

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---------------|----------------|--------|----------|------------|
| | Unique Clients | 858 | 2,262 | -62% ▼ |
| | Admits | 689 | 2,259 | -69% ▼ |
| | Discharges | 649 | 2,397 | -73% ▼ |
| | Service Hours | | - | |
| | Bed Days | 86,221 | 116,244 | -26% ▼ |

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

Consumer Satisfaction Survey

(Based on 4 FY20 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ Quality and Appropriateness | | 100% | 80% | 93% |
| ✓ Participation in Treatment | | 100% | 80% | 92% |
| ✓ Overall | | 100% | 80% | 91% |
| ✓ Respect | | 100% | 80% | 91% |
| ✓ Access | | 100% | 80% | 88% |
| ✓ Outcome | | 100% | 80% | 83% |
| ✓ Recovery | | 100% | 80% | 79% |
| ● General Satisfaction | | 75% | 80% | 92% |

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

Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|----------------------|---------------------|-----|-------|
| Addiction | Inpatient Services | 556 | 64.4% |
| | Outpatient Services | 307 | 35.6% |
| Mental Health | Inpatient Services | 307 | 35.6% |
| | Outpatient Services | 556 | 64.4% |

Client Demographics

| Age | # | % | State Avg |
|-------|-----|-----|-----------|
| 18-25 | 72 | 8% | 10% |
| 26-34 | 193 | 23% | 22% |
| 35-44 | 218 | 25% | 23% |
| 45-54 | 156 | 18% | 19% |
| 55-64 | 161 | 19% | 18% |
| 65+ | 56 | 7% | 7% |

| Gender | # | % | State Avg |
|-------------|-----|-----|-----------|
| Male | 567 | 66% | 59% |
| Female | 287 | 33% | 41% |
| Transgender | 4 | 0% | 0% |

| Ethnicity | # | % | State Avg |
|-------------------|-----|-----|-----------|
| Non-Hispanic | 674 | 79% | ▲ 68% |
| Hisp-Puerto Rican | 119 | 14% | 11% |
| Hispanic-Other | 53 | 6% | 8% |
| Unknown | 7 | 1% | ▼ 12% |
| Hispanic-Mexican | 3 | 0% | 0% |
| Hispanic-Cuban | 2 | 0% | 0% |

| Race | # | % | State Avg |
|---------------------------------|-----|-----|-----------|
| White/Caucasian | 506 | 59% | 61% |
| Black/African American | 187 | 22% | 17% |
| Other | 141 | 16% | 13% |
| Asian | 9 | 1% | 1% |
| Unknown | 7 | 1% | 6% |
| Multiple Races | 5 | 1% | 1% |
| Am. Indian/Native Alaskan | 2 | 0% | 0% |
| Hawaiian/Other Pacific Islander | 1 | 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 | 216 | 224 | -4% |
| Admits | 73 | 70 | 4% |
| Discharges | 73 | 77 | -5% |
| Transfers - In | 1 | 10 | -90% ▼ |
| Transfers - Out | 3 | 7 | -57% ▼ |
| Bed Days | 53,328 | 56,219 | -5% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| ● Treatment Completed Successfully | | 63 | 83% | 95% | 80% | -12% ▼ |
| ✓ No Re-admit within 30 Days of Discharge | | 61 | 87% | 85% | 86% | 2% |
| ● Follow-up within 30 Days of Discharge | | 51 | 82% | 90% | 78% | -8% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|--------------------------|--------|-----------|
| ✓ Valid NOMS Data | | 85% |
| On-Time Periodic | Actual | State Avg |
| ● 6 Month Updates | | 12% |
| Co-occurring | Actual | State Avg |
| ✓ MH Screen Complete | | 88% |
| ✓ SA Screen Complete | | 100% |
| Diagnosis | Actual | State Avg |
| ✓ Valid Axis I Diagnosis | | 99% |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------|-----------------|------|------------|----------|----------|--------|-----------|----------------|
| ✓ Avg Utilization Rate | | 140 | 1,193 days | 0.2 | 104% | 90% | 86% | 14% ▲ |

■ < 90%
 ■ 90-110%
 ■ > 110%

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 11 Active Acute Psychiatric Programs

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|-----------------|--------|----------|------------|
| Unique Clients | 32 | 28 | 14% ▲ |
| Admits | 15 | 3 | 400% ▲ |
| Discharges | 3 | 10 | -70% ▼ |
| Transfers - In | 1 | 2 | -50% ▼ |
| Transfers - Out | 1 | 1 | 0% |
| Bed Days | 9,358 | 7,296 | 28% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 96% | 85% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 12% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 67% | 88% |
| SA Screen Complete | 100% | 100% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

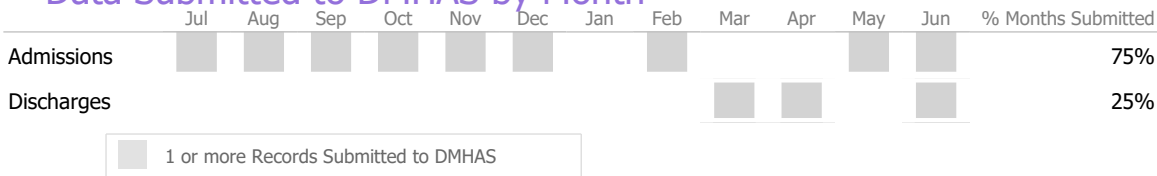
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 2 | 50% | 95% | 80% | -45% ▼ |
| No Re-admit within 30 Days of Discharge | | 2 | 100% | 85% | 86% | 15% ▲ |
| Follow-up within 30 Days of Discharge | | 1 | 50% | 90% | 78% | -40% ▼ |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------|-----------------|------|------------|----------|----------|--------|-----------|----------------|
| Avg Utilization Rate | | 45 | 1,262 days | 0.4 | 57% | 90% | 86% | -33% ▼ |

Legend: ■ < 90% ■ 90-110% ■ > 110%

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 11 Active Acute Psychiatric Programs

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 17 | 25 | -32% ▼ |
| Admits | 3 | 12 | -75% ▼ |
| Discharges | 6 | 11 | -45% ▼ |
| Bed Days | 4,881 | 5,592 | -13% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 84% | 85% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 12% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 100% | 88% |
| SA Screen Complete | 100% | 100% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 6 | 100% | 95% | 80% | 5% |
| ● No Re-admit within 30 Days of Discharge | | 4 | 67% | 85% | 86% | -18% ▼ |
| ● Follow-up within 30 Days of Discharge | | 4 | 67% | 90% | 78% | -23% ▼ |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------|-----------------|------|------------|----------|----------|--------|-----------|----------------|
| ● Avg Utilization Rate | | 15 | 1,284 days | 0.3 | 89% | 90% | 86% | -1% |

Legend: < 90% (light blue), 90-110% (grey), > 110% (red)

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 11 Active Acute Psychiatric Programs

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 43 | 36 | 19% ▲ |
| Admits | 26 | 18 | 44% ▲ |
| Discharges | 22 | 19 | 16% ▲ |
| Bed Days | 6,729 | 6,457 | 4% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 22 | 100% | 95% | 80% | 5% |
| ✓ No Re-admit within 30 Days of Discharge | | 21 | 95% | 85% | 86% | 10% |
| ○ Follow-up within 30 Days of Discharge | | 15 | 68% | 90% | 78% | -22% ▼ |

Data Submission Quality

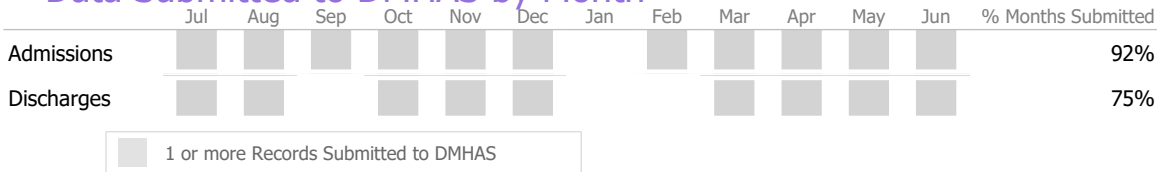
| Data Entry | Actual | State Avg |
|--------------------------|--------|-----------|
| ✓ Valid NOMS Data | | 85% |
| ○ On-Time Periodic | | |
| ○ 6 Month Updates | | 12% |
| Co-occurring | | |
| ✓ MH Screen Complete | | 88% |
| ✓ SA Screen Complete | | 100% |
| Diagnosis | | |
| ✓ Valid Axis I Diagnosis | | 99% |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| ✓ Avg Utilization Rate | | 20 | 339 days | 0.2 | 92% | 90% | 86% | 2% |

■ < 90%
 ■ 90-110%
 ■ > 110%

Data Submitted to DMHAS by Month



▲ > 10% Over
 ▼ < 10% Under

■ Actual
 | Goal
 ✓ Goal Met
 ○ Below Goal

* State Avg based on 11 Active Acute Psychiatric Programs

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

Medically Managed Detox 4.0

Connecticut Valley Hospital

Addiction - Inpatient Services - Medically Managed Detox 4.2

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2020 - June 2021 (Data as of Sep 20, 2021)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|-----------------|--------|----------|------------|
| Unique Clients | 358 | 1,411 | -75% ▼ |
| Admits | 382 | 1,667 | -77% ▼ |
| Discharges | 238 | 1,261 | -81% ▼ |
| Transfers - Out | 140 | 435 | -68% ▼ |
| Bed Days | 2,145 | 9,720 | -78% ▼ |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| ● Treatment Completed Successfully | | 235 | 62% | 80% | 62% | -18% ▼ |
| ✓ No Re-admit within 30 Days of Discharge | | 230 | 97% | 85% | 97% | 12% ▲ |
| ● Follow-up within 30 Days of Discharge | | 49 | 45% | 90% | 45% | -45% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|--------------------------|--------|-----------|
| ✓ Valid NOMS Data | | 89% 58% |
| ✓ Valid TEDS Data | | 100% 74% |
| On-Time Periodic | | |
| 6 Month Updates | | N/A N/A |
| Co-occurring | | |
| ✓ MH Screen Complete | | 100% 53% |
| ✓ SA Screen Complete | | 100% 53% |
| Diagnosis | | |
| ✓ Valid Axis I Diagnosis | | 100% 100% |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------|-----------------|------|---------|----------|----------|--------|-----------|----------------|
| ● Avg Utilization Rate | | 41 | 6 days | 0.1 | 14% | 90% | 14% | -76% ▼ |

Legend: < 90% (light blue), 90-110% (grey), >110% (red)

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |

Legend: Grey box = 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 2 Active Medically Managed Detox 4.2 Programs

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

Medically Monitored Intensive Inpt. 3.7

Connecticut Valley Hospital

Addiction - Inpatient Services - NA

Connecticut Dept of Mental Health and Addiction Services

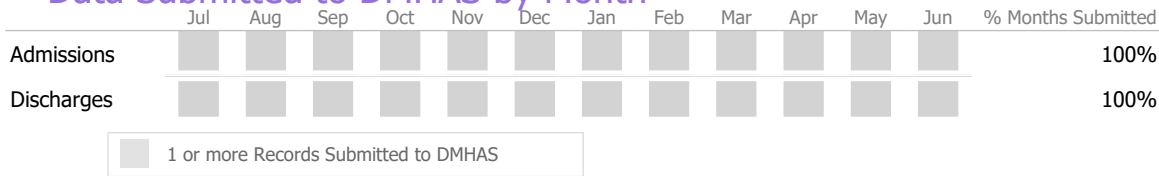
Program Quality Dashboard

Reporting Period: July 2020 - June 2021 (Data as of Sep 20, 2021)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|-----------------|--------|----------|------------|
| Unique Clients | 339 | 984 | -66% ▼ |
| Admits | 190 | 482 | -61% ▼ |
| Discharges | 307 | 1,002 | -69% ▼ |
| Transfers - In | 171 | 457 | -63% ▼ |
| Transfers - Out | 29 | 28 | 4% |
| Bed Days | 9,780 | 30,960 | -68% ▼ |

Data Submitted to DMHAS by Month



* State Avg based on 1 Active NA Programs

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 0 | 16 | ▼ |
| Admits | - | 7 | -100% ▼ |
| Discharges | - | 17 | -100% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|--------------------|--------|-----------|
| Valid NOMS Data | N/A | 97% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | N/A | 100% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | N/A | 100% |
| SA Screen Complete | N/A | 100% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 95% | 81% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 88% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 100% | N/A |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % 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 1 Active Sub-Acute Programs

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