

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---------------|----------------|--------|----------|------------|
| | Unique Clients | 1,524 | 1,532 | -1% |
| | Admits | 703 | 412 | 71% ▲ |
| | Discharges | 639 | 382 | 67% ▲ |
| | Service Hours | 12,572 | 11,222 | 12% ▲ |
| | Bed Days | 2,220 | 2,375 | -7% |

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

Consumer Satisfaction Survey

(Based on 185 FY16 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ Participation in Treatment | | 95% | 80% | 92% |
| ✓ General Satisfaction | | 92% | 80% | 92% |
| ✓ Quality and Appropriateness | | 92% | 80% | 93% |
| ✓ Overall | | 91% | 80% | 91% |
| ✓ Access | | 90% | 80% | 88% |
| ✓ Respect | | 89% | 80% | 91% |
| ✓ Outcome | | 82% | 80% | 83% |
| ✓ Recovery | | 80% | 80% | 79% |

Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|----------------------|---------------------------|---------------------------|-------|
| Mental Health | Outpatient | 1,066 | 39.3% |
| | Social Rehabilitation | 662 | 24.4% |
| | Community Support | 220 | 8.1% |
| | Intake | 164 | 6.0% |
| | Crisis Services | 105 | 3.9% |
| | ACT | 53 | 2.0% |
| | Other | 31 | 1.1% |
| | Inpatient Services | 28 | 1.0% |
| | Residential Services | 10 | 0.4% |
| | Forensic MH | Forensics Community-based | 255 |
| Outpatient | | 43 | 1.6% |
| Case Management | | 25 | 0.9% |
| Forensic SA | Forensics Community-based | 51 | 1.9% |

Client Demographics

| Age | # | % | State Avg | Gender | # | % | State Avg | |
|------------------|-------------------|-------|-----------|-------------|---------------------------------|-----|-----------|-----|
| 18-25 | 187 | 12% | 12% | Male | 928 | 61% | 58% | |
| 26-34 | 262 | 17% | 22% | Female | 592 | 39% | 42% | |
| 35-44 | 267 | 18% | 19% | Transgender | 4 | 0% | 0% | |
| 45-54 | 384 | 25% | 23% | Race | Black/African American | 633 | 42% ▲ | 16% |
| 55-64 | 307 | 20% | 18% | | White/Caucasian | 490 | 32% ▼ | 65% |
| 65+ | 115 | 8% | 6% | | Other | 328 | 22% | 13% |
| | | | | | Asian | 22 | 1% | 1% |
| Ethnicity | Non-Hispanic | 1,033 | 68% | 75% | Unknown | 22 | 1% | 3% |
| | Hisp-Puerto Rican | 322 | 21% | 12% | Multiple Races | 11 | 1% | 1% |
| | Hispanic-Other | 97 | 6% | 7% | Am. Indian/Native Alaskan | 5 | 0% | 1% |
| | Unknown | 59 | 4% | 6% | Hawaiian/Other Pacific Islander | 3 | 0% | 0% |
| | Hispanic-Mexican | 7 | 0% | 1% | | | | |
| Hispanic-Cuban | 6 | 0% | 0% | | | | | |

500 Vine Jail Div

Capitol Region Mental Health Center

Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services

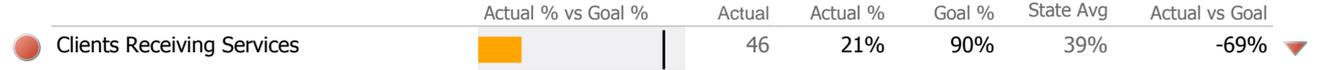
Program Quality Dashboard

Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 244 | 207 | 18% ▲ |
| Admits | 83 | 80 | 4% |
| Discharges | 68 | 58 | 17% ▲ |
| Service Hours | 209 | 79 | 166% ▲ |

Service Utilization



Jail Diversion



Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 18 Active Court Liaison-Jail Diversion Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 53 | 48 | 10% ▲ |
| Admits | 2 | 1 | 100% ▲ |
| Discharges | - | 2 | -100% ▼ |
| Service Hours | 772 | 412 | 87% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 97% |
| On-Time Periodic | | |
| 6 Month Updates | 43% | 78% |
| Cooccurring | | |
| MH Screen Complete | 100% | 95% |
| SA Screen Complete | 100% | 95% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 94% | 99% |
| Valid Axis V GAF Score | 75% | 78% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 65% | 56% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 92% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 44% | N/A |

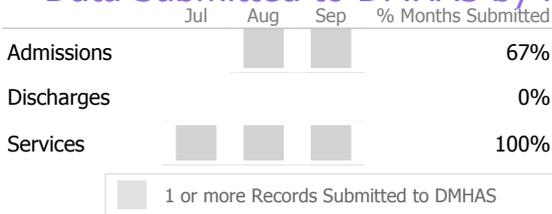
Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Stable Living Situation | | 24 | 45% | 60% | 86% | -15% ▼ |
| Employed | | 0 | 0% | 15% | 11% | -15% ▼ |
| Social Support | | 14 | 26% | 60% | 75% | -34% ▼ |
| Improved/Maintained Axis V GAF Score | | 25 | 51% | 85% | 46% | -34% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 53 | 100% | 90% | 99% | 10% |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 14 Active Assertive Community Treatment Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 25 | 23 | 9% |
| Admits | 5 | 5 | 0% |
| Discharges | 4 | 4 | 0% |
| Service Hours | 355 | 316 | 12% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|--------|-----------|
| Valid NOMS Data | 98% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 93% | 80% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 4 | 100% | 50% | 24% | 50% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Self Help | | 24 | 96% | 60% | 87% | 36% ▲ |
| ● Social Support | | 13 | 52% | 60% | 41% | -8% |
| ● Stable Living Situation | | 18 | 72% | 80% | 66% | -8% |
| ● Employed | | 2 | 8% | 20% | 4% | -12% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 21 | 100% | 90% | 99% | 10% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 4 Active Standard Case Management Programs

Program Activity

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

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | N/A | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | N/A | 58% |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | N/A | 83% |
| SA Screen Complete | N/A | 81% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 0% | 97% |
| Valid Axis V GAF Score | 0% | 86% |

Data Submitted to DMHAS by Month



Discharge Outcomes

| Measure | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 42% | N/A |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Stable Living Situation | | 1 | 100% | 95% | 80% | 5% |
| ● Employed | | 0 | 0% | 30% | 19% | -30% ▼ |
| ● Social Support | | 0 | 0% | 60% | 64% | -60% ▼ |
| ● Improved/Maintained Axis V GAF Score | | N/A | N/A | 75% | 45% | -75% ▼ |

Service Utilization

| Measure | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 1 | 100% | 90% | 69% | 10% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ● 2 or more Services within 30 days | | 0 | 0% | 75% | 64% | -75% ▼ |

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 15 | 15 | 0% |
| Admits | - | 2 | -100% ▼ |
| Discharges | 3 | 2 | 50% ▲ |
| Service Hours | 144 | 149 | -3% |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 2 Active Re-entry Programs Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 10 | 14 | -29% ▼ |
| Admits | 2 | - | |
| Discharges | 16 | 2 | 700% ▲ |

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 3 Active UM Screening Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 220 | 184 | 20% ▲ |
| Admits | 22 | 37 | -41% ▼ |
| Discharges | 78 | 24 | 225% ▲ |
| Service Hours | 1,099 | 907 | 21% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|----------------------------------|--------|-----------|
| Valid NOMS Data | 99% | 97% |
| On-Time Periodic 6 Month Updates | 87% | 88% |
| Cooccurring MH Screen Complete | 100% | 87% |
| SA Screen Complete | 100% | 86% |
| Diagnosis Valid Axis I Diagnosis | 89% | 98% |
| Valid Axis V GAF Score | 43% | 92% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 75 | 96% | 65% | 74% | 31% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Social Support | | 145 | 66% | 60% | 79% | 6% |
| ✓ Stable Living Situation | | 187 | 85% | 80% | 92% | 5% |
| ● Employed | | 12 | 5% | 20% | 12% | -15% ▼ |
| ● Improved/Maintained Axis V GAF Score | | 21 | 11% | 95% | 58% | -84% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ● Clients Receiving Services | | 151 | 79% | 90% | 94% | -11% ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 47 Active CSP Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 73 | 80 | -9% |
| Admits | 1 | 6 | -83% ▼ |
| Discharges | 2 | 4 | -50% ▼ |
| Service Hours | 491 | 451 | 9% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 95% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 90% | 58% |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | 100% | 83% |
| SA Screen Complete | 100% | 81% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 7% | 86% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 0 | 0% | 50% | 42% | -50% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 49 | 67% | 60% | 64% | 7% |
| Employed | | 27 | 37% | 30% | 19% | 7% |
| Stable Living Situation | | 69 | 95% | 95% | 80% | 0% |
| Improved/Maintained Axis V GAF Score | | 5 | 7% | 75% | 45% | -68% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 70 | 99% | 90% | 69% | 9% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 1 | 100% | 75% | 64% | 25% ▲ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 33% |
| Discharges | | | | 67% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

* State Avg based on 94 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 43 | 60 | -28% ▼ |
| Admits | 7 | 5 | 40% ▲ |
| Discharges | 6 | 9 | -33% ▼ |
| Service Hours | 675 | 643 | 5% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|----------------------------------|--------|-----------|
| Valid NOMS Data | 94% | 91% |
| On-Time Periodic 6 Month Updates | 97% | 80% |
| Cooccurring MH Screen Complete | 100% | 92% |
| SA Screen Complete | 100% | 92% |
| Diagnosis Valid Axis I Diagnosis | 98% | 99% |
| Valid Axis V GAF Score | 9% | 78% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 1 | 17% | 50% | 32% | -33% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Self Help | | 42 | 98% | 60% | 28% | 38% ▲ |
| Social Support | | 31 | 72% | 60% | 73% | 12% ▲ |
| Stable Living Situation | | 37 | 86% | 95% | 79% | -9% |
| Employed | | 1 | 2% | 30% | 14% | -28% ▼ |
| Improved/Maintained Axis V GAF Score | | 2 | 6% | 75% | 45% | -69% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 37 | 100% | 90% | 96% | 10% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 7 | 100% | 75% | 96% | 25% ▲ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 67% |
| 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 2 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 138 | 341 | -60% ▼ |
| Admits | - | 3 | -100% ▼ |
| Discharges | 138 | 12 | 1050% ▲ |
| Service Hours | 58 | 1,368 | -96% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|----------------------------------|--------|-----------|
| Valid NOMS Data | 98% | 93% |
| On-Time Periodic 6 Month Updates | N/A | 58% |
| Cooccurring MH Screen Complete | N/A | 83% |
| SA Screen Complete | N/A | 81% |
| Diagnosis Valid Axis I Diagnosis | 99% | 97% |
| Valid Axis V GAF Score | 88% | 86% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 138 | 100% | 50% | 42% | 50% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Stable Living Situation | | 128 | 93% | 95% | 80% | -2% |
| Social Support | | 59 | 43% | 60% | 64% | -17% ▼ |
| Improved/Maintained Axis V GAF Score | | 69 | 50% | 75% | 45% | -25% ▼ |
| Employed | | 5 | 4% | 30% | 19% | -26% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | N/A | N/A | 90% | 69% | N/A ▼ |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 0 | 0% | 75% | 64% | -75% ▼ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 31 | 41 | -24% ▼ |
| Admits | 26 | 38 | -32% ▼ |
| Discharges | 27 | 37 | -27% ▼ |

Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Evaluation within 1.5 hours of Request | | 27 | 96% | 75% | 67% | 21% ▲ |
| ✓ Community Location Evaluation | | 28 | 100% | 80% | 81% | 20% ▲ |
| ● Follow-up Service within 48 hours | | 2 | 18% | 90% | 54% | -72% ▼ |

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 25 Active Mobile Crisis Team Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 10 | 10 | 0% |
| Admits | 2 | - | |
| Discharges | 1 | - | |
| Bed Days | 782 | 920 | -15% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 93% | 99% |
| On-Time Periodic | | |
| 6 Month Updates | 40% | 91% |
| Cooccurring | | |
| MH Screen Complete | 100% | 90% |
| SA Screen Complete | 100% | 89% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 80% | 100% |
| Valid Axis V GAF Score | 70% | 96% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 0 | 0% | 60% | 73% | -60% ▼ |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 81% | N/A |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Stable Living Situation | | 8 | 80% | 95% | 97% | -15% ▼ |
| Social Support | | 4 | 40% | 60% | 85% | -20% ▼ |
| Employed | | 0 | 0% | 25% | 7% | -25% ▼ |
| Improved/Maintained Axis V GAF Score | | 1 | 17% | 95% | 66% | -78% ▼ |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| Avg Utilization Rate | | 10 | 382 days | 1.0 | 85% | 90% | 91% | -5% |

■ < 90%
 ■ 90-110%
 ■ > 110%

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 67% |
| Discharges | | | | 33% |

▲ > 10% Over
 ▼ < 10% Under

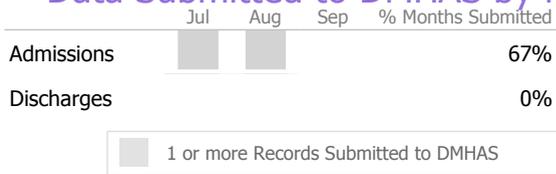
■ Actual
 | Goal
 ✓ Goal Met
 ● Below Goal

* State Avg based on 74 Active Supervised Apartments Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 16 | 18 | -11% ▼ |
| Admits | 2 | 2 | 0% |
| Discharges | - | 2 | -100% ▼ |

Data Submitted to DMHAS by Month



* State Avg based on 2 Active Outreach & Engagement Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 28 | 20 | 40% ▲ |
| Admits | 12 | 4 | 200% ▲ |
| Discharges | 13 | 6 | 117% ▲ |
| Bed Days | 1,438 | 1,455 | -1% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 89% | 89% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 75% | 75% |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | N/A | N/A |
| SA Screen Complete | N/A | N/A |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 93% | 93% |
| Valid Axis V GAF Score | 4% | 4% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|--------------------|--------------------|----------|----------|-----------|----------------|----------------|
| Treatment Completed Successfully | | 6 | 46% | 95% | 46% | -49% ▼ | |
| No Re-admit within 30 Days of Discharge | | 13 | 100% | 85% | 100% | 15% ▲ | |
| Follow-up within 30 Days of Discharge | | 3 | 50% | 90% | 50% | -40% ▼ | |
| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Improved/Maintained Axis V GAF Score | | 1 | 6% | 75% | 6% | -69% ▼ | |

Recovery

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Improved/Maintained Axis V GAF Score | | 1 | 6% | 75% | 6% | -69% ▼ |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| Avg Utilization Rate | | 16 | 217 days | 0.6 | 98% | 90% | 98% | 8% |

■ < 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

* State Avg based on 2 Active Non-Certified Subacute Programs

Intake Team

Capitol Region Mental Health Center
Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 154 | 183 | -16% ▼ |
| Admits | 34 | 38 | -11% ▼ |
| Discharges | 125 | 43 | 191% ▲ |
| Service Hours | 141 | 144 | -2% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 10 Active Central Intake Programs

JD Sub Use

Capitol Region Mental Health Center

Forensic SA - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 51 | 63 | -19% ▼ |
| Admits | 10 | 34 | -71% ▼ |
| Discharges | 11 | 19 | -42% ▼ |
| Service Hours | - | - | |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ● Clients Receiving Services | | 0 | 0% | 90% | | N/A ▼ |

Jail Diversion

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

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

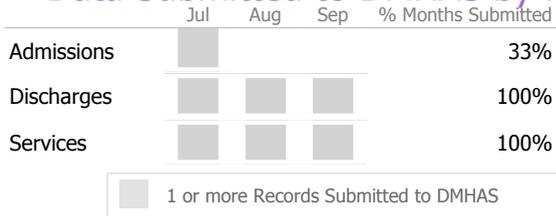
■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 1 Active Court Liaison-Jail Diversion Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 15 | 7 | 114% ▲ |
| Admits | 2 | 2 | 0% |
| Discharges | 6 | - | |
| Service Hours | 33 | 22 | 52% ▲ |

Data Submitted to DMHAS by Month



* State Avg based on 14 Active Other Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 74 | 93 | -20% ▼ |
| Admits | 77 | 107 | -28% ▼ |
| Discharges | 78 | 105 | -26% ▼ |

Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Evaluation within 1.5 hours of Request | | 88 | 100% | 75% | 67% | 25% ▲ |
| ✓ Community Location Evaluation | | 86 | 98% | 80% | 81% | 18% ▲ |
| ● Follow-up Service within 48 hours | | 9 | 35% | 90% | 54% | -55% ▼ |

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 25 Active Mobile Crisis Team Programs

Peer Support

Capitol Region Mental Health Center

Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

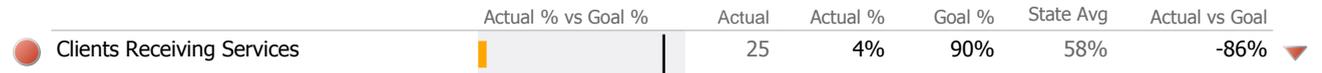
Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---------------------------|--------|----------|------------|
| Unique Clients | 662 | 645 | 3% |
| Admits | 46 | 29 | 59% ▲ |
| Discharges | 21 | 23 | -9% |
| Service Hours | 34 | 5 | |
| Social Rehab/PHP/IOP Days | 0 | 0 | |

*Data System Limitations are affecting service numbers in this program

Service Utilization



Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 38 Active Social Rehabilitation Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 474 | 280 | 69% ▲ |
| Admits | 196 | 10 | 1860% ▲ |
| Discharges | 22 | 9 | 144% ▲ |
| Service Hours | 1,626 | 1,432 | 14% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 97% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 89% | 58% |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | 92% | 83% |
| SA Screen Complete | 92% | 81% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 65% | 97% |
| Valid Axis V GAF Score | 25% | 86% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 3 | 14% | 50% | 42% | -36% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 239 | 50% | 60% | 64% | -10% |
| Stable Living Situation | | 396 | 83% | 95% | 80% | -12% ▼ |
| Employed | | 15 | 3% | 30% | 19% | -27% ▼ |
| Improved/Maintained Axis V GAF Score | | 48 | 18% | 75% | 45% | -57% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 439 | 97% | 90% | 69% | 7% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 71 | 36% | 75% | 64% | -39% ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 94 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 405 | 257 | 58% | ▲ |
| Admits | 159 | 1 | 15800% | ▲ |
| Discharges | 9 | 8 | 13% | ▲ |
| Service Hours | 2,253 | 1,245 | 81% | ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 98% | 58% |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | 83% | 83% |
| SA Screen Complete | 83% | 81% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 70% | 97% |
| Valid Axis V GAF Score | 39% | 86% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 3 | 33% | 50% | 42% | -17% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 299 | 74% | 60% | 64% | 14% ▲ |
| Stable Living Situation | | 354 | 87% | 95% | 80% | -8% |
| Employed | | 39 | 10% | 30% | 19% | -20% ▼ |
| Improved/Maintained Axis V GAF Score | | 48 | 20% | 75% | 45% | -55% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 395 | 99% | 90% | 69% | 9% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 111 | 70% | 75% | 64% | -5% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 94 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 117 | 123 | -5% |
| Admits | 14 | 8 | 75% ▲ |
| Discharges | 10 | 13 | -23% ▼ |
| Service Hours | 4,682 | 4,050 | 16% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 93% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 65% | 58% |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | 100% | 83% |
| SA Screen Complete | 100% | 81% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 88% | 86% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 5 | 50% | 50% | 42% | 0% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ● Social Support | | 65 | 56% | 60% | 64% | -4% |
| ● Stable Living Situation | | 86 | 74% | 95% | 80% | -21% ▼ |
| ● Employed | | 9 | 8% | 30% | 19% | -22% ▼ |
| ● Improved/Maintained Axis V GAF Score | | 51 | 57% | 75% | 45% | -18% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 106 | 99% | 90% | 69% | 9% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ 2 or more Services within 30 days | | 12 | 86% | 75% | 64% | 11% ▲ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 94 Active Standard Outpatient Programs