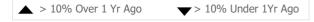
Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Provider Activity

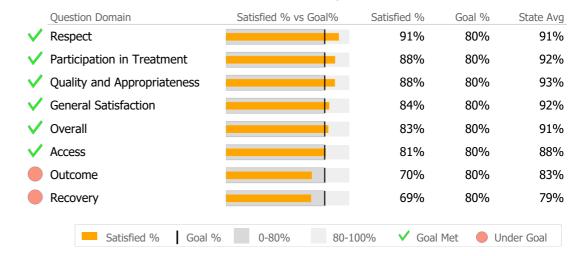




Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	4,374	60.6%
	Intake	560	7.8%
Medicati	on Assisted Treatment	176	2.4%
	Case Management	66	0.9%
	Consultation	24	0.3%
	IOP	21	0.3%
Forensic SA			
Foren	sics Community-based	1,916	26.5%
	Case Management	80	1.1%

Consumer Satisfaction Survey (Based on 228 FY18 Surveys)



Client Demographics

Age	#	%	State Avg	Gender		# %	State Avg
18-25	1,320	19%	12%	Male	4,31	2 62%	60%
26-34	2,107	30%	24%	Female	2,62	8 38%	40%
35-44	1,499	22%	21%	Transgender			0%
45-54	1,086	16%	20%				
55-64	716	10%	17%				
65+	209	3%	6%	Race		# %	State Avg
				White/Caucasian	3,85	5 55%	63%
Ethnicity	#	%	State Avg	Other	1,17	1 17%	14%
Unknown 📙	2,905	42%	▲ 9%	Black/African American	1,07	7 15%	16%
Non-Hispanic	2,636	38%	▼ 71%	Unknown	50	0 7%	5%
Hisp-Puerto Rican	1,149	17%	13%	Multiple Races	17	4 3%	1%
Hispanic-Other	212	3%	7%	Am. Indian/Native Alaskan	7	7 1%	1%
ľ				Asian	6	6 1%	1%
Hispanic-Mexican	37	1%	1%	Hawaiian/Other Pacific Islander	3	5 1%	0%
Hispanic-Cuban	16	0%	0%				

▲ > 10% Over State Avg

▼ > 10% Under State Avg

Unique Clients State Avg

Access Line

Wheeler Clinic

Addiction - Intake - Central Intake

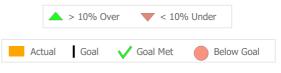
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	560		
Admits	637	-	
Discharges	637	-	

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										78%
Discharges										78%
	1 or mo	ore Recor	ds Subn	nitted to	DMHAS	5				



^{*} State Avg based on 2 Active Central Intake Programs

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	9	12	-25%	lacktriangle
Admits	2	1	100%	•
Discharges	2	6	-67%	•
Service Hours	120	101	19%	•

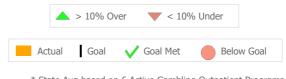
Data Submission Quality

Data Entry	Actu	al State Avg
Valid NOMS Data	889	% 96%
✓ Valid TEDS Data	159	% 40%
On-Time Periodic	Actu	al State Avg
6 Month Updates	140	% 91%
Cooccurring	Actu	ial State Avg
MH Screen Complete	100	% 100%
✓ SA Screen Complete	100	% 100%
•		
Diagnosis	Actu	ial State Avg
✓ Valid Axis I Diagnosis	1000	% 100%
✓ Valid Axis V GAF Score	1000	% 100%
•		

Discharge Outcomes







^{*} State Avg based on 6 Active Gambling Outpatient Programs

Latino Outreach 620296

Wheeler Clinic

Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

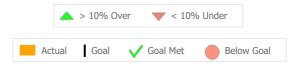
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	66	25	164%	•
Admits	45	13	246%	•
Discharges	5	8	-38%	•
Service Hours	554	448	24%	•

Service Engagement



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										22%
Services										67%
	1 or mo	ore Recor	ds Subn	nitted to	DMHAS					



^{*} State Avg based on 12 Active Outreach & Engagement Programs

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	21	64	-67%	\blacksquare
Admits	-	37	-100%	•
Discharges	-	44	-100%	•
Service Hours	-	37	-100%	•
Social Rehab/PHP/IOP Days	0	332	-100%	▼

Data Submission Quality

	Valid Axis I Diagnosis	95%	100%
	Diagnosis	Actual	State Avg
	SA Screen Complete	N/A	91%
	MH Screen Complete	N/A	91%
	Cooccurring	Actual	State Avg
/	6 Month Updates	0%	0%
	On-Time Periodic	Actual	State Avg
	Valid TEDS Data	N/A	97%
	Valid NOMS Data	N/A	95%
	Data Entry	Actual	State Avg

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	66%	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%	62%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		15	71%	75%	77%	-4%	
Self Help	'	7	33%	60%	42%	-27%	_
Abstinence/Reduced Drug Use		5	24%	55%	64%	-31%	_
Employed		3	14%	50%	28%	-36%	
Stable Living Situation		12	57%	95%	87%	-38%	_
Improved/Maintained Axis V GAF Score	<u> </u>	3	14%	75%	59%	-61%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	63%	N/A	

Data Submitted to DMHAS by Month

✓ Valid Axis V GAF Score



100%

100%



^{*} State Avg based on 48 Active Standard IOP Programs

Addiction - Outpatient - Standard Outpatient

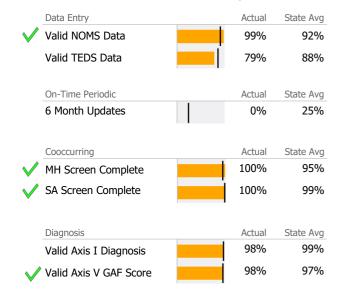
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

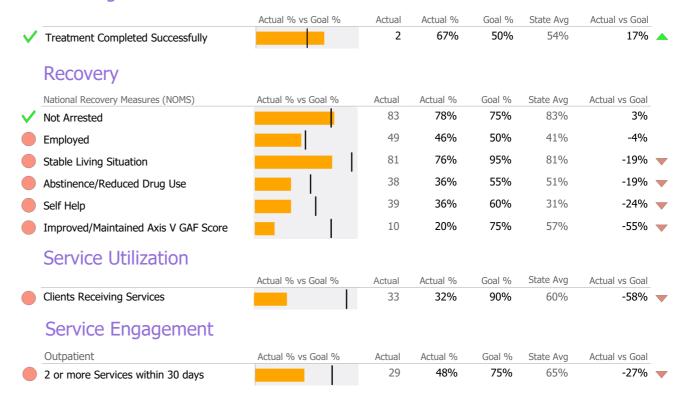
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	107	89	20%	•
Admits	61	35	74%	•
Discharges	3	44	-93%	•
Service Hours	128	266	-52%	•

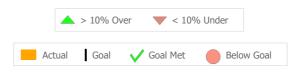
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 113 Active Standard Outpatient Programs

MAT - Naltrexone - Plainville

Wheeler Clinic

Addiction - Medication Assisted Treatment - Naltrexone

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	0			
Admits	-	-		
Discharges	_	_		

Data Submission Quality

SA Screen Complete

Data Sabimosit	ori Quai	icy	
Data Entry		Actual	State Avg
Valid NOMS Data		N/A	79%
Valid TEDS Data		N/A	99%
On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	9%
Cooccurring		Actual	State Avg

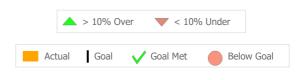
Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		N/A	N/A	50%	56%	N/A	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		N/A	N/A	55%	58%	-55%	
Employed		N/A	N/A	50%	19%	-50%	
Improved/Maintained Axis V GAF Score		N/A	N/A	75%	57%	-75%	
Not Arrested		N/A	N/A	75%	77%	-75%	
Self Help		N/A	N/A	60%	42%	-60%	
Stable Living Situation		N/A	N/A	95%	84%	-95%	

Data Submitted to DMHAS by Month

Jul Aug Sep Oct Nov Dec Jan Feb Mar % Months Submitted Admissions 0% 0% Discharges 1 or more Records Submitted to DMHAS

100%



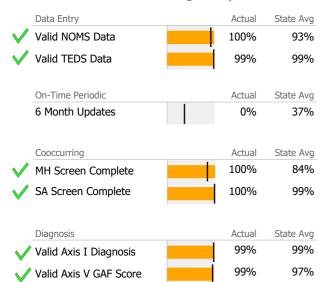
^{*} State Avg based on 8 Active Naltrexone Programs

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	176	91	93%	•
Admits	60	90	-33%	•
Discharges	-	-		
Service Hours	_	_		

Data Submission Quality



Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		N/A	N/A	50%	51%	N/A	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
/	Not Arrested		166	94%	75%	89%	19%	_
	Abstinence/Reduced Drug Use		88	50%	55%	60%	-5%	
	Stable Living Situation		155	88%	95%	87%	-7%	
	Employed		73	41%	50%	33%	-9%	
	Self Help		86	49%	60%	30%	-11%	_
	Improved/Maintained Axis V GAF Score		0	0%	75%	54%	-75%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		0	0%	90%	63%	N/A	

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	5										100%
Discharges	5										0%
Services											0%
		1 or m	ore Reco	rds Subr	nitted to	DMHAS					



^{*} State Avg based on 22 Active Buprenorphine Maintenance Programs

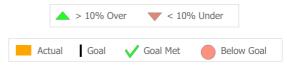
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	24	1	2300%	•
Admits	20	1	1900%	•
Discharges	-	-		
Service Hours	-	_		

Duce	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	1									67%
Discharges										0%
Services										0%
	1 or m	ore Record	ds Submit	tted to	DMHAS					



^{*} State Avg based on 1 Active Consultation Programs

Post-Release Transitional Forensic Case Management

Wheeler Clinic

Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

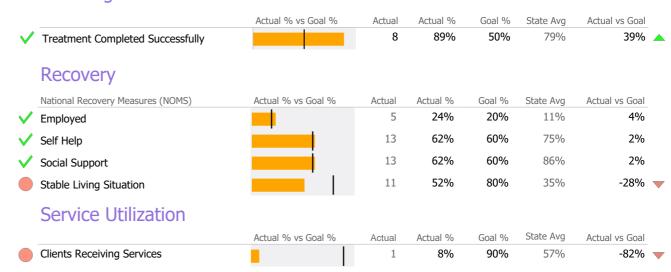
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	21	22	-5%	
Admits	7	18	-61%	•
Discharges	9	9	0%	
Service Hours	98	164	-40%	•

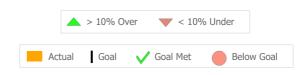
Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	72%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	4%

Discharge Outcomes







^{*} State Avg based on 8 Active Standard Case Management Programs

Pre-Release Transitional Forensic Case Management

Wheeler Clinic

Forensic SA - Case Management - Standard Case Management

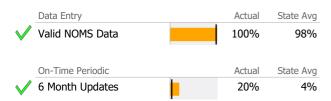
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

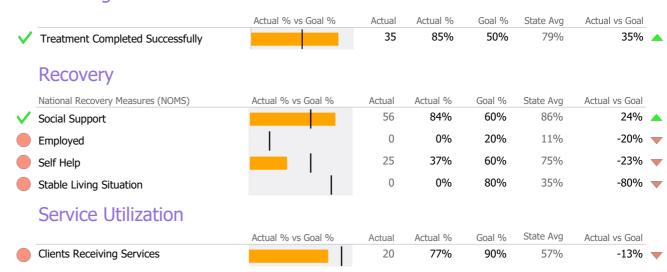
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	67	65	3%	
Admits	40	30	33%	•
Discharges	41	51	-20%	•
Service Hours	229	154	49%	•

Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 8 Active Standard Case Management Programs

PTIP - 2024 E. Main St. 620713

Wheeler Clinic

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

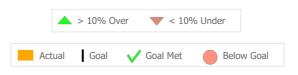
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	760	724	5%	
Admits	495	425	16%	•
Discharges	499	443	13%	•

			OHIL	Dy I'I		וויוט	LU	IILLCU	Jubii	Data
% Months Submitted	Mar	Feb	Jan	Dec	Nov	Oct	Sep	Aug	Jul	
100%										Admissions
100%										Discharges
				S	DMHA	mitted to	ds Sub	ore Record	1 or m	



^{*} State Avg based on 15 Active Pre-trial Intervention Programs Programs

PTIP-75 N. Mountain Rd. 620707

Wheeler Clinic

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

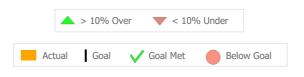
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,158	1,122	3%	
Admits	506	512	-1%	
Discharges	503	443	14%	•

	utu	Jub		ittuu	CO			D y	1.16	ווע			
		J	ul	Aug	Sep	Oc	t Nov	Dec		Jan	Feb	Mar	% Months Submitted
Admiss	ions												100%
Discha	rges												100%
		1 o	r mo	re Recor	ds Sul	mitted	to DMHA	AS					



^{*} State Avg based on 15 Active Pre-trial Intervention Programs Programs

Data Entry

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

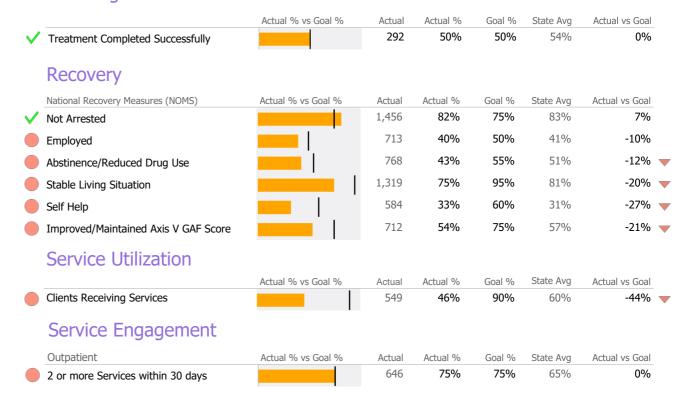
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,760	1,318	34%	•
Admits	873	878	-1%	
Discharges	582	611	-5%	
Service Hours	5,799	4,780	21%	•

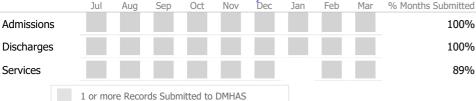
Data Submission Quality

Valid NOMS Data	84%	92%
Valid TEDS Data	71%	88%
On-Time Periodic	Actual	State Avg
6 Month Updates	17%	25%
Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	95%
✓ SA Screen Complete	100%	99%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	97%	99%
✓ Valid Axis V GAF Score	99%	97%

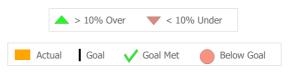
Discharge Outcomes



Data Submitted to DMHAS by Month



State Avg



^{*} State Avg based on 113 Active Standard Outpatient Programs

Data Entry

Valid NOMS Data

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

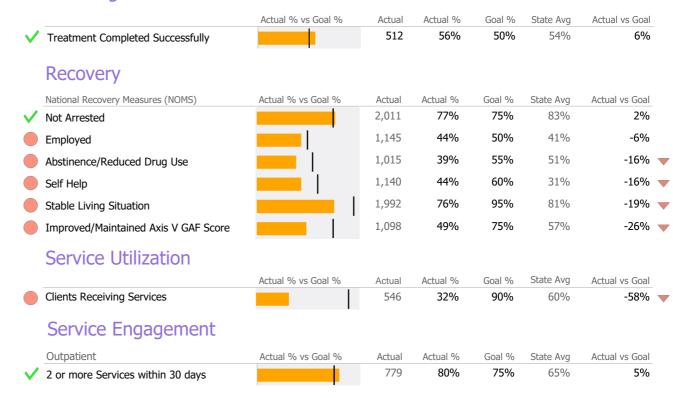
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2,584	2,227	16%	•
Admits	990	1,470	-33%	•
Discharges	914	748	22%	•
Service Hours	7,235	9,328	-22%	•

Data Submission Quality

valia ivoi lo bata	0170	32 70
Valid TEDS Data	61%	88%
On-Time Periodic	Actual	State Avg
6 Month Updates	9%	25%
Consequence	A -t1	Charles Asses
Cooccurring	Actual	State Avg
✓ MH Screen Complete	100%	95%
✓ SA Screen Complete	100%	99%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	97%	99%
✓ Valid Axis V GAF Score	100%	97%

Discharge Outcomes



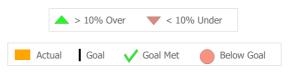
Data Submitted to DMHAS by Month

	Jı	ıl	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions											100%
Discharges											100%
Services											89%
	1 or	more	e Reco	rds Sub	mitted	to DMH/	AS				

State Avg

92%

81%



^{*} State Avg based on 113 Active Standard Outpatient Programs

SOR - HCWH-Bristol

Wheeler Clinic

Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - March 2019 (Data as of Jun 25, 2019)

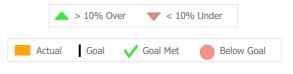
Program Activity

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%
	1 0" "	ara Daga	rda Cubr	aittad ta	DMHAC					

1 or more Records Submitted to DMHAS



^{*} State Avg based on 12 Active Outreach & Engagement Programs