SCADD
Lebanon, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2019 - June 2020   (Data as of Oct 19, 2020)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	3,098	3,079	1%	
	Admits	4,068	4,240	-4%	
	Discharges	4,434	3,967	12%	▲
	Service Hours	9,763	13,205	-26%	▼
	Bed Days	45,819	49,321	-7%	
	S.Rehab/PHP/IOP	2,010	39,439	-95%	▼

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Addiction				
	Outpatient		1,464	38.0%
	Residential Services		1,360	35.3%
	IOP		257	6.7%
	Medication Assisted Treatment		76	2.0%
Forensic SA				
	Forensics Community-based		550	14.3%
	Case Management		143	3.7%

Consumer Satisfaction Survey   (Based on 318 FY19 Surveys)

Question Domain		Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Participation in Treatment		88%	80%	92%
✓	Quality and Appropriateness		87%	80%	93%
✓	Respect		85%	80%	91%
✓	Overall		84%	80%	91%
✓	Recovery		80%	80%	79%
⬤	General Satisfaction		78%	80%	92%
⬤	Outcome		74%	80%	83%
⬤	Access		74%	80%	88%

Legend: ▬ Satisfied % | Goal % ▬ 0-80% ▬ 80-100% ✓ Goal Met ⬤ Under Goal

Client Demographics

Age

Age		#	%	State Avg
18-25		379	12%	11%
26-34		1,008	33%	23%
35-44		817	26%	22%
45-54		512	17%	20%
55-64		341	11%	18%
65+		41	1%	6%

Gender

Gender		#	%		State Avg
Male		2,309	75%	▲	60%
Female		786	25%	▼	40%
Transgender					0%

Ethnicity

Ethnicity		#	%	State Avg
Non-Hispanic		2,384	77%	69%
Hisp-Puerto Rican		339	11%	11%
Unknown		246	8%	11%
Hispanic-Other		94	3%	8%
Hispanic-Mexican		26	1%	1%
Hispanic-Cuban		9	0%	0%

Race

Race		#	%	State Avg
White/Caucasian		2,177	70%	62%
Black/African American		477	15%	17%
Other		282	9%	13%
Unknown		84	3%	6%
Am. Indian/Native Alaskan		39	1%	1%
Asian		20	1%	1%
Hawaiian/Other Pacific Islander		13	0%	0%
Multiple Races		6	0%	1%

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

Bank St 922402
SCADD
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	60	53	13%	▲
Admits	52	47	11%	▲
Discharges	51	46	11%	▲
Bed Days	3,294	3,412	-3%	

Data Submission Quality

Data Entry	Actual % vs State	Actual	State Avg
✓ Valid NOMS Data		99%	77%
✓ Valid TEDS Data		100%	95%

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

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	77%
✓ SA Screen Complete		100%	77%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		31	61%	85%	69%	-24%	▼
● No Re-admit within 30 Days of Discharge		41	80%	85%	84%	-5%	
✓ Follow-up within 30 Days of Discharge		29	94%	90%	70%	4%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Abstinence/Reduced Drug Use		55	92%	70%	88%	22%	▲
● Improved/Maintained Axis V GAF Score		34	67%	75%	88%	-8%	
● Employed		14	23%	60%	48%	-37%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		10	71 days	0.1	90%	90%	90%	0%

▢ < 90%   ▢ 90-110%   ▢ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 9 Active Transitional/Halfway House 3.1 Programs

Coit St Women-DMHAS 922401
SCADD
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	48	64	-25%	▼
Admits	39	57	-32%	▼
Discharges	39	58	-33%	▼
Bed Days	3,369	3,367	0%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		15	38%	85%	69%	-47%	▼
✓	No Re-admit within 30 Days of Discharge		35	90%	85%	84%	5%	
🔴	Follow-up within 30 Days of Discharge		13	87%	90%	70%	-3%	

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	100%	77%
✓	Valid TEDS Data	100%	95%

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

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	77%
✓	SA Screen Complete	100%	77%

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

Recovery

National Recovery Measures (NOMS)

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		46	94%	70%	88%	24%	▲
✓	Improved/Maintained Axis V GAF Score		38	97%	75%	88%	22%	▲
🔴	Employed		22	45%	60%	48%	-15%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Avg Utilization Rate		11	107 days	0.1	84%	90%	90%	-6%

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													92%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 9 Active Transitional/Halfway House 3.1 Programs

Detox 922600
SCADD
Addiction - Residential Services - Medically Monitored Detox 3.7D

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	968	902	7%
Admits	1,286	1,209	6%
Discharges	1,288	1,210	6%
Bed Days	5,527	5,453	1%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		844	66%	80%	69%	-14%	▼
No Re-admit within 30 Days of Discharge		995	77%	85%	79%	-8%	
Follow-up within 30 Days of Discharge		484	57%	90%	54%	-33%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		93%	82%
✔ Valid TEDS Data		100%	95%

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

Co-occurring		Actual	State Avg
✔ MH Screen Complete		98%	97%
✔ SA Screen Complete		98%	97%

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

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization Rate		20	4 days	0.0	76%	90%	94%	-14%	▼

☐ < 90%	☐ 90-110%	☐ >110%

Data Submitted to DMHAS by Month

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

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

☐ Actual | Goal   ✔ Goal Met   ● Below Goal
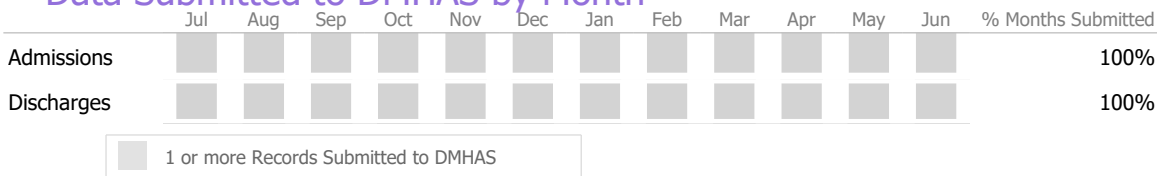
* State Avg based on 8 Active Medically Monitored Detox 3.7D Programs

Lebanon Pines-CSSD 922702
SCADD
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	83	101	-18%	▼
Admits	61	84	-27%	▼
Discharges	75	80	-6%	
Bed Days	6,938	7,461	-7%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		57	76%	70%	76%	6%	
✓	No Re-admit within 30 Days of Discharge		70	93%	85%	92%	8%	
●	Follow-up within 30 Days of Discharge		37	65%	90%	71%	-25%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		98%	83%
✓ Valid TEDS Data		100%	94%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	13%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	86%
✓ SA Screen Complete		100%	86%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		76	92%	70%	73%	22%	▲
●	Improved/Maintained Axis V GAF Score		62	83%	95%	88%	-12%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
●	Avg Utilization Rate		22	116 days	0.2	86%	90%	93%	-4%
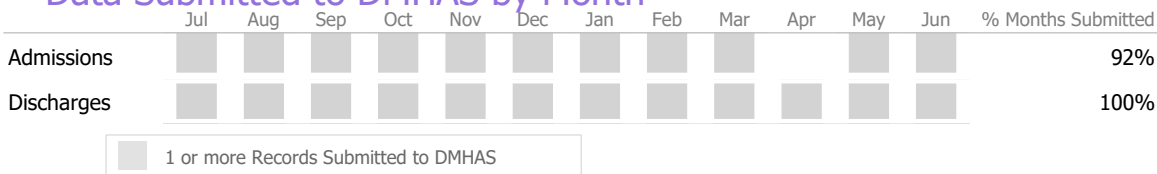
▢ < 90%	▢ 90-110%	▢ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													92%
Discharges													100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▢ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Lebanon Pines-DMHAS 922701
SCADD
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	366	415	-12%	▼
Admits	306	357	-14%	▼
Discharges	352	361	-2%	
Bed Days	22,467	25,305	-11%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Treatment Completed Successfully		252	72%	70%	76%	2%
✓	No Re-admit within 30 Days of Discharge		310	88%	85%	92%	3%
●	Follow-up within 30 Days of Discharge		205	81%	90%	71%	-9%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		95%	83%
✓ Valid TEDS Data		100%	94%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	13%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		98%	86%
✓ SA Screen Complete		98%	86%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		282	76%	70%	73%	6%	
●	Improved/Maintained Axis V GAF Score		290	82%	95%	88%	-13%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
●	Avg Utilization Rate		76	79 days	0.1	81%	90%	93%	-9%
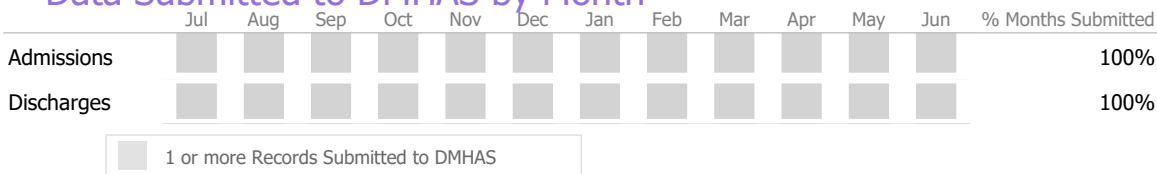
	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Main St Men 922403
SCADD
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	75	73	3%
Admits	63	62	2%
Discharges	67	62	8%
Bed Days	4,224	4,323	-2%

Data Submission Quality

Data Entry	Actual % vs State Avg	Actual	State Avg
✓ Valid NOMS Data		97%	77%
✓ Valid TEDS Data		100%	95%

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

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	77%
✓ SA Screen Complete		100%	77%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Treatment Completed Successfully		47	70%	85%	69%	-15% ▼
✓	No Re-admit within 30 Days of Discharge		61	91%	85%	84%	6%
🔴	Follow-up within 30 Days of Discharge		37	79%	90%	70%	-11% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		73	97%	70%	88%	27% ▲
✓ Employed		50	67%	60%	48%	7%
✓ Improved/Maintained Axis V GAF Score		51	76%	75%	88%	1%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Avg Utilization Rate		13	73 days	0.1	89%	90%	90%	-1%

🟦 < 90%	⬜ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 9 Active Transitional/Halfway House 3.1 Programs

New London IOP 922750
SCADD
Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	191	220	-13% ▼
Admits	195	234	-17% ▼
Discharges	209	223	-6%
Service Hours	95	16	
Social Rehab/PHP/IOP Days	1,539	1,602	-4%

Data Submission Quality

Data Entry	Actual % vs State Avg	Actual	State Avg
Valid NOMS Data		90%	92%
✓ Valid TEDS Data		100%	94%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	2%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		96%	90%
✓ SA Screen Complete		100%	90%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		116	56%	50%	64%	6%
● Follow-up within 30 Days of Discharge		73	63%	90%	65%	-27% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		130	60%	55%	65%	5%
✓ Not Arrested		165	76%	75%	79%	1%
● Improved/Maintained Axis V GAF Score		150	72%	75%	77%	-3%
● Stable Living Situation		192	88%	95%	88%	-7%
● Employed		86	40%	50%	27%	-10%
● Self Help		73	34%	60%	35%	-26% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		7	78%	90%	70%	-12% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 56 Active Standard IOP Programs

New London Outpatient 922407
SCADD
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	980	885	11%	▲
Admits	931	894	4%	
Discharges	996	773	29%	▲
Service Hours	5,396	8,335	-35%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	91%	90%
✔	Valid TEDS Data	99%	89%

On-Time Periodic		Actual	State Avg
✔	6 Month Updates	100%	20%

Co-occurring		Actual	State Avg
✔	MH Screen Complete	96%	88%
✔	SA Screen Complete	98%	96%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		393	39%	50%	48%	-11%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Abstinence/Reduced Drug Use		803	71%	55%	53%	16%	▲
✔	Not Arrested		883	78%	75%	82%	3%	
✔	Employed		613	54%	50%	40%	4%	
🔴	Stable Living Situation		993	88%	95%	81%	-7%	
🔴	Improved/Maintained Axis V GAF Score		487	48%	75%	56%	-27%	▼
🔴	Self Help		279	25%	60%	27%	-35%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Clients Receiving Services		135	96%	90%	62%	6%	

Service Engagement

	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		502	62%	75%	66%	-13%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 117 Active Standard Outpatient Programs

Norwich IOP 922350
SCADD
Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	72	192	-63%	▼
Admits	72	191	-62%	▼
Discharges	79	203	-61%	▼
Service Hours	2	19	-89%	▼
Social Rehab/PHP/IOP Days	471	37,837	-99%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	84%	92%
✓	Valid TEDS Data	100%	94%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	2%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	98%	90%
✓	SA Screen Complete	99%	90%

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

Discharge Outcomes

	Measure	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		52	66%	50%	64%	16%	▲
🔴	Follow-up within 30 Days of Discharge		28	54%	90%	65%	-36%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		46	58%	55%	65%	3%	
✓	Stable Living Situation		78	99%	95%	88%	4%	
🔴	Employed		37	47%	50%	27%	-3%	
🔴	Improved/Maintained Axis V GAF Score		55	70%	75%	77%	-5%	
🔴	Not Arrested		35	44%	75%	79%	-31%	▼
🔴	Self Help		13	16%	60%	35%	-44%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		N/A	N/A	90%	70%	N/A	▼

Data Submitted to DMHAS by Month
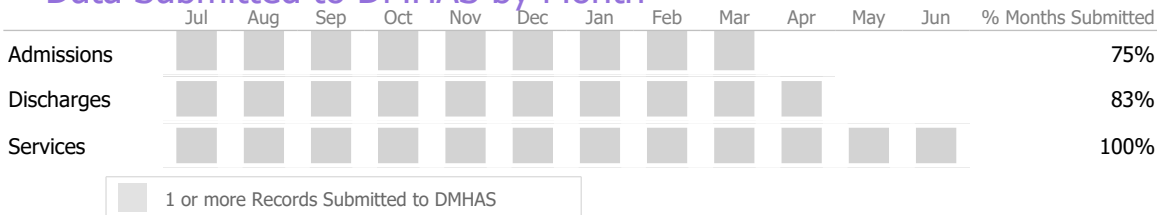
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													75%
Discharges													83%
Services													100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal ✓ Goal Met 🔴 Below Goal

* State Avg based on 56 Active Standard IOP Programs

Norwich Outpatient 922200
SCADD
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	571	473	21%	▲
Admits	525	467	12%	▲
Discharges	631	421	50%	▲
Service Hours	3,180	3,960	-20%	▼

Data Submission Quality

Data Entry		Actual	State Avg
	Valid NOMS Data	88%	90%
✓	Valid TEDS Data	99%	89%

On-Time Periodic		Actual	State Avg
	6 Month Updates	N/A	20%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	92%	88%
✓	SA Screen Complete	96%	96%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		229	36%	50%	48%	-14%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Abstinence/Reduced Drug Use		436	69%	55%	53%	14%	▲
✓	Employed		325	52%	50%	40%	2%	
🔴	Stable Living Situation		566	90%	95%	81%	-5%	
🔴	Not Arrested		371	59%	75%	82%	-16%	▼
🔴	Improved/Maintained Axis V GAF Score		315	50%	75%	56%	-25%	▼
🔴	Self Help		143	23%	60%	27%	-37%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		N/A	N/A	90%	62%	N/A	▼

Service Engagement

	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		333	68%	75%	66%	-7%	

Data Submitted to DMHAS by Month
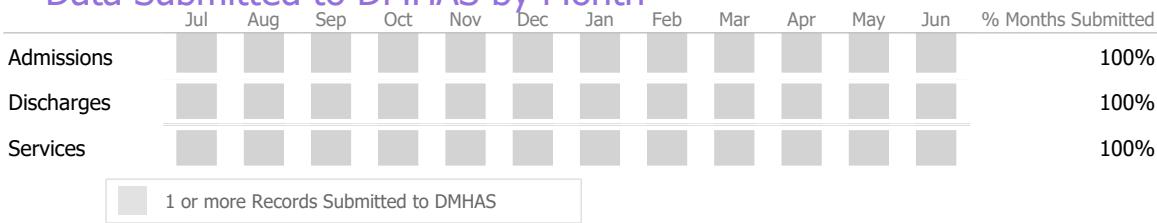
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Discharges	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%
Services	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual   │ Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 117 Active Standard Outpatient Programs

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

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	81	68	19%	▲
Admits	71	65	9%	
Discharges	76	51	49%	▲
Service Hours	613	721	-15%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		19	25%	50%	55%	-25%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Self Help		86	97%	60%	72%	37%	▲
✔	Social Support		87	98%	60%	85%	38%	▲
✔	Employed		31	35%	20%	15%	15%	▲
🔴	Stable Living Situation		67	75%	80%	51%	-5%	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		98%	99%

On-Time Periodic			Actual	State Avg
✔	6 Month Updates		100%	14%

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		13	100%	90%	38%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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
SCADD
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	124	159	-22% ▼
Admits	83	142	-42% ▼
Discharges	121	117	3%
Service Hours	216	124	74% ▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	99%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	14%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		73	60%	50%	55%	10% ▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		122	96%	60%	85%	36% ▲
✓ Self Help		118	93%	60%	72%	33% ▲
● Employed		13	10%	20%	15%	-10% ▼
● Stable Living Situation		70	55%	80%	51%	-25% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		4	67%	90%	38%	-23% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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

PTIP-Main Street 922705
SCADD
Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	383	442	-13%	▼
Admits	193	270	-29%	▼
Discharges	257	255	1%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢		▢	92%
Discharges	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

◼ Actual | Goal   ✓ Goal Met   ● Below Goal
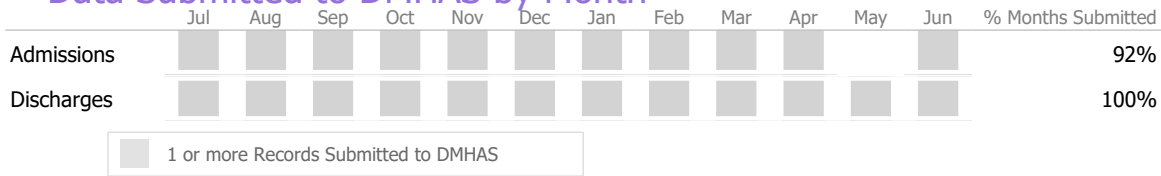
* State Avg based on 16 Active Pre-trial Intervention Programs Programs

SOR E-MAT
SCADD
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	76	32	138%	▲
Admits	52	32	63%	▲
Discharges	56	4	1300%	▲
Service Hours	188	26		

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		20	36%	50%	48%	-14%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Abstinence/Reduced Drug Use		67	84%	55%	55%	29%	▲
✔ Not Arrested		66	82%	75%	77%	7%	
✔ Employed		41	51%	50%	33%	1%	
✔ Stable Living Situation		76	95%	95%	78%	0%	
✔ Improved/Maintained Axis V GAF Score		57	81%	75%	56%	6%	
● Self Help		42	52%	60%	26%	-8%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		21	84%	90%	47%	-6%

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		95%	91%
✔ Valid TEDS Data		100%	95%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	35%

Co-occurring		Actual	State Avg
✔ MH Screen Complete		94%	81%
✔ SA Screen Complete		94%	91%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% 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 24 Active Buprenorphine Maintenance Programs

SOR MAT Employment
SCADD
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6		
Admits	6	-	
Discharges	2	-	
Service Hours	11	-	

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	95%	91%
✓	Valid TEDS Data	100%	95%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	35%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	83%	81%
	SA Screen Complete	83%	91%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Treatment Completed Successfully		0	0%	50%	48%	-50% ▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Abstinence/Reduced Drug Use		5	83%	55%	55%	28% ▲
✓	Stable Living Situation		6	100%	95%	78%	5%
✓	Employed		3	50%	50%	33%	0%
🔴	Not Arrested		4	67%	75%	77%	-8%
🔴	Self Help		2	33%	60%	26%	-27% ▼
🔴	Improved/Maintained Axis V GAF Score		0	0%	75%	56%	-75% ▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Clients Receiving Services		3	75%	90%	47%	-15% ▼

Data Submitted to DMHAS by Month
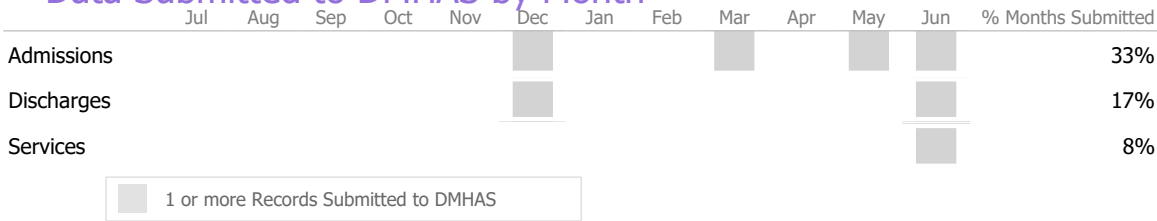
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions						▪			▪		▪	▪	33%
Discharges						▪						▪	17%
Services												▪	8%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 24 Active Buprenorphine Maintenance Programs

SOR-MAT-Naltrexone
SCADD
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

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	86%
Valid TEDS Data		N/A	98%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	0%

Co-occurring		Actual	State Avg
MH Screen Complete		N/A	91%
SA Screen Complete		N/A	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	57%	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%	38%	-55% ▼
Employed		N/A	N/A	50%	28%	-50% ▼
Improved/Maintained Axis V GAF Score		N/A	N/A	75%	54%	-75% ▼
Not Arrested		N/A	N/A	75%	85%	-75% ▼
Self Help		N/A	N/A	60%	22%	-60% ▼
Stable Living Situation		N/A	N/A	95%	83%	-95% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		N/A	N/A	90%	38%	N/A ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 7 Active Naltrexone Programs

STR TPP - New London
SCADD
Forensic SA - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	168	143	17%	▲
Admits	133	129	3%	
Discharges	135	103	31%	▲
Service Hours	63	6		

Service Utilization
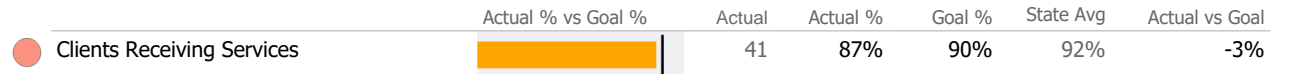
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Clients Receiving Services	▮▮▮	41	87%	90%	92%	-3%

Jail Diversion

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Follow-up Service within 48 hours		0	0%	0%	100%	0%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢		92%
Discharges	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%
Services	▢								▢	▢	▢		42%

▢ 1 or more Records Submitted to DMHAS
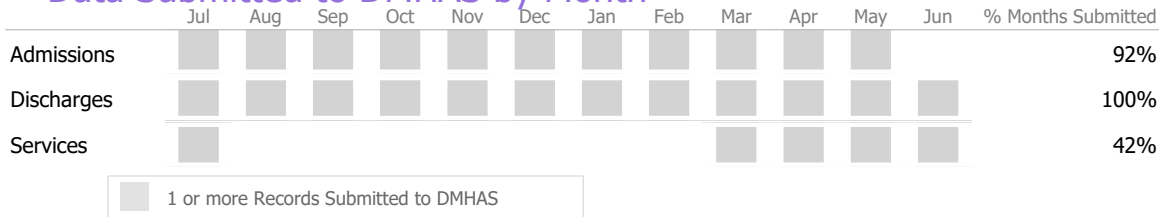
▲ > 10% Over	▼ < 10% Under

▮ Actual		Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 5 Active Court Liaison-Jail Diversion Programs