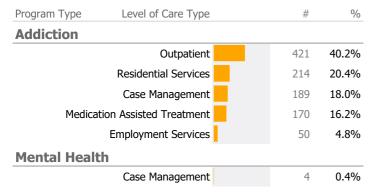
Provider Activity





Clients by Level of Care



Consumer Satisfaction Survey (Based on 690 FY21 Surveys) Question Domain Satisfied % vs Goal% Satisfied % Goal % State Avg General Satisfaction 96% 80% 92% Participation in Treatment 96% 80% 92% **Quality and Appropriateness** 96% 80% 93% Overall 80% 91% 95% Access 80% 88% 93% Respect 80% 91% 93% Outcome 91% 80% 83% Recovery 89% 80% 79% 0-80% 80-100% ✓ Goal Met Satisfied % Goal % Under Goal

Client Demographics

Age		#	%	State Avg	Gender	#	%	State Avg
18-25		56	7%	9%	Male	436	57%	59%
26-34		218	29%	21%	Female	323	43%	41%
35-44	•	229	30%	23%	Transgender			0%
45-54		129	17%	19%				
55-64		98	13%	19%				
65+	1	28	4%	9%	Race	#	%	State Avg
	•				White/Caucasian	583	77%	▲ 62%
Ethnicity		#	%	State Avg	Unknown	63	8%	6%
Non-Hispanic		622	82%	▲ 68%	Other	54	7%	13%
Unknown		75	10%	11%	Black/African American	46	6%	▼ 17%
Hispanic-Other		59	8%	8%	Am. Indian/Native Alaskan	8	1%	0%
1		1	0%	0%	Asian	3	0%	1%
Hispanic-Cuban					Hawaiian/Other Pacific Islander	2	0%	0%
Hispanic-Mexican		1	0%	1%	Multiple Races			1%
Hisp-Puerto Rican		1	0%	▼ 11%				
	(Unique C	lients	State Avg	▲ > 10% Over State Avg	7 > 10% U	Inder St	tate Avg

221 Migeon-PILOTS Development 562-551

McCall Foundation Inc

Service Hours

Mental Health - Case Management - Supportive Housing - Development

2

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

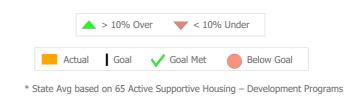
Program Activity Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 1 Yr Ago Measure Variance % Actual 50% 85% -35% Stable Living Situation **Unique Clients** -20% Service Utilization Admits -100% Discharges -100% Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % Clients Receiving Services 3 -15% 75% 90% 95%

Data Submission Quality

Data Entry	Actual 9	State Avg
Valid NOMS Data	N/A	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	86%

5

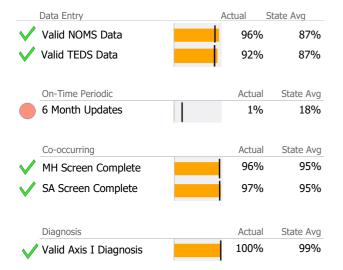


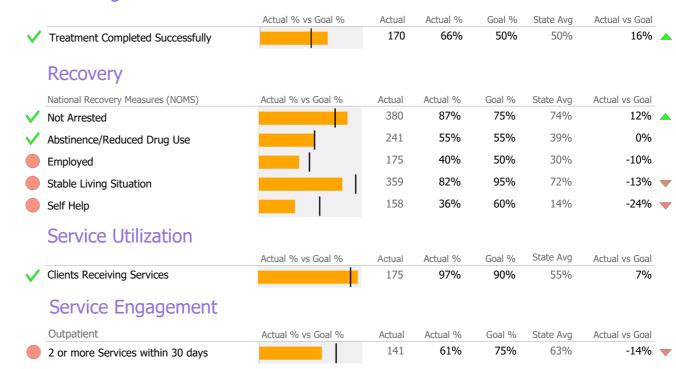


Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	420	451	-7%	
Admits	240	205	17%	•
Discharges	257	260	-1%	
Service Hours	2,266	870	161%	•

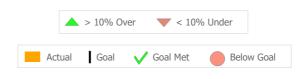
Data Submission Quality











^{*} State Avg based on 107 Active Standard Outpatient Programs

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McCall Foundation Inc

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

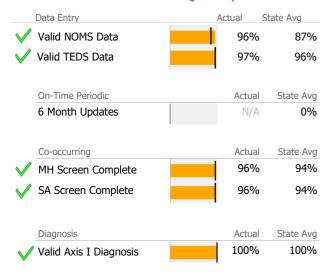
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

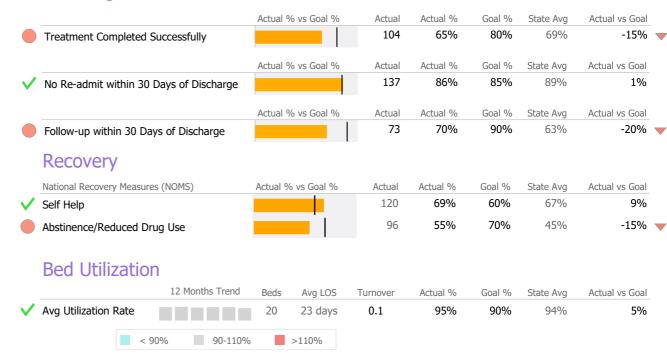
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	167	170	-2%
Admits	156	169	-8%
Discharges	159	165	-4%
Bed Days	3,484	3,499	0%

Data Submission Quality









^{*} State Avg based on 7 Active SA Intensive Res. Rehabilitation 3.7 Programs

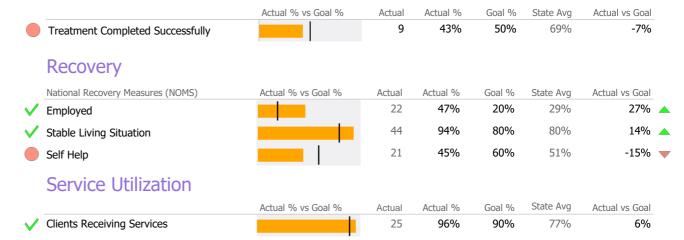
Program Activity

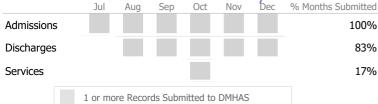
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	47		
Admits	47	-	
Discharges	21	-	
Service Hours	169	_	

Data Submission Quality

Data Entry	 Actual	State Avg
✓ Valid NOMS Data	97%	94%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	56%

Discharge Outcomes







^{*} State Avg based on 13 Active Standard Case Management Programs

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	22	20	10%	
Admits	12	10	20%	•
Discharges	10	11	-9%	
Bed Days	2,074	1,781	16%	•

Discharge Outcomes



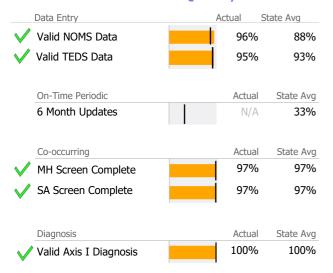
Data Submitted to DMHAS by Month



Program Activity

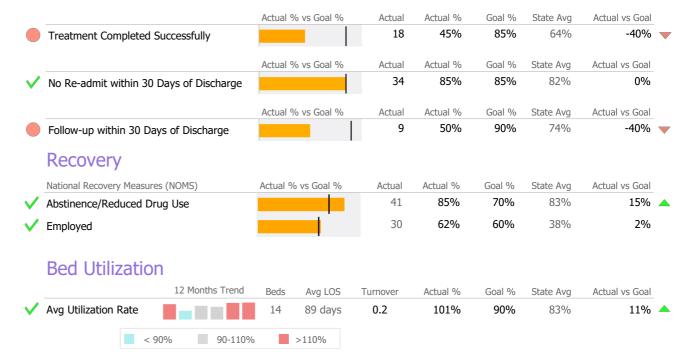
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	48	39	23%	•
Admits	35	26	35%	•
Discharges	40	26	54%	•
Bed Days	2,601	2,525	3%	

Data Submission Quality



Data Submitted to DMHAS by Month

Data	Subili	ILLEU	ιU	וויוט	IAS	Dy I	MOHUH
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%
	1 or more Records Submitted to DMHAS						



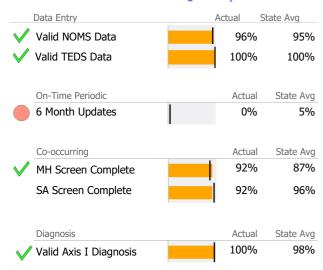


^{*} State Avg based on 8 Active Transitional/Halfway House 3.1 Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	15	73%	•
Admits	13	15	-13%	•
Discharges	11	2	450%	•

Data Submission Quality



Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	.							100%
Discharges								83%
1 or more Records Submitted to DMHAS								



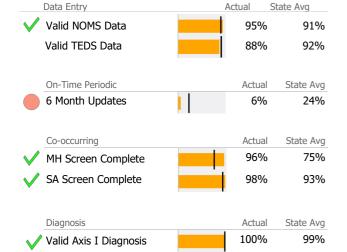


^{*} State Avg based on 6 Active Naltrexone Programs

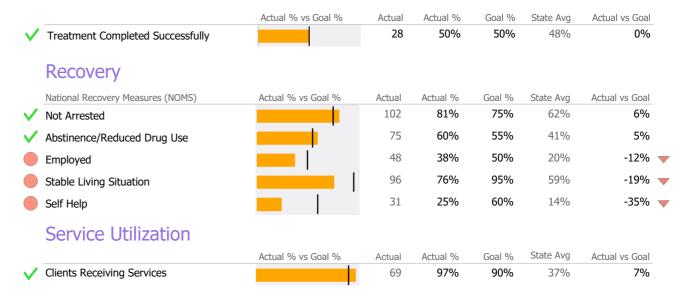
Program Activity

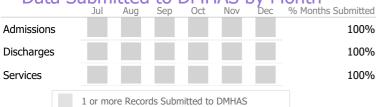
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	123	153	-20%	•
Admits	53	73	-27%	•
Discharges	56	61	-8%	
Service Hours	796	275	189%	•

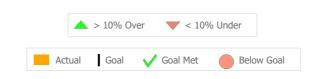
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 20 Active Buprenorphine Maintenance Programs

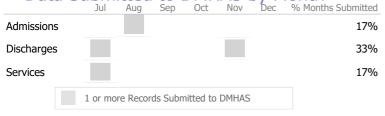
Addiction - Case Management - Outreach & Engagement

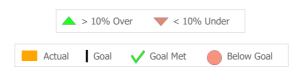
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10	15	-33% ▼
Admits	1	3	-67% ▼
Discharges	4	14	-71% ▼
Service Hours	-	3	-100% ~

Service Engagement







^{*} State Avg based on 22 Active Outreach & Engagement Programs

Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Program A	Activity
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Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	50	44	14%	•
Admits	28	34	-18%	•
Discharges	45	32	41%	•
Service Hours	90	83	9%	

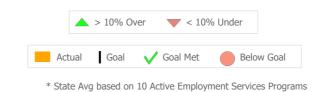
Recovery



Data Submission Quality

Data Entry	Actu	al S	State Avg
✓ Valid NOMS Data		98%	84%
On-Time Periodic	,	Actual	State Avg
6 Month Updates		N/A	70%

		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	6							100%
Discharges	;							100%
Services								67%
1 or more Records Submitted to DMHAS								

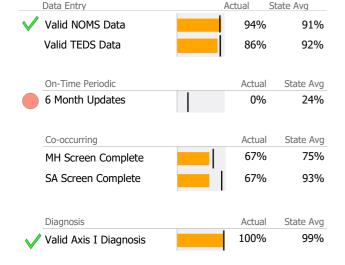


Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

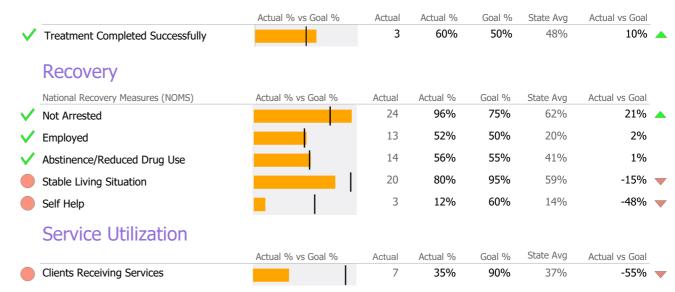
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	25	8	213%	•
Admits	15	8	88%	•
Discharges	5	5	0%	
Service Hours	20	10	106%	•

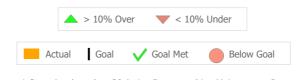
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 20 Active Buprenorphine Maintenance Programs

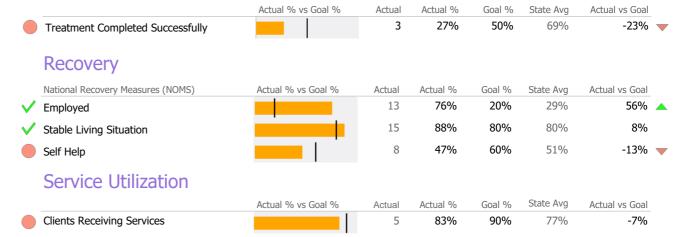
Program Activity

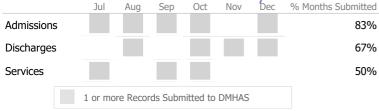
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	17	25	-32%	lacktriangle
Admits	13	22	-41%	•
Discharges	11	17	-35%	•
Service Hours	49	26	89%	•

Data Submission Quality

Data Entry	Actua	al St	tate Avg
✓ Valid NOMS Data		98%	94%
On-Time Periodic	A	Actual	State Avg
6 Month Updates		0%	56%

Discharge Outcomes





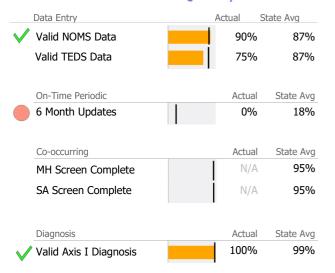


^{*} State Avg based on 13 Active Standard Case Management Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	23	-83%	▼
Admits	-	7	-100%	•
Discharges	2	15	-87%	•
Service Hours	10	12	-11%	•

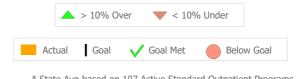
Data Submission Quality











^{*} State Avg based on 107 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	117	144	-19% ▼	
Admits	36	52	-31% 🔻	
Discharges	36	43	-16% 🔻	
Service Hours	19	31	-40% ▼	

Service Engagement







^{*} State Avg based on 22 Active Outreach & Engagement Programs