	32 days	0.1	85%	90%	76%	-5%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%

1 or more Records Submitted to DMHAS

* State Avg based on 12 Active Recovery House Programs

Emergency Shelter-DMHAS 931450
Wellmore
Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	170	159	7%
Admits	171	176	-3%
Discharges	171	171	0%
Bed Days	2,682	3,116	-14%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		143	84%	85%	80%	-1%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		15	16 days	0.1	65%	90%	76%	-25%

< 90% 90-110% >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 12 Active Recovery House Programs

Integrated Primary & BH Care - PIC
Wellmore
Other - Other - Integrated Primary Care

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	50		
Admits	50	-	
Discharges	2	-	
Service Hours	125	-	

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	96%
✓ SA Screen Complete	100%	96%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	64%
✓ Valid Axis V GAF Score	98%	64%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions							■	■	■	33%
Discharges									■	11%
Services								■	■	22%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 6 Active Integrated Primary Care Programs

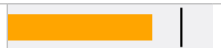
Morris House-DMHAS 931404
Wellmore
Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	83	84	-1%
Admits	65	67	-3%
Discharges	65	67	-3%
Bed Days	5,314	5,637	-6%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		46	71%	85%	80%	-14%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		23	93 days	0.2	84%	90%	76%	-6%

< 90% 90-110% >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 12 Active Recovery House Programs

Post-Release Transitional Forensic Case Management
Wellmore
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	23	13%	▲
Admits	24	19	26%	▲
Discharges	21	23	-9%	
Service Hours	140	118	19%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	98%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	4%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		17	81%	50%	79%	31%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		22	85%	60%	86%	25%	▲
✓ Employed		9	35%	20%	11%	15%	▲
✓ Stable Living Situation		22	85%	80%	35%	5%	
● Self Help		15	58%	60%	75%	-2%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		5	100%	90%	57%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 8 Active Standard Case Management Programs

Pre-Release Transitional Forensic Case Management
Wellmore
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	74	77	-4%	
Admits	63	58	9%	
Discharges	55	47	17%	▲
Service Hours	413	295	40%	▲

Data Submission Quality

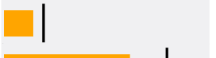
Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	98%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	4%

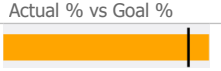
Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		53	96%	50%	79%	46%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		54	73%	60%	86%	13%	▲
● Self Help		43	58%	60%	75%	-2%	
● Employed		11	15%	20%	11%	-5%	
● Stable Living Situation		46	62%	80%	35%	-18%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		19	100%	90%	57%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■		■		■	■	■	■	78%
Discharges	■	■	■	■	■	■	■	■	■	100%
Services	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 8 Active Standard Case Management Programs

Waterbury Outpatient 931204
Wellmore
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	629	571	10%	▲
Admits	643	591	9%	
Discharges	646	603	7%	
Service Hours	2,184	2,573	-15%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	92%
✓ Valid TEDS Data	88%	88%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	25%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	95%
✓ SA Screen Complete	100%	99%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%
✓ Valid Axis V GAF Score	100%	97%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully	462	72%	50%	54%	22%	▲

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested	672	96%	75%	83%	21%	▲
✓ Abstinence/Reduced Drug Use	407	58%	55%	51%	3%	
● Stable Living Situation	628	89%	95%	81%	-6%	
● Employed	221	31%	50%	41%	-19%	▼
● Self Help	268	38%	60%	31%	-22%	▼
● Improved/Maintained Axis V GAF Score	288	45%	75%	57%	-30%	▼

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services	55	96%	90%	60%	6%

Service Engagement

Outpatient	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ 2 or more Services within 30 days	568	97%	75%	65%	22%	▲

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

Women/Children InterRes 931405
Wellmore
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 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	29	25	16%	▲
Admits	23	19	21%	▲
Discharges	24	24	0%	
Bed Days	1,775	1,808	-2%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	95%
Valid TEDS Data	98%	100%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	3%

Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	96%
✓ SA Screen Complete	100%	96%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	100%
✓ Valid Axis V GAF Score	100%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										78%
Discharges										89%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		16	67%	70%	75%	-3%
✓ No Re-admit within 30 Days of Discharge		20	87%	85%	93%	2%
● Follow-up within 30 Days of Discharge		12	75%	90%	68%	-15% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		23	79%	70%	80%	9%
● Improved/Maintained Axis V GAF Score		21	84%	95%	78%	-11% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
● Avg Utilization Rate		8	118 days	0.2	81%	90%	103%	-9%

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 28 Active Intermediate/Long Term Res.Tx 3.5 Programs