

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---------------|----------------|--------|----------|------------|
| | Unique Clients | 296 | 288 | 3% |
| | Admits | 42 | 21 | 100% ▲ |
| | Discharges | 32 | 25 | 28% ▲ |
| | Service Hours | 1,122 | 915 | 23% ▲ |

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

Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|----------------------|--------------------|-----|--------|
| Mental Health | Outpatient | 296 | 100.0% |

Consumer Satisfaction Survey (Based on 117 FY15 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ Participation in Treatment | | 96% | 80% | 92% |
| ✓ Access | | 96% | 80% | 88% |
| ✓ Respect | | 95% | 80% | 91% |
| ✓ General Satisfaction | | 95% | 80% | 92% |
| ✓ Overall | | 93% | 80% | 91% |
| ✓ Quality and Appropriateness | | 93% | 80% | 93% |
| ✓ Outcome | | 87% | 80% | 83% |
| ● Recovery | | 74% | 80% | 79% |

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

Client Demographics

| Age | # | % | State Avg | Gender | # | % | State Avg |
|-------------------|-----|-----|-----------|---------------------------------|-----|-----|-----------|
| 18-25 | 16 | 5% | 13% | Female | 154 | 52% | 41% ▲ |
| 26-34 | 35 | 12% | 23% ▼ | Male | 142 | 48% | 59% ▼ |
| 35-44 | 54 | 18% | 19% | Transgender | | | 0% |
| 45-54 | 67 | 23% | 23% | | | | |
| 55-64 | 80 | 27% | 16% ▲ | | | | |
| 65+ | 44 | 15% | 5% | | | | |
| Ethnicity | # | % | State Avg | Race | # | % | State Avg |
| Non-Hispanic | 263 | 89% | 75% ▲ | White/Caucasian | 193 | 65% | 65% |
| Hispanic-Other | 14 | 5% | 6% | Black/African American | 64 | 22% | 17% |
| Unknown | 10 | 3% | 6% | Other | 24 | 8% | 13% |
| Hisp-Puerto Rican | 9 | 3% | 12% | Multiple Races | 6 | 2% | 1% |
| Hispanic-Cuban | | | 0% | Unknown | 5 | 2% | 3% |
| Hispanic-Mexican | | | 1% | Asian | 4 | 1% | 1% |
| | | | | Am. Indian/Native Alaskan | | | 0% |
| | | | | Hawaiian/Other Pacific Islander | | | 0% |

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

Program Activity

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|----------------|--------|----------|------------|
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Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 95% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 64% |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | 94% | 77% |
| SA Screen Complete | 94% | 74% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 99% | 99% |
| Valid Axis V GAF Score | 100% | 85% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 10 | 31% | 50% | 45% | -19% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 246 | 83% | 60% | 67% | 23% ▲ |
| Stable Living Situation | | 289 | 98% | 95% | 85% | 3% |
| Employed | | 81 | 27% | 30% | 20% | -3% |
| Improved/Maintained Axis V GAF Score | | 211 | 81% | 75% | 52% | 6% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 256 | 97% | 90% | 80% | 7% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 38 | 90% | 75% | 62% | 15% ▲ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | 83% |
| 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 94 Active Standard Outpatient Programs