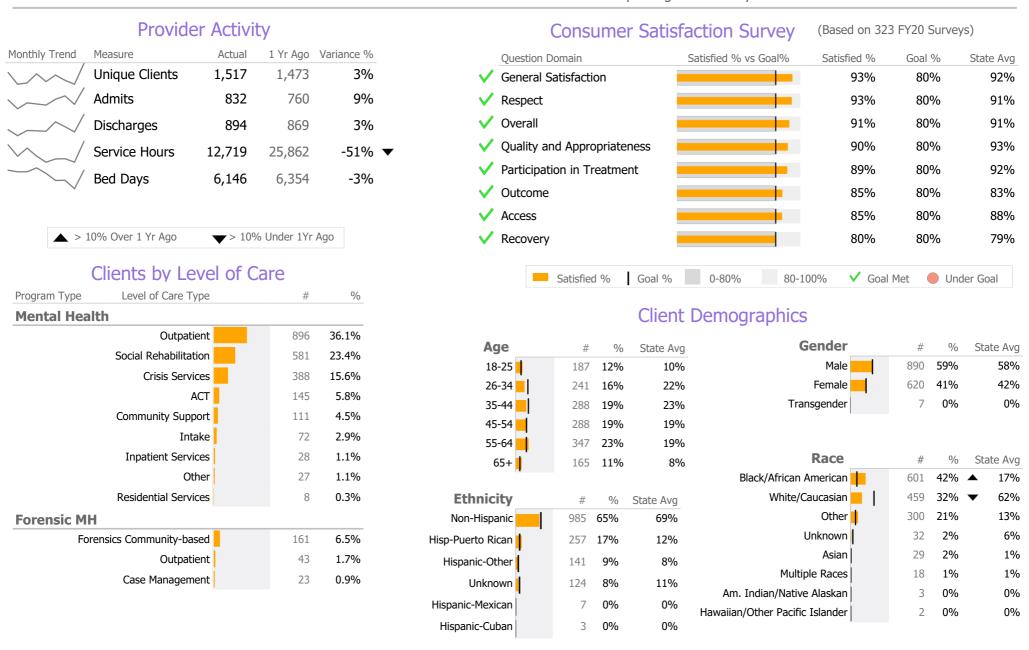
▲ > 10% Over State Avg

▼ > 10% Under State Avg



Unique Clients State Avg

500 Vine Jail Div

Capitol Region Mental Health Center

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

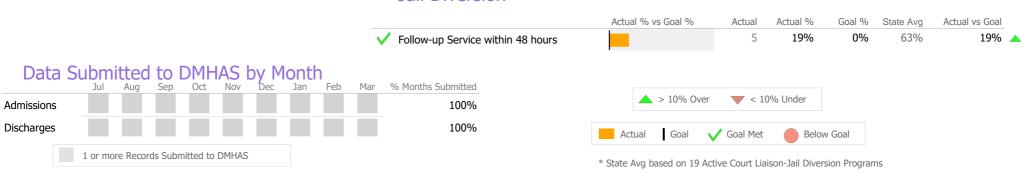
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

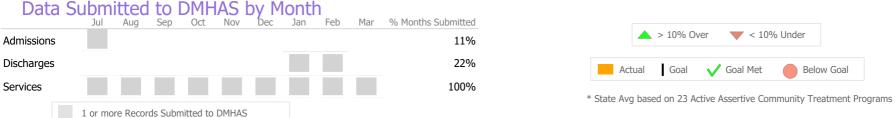
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	152	206	-26%	•
Admits	120	194	-38%	•
Discharges	84	226	-63%	•

Jail Diversion



Program Activity Discharge Outcomes Variance % Actual % State Avg Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % Actual vs Goal **Unique Clients** 42 53 -21% Treatment Completed Successfully 0 0% 65% 44% -65% -5 Admits **-80% ▼** Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 Discharges 12 -83% -1 100% 85% 94% 15% No Re-admit within 30 Days of Discharge Service Hours 754 1,836 -59% Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge N/A N/A 90% 57% N/A **Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Valid NOMS Data 98% 83% 37 88% 60% 92% 28% Stable Living Situation 28 67% 60% 79% 7% Social Support On-Time Periodic Actual State Avg 3 7% 15% 15% -8% **Employed** 6 Month Updates 100% 91% Service Utilization Co-occurring Actual State Avg Actual % Goal % State Avg Actual vs Goal Actual % vs Goal % Actual 100% 91% MH Screen Complete Clients Receiving Services 40 100% 90% 99% 10% SA Screen Complete 100% 90% Diagnosis State Avg Actual 100% 98% ✓ Valid Axis I Diagnosis



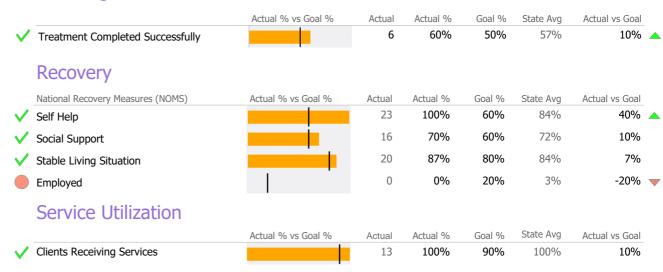
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	23	22	5%
Admits	9	14	-36% ▼
Discharges	10	9	11% 🔺
Service Hours	479	519	-8%

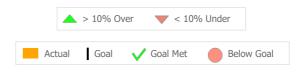
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 3 Active Standard Case Management Programs

BHH ADULT NAE

Capitol Region Mental Health Center

Mental Health - Outpatient - Standar

Mental Health - Outpatient - Standard Outpatient

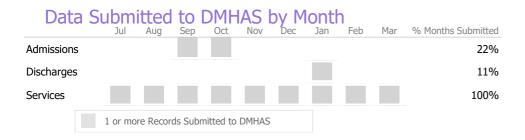
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

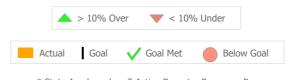
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity Discharge Outcomes Actual % State Avg Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % Actual vs Goal **Unique Clients** N/A N/A 50% 34% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours N/A N/A 30% 23% -30% **Employed** 60% 62% -60% -Social Support N/A N/A **Data Submission Quality** 95% -95% -Stable Living Situation N/A N/A 74% Data Entry Actual State Avg Service Utilization Valid NOMS Data 86% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services N/A N/A 90% 84% N/A 🔻 On-Time Periodic Actual State Avg 6 Month Updates N/A 55% Actual State Avg Co-occurring N/A 78% MH Screen Complete SA Screen Complete N/A 79% Data Submitted to DMHAS by Month Mar % Months Submitted < 10% Under</p> > 10% Over Admissions 0% Discharges 0% ✓ Goal Met Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 85 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	10	14	-29%	\blacksquare
Admits	2	2	0%	
Discharges	1	2	-50%	•
Service Hours	172	441	-61%	•





^{*} State Avg based on 3 Active Re-entry Programs Programs

CRMHC UM Screening

Capitol Region Mental Health Center

Mental Health - Intake - UM Screening

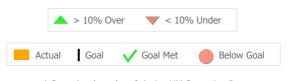
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity

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



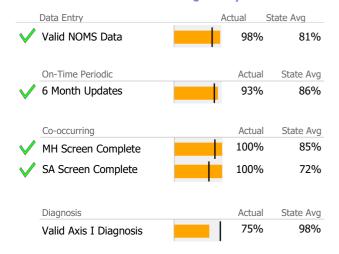


^{*} State Avg based on 0 Active UM Screening Programs

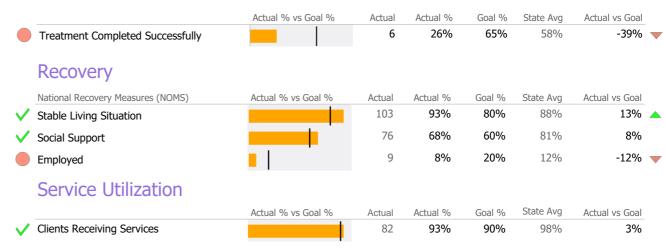
Program Activity

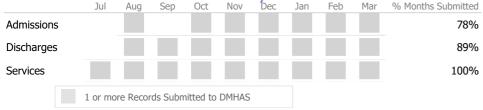
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	111	144	-23%	lacktriangle
Admits	17	37	-54%	•
Discharges	23	55	-58%	•
Service Hours	545	1,913	-72%	•

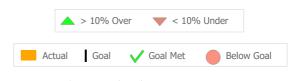
Data Submission Quality



Discharge Outcomes







Deaf and Hard of Hearing Team

Capitol Region Mental Health Center

Mental Health - Outpatient - Standard Outpatient

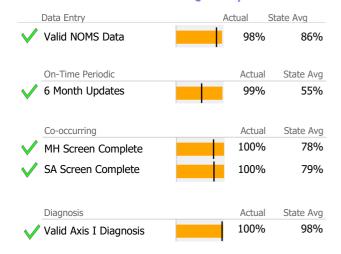
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	90	87	3%	
Admits	6	8	-25%	•
Discharges	16	3	433%	•
Service Hours	990	1,036	-4%	

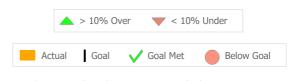
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 85 Active Standard Outpatient Programs

Forensic Outpatient 3120140F

Capitol Region Mental Health Center

Forensic MH - Outpatient - Standard Outpatient

1 or more Records Submitted to DMHAS

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

* State Avg based on 3 Active Standard Outpatient Programs

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 43 53 -19% Treatment Completed Successfully 0 0% 50% 50% -50% Admits 11 20 **-45% ** Recovery 8 Discharges 25 **-68% ▼** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 645 1,085 -41% 43 100% 60% 33% 40% 🔺 Self Help 29 67% 60% 69% 7% Social Support **Data Submission Quality** 35 82% Stable Living Situation 81% 95% -14% Data Entry Actual State Avg 2 5% 30% 17% -25% -**Employed** Valid NOMS Data 94% 88% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual vs Goal Actual % vs Goal % Actual Actual % 6 Month Updates 96% 96% Clients Receiving Services 35 90% 100% 99% 10% Service Engagement Co-occurring Actual State Avg 100% 75% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 9 82% 75% 92% 7% SA Screen Complete 100% 75% 2 or more Services within 30 days Diagnosis State Avg Actual 84% 97% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 56% Discharges 67% ✓ Goal Met Actual Goal Below Goal Services 100%

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

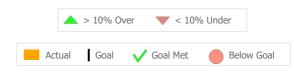
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	168	50	236%	•
Admits	185	51	263%	•
Discharges	184	51	261%	•

Crisis



	Jul	Aug	Sep		Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
	1 or r	nore Record	ds Sub	mitted t	o DMHA	S				



^{*} State Avg based on 26 Active Mobile Crisis Team Programs

Capitol Region Mental Health Center Mental Health - Residential Services - Supervised Apartments

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Unique Clients** 12 -33% 🔻 100% 60% 78% 40% 🔺 Treatment Completed Successfully 6 Admits -83% 🔻 Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **-75% ▼** Discharges 1 4 Follow-up within 30 Days of Discharge 100% 90% 77% 10% **Bed Days** 2,103 1,987 6% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Data Submission Quality** 6 84% 15% Social Support 75% 60% Data Entry Actual State Avg 2 25% 25% 9% 0% **Employed** Valid NOMS Data 93% 75% 88% 95% 94% -7% Stable Living Situation On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 86% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 620 days 77% 90% 93% -13% **V** 0.4 Actual State Avg Co-occurring 89% N/A MH Screen Complete >110% 90-110% < 90% SA Screen Complete N/A 74% State Avg Diagnosis Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 11% Discharges 11% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 79 Active Supervised Apartments Programs

Homeless Outreach Team

Capitol Region Mental Health Center

Mental Health - Other - Outreach & Engagement

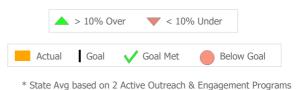
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity

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





Inpatient Treatment Unit

Capitol Region Mental Health Center

Mental Health - Inpatient Services - Non-Certified Subacute

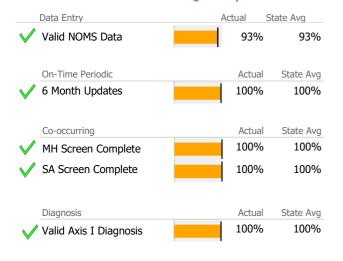
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

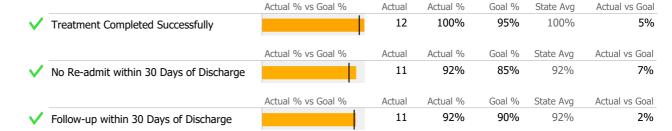
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	28	28	0%
Admits	13	12	8%
Discharges	12	12	0%
Bed Days	4,043	4,367	-7%

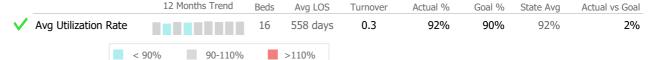
Data Submission Quality



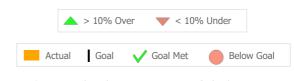
Discharge Outcomes



Bed Utilization





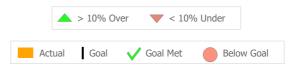


^{*} State Avg based on 1 Active Non-Certified Subacute Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	72	112	-36%	•
Admits	50	78	-36%	•
Discharges	50	88	-43%	•
Service Hours	299	656	-54%	•

Data	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
	Jui	Aug	Sep	OCL	IVOV	Dec	Jan	гер	Mai	70 MOILLIS SUDITILLED
Admissions										100%
Discharges										100%
•										
Services										100%
										_
	1 or m	nore Recor	de Suk	mitted t	o DMH	ıs				
	1 01 11	iore recor	us Jul	milliced (יוויום ט.	13				



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 - March 2021 (Data as of Jun 28, 2021)

Program Activity

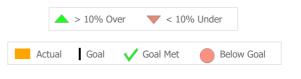
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

Data Submitted to DMHAS by Month
Jul Aug Sep Oct Nov Dec Jan Feb Mar % Months Submitted

Admissions

Discharges

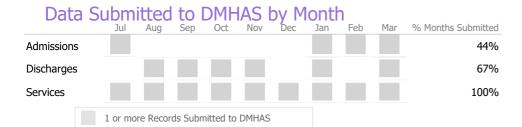
1 or more Records Submitted to DMHAS

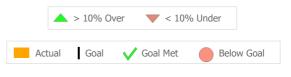


^{*} State Avg based on 5 Active Court Liaison-Jail Diversion Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	40	-35%	▼
Admits	7	20	-65%	•
Discharges	8	16	-50%	•
Service Hours	228	398	-43%	•





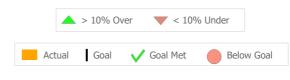
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	253	175	45%	•
Admits	355	218	63%	•
Discharges	353	218	62%	•

Crisis



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
1 or more Records Submitted to DMHAS										



^{*} State Avg based on 26 Active Mobile Crisis Team Programs

Peer Support

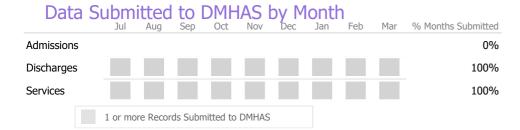
Capitol Region Mental Health Center

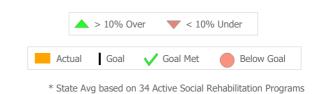
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity Service Utilization Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Measure Actual 1 Yr Ago Variance % Clients Receiving Services 22 4% 90% 63% -86% -**Unique Clients** 581 651 -11% 22 Admits -100% 47 57 Discharges -18% Service Hours 10 92 **-89% ▼** Social Rehab/PHP/IOP 0 Days





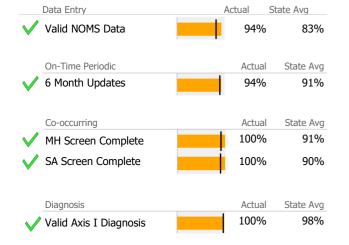
Program Activity Discharge Outcomes Actual % Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 429 446 -4% 3% 50% 34% -47% Treatment Completed Successfully 20 -20% 🔻 Admits 25 Recovery 34 Discharges 31 10% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 2,497 4,198 -41% 255 59% 60% 62% -1% Social Support 388 90% 95% 74% -5% Stable Living Situation **Data Submission Quality** 39 9% **Employed** 30% 23% -21% Data Entry Actual State Avg Service Utilization Valid NOMS Data 98% 86% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 394 100% 90% 84% 10% On-Time Periodic Actual State Avg 6 Month Updates 85% 55% Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Co-occurring Actual State Avg Actual 97% 13 65% 75% 76% -10% 78% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 100% 79% Diagnosis State Avg Actual 72% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 89% Discharges 100% ✓ Goal Met Actual Goal Below Goal 100% Services * State Avg based on 85 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 378 393 -4% 12% 50% 34% -38% Treatment Completed Successfully 15 -35% 🔻 Admits 23 Recovery 32 32 0% Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 3,617 4,976 -27% 309 82% 60% 62% 22% 🔺 Social Support 358 95% 95% 74% 0% Stable Living Situation **Data Submission Quality** 57 -15% **Employed** 15% 30% 23% Data Entry Actual State Avg Service Utilization Valid NOMS Data 99% 86% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 344 99% 90% 84% 9% On-Time Periodic Actual State Avg 6 Month Updates 94% 55% Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Ava Actual vs Goal Co-occurring Actual State Avg Actual 94% 10 67% 75% 76% -8% 78% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 100% 79% Diagnosis State Avg Actual 88% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 89% Discharges 78% ✓ Goal Met Actual Goal Below Goal Services 100% * State Avg based on 85 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

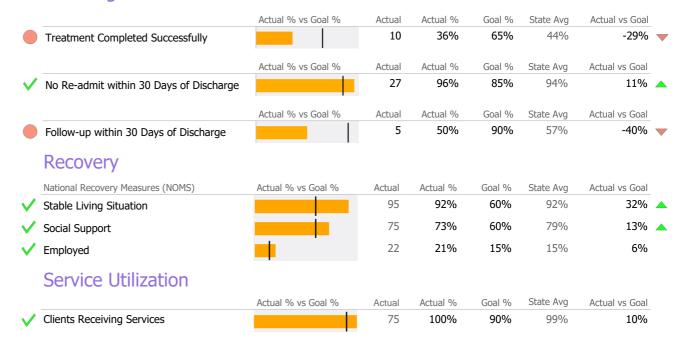
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	103	109	-6%	
Admits	19	25	-24%	•
Discharges	28	28	0%	
Service Hours	2,484	8,712	-71%	•

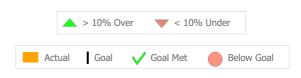
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 23 Active Assertive Community Treatment Programs