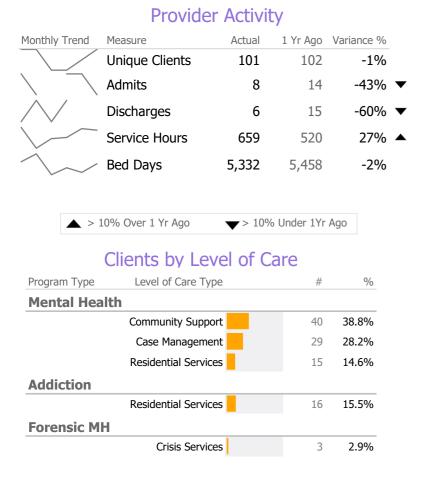
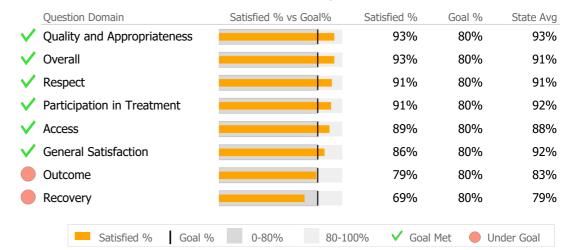
Inspirica Inc. (formerly St Luke's LifeWorks) Stamford, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)



Consumer Satisfaction Survey (Based on 76 FY21 Surveys)



Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	1	1%	9%	Male 🗾	53	52%	59%
26-34 📕	12	12%	21%	Female	48	48%	41%
35-44 📒	15	15%	23%	Transgender			0%
45-54 📕	20	20%	19%				
55-64	39	39%	▲ 19%				
65+	14	14%	9%	Race	#	%	State Avg
				Black/African American	51	50%	▲ 17%
Ethnicity	#	%	State Avg	White/Caucasian 📒 📔	46	46%	▼ 62%
Non-Hispanic	76	75%	68%	Other	2	2%	▼ 13%
Hisp-Puerto Rican	15	15%	11%	Asian	1	1%	1%
Hispanic-Other	7	7%	8%	Multiple Races	1	1%	1%
Hispanic-Mexican	2	2%	1%	Am. Indian/Native Alaskan			0%
				Hawaiian/Other Pacific Islander			0%
Unknown	1	1%	11%	Unknown			6%
Hispanic-Cuban			0%				
,							
-	Unique	Clients	State Avg	▲ > 10% Over State Avg	> 10% L	Inder St	ate Avg

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

Atlantic Park Apts 120-260

Inspirica Inc. (formerly St Luke's LifeWorks) Mental Health - Case Management - Supportive Housing – Development Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

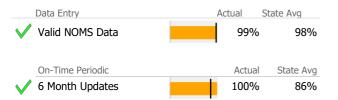
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	15	16	-6%	
Admits	-	2	-100% 🔻	
Discharges	-	1	-100% 🔻	
Service Hours	39	76	-48% 🔻	

	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		15	100%	85%	94%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		14	93%	90%	95%	3%	

Data Submission Quality



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							100%

	> 10% 0	ver v < 100	% Under	
Actual	Goal	V Goal Met	Below G	oal

* State Avg based on 65 Active Supportive Housing – Development Programs

Recovery

Colony Apartments 120-261

Inspirica Inc. (formerly St Luke's LifeWorks)

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	14	16	-13%	▼
Admits	-	1	-100%	▼
Discharges	-	2	-100%	▼
Service Hours	61	63	-3%	

National Deservery Messymes (NOMC) Astual 0/ us Cast 0/ Ashiral A shuel 0/ Caal 0/ Chata Aura A stude Luce Cool

Data Submission Quality



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							0%
Services							100%

R	e	С	0	V	e	r١	/
	-	-	<u> </u>		-	- 1	1

	National Recovery Measures (NOMS)	Actual % VS Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		14	100%	85%	94%	15%	4
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		13	93%	90%	95%	3%	

	> 10% 0	/er	V < 10 ⁰	% Under	
Actual	Goal	\checkmark	Goal Met	Belo	w Goal

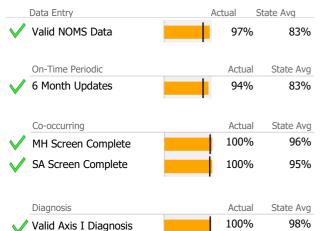
* State Avg based on 65 Active Supportive Housing - Development Programs

Inspirica Inc. (formerly St Luke's LifeWorks) Mental Health - Community Support - CSP

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	40	40	0%
Admits	3	6	-50% 🔻
Discharges	1	4	-75% 🔻
Service Hours	558	381	46% 🔺

Data Submission Quality



Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		0	0%	65%	57%	-65%	▼
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		35	88%	60%	80%	28%	
\checkmark	Stable Living Situation		39	98%	80%	86%	18%	
	Employed		5	12%	20%	14%	-8%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		39	100%	90%	98%	10%	

Data Submitted to DMHAS by Month



	> 10% 0	ver 💙 < 100	% Under
Actual	Goal	V Goal Met	Below Goal
Actual	Goal	V Goal Met	Below Goal

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

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	15	17	-12% 🔻
Admits	2	4	-50% 🔻
Discharges	2	5	-60% 🔻
Bed Days	2,331	2,287	2%

Data Submission Quality

Valid Axis I Diagnosis

Data Entry	Actual S	tate Avg
Valid NOMS Data	100%	77%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	93%
•		
Co-occurring	Actual	State Avg
V MH Screen Complete	100%	98%
V SA Screen Complete	100%	88%
Diagnosis	Actual	State Avg

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Treatment Completed Successfully		2	100%	60%	75%	40%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		1	50%	90%	81%	-40%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		15	100%	95%	96%	5%	
\checkmark	Social Support		9	60%	60%	86%	0%	
	Employed		0	0%	25%	13%	-25%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Avg Utilization Rate		13	1,235 days	0.5	97%	90%	94%	7%
	< 90	90-110%		>110%					

Data Submitted to DMHAS by Month Dec % Months Submitted Admissions

100%

99%

33%

33%

Discharges	
	1 or more Records Submitted to DMHAS

	> 10% 0	ver 🔻 < 10	% Under
Actual	Goal	🗸 Goal Met	Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Forensic MH - Crisis Services - Respite Bed

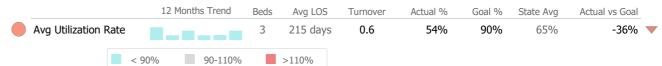
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3	4	-25% 🔻
Admits	1	1	0%
Discharges	2	3	-33% 🔻
Bed Days	298	411	-27% 🔻

Discharge Outcomes



Bed Utilization



Data Submitted to DMHAS by Month



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

* State Avg based on 7 Active Respite Bed Programs

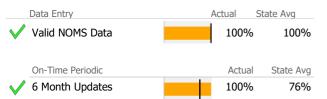
Variances in data may be indicative of operational adjustments related to the pandemic.

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

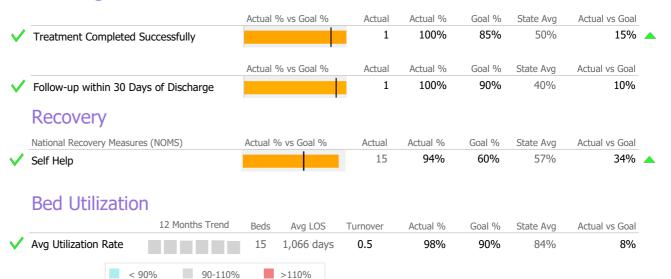
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16	15	7%
Admits	2	-	
Discharges	1	-	
Bed Days	2,703	2,760	-2%

Data Submission Quality



Discharge Outcomes



Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec % Months Submitted Admissions 33% Discharges 1 or more Records Submitted to DMHAS

		> 10% Ove	er 🔻	< 10%	Under	
A	ctual	Goal	V Goal	Met	Belo	w Goal

* State Avg based on 3 Active AIDS Residential Programs