

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	152	97	57%	▲
	Admits	95	68	40%	▲
	Discharges	73	38	92%	▲
	Service Hours	797	369	116%	▲

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health	Case Management	152	100.0%

Client Demographics

Age	#	%	State Avg
18-25	1	1%	16%
26-34	3	2%	23%
35-44	6	4%	20%
45-54	34	22%	24%
55-64	65	43%	14%
65+	43	28%	4%

Ethnicity	#	%	State Avg
Non-Hispanic	137	90%	75%
Hispanic-Other	8	5%	6%
Hisp-Puerto Rican	6	4%	12%
Unknown	1	1%	6%
Hispanic-Cuban			0%
Hispanic-Mexican			0%

Gender	#	%	State Avg
Male	79	52%	60%
Female	72	48%	40%

Race	#	%	State Avg
White/Caucasian	103	68%	65%
Black/African American	45	30%	17%
Other	2	1%	14%
Unknown	2	1%	3%
Am. Indian/Native Alaskan			1%
Asian			1%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%

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

Survey Data Not Available

Nursing Home Facility Program - 293

Southwestern CT Agency on Aging

Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Sep 16, 2014)

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Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	95%	95%
On-Time Periodic	Actual	State Avg
6 Month Updates	96%	58%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		31	46%	50%	60%	-4%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		146	95%	80%	65%	15% ▲
Social Support		97	63%	60%	48%	3%
Employed		0	0%	20%	5%	-20% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		80	99%	90%	67%	9%

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 37 Active Standard Case Management Programs