McCall Foundation Inc
Torrington, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2017 - September 2017   (Data as of Dec 13, 2017)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	584	344	70%	▲
	Admits	295	182	62%	▲
	Discharges	298	143	108%	▲
	Service Hours	2,526	1,847	37%	▲
	Bed Days	4,267	4,151	3%	

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	452	70.7%
	Residential Services	159	24.9%
	Case Management	25	3.9%
Mental Health			
	Case Management	3	0.5%

Consumer Satisfaction Survey   (Based on 198 FY17 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Quality and Appropriateness		97%	80%	93%
✓	General Satisfaction		96%	80%	92%
✓	Overall		96%	80%	91%
✓	Respect		96%	80%	91%
✓	Participation in Treatment		95%	80%	92%
✓	Access		92%	80%	88%
✓	Outcome		87%	80%	83%
✓	Recovery		82%	80%	79%

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

Client Demographics

Age

Age	#	%		State Avg
18-25	60	10%		11%
26-34	194	33%	▲	22%
35-44	128	22%		19%
45-54	113	19%		22%
55-64	65	11%		19%
65+	24	4%		6%

Gender

Gender	#	%	State Avg
Male	373	64%	58%
Female	211	36%	41%
Transgender			0%

Ethnicity

Ethnicity	#	%		State Avg
Non-Hispanic	543	93%	▲	74%
Hisp-Puerto Rican	31	5%		13%
Unknown	6	1%		6%
Hispanic-Mexican	2	0%		1%
Hispanic-Other	2	0%		7%
Hispanic-Cuban				0%

Race

Race	#	%		State Avg
White/Caucasian	525	90%	▲	65%
Black/African American	27	5%	▼	16%
Other	26	4%		13%
Unknown	4	1%		3%
Am. Indian/Native Alaskan	2	0%		1%
Asian				1%
Multiple Races				1%
Hawaiian/Other Pacific Islander				0%

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

221 Migeon-PILOTS Development 562-551
McCall Foundation Inc
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3	6	-50%	▼
Admits	-	-		
Discharges	-	1	-100%	▼
Service Hours	-	26	-100%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Stable Living Situation		3	100%	85%	89%	15%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		0	0%	90%	89%	N/A	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	99%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	79%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
Services				0%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 53 Active Supportive Housing – Development Programs

58 High St OP 940200
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	428	195	119%	▲
Admits	169	85	99%	▲
Discharges	176	47	274%	▲
Service Hours	2,012	1,385	45%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	98%	95%
✓	Valid TEDS Data	92%	92%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	58%	34%

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

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		31	18%	50%	55%	-32%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		400	91%	75%	82%	16%	▲
✓	Abstinence/Reduced Drug Use		272	62%	55%	52%	7%	
🔴	Stable Living Situation		377	86%	95%	82%	-9%	
🔴	Employed		168	38%	50%	39%	-12%	▼
🔴	Self Help		182	41%	60%	33%	-19%	▼
🔴	Improved/Maintained Axis V GAF Score		200	70%	75%	49%	-5%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		246	94%	90%	60%	4%

Service Engagement

Outpatient		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	2 or more Services within 30 days		87	52%	75%	74%	-23%	▼

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

Carnes Wks Intens Res 940601
McCall Foundation Inc
Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	113	91	24%	▲
Admits	94	73	29%	▲
Discharges	92	71	30%	▲
Bed Days	1,894	1,792	6%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		63	68%	80%	75%	-12%	▼
✔	No Re-admit within 30 Days of Discharge		78	85%	85%	91%	0%	
🔴	Follow-up within 30 Days of Discharge		31	49%	90%	57%	-41%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	100%	98%
✔	Valid TEDS Data	100%	100%

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

Cooccurring		Actual	State Avg
✔	MH Screen Complete	100%	98%
✔	SA Screen Complete	100%	98%

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	
✔	Improved/Maintained Axis V GAF Score		91	99%	75%	85%	24%	▲
✔	Abstinence/Reduced Drug Use		83	73%	70%	56%	3%	
🔴	Self Help		64	56%	60%	75%	-4%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Avg Utilization Rate		20	22 days	0.2	103%	90%	96%	13%	▲

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 SA Intensive Res. Rehabilitation 3.7 Programs

Hotchkiss House-CSSD 94077D
McCall Foundation Inc
Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	19	15	27%	▲
Admits	8	5	60%	▲
Discharges	7	3	133%	▲
Bed Days	1,082	1,078	0%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				67%
Discharges				67%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 13 Active Recovery House Programs

Intermed Res 940400
McCall Foundation Inc
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	28	29	-3% ▼
Admits	14	15	-7%
Discharges	13	15	-13% ▼
Bed Days	1,291	1,281	1%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Treatment Completed Successfully		8	62%	85%	72%	-23% ▼
✓	No Re-admit within 30 Days of Discharge		13	100%	85%	76%	15% ▲
🔴	Follow-up within 30 Days of Discharge		4	50%	90%	57%	-40% ▼

Data Submission Quality

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

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

Cooccurring		Actual	State Avg
✓	MH Screen Complete	100%	97%
✓	SA Screen Complete	100%	97%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%
✓	Valid Axis V GAF Score	100%	88%

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Abstinence/Reduced Drug Use		28	100%	70%	93%	30% ▲
🔴	Employed		14	50%	60%	39%	-10%
✓	Improved/Maintained Axis V GAF Score		13	100%	75%	72%	25% ▲

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		14	96 days	0.5	100%	90%	86%	10%

■ < 90%   ■ 90-110%   ■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 11 Active Transitional/Halfway House 3.1 Programs

Senior Services
McCall Foundation Inc
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	25	32	-22%	▼
Admits	-	2	-100%	▼
Discharges	4	2	100%	▲
Service Hours	419	409	2%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		95%	52%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges	▢	▢	▢	100%
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		4	100%	50%	75%	50%	▲

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Self Help		23	92%	60%	68%	32%	▲
✓	Stable Living Situation		24	96%	80%	84%	16%	▲
●	Employed		2	8%	20%	20%	-12%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Clients Receiving Services		20	95%	90%	70%	5%	

▲ > 10% Over   ▼ < 10% Under

▢ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 14 Active Standard Case Management Programs

Winsted OP 940201
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	7	414%	▲
Admits	10	2	400%	▲
Discharges	6	4	50%	▲
Service Hours	96	27		

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		99%	95%
✔ Valid TEDS Data		94%	92%

On-Time Periodic		Actual	State Avg
6 Month Updates		25%	34%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	99%
✔ SA Screen Complete		100%	99%

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

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		0	0%	50%	55%	-50%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Not Arrested		35	97%	75%	82%	22%	▲
✔ Abstinence/Reduced Drug Use		23	64%	55%	52%	9%	
✔ Employed		20	56%	50%	39%	6%	
🔴 Stable Living Situation		32	89%	95%	82%	-6%	
🔴 Self Help		15	42%	60%	33%	-18%	▼
🔴 Improved/Maintained Axis V GAF Score		8	57%	75%	49%	-18%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		20	67%	90%	60%	-23%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 2 or more Services within 30 days		4	40%	75%	74%	-35%	▼

▲ > 10% Over   ▼ < 10% Under

☐ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 113 Active Standard Outpatient Programs