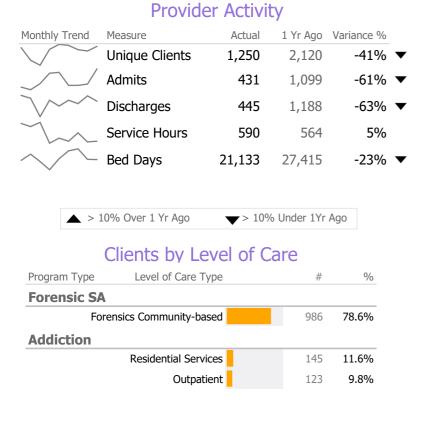
Connecticut Renaissance Inc.

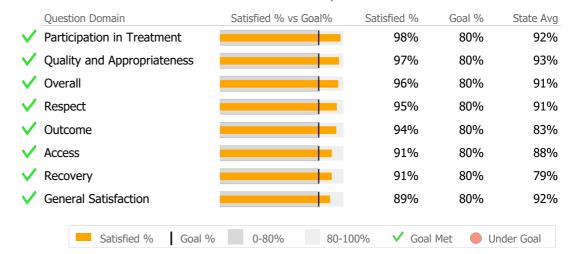
Shelton, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

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



Consumer Satisfaction Survey (Based on 260 FY20 Surveys)



Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25 📕	221	18%	10%	Male Male	958	77%	▲ 58%
26-34	360	29%	22%	Female <mark>–</mark>	289	23%	▼ 42%
35-44	315	25%	23%	Transgender			0%
45-54 📕	193	15%	19%				
55-64	120	10%	19%				
65+	37	3%	8%	Race	#	%	State Avg
				White/Caucasian	955	76%	▲ 62%
Ethnicity	#	%	State Avg	Black/African American	207	17%	17%
Non-Hispanic	840	67%	69%	Other	52	4%	13%
Hispanic-Other	. 364	29%	▲ 8%	Asian	23	2%	1%
Hisp-Puerto Rican	26	2%	12%	Unknown	12	1%	6%
Unknown	15	1%	11%	Multiple Races	1	0%	1%
				Am. Indian/Native Alaskan			0%
Hispanic-Mexican	4	0%	0%	Hawaiian/Other Pacific Islander			0%
Hispanic-Cuban	1	0%	0%				
I	Unique C	lients	State Avg	▲ > 10% Over State Avg	> 10% L	Jnder S	tate Avg

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

CTR - Bettor Choice

Connecticut Renaissance Inc. Addiction - Outpatient - Gambling Outpatient

Program Activity

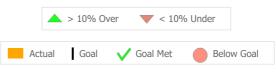
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	21	17	24%	
Admits	10	8	25%	
Discharges	8	4	100%	
Service Hours	149	93	61%	

Data Submission Quality

Data Entry	Act	ual S	itate Avg
🗸 Valid NOMS Data		94%	89%
Valid TEDS Data		43%	39%
On-Time Periodic		Actual	State Avg
6 Month Updates		83%	46%
Co-occurring		Actual	State Avg
V MH Screen Complete		100%	99%
V SA Screen Complete		100%	99%
Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		100%	100%

Data Submitted to DMHAS by Month





* State Avg based on 4 Active Gambling Outpatient Programs

Discharge Outcomes



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

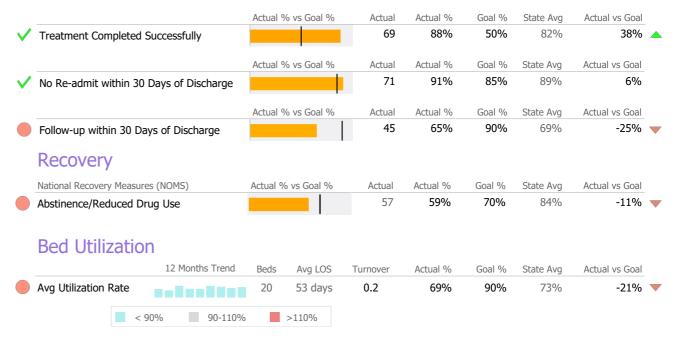
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	92	129	-29% 🔻	
Admits	86	114	-25% 🔻	
Discharges	78	118	-34% 🔻	
Bed Days	3,789	5,349	-29% 🔻	

Data Submission Quality

Data Entry	Actual State	e Avg
Valid NOMS Data	98%	99%
Valid TEDS Data	94%	99%
On-Time Periodic	Actual S	State Avg
V 6 Month Updates	0%	0%
Co-occurring	Actual S	State Avg
Co-occurring MH Screen Complete	Actual S	State Avg 94%
MH Screen Complete	100%	94%

Discharge Outcomes



Data Submitted to DMHAS by Month

Valid Axis I Diagnosis



100%

100%

	> 10% 0	ver 🔻 < 100	% Under	
Actual	Goal	V Goal Met	Belov	w Goal

* State Avg based on 4 Active SA Intensive Residential - Enhanced Programs

Addiction - Outpatient - Standard Outpatient

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	105	131	-20%	▼
Admits	47	84	-44%	▼
Discharges	56	60	-7%	
Service Hours	441	375	18%	

Data Submission Quality

Data Entry	Actual S	State Avg
Valid NOMS Data	84%	85%
Valid TEDS Data	87%	85%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	21%	21%
Co-occurring	Actual	State Avg
V MH Screen Complete	98%	91%
V SA Screen Complete	98%	97%
B: .	Astron	<u> </u>

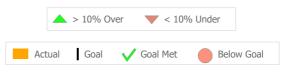


Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		27	48%	50%	51%	-2%	
5							
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		46	42%	50%	31%	-8%	
Abstinence/Reduced Drug Use		51	46%	55%	48%	-9%	
Stable Living Situation		86	78%	95%	76%	-17%	
Not Arrested		56	51%	75%	76%	-24%	-
Self Help		5	5%	60%	18%	-55%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		26	47%	90%	69%	-43%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		25	56%	75%	62%	-19%	

Data Submitted to DMHAS by Month



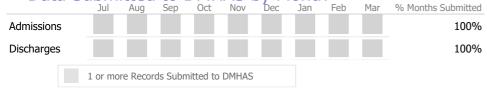


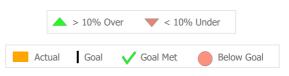
* State Avg based on 109 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	986	1,655	-40% 🔻	
Admits	243	743	-67% 🔻	
Discharges	262	833	-69% 🔻	

Data Submitted to DMHAS by Month





* State Avg based on 16 Active Pre-trial Intervention Programs Programs

Connecticut Renaissance Inc.

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

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	54	190	-72% 🔻
Admits	45	147	-69% 🔻
Discharges	41	159	-74% 🔻
Bed Days	17,344	22,066	-21% 🔻

Data Submission Quality

Data Entry	Actual S	tate Avg
Valid NOMS Data	94%	90%
Valid TEDS Data	98%	99%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	5%
-		
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	89%
V SA Screen Complete	100%	89%
•		
Diagnosis	Actual	State Avg

Discharge Outcomes

			Actual of	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	l
Treatment Completed Successfully				27	66%	70%	67%	-4%		
			Actual o	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
No Re-admit within 30 Days of Discharge				39	95%	85%	89%	10%		
			Actual 9	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge				13	48%	90%	70%	-42%		
Recov	very									
National Recovery Measures (NOMS)		Actual % vs Goal %		Actual	Actual %	Goal %	State Avg	Actual vs Goal		
Abstinence/Reduced Drug Use				35	65%	70%	68%	-5%		
Bed l	Jtilizatio	n								
		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization Rate		STATES-	90	101 days	1.1	70%	90%	79%	-20%	
	< 90% 90-110		% >110%							
	< 9	90% 90-110%		>110%						

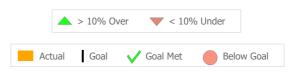
Data Submitted to DMHAS by Month

Valid Axis I Diagnosis



100%

100%



* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs