

Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---------------|----------------|--------|----------|------------|
| | Unique Clients | 1,366 | 1,375 | -1% |
| | Admits | 515 | 513 | 0% |
| | Discharges | 564 | 615 | -8% |
| | Service Hours | 8,465 | 18,619 | -55% ▼ |
| | Bed Days | 4,170 | 4,124 | 1% |

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

Consumer Satisfaction Survey

(Based on 323 FY20 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ General Satisfaction | | 93% | 80% | 92% |
| ✓ Respect | | 93% | 80% | 91% |
| ✓ Overall | | 91% | 80% | 91% |
| ✓ Quality and Appropriateness | | 90% | 80% | 93% |
| ✓ Participation in Treatment | | 89% | 80% | 92% |
| ✓ Outcome | | 85% | 80% | 83% |
| ✓ Access | | 85% | 80% | 88% |
| ✓ Recovery | | 80% | 80% | 79% |

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

Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|----------------------|---------------------------|-----|-------|
| Mental Health | Outpatient | 881 | 39.1% |
| | Social Rehabilitation | 581 | 25.8% |
| | Crisis Services | 264 | 11.7% |
| | ACT | 140 | 6.2% |
| | Community Support | 103 | 4.6% |
| | Intake | 52 | 2.3% |
| | Inpatient Services | 23 | 1.0% |
| | Other | 22 | 1.0% |
| | Residential Services | 8 | 0.4% |
| Forensic MH | Forensics Community-based | 122 | 5.4% |
| | Outpatient | 38 | 1.7% |
| | Case Management | 18 | 0.8% |

Client Demographics

| Age | # | % | State Avg |
|-------|-----|-----|-----------|
| 18-25 | 156 | 11% | 9% |
| 26-34 | 208 | 15% | 21% |
| 35-44 | 254 | 19% | 22% |
| 45-54 | 264 | 19% | 19% |
| 55-64 | 330 | 24% | 20% |
| 65+ | 153 | 11% | 8% |

| Gender | # | % | State Avg |
|-------------|-----|-----|-----------|
| Male | 806 | 59% | 58% |
| Female | 553 | 40% | 42% |
| Transgender | 7 | 1% | 0% |

| Ethnicity | # | % | State Avg |
|-------------------|-----|-----|-----------|
| Non-Hispanic | 917 | 67% | 70% |
| Hisp-Puerto Rican | 239 | 17% | 12% |
| Hispanic-Other | 116 | 8% | 8% |
| Unknown | 85 | 6% | 10% |
| Hispanic-Mexican | 6 | 0% | 0% |
| Hispanic-Cuban | 3 | 0% | 0% |

| Race | # | % | State Avg |
|---------------------------------|-----|-----|-----------|
| Black/African American | 554 | 42% | ▲ 17% |
| White/Caucasian | 421 | 32% | ▼ 62% |
| Other | 272 | 21% | 13% |
| Asian | 28 | 2% | 1% |
| Unknown | 24 | 2% | 6% |
| Multiple Races | 15 | 1% | 1% |
| Am. Indian/Native Alaskan | 3 | 0% | 1% |
| Hawaiian/Other Pacific Islander | 2 | 0% | 0% |

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

Variances in data may be indicative of operational adjustments related to the pandemic.

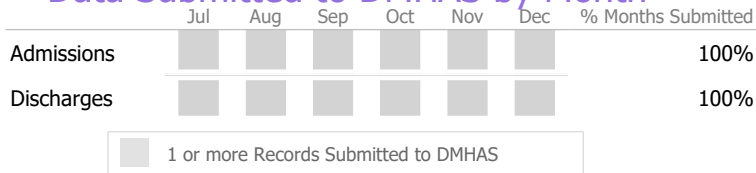
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 113 | 164 | -31% ▼ |
| Admits | 67 | 135 | -50% ▼ |
| Discharges | 54 | 153 | -65% ▼ |

Jail Diversion

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Follow-up Service within 48 hours | | 1 | 13% | 0% | 61% | 12% ▲ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 42 | 52 | -19% ▼ |
| Admits | 1 | 4 | -75% ▼ |
| Discharges | - | 10 | -100% ▼ |
| Service Hours | 519 | 1,302 | -60% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 84% |
| On-Time Periodic | | |
| 6 Month Updates | 93% | 87% |
| Co-occurring | | |
| MH Screen Complete | 100% | 89% |
| SA Screen Complete | 100% | 89% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 100% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 65% | 39% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 94% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 48% | N/A |

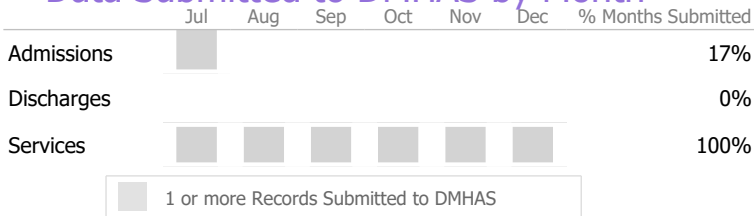
Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Stable Living Situation | | 37 | 88% | 60% | 93% | 28% ▲ |
| Social Support | | 28 | 67% | 60% | 79% | 7% |
| Employed | | 3 | 7% | 15% | 14% | -8% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 41 | 98% | 90% | 99% | 8% |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 23 Active Assertive Community Treatment Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 18 | 21 | -14% ▼ |
| Admits | 4 | 12 | -67% ▼ |
| Discharges | 6 | 7 | -14% ▼ |
| Service Hours | 342 | 342 | 0% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|--------|-----------|
| Valid NOMS Data | 91% | 88% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 100% | 100% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 3 | 50% | 50% | 50% | 0% |

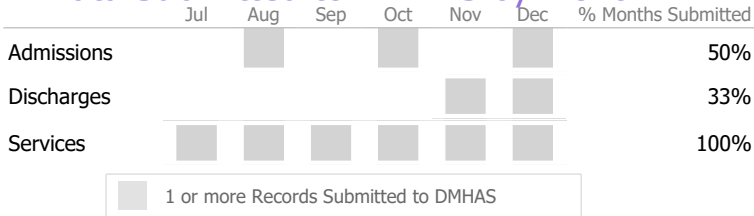
Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Self Help | | 18 | 100% | 60% | 81% | 40% ▲ |
| ✓ Social Support | | 12 | 67% | 60% | 78% | 7% |
| ✓ Stable Living Situation | | 15 | 83% | 80% | 81% | 3% |
| ● Employed | | 0 | 0% | 20% | 4% | -20% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 12 | 100% | 90% | 100% | 10% |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 3 Active Standard Case Management Programs

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% |
| On-Time Periodic | | |
| 6 Month Updates | | N/A 52% |
| Co-occurring | | |
| MH Screen Complete | | N/A 75% |
| SA Screen Complete | | N/A 75% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 33% | N/A |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Employed | | N/A | N/A | 30% | 22% | -30% ▼ |
| Social Support | | N/A | N/A | 60% | 60% | -60% ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 74% | -95% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | N/A | N/A | 90% | 81% | N/A ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | 0% |
| Discharges | | | | | | | 0% |

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

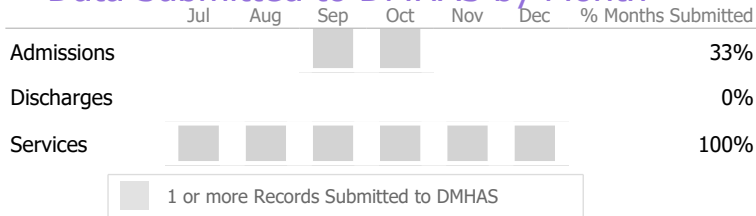
* State Avg based on 85 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 10 | 13 | -23% ▼ |
| Admits | 2 | 1 | 100% ▲ |
| Discharges | - | 2 | -100% ▼ |
| Service Hours | 121 | 313 | -61% ▼ |

Data Submitted to DMHAS by Month



* State Avg based on 3 Active Re-entry Programs Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 0 | | |
| Admits | - | - | |
| Discharges | - | - | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % 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 0 Active UM Screening Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 103 | 134 | -23% ▼ |
| Admits | 9 | 27 | -67% ▼ |
| Discharges | 16 | 45 | -64% ▼ |
| Service Hours | 375 | 1,470 | -74% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 80% |
| On-Time Periodic | | |
| 6 Month Updates | 91% | 81% |
| Co-occurring | | |
| MH Screen Complete | 100% | 80% |
| SA Screen Complete | 100% | 61% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 78% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 4 | 25% | 65% | 59% | -40% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Stable Living Situation | | 95 | 92% | 80% | 88% | 12% ▲ |
| Social Support | | 74 | 72% | 60% | 82% | 12% ▲ |
| Employed | | 12 | 12% | 20% | 13% | -8% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 80 | 92% | 90% | 97% | 2% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | ■ | | ■ | ■ | ■ | 67% |
| 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 36 Active CSP Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 87 | 82 | 6% |
| Admits | 3 | 3 | 0% |
| Discharges | 11 | 3 | 267% ▲ |
| Service Hours | 670 | 709 | -6% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 98% | 86% |
| On-Time Periodic | | |
| 6 Month Updates | 99% | 52% |
| Co-occurring | | |
| MH Screen Complete | 100% | 75% |
| SA Screen Complete | 100% | 75% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 100% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 5 | 45% | 50% | 33% | -5% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 67 | 77% | 60% | 60% | 17% ▲ |
| Employed | | 30 | 34% | 30% | 22% | 4% |
| Stable Living Situation | | 82 | 94% | 95% | 74% | -1% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 75 | 99% | 90% | 81% | 9% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 3 | 100% | 75% | 76% | 25% ▲ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | ■ | ■ | ■ | 50% |
| Discharges | ■ | ■ | | ■ | | ■ | 67% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 85 Active Standard Outpatient Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 38 | 50 | -24% ▼ |
| Admits | 6 | 15 | -60% ▼ |
| Discharges | 6 | 20 | -70% ▼ |
| Service Hours | 428 | 828 | -48% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 93% | 88% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 93% | 96% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 100% | 68% |
| SA Screen Complete | 100% | 68% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 92% | 97% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 0 | 0% | 50% | 46% | -50% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Self Help | | 38 | 100% | 60% | 33% | 40% ▲ |
| Social Support | | 26 | 68% | 60% | 73% | 8% |
| Stable Living Situation | | 30 | 79% | 95% | 82% | -16% ▼ |
| Employed | | 2 | 5% | 30% | 19% | -25% ▼ |

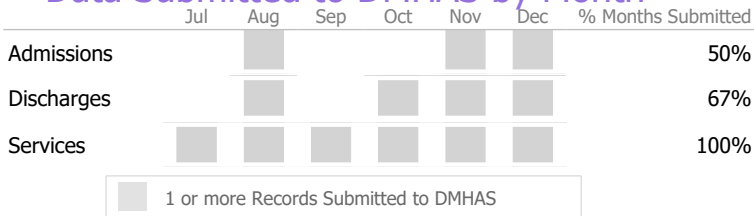
Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 29 | 88% | 90% | 97% | -2% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 4 | 67% | 75% | 90% | -8% |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 3 Active Standard Outpatient Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

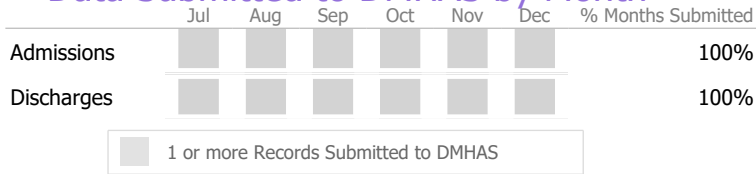
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 105 | 35 | 200% ▲ |
| Admits | 112 | 35 | 220% ▲ |
| Discharges | 112 | 35 | 220% ▲ |

Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Evaluation within 1.5 hours of Request | | 105 | 97% | 75% | 79% | 22% ▲ |
| ✓ Community Location Evaluation | | 108 | 100% | 80% | 71% | 20% ▲ |
| ● Follow-up Service within 48 hours | | 12 | 35% | 90% | 69% | -55% ▼ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 25 Active Mobile Crisis Team Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 8 | 10 | -20% ▼ |
| Admits | 1 | 4 | -75% ▼ |
| Discharges | - | 2 | -100% ▼ |
| Bed Days | 1,472 | 1,188 | 24% ▲ |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 60% | 79% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 75% | N/A |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Social Support | | 6 | 75% | 60% | 83% | 15% ▲ |
| ● Stable Living Situation | | 7 | 88% | 95% | 93% | -7% |
| ● Employed | | 1 | 12% | 25% | 9% | -13% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|--------------------------|--------|-------------|
| ✓ Valid NOMS Data | | 91% vs 75% |
| On-Time Periodic | Actual | State Avg |
| ✓ 6 Month Updates | | 100% vs 87% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | | N/A vs 84% |
| SA Screen Complete | | N/A vs 69% |
| Diagnosis | Actual | State Avg |
| ✓ Valid Axis I Diagnosis | | 100% vs 99% |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| ● Avg Utilization Rate | | 10 | 552 days | 0.6 | 80% | 90% | 93% | -10% |

■ < 90%
 ■ 90-110%
 ■ >110%

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | 17% |
| Discharges | | | | | | | 0% |

▲ > 10% Over
 ▼ < 10% Under

■ Actual
 | Goal
 ✓ Goal Met
 ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 0 | | |
| Admits | - | - | |
| Discharges | - | - | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % 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 2 Active Outreach & Engagement Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 23 | 23 | 0% |
| Admits | 8 | 7 | 14% ▲ |
| Discharges | 8 | 7 | 14% ▲ |
| Bed Days | 2,698 | 2,936 | -8% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 93% | 93% |
| On-Time Periodic | | |
| 6 Month Updates | 100% | 100% |
| Co-occurring | | |
| MH Screen Complete | N/A | N/A |
| SA Screen Complete | N/A | N/A |
| Diagnosis | | |
| Valid Axis I Diagnosis | 96% | 96% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 8 | 100% | 95% | 100% | 5% |
| ✓ No Re-admit within 30 Days of Discharge | | 7 | 88% | 85% | 88% | 3% |
| ● Follow-up within 30 Days of Discharge | | 7 | 88% | 90% | 88% | -2% |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| ✓ Avg Utilization Rate | | 16 | 560 days | 0.4 | 92% | 90% | 92% | 2% |

Legend: ■ < 90% ■ 90-110% ■ > 110%

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | ■ | ■ | ■ | ■ | | ■ | 83% |
| Discharges | ■ | ■ | ■ | | ■ | ■ | 83% |

Legend: ■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 1 Active Non-Certified Subacute Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Intake Team

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

Connecticut Dept of Mental Health and Addiction Services

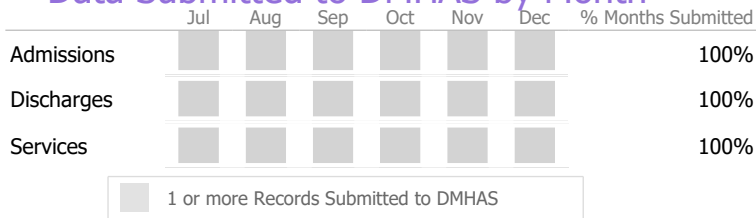
Program Quality Dashboard

Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 52 | 84 | -38% ▼ |
| Admits | 30 | 50 | -40% ▼ |
| Discharges | 33 | 63 | -48% ▼ |
| Service Hours | 175 | 461 | -62% ▼ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 17 Active Central Intake Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

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 2020 - December 2020 (Data as of Apr 06, 2021)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 0 | | |
| Admits | - | - | |
| Discharges | - | - | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | 0% |
| Discharges | | | | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

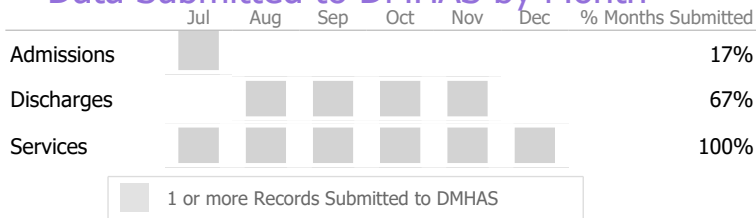
* State Avg based on 5 Active Court Liaison-Jail Diversion Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 22 | 35 | -37% ▼ |
| Admits | 3 | 14 | -79% ▼ |
| Discharges | 6 | 13 | -54% ▼ |
| Service Hours | 161 | 286 | -44% ▼ |

Data Submitted to DMHAS by Month



* State Avg based on 15 Active Other Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

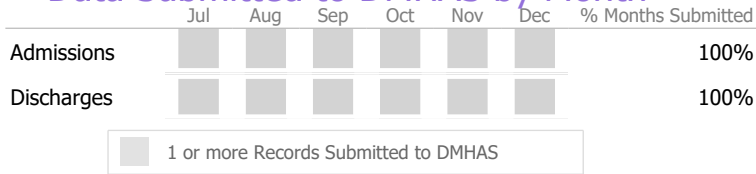
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 181 | 115 | 57% ▲ |
| Admits | 232 | 137 | 69% ▲ |
| Discharges | 232 | 137 | 69% ▲ |

Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Evaluation within 1.5 hours of Request | | 219 | 97% | 75% | 79% | 22% ▲ |
| ✓ Community Location Evaluation | | 223 | 99% | 80% | 71% | 19% ▲ |
| ● Follow-up Service within 48 hours | | 42 | 50% | 90% | 69% | -40% ▼ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 25 Active Mobile Crisis Team Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Peer Support

Capitol Region Mental Health Center

Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services

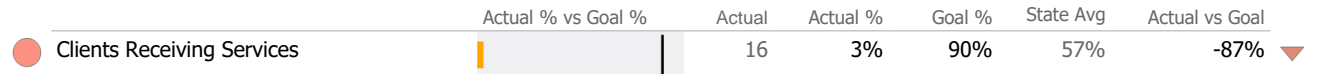
Program Quality Dashboard

Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

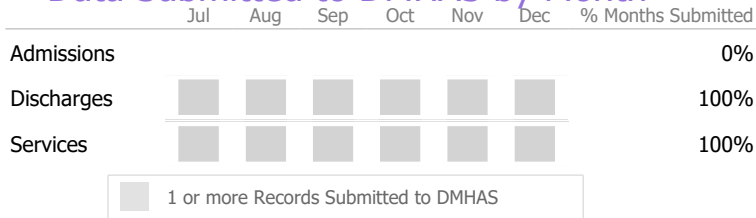
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---------------------------|--------|----------|------------|
| Unique Clients | 581 | 645 | -10% |
| Admits | - | 15 | -100% ▼ |
| Discharges | 26 | 48 | -46% ▼ |
| Service Hours | 6 | 73 | -92% ▼ |
| Social Rehab/PHP/IOP Days | 0 | 0 | |

Service Utilization



Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 422 | 437 | -3% |
| Admits | 13 | 16 | -19% ▼ |
| Discharges | 19 | 23 | -17% ▼ |
| Service Hours | 1,678 | 2,930 | -43% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 86% |
| On-Time Periodic | | |
| 6 Month Updates | 86% | 52% |
| Co-occurring | | |
| MH Screen Complete | 100% | 75% |
| SA Screen Complete | 100% | 75% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 72% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 0 | 0% | 50% | 33% | -50% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 246 | 58% | 60% | 60% | -2% |
| Stable Living Situation | | 378 | 90% | 95% | 74% | -5% |
| Employed | | 40 | 9% | 30% | 22% | -21% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 401 | 99% | 90% | 81% | 9% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 7 | 54% | 75% | 76% | -21% ▼ |

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 85 Active Standard Outpatient Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 373 | 391 | -5% |
| Admits | 10 | 20 | -50% ▼ |
| Discharges | 15 | 24 | -38% ▼ |
| Service Hours | 2,443 | 3,506 | -30% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 86% |
| On-Time Periodic | | |
| 6 Month Updates | 94% | 52% |
| Co-occurring | | |
| MH Screen Complete | 100% | 75% |
| SA Screen Complete | 100% | 75% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 88% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 4 | 27% | 50% | 33% | -23% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 306 | 82% | 60% | 60% | 22% ▲ |
| Stable Living Situation | | 353 | 95% | 95% | 74% | 0% |
| Employed | | 61 | 16% | 30% | 22% | -14% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 357 | 100% | 90% | 81% | 10% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 7 | 70% | 75% | 76% | -5% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | ■ | ■ | ■ | ■ | ■ | ■ | 100% |
| Discharges | | ■ | ■ | | ■ | ■ | 67% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 85 Active Standard Outpatient Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 98 | 103 | -5% |
| Admits | 14 | 18 | -22% ▼ |
| Discharges | 20 | 23 | -13% ▼ |
| Service Hours | 1,548 | 6,399 | -76% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 93% | 84% |
| On-Time Periodic | | |
| 6 Month Updates | 95% | 87% |
| Co-occurring | | |
| MH Screen Complete | 100% | 89% |
| SA Screen Complete | 100% | 89% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 100% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 7 | 35% | 65% | 39% | -30% ▼ |
| No Re-admit within 30 Days of Discharge | | 20 | 100% | 85% | 94% | 15% ▲ |
| Follow-up within 30 Days of Discharge | | 2 | 29% | 90% | 48% | -61% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Stable Living Situation | | 92 | 94% | 60% | 93% | 34% ▲ |
| Social Support | | 70 | 71% | 60% | 79% | 11% ▲ |
| Employed | | 18 | 18% | 15% | 14% | 3% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 78 | 100% | 90% | 99% | 10% |

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 23 Active Assertive Community Treatment Programs

Variations in data may be indicative of operational adjustments related to the pandemic.