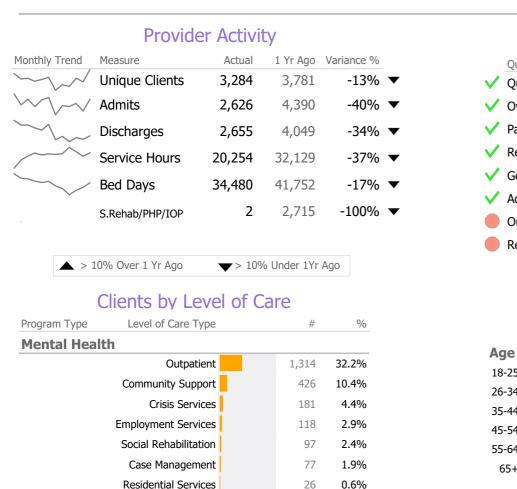
Addiction

Forensic MH

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



ACT

Outpatient

Residential Services

Case Management

Residential Services

Forensics Community-based

16

1,320

429

12

56

11

0.4%

32.3%

10.5%

0.3%

1.4%

0.3%

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-----------------------------|----------------------|-------------|--------|-----------|
| Quality and Appropriateness | | 93% | 80% | 93% |
| Overall | | 92% | 80% | 91% |
| Participation in Treatment | | 90% | 80% | 92% |
| Respect | | 90% | 80% | 91% |
| General Satisfaction | | 90% | 80% | 92% |
| Access | | 87% | 80% | 88% |
| Outcome | | 79% | 80% | 83% |
| Recovery | | 71% | 80% | 79% |

Client Demographics

Gender # % State Avg % State Avg 8% 2,040 62% 59% 18-25 264 10% Male 1,242 38% 41% 26-34 781 24% 22% Female Transgender 0% 23% 35-44 752 23% 19% 45-54 639 19% 55-64 648 20% 18% **Race** % # State Avg 65+ 200 6% 7% 68% White/Caucasian 2,239 61% **Ethnicity** Other 488 15% 13% # % State Avg Black/African American 368 11% 17% Non-Hispanic 2,403 73% 68% Unknown 152 5% 6% Hispanic-Other 564 17% 8% Asian 21 1% 1% Unknown 198 6% 12% Am. Indian/Native Alaskan 8 0% 0% Hisp-Puerto Rican 4% 11% 115 Multiple Races 6 0% 1%

Hawaiian/Other Pacific Islander

▲ > 10% Over State Avg

2

▼ > 10% Under State Avg

0%

0%

0%

Unique Clients | State Avg

4

0%

0%

Hispanic-Mexican

Hispanic-Cuban

ABI SA Counselor Outpatient Program

Rushford Center

Addiction - Outpatient - Standard Outpatient

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 Discharge Outcomes Measure Actual % vs Goal % Goal % Actual vs Goal Actual 1 Yr Ago Variance % Actual Actual % State Avg **Unique Clients** 42 48 -13% 100% 50% 51% 50% 🔺 Treatment Completed Successfully Admits 4 -100% Recovery Discharges 2 6 -67% **T** National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual 3 Service Hours 143 **-98% ▼** 24 57% 55% 49% 2% Abstinence/Reduced Drug Use 28 67% 75% 79% -8% Not Arrested **Data Submission Quality** 27 64% 78% 95% -31% Stable Living Situation Data Entry State Avg 11 26% 60% 18% -34% Self Help Valid NOMS Data 100% 86% 3 7% -43% -50% 32% **Employed** Valid TEDS Data 100% 86% Service Utilization On-Time Periodic Actual State Avg Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 6 Month Updates 0% 26% Clients Receiving Services 90% 72% -88% -3% Service Engagement Co-occurring Actual State Avg 92% N/A MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal SA Screen Complete 96% 0 0% 75% 61% -75% N/A 2 or more Services within 30 days Diagnosis Actual State Avg Valid Axis I Diagnosis 100% 99% Data Submitted to DMHAS by Month May Feb Mar Apr Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 0% Discharges 8% Goal Met Actual Goal Below Goal 8% Services * State Avg based on 111 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

1 or more Records Submitted to DMHAS

* State Avg based on 88 Active Standard Outpatient Programs

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

Program Activity Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 1,031 1,074 -4% 20 6% 50% 36% -44% Treatment Completed Successfully Admits 346 537 -36% Recovery 353 Discharges 410 -14% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 8,921 10,735 -17% 504 45% 60% 62% -15% Social Support 137 12% 24% -18% 30% **Employed Data Submission Quality** 95% Stable Living Situation 340 31% 75% -64% -Data Entry Actual State Avg Service Utilization Valid NOMS Data 36% 86% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 547 72% 90% 85% -18% On-Time Periodic Actual State Avg 19% 54% 6 Month Updates Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Actual State Avg Co-occurring 231 1% 71% 75% 75% -4% 80% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 1% 81% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% Discharges 100% ✓ Goal Met Actual Goal Below Goal 100% Services

1 or more Records Submitted to DMHAS

* State Avg based on 88 Active Standard Outpatient Programs

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

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 239 257 -7% Treatment Completed Successfully 21 49% 50% 36% -1% 30 Admits 96 -69% Recovery Discharges 43 55 -22% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,941 1,557 25% 167 69% 60% 62% 9% Social Support 24% -19% 26 11% 30% **Employed Data Submission Quality** 95 95% Stable Living Situation 39% 75% -56% Data Entry Actual State Avg Service Utilization Valid NOMS Data 66% 86% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 194 98% 90% 85% 8% On-Time Periodic Actual State Avg 26% 54% 6 Month Updates Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Actual State Avg Co-occurring -38% -33% 11 37% 75% 75% 80% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 37% 81% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% Discharges 92% ✓ Goal Met Actual Goal Below Goal 33% Services

Camp Street MH Intensive Forensic Residential Prog

1 or more Records Submitted to DMHAS

Rushford Center

Forensic MH - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

* State Avg based on 1 Active MH Intensive Res. Rehabilitation Programs

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

Program Activity Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Unique Clients** 11 11 0% Treatment Completed Successfully 20% 75% 20% -55% 8 6 -25% 🔻 Admits Actual % vs Goal % Goal % Actual Actual % State Avg Actual vs Goal 5 Discharges 6 -17% No Re-admit within 30 Days of Discharge 5 100% 85% 100% 15% **Bed Days** 1,965 1,275 54% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge 100% 90% 100% 10% **Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 42% 42% 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 90% 311 days 0.2 90% 90% 0% On-Time Periodic Actual State Avg 90-110% >110% 6 Month Updates 0% 0% Co-occurring Actual State Avg 0% 0% MH Screen Complete SA Screen Complete 0% 0% Diagnosis State Avg Actual 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov May % Months Submitted > 10% Over < 10% Under</p> Admissions 50% Discharges 42% ✓ Goal Met Actual Goal Below Goal

Career Development Svs 303-270

Rushford Center

Mental Health - Employment Services - Employment Services

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 | 118 | 195 | -39% | • |
| Admits | 49 | 125 | -61% | • |
| Discharges | 60 | 138 | -57% | • |
| Service Hours | 255 | 448 | -43% | • |

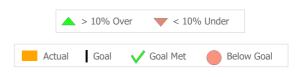
Recovery



Data Submission Quality

| Data Entry | Actu | ıal St | tate Avg |
|------------------|------|--------|-----------|
| Valid NOMS Data | | 63% | 90% |
| On-Time Periodic | | Actual | State Avg |
| 6 Month Updates | | 77% | 93% |

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|---------|----------|----------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | | | | 67% |
| Discharges | | | | | | | | | | | | | 75% |
| Services | | | | | | | | | | | | | 100% |
| | 1 or mo | ore Reco | rds Subn | nitted to | DMHAS | | | | | | | | |



^{*} State Avg based on 39 Active Employment Services Programs

1 or more Records Submitted to DMHAS

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

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

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

Reporting Period: July 2020 - June 2021 (Data as of Sep 20, 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 23 90% 56% 6% 96% Unique Clients 56 74 -24% 38 Admits 55 -31% Discharges 33 60 -45% **T** Service Hours 65 63 4% Jail Diversion Actual % vs Goal % Goal % Actual vs Goal Actual Actual % State Avg 0% 40% 🔺 40% 60% Follow-up Service within 48 hours Data Submitted to DMHAS by Month Sep % Months Submitted Feb Mar > 10% Over < 10% Under</p> Admissions 83% Discharges 83% Goal Goal Met Below Goal Services 100%

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 | 59 | 76 | -22% ▼ | |
| Admits | 66 | 82 | -20% ▼ | |
| Discharges | 64 | 85 | -25% ▼ | |
| Bed Days | 1,269 | 1,693 | -25% ▼ | |

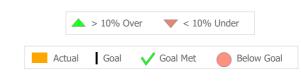
Discharge Outcomes



Bed Utilization

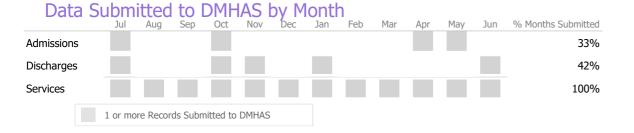


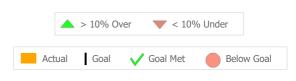
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|---------|---------|----------|-----------|-------|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |
| | 1 or mo | re Reco | rds Subn | nitted to | DMHAS | | | | | | | | |



^{*} State Avg based on 10 Active Respite Bed Programs

Program Activity Service Utilization Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Measure Actual 1 Yr Ago Variance % Clients Receiving Services 72 80% 90% 69% -10% **Unique Clients** 97 142 -32% 🔻 5 52 Admits **-90% ▼** 8 53 Discharges **-85% ▼** Service Hours 719 1,169 -39% Social Rehab/PHP/IOP 2 2,715 -100% Days





^{*} State Avg based on 34 Active Social Rehabilitation Programs

Homeless Case Management303-294

Rushford Center

Mental Health - Case Management - Outreach & Engagement

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 | 25 | 9 | 178% | • |
| Admits | 22 | 6 | 267% | • |
| Discharges | 11 | 6 | 83% | • |
| Service Hours | 90 | _ | | |

Service Engagement







^{*} State Avg based on 46 Active Outreach & Engagement Programs

1 or more Records Submitted to DMHAS

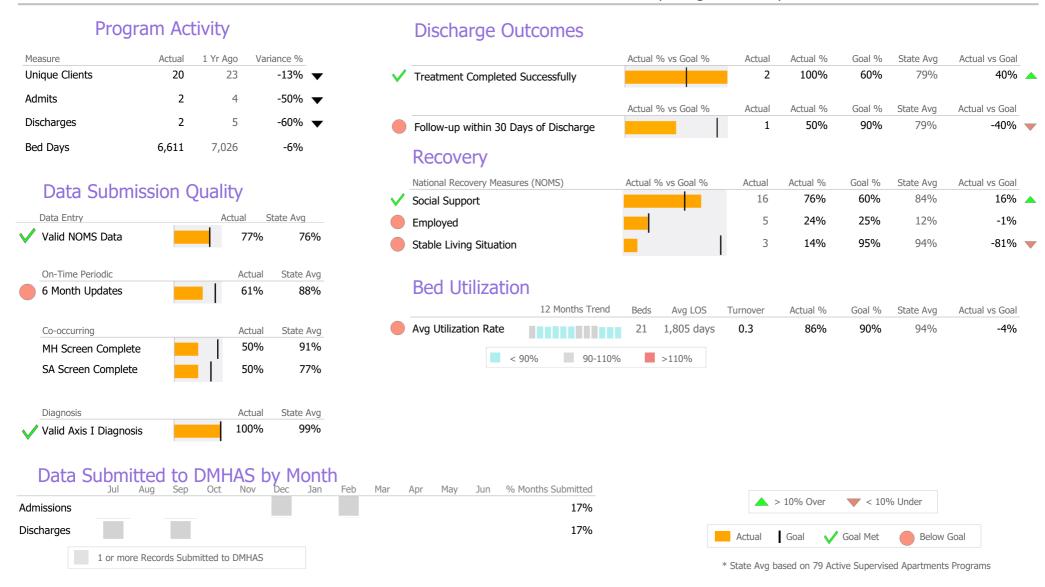
Reporting Period: July 2020 - June 2021 (Data as of Sep 20, 2021)

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 203 215 -6% Treatment Completed Successfully 2 5% 50% 36% -45% 37 Admits 69 **-46% ** Recovery 5% Discharges 44 42 National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 1,919 2,559 -25% 129 59% 60% 62% -1% Social Support 17 8% 30% 24% -22% **Employed Data Submission Quality** 95% Stable Living Situation 62 28% 75% -67% Data Entry Actual State Avg Service Utilization Valid NOMS Data 62% 86% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 122 70% 90% 85% -20% On-Time Periodic Actual State Avg 34% 54% 6 Month Updates Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual State Avg Actual Co-occurring 32 19% 0% 80% 2 or more Services within 30 days 94% 75% 75% MH Screen Complete SA Screen Complete 0% 81% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 92% Discharges 100% ✓ Goal Met Actual Goal Below Goal 92% Services * State Avg based on 88 Active Standard Outpatient Programs

Mental Health - Residential Services - Supervised Apartments

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 Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 5 6 -17% N/A N/A 50% 51% N/A Treatment Completed Successfully Admits 1 -100% Recovery Discharges 1 -100% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 178 -100% 4 80% 75% 79% 5% Not Arrested 3 60% 55% 49% 5% Abstinence/Reduced Drug Use **Data Submission Quality** Stable Living Situation 4 80% 95% 78% -15% Data Entry Actual State Avg 2 40% 18% 60% -20% Self Help Valid NOMS Data 86% N/A 0 0% 50% 32% -50% **Employed** Valid TEDS Data N/A 86% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 0% 26% Clients Receiving Services 0 0% 90% 72% N/A 🔻 Service Engagement Co-occurring Actual State Avg N/A 92% MH Screen Complete Outpatient Actual % vs Goal % Actual vs Goal Actual Actual % Goal % State Ava SA Screen Complete N/A 96% 0% 75% 61% -75% -2 or more Services within 30 days Diagnosis Actual State Avg 100% 99% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 0% 0% Discharges Actual Goal ✓ Goal Met Below Goal Services 0% * State Avg based on 111 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

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 | 133 | 113 | 18% | • |
| Admits | 163 | 138 | 18% | • |
| Discharges | 161 | 138 | 17% | • |
| Service Hours | 84 | 7 | | |

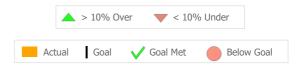
Crisis



Data Submitted to DMHAS by Month

1 or more Records Submitted to DMHAS

| | Jui | Aug | Sep | UCL | INOV | Dec | Jan | ren | Ividi | Apr | I*Idy | Juii | % MOTHETS Submitted |
|------------|-----|-----|-----|-----|------|-----|-----|-----|-------|-----|-------|------|---------------------|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |
| Services | | | | | | | | | | | | | 100% |
| | | | | | | | | | | | | | |



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

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 261 384 -32% 0 0% 50% 51% -50% Treatment Completed Successfully 31 Admits 305 -90% **T** Recovery Discharges 6 172 -97% **-**National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 724 1,685 -57% 49 19% 50% 32% -31% **Employed** 50 19% 55% 49% -36% -Abstinence/Reduced Drug Use **Data Submission Quality** 90 34% 75% 79% -41% Not Arrested Data Entry Actual State Avg 43 18% -44% -16% 60% Self Help Valid NOMS Data 10% 86% 66 25% 95% 78% -70% Stable Living Situation Valid TEDS Data 3% 86% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual % vs Goal % Actual Actual % Actual vs Goal 6 Month Updates 0% 26% Clients Receiving Services 66 26% 90% 72% -64% Service Engagement Co-occurring Actual State Avg 16% 92% MH Screen Complete Outpatient Actual % vs Goal % Actual vs Goal Actual Actual % Goal % State Ava SA Screen Complete 16% 96% 12 39% 75% 61% -36% 2 or more Services within 30 days Diagnosis Actual State Avg Valid Axis I Diagnosis 100% 99% Data Submitted to DMHAS by Month Sep Mar % Months Submitted Jun > 10% Over < 10% Under</p> Admissions 100% 42% Discharges Actual Goal ✓ Goal Met Below Goal Services 92% * State Avg based on 111 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

* State Avg based on 29 Active MH Intensive Res. Rehabilitation Programs

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

Program Activity Discharge Outcomes Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 6 0% Treatment Completed Successfully 0 0% 75% 70% -75% Admits Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % Discharges 1 1 0% 1 100% 85% 77% 15% No Re-admit within 30 Days of Discharge **Bed Days** 1.811 1,902 -5% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge N/A N/A 90% 77% N/A **Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 70% 97% 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 99% 90% 1,737 days 0.2 91% 9% On-Time Periodic Actual State Avg 90-110% >110% 6 Month Updates 75% 87% Actual State Avg Co-occurring 0% 86% MH Screen Complete SA Screen Complete 0% 87% Diagnosis State Avg Actual 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Apr May % Months Submitted > 10% Over < 10% Under</p> Admissions 8% Discharges 8% Actual Goal ✓ Goal Met Below Goal 1 or more Records Submitted to DMHAS

Pilots Program 303-551

Rushford Center

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

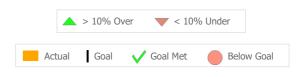
Reporting Period: July 2020 - June 2021 (Data as of Sep 20, 2021)

Program Activity Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Measure Actual 1 Yr Ago Variance % 5 29% 85% 89% -56% -Stable Living Situation Unique Clients 17 22 -23% 🔻 Service Utilization 2 Admits -100% 6 Discharges 1 -83% **T** State Ava Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 14 88% 90% 97% -2% 149 Service Hours 53 -64%

Data Submission Quality







^{*} State Avg based on 106 Active Supportive Housing – Scattered Site Programs

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

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 Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 530 715 -26% 306 57% 80% 68% -23% Treatment Completed Successfully Admits 518 749 -31% Actual % vs Goal % Goal % Actual Actual % State Avg Actual vs Goal Discharges 534 739 -28% 484 91% 85% 90% 6% No Re-admit within 30 Days of Discharge Bed Davs 9,291 12,921 -28% **T** Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 139 45% 90% 66% -45% -**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 63% 83% 261 47% 60% 50% -13% Self Help 98% Valid TEDS Data 97% 187 33% 70% 41% -37% Abstinence/Reduced Drug Use On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates N/A 0% 12 Months Trend Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal Avg Utilization Rate 19 days 0.1 75% 90% 88% -15% **T** Co-occurring Actual State Avg 39% 93% MH Screen Complete < 90% 90-110% >110% SA Screen Complete 34% 93% Diagnosis Actual State Avg 100% 100% Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 100% 100% Discharges ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 7 Active SA Intensive Res. Rehabilitation 3.7 Programs

* State Avg based on 7 Active Medically Monitored Detox 3.7D Programs

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

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 922 1,145 -19% Treatment Completed Successfully 716 63% 80% 67% -17% Admits 1,131 1,418 -20% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 1.135 1,419 -20% 972 86% 85% 80% 1% No Re-admit within 30 Days of Discharge **Bed Days** 4,640 5,659 -18% Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 309 43% 90% 54% -47% **Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 67% 80% 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal 99% Valid TEDS Data 98% Avg Utilization Rate 90% 19 4 days 0.0 67% 72% -23% **T** 90-110% >110% On-Time Periodic State Avg Actual 6 Month Updates N/A N/A Co-occurring Actual State Avg 34% 96% MH Screen Complete SA Screen Complete 33% 95% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 100% 100% Discharges ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS

Rushford Community Support/RP Program

Rushford Center

SA Screen Complete

✓ Valid Axis I Diagnosis

Diagnosis

Mental Health - Community Support - CSP

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 Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Unique Clients** 426 487 -13% 17 20% 65% 56% -45% Treatment Completed Successfully Admits 62 157 -61% Recovery 86 Discharges 133 -35% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 4,710 10,984 -57% 287 67% 60% 81% 7% Social Support 32 7% 20% -13% 13% **Employed Data Submission Quality** 25% 80% 88% -55% -Stable Living Situation 108 Data Entry Actual State Avg Service Utilization Valid NOMS Data 54% 81% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 311 90% 90% 98% 0% On-Time Periodic Actual State Avg 17% 86% 6 Month Updates Actual State Avg Co-occurring 6% 87% MH Screen Complete

Data Submitted to DMHAS by Month



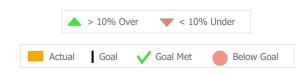
77%

State Avg

98%

6%

Actual 100%



^{*} State Avg based on 36 Active CSP Programs

Mental Health - Case Management - Supportive Housing - Scattered Site

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 | 37 | 33 | 12% | • |
| Admits | 5 | 3 | 67% | • |
| Discharges | 3 | 1 | 200% | • |
| Service Hours | 148 | 311 | -52% | • |

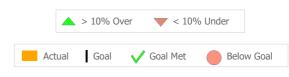
Recovery

| Na | ational Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| St | table Living Situation | | 6 | 16% | 85% | 89% | -69% |
| S | Service Utilization | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| / CI | lients Receiving Services | | 31 | 91% | 90% | 97% | 1% |

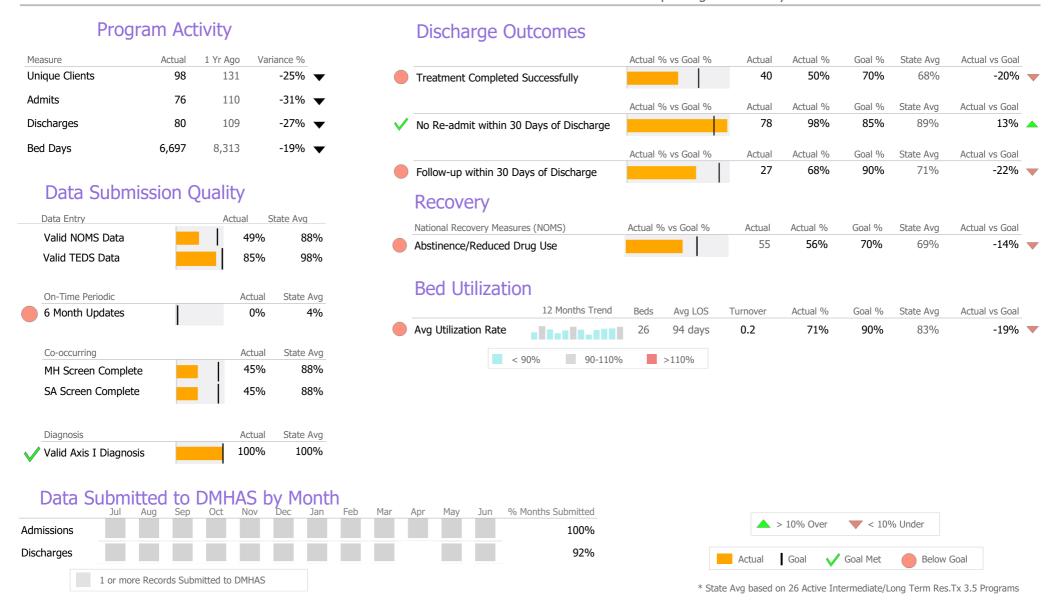
Data Submission Quality

| Data Entry | Actı | ual S | tate Avg |
|------------------|------|--------|-----------|
| Valid NOMS Data | | 62% | 96% |
| On-Time Periodic | | Actual | State Avg |
| 6 Month Updates | | 53% | 87% |





^{*} State Avg based on 106 Active Supportive Housing – Scattered Site Programs



SUD CM/ Substance Use Disorder Case Management

Rushford Center

Addiction - Case Management - Standard Case Management

1 or more Records Submitted to DMHAS

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 Discharge Outcomes Variance % Actual % State Avg Actual vs Goal Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % **Unique Clients** 12 275 -96% -N/A N/A 50% 52% N/A Treatment Completed Successfully Admits 284 -100% Recovery Discharges 284 -100% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 333 -100% 8% 20% 29% -12% **Employed** 33% 80% 82% -47% 4 Stable Living Situation **Data Submission Quality** 0 0% Self Help 60% 61% -60% Data Entry Actual State Avg Service Utilization Valid NOMS Data 94% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 0 0% 90% 85% N/A 🔻 On-Time Periodic Actual State Avg 6 Month Updates 0% 66% Data Submitted to DMHAS by Month Dec Feb Mar May Jun % Months Submitted Apr > 10% Over < 10% Under</p> Admissions 0% 0% Discharges Goal Met Below Goal Actual Goal 0% Services * State Avg based on 8 Active Standard Case Management Programs

Addiction - Outpatient - Standard Outpatient

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 Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 124 253 -51% 0 0% 50% 51% -50% Treatment Completed Successfully Admits 28 181 -85% 🔻 Recovery Discharges 14 174 -92% **-**Actual % vs Goal % National Recovery Measures (NOMS) Actual Actual % Goal % State Avg Actual vs Goal Service Hours 623 1,809 -66% 🔻 46 37% 55% 49% -18% Abstinence/Reduced Drug Use 31 25% 50% 32% -25% -**Employed Data Submission Quality** 61 48% 75% 79% -27% Not Arrested Data Entry Actual State Avg 29 23% 18% -37% 60% Self Help Valid NOMS Data 20% 86% 59 47% 95% 78% -48% Stable Living Situation Valid TEDS Data 17% 86% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 0% 26% Clients Receiving Services 46 41% 90% 72% -49% Service Engagement Co-occurring Actual State Avg 18% 92% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 18% 96% 2 or more Services within 30 days 22 79% 75% 61% 4% Diagnosis Actual State Avg Valid Axis I Diagnosis 100% 99% Data Submitted to DMHAS by Month Nov Mar % Months Submitted Jun > 10% Over < 10% Under</p> 92% Admissions 83% Discharges Actual Goal ✓ Goal Met Below Goal Services 100% * State Avg based on 111 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 16 13 23% 11% 65% 46% -54% -Treatment Completed Successfully 10 150% Admits 4 Actual % vs Goal % Goal % State Avg Actual Actual % Actual vs Goal 9 Discharges 6 50% 8 89% 85% 93% 4% No Re-admit within 30 Days of Discharge **Bed Days** 2,196 -26% **T** 2,963 Actual % vs Goal % Actual % State Avg Actual vs Goal Actual Goal % Follow-up within 30 Days of Discharge 0 0% 90% 56% -90% **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 16% 83% 0 0% 15% 16% -15% **Employed** 3 18% 60% 79% -42% -Social Support On-Time Periodic Actual State Avg 3 92% 18% 60% -42% -Stable Living Situation 0% 87% 6 Month Updates **Bed Utilization** Actual State Avg Co-occurring 10% 93% MH Screen Complete 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal SA Screen Complete 0% 92% Avg Utilization Rate 654 days 60% 90% -30% **T** 0.3 60% 90-110% >110% < 90% Diagnosis State Avg Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 50% Discharges 42% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 23 Active Assertive Community Treatment Programs