Provider Activity





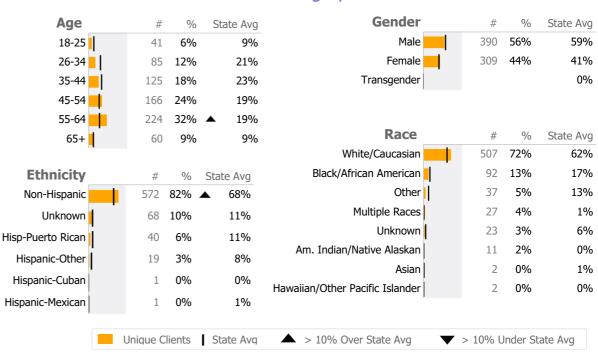
Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Healt	th		
	Community Support	251	23.6%
	Social Rehabilitation	250	23.5%
	Case Management	166	15.6%
	Employment Services	115	10.8%
	Residential Services	100	9.4%
	Housing Services	97	9.1%
	Recovery Support	47	4.4%
	Education Support	36	3.4%
Forensic MH			
	Case Management	2	0.2%

Consumer Satisfaction Survey (Based on 100 FY21 Surveys)



Client Demographics



BOS - 72Reliance Health Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

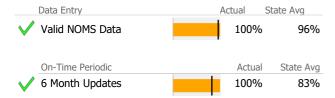
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	10	10	0%	
Admits	-	10	-100% 🔻	
Discharges	1	-		
Service Hours	277	43		

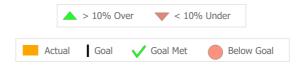
Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Stable Living Situation		9	90%	85%	88%	5%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Clients Receiving Services		9	100%	90%	96%	10%

Data Submission Quality





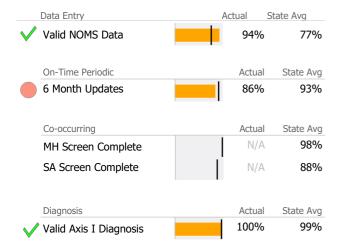


^{*} State Avg based on 109 Active Supportive Housing - Scattered Site Programs

Program Activity

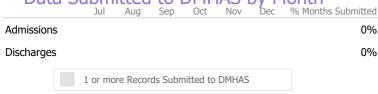
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	7	7	0%
Admits	-	-	
Discharges	-	-	
Bed Days	1,288	1,288	0%

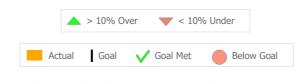
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 80 Active Supervised Apartments Programs

Program Activity Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 9 9 0% Treatment Completed Successfully 50% 60% 75% -10% Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 100% Discharges 1 0 0% 90% 81% -90% Follow-up within 30 Days of Discharge -5% **Bed Days** 1,487 1,569 Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** 8 29% Social Support 89% 60% 86% Data Entry Actual State Avg 9 95% 96% 5% 100% Stable Living Situation Valid NOMS Data 100% 77% 25% 11% 13% -14% **Employed** 1 On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 93% 12 Months Trend Avg LOS Actual vs Goal Beds Turnover Actual % Goal % State Avg Avg Utilization Rate 2,473 days 162% 90% 94% 72% 📤 0.3 Actual State Avg Co-occurring 98% N/A MH Screen Complete 90-110% >110% < 90% SA Screen Complete N/A 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Nov ▲ > 10% Over < 10% Under</p> Admissions 0% Discharges 17% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 80 Active Supervised Apartments Programs

Mental Health - 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 Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	115	120	-4%	
Admits	27	23	17%	•
Discharges	25	33	-24%	•
Service Hours	531	501	6%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
V	Employed		57	49%	35%	49%	14%	_
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		81	89%	90%	94%	-1%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	6 91%
On-Time Periodic	Actua	al State Avg
6 Month Updates	85%	6 89%

Data	Jubii	IICCCG		ווו וש		$\boldsymbol{\omega}$	IOTICIT
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							83%
Services							100%
	1 or m	nore Record	ls Subr	mitted to	DMHA	S	



Mental Health - Residential Services - Supervised Apartments

1 or more Records Submitted to DMHAS

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 Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 19 19 0% Treatment Completed Successfully 0 0% 60% 75% -60% -2 Admits 1 -50% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 -50% Discharges 1 N/A N/A 90% 81% N/A Follow-up within 30 Days of Discharge **Bed Days** 3.312 3,027 9% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** 29% Social Support 17 89% 60% 86% Data Entry Actual State Avg 19 95% 96% 5% 100% Stable Living Situation Valid NOMS Data 100% 77% 5% 25% 13% -20% **Employed** 1 On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 93% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 1,779 days 90% 90% 94% State Avg 0.5 0% Co-occurring Actual 100% 98% MH Screen Complete 90-110% >110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov ▲ > 10% Over < 10% Under</p> Admissions 17% Discharges 17% ✓ Goal Met Actual Goal Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

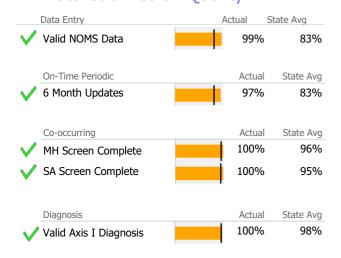
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

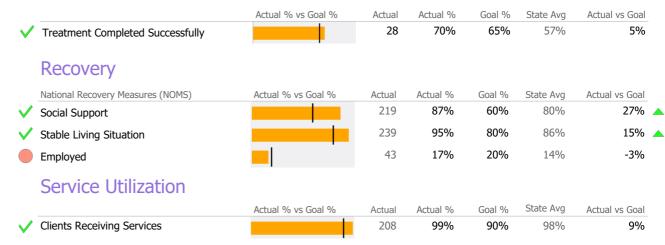
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	251	259	-3%	
Admits	20	17	18%	•
Discharges	40	32	25%	•
Service Hours	2,346	2,703	-13%	•

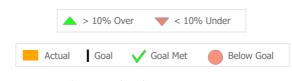
Data Submission Quality



Discharge Outcomes







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

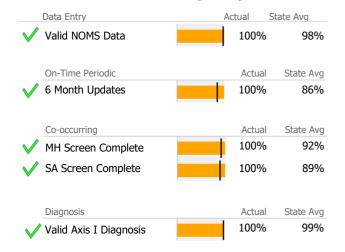
Mental Health - Residential Services - MH Intensive Res. Rehabilitation

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	6	17%	•
Admits	1	-		
Discharges	1	1	0%	
Bed Days	1,057	1,087	-3%	

Data Submission Quality



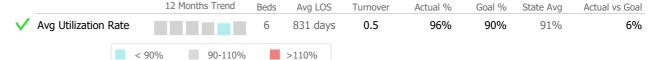
Data Submitted to DMHAS by Month



Discharge Outcomes



Bed Utilization





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

FUSE - Norwich, New London Site

Reliance Health Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Goal %

State Avg

Actual vs Goal

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

Actual %

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10	10	0%
Admits	-	-	
Discharges	-	-	
Service Hours	120	117	3%

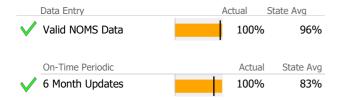
Recovery

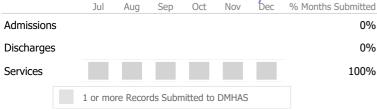
National Recovery Measures (NOMS)

V	Stable Living Situation		10	100%	85%	88%	15%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Clients Receiving Services		10	100%	90%	96%	10%

Actual % vs Goal %

Data Submission Quality







^{*} State Avg based on 109 Active Supportive Housing - Scattered Site Programs

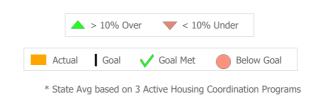
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	97	85	14%	•
Admits	25	40	-38%	•
Discharges	47	34	38%	•
Service Hours	-	_		

Dutu	Subiii	CCCG	COL	, II I	, 10	\sim $^{\circ}$	101101
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							83%
Services							0%
	1 or mo	re Record	ls Subm	itted to	DMHA	S	



Individual supports Program (ISP) 409-259

Reliance Health Inc.

6 Month Updates

Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

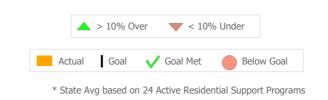
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity Discharge Outcomes Actual % State Avg Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % Actual vs Goal **Unique Clients** 0% N/A N/A 50% 88% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 60 233 **-74% ▼** 100% 60% 87% 40% 🔺 Social Support 100% 85% 97% 15% 🔺 Stable Living Situation **Data Submission Quality** 0 0% 25% -25% -**Employed** 14% Data Entry Actual State Avg Service Utilization Valid NOMS Data 100% 99% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 100% 90% 97% 10% On-Time Periodic Actual State Avg



100%

93%



Diagnosis

✓ Valid Axis I Diagnosis

Mental Health - Residential Services - Supervised Apartments

Program Activity Variance % Measure 1 Yr Ago **Unique Clients** 50% 🔺 Admits Discharges 1 Service Hours 869 751 16% Bed Davs 991 736 35% **Data Submission Quality** Data Entry Actual State Avg Valid NOMS Data 100% 77% On-Time Periodic Actual State Avg 6 Month Updates 100% 93% Co-occurring State Avg Actual 100% MH Screen Complete 98% SA Screen Complete 100% 88%

Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec % Months Submitted Admissions 17% Discharges 17% Services 100%

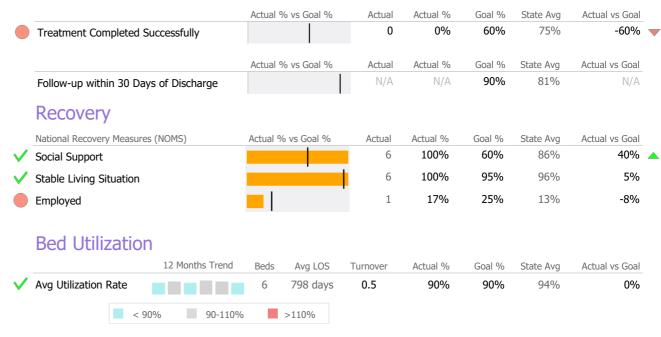
Actual

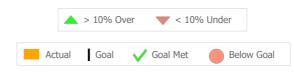
100%

State Avg

99%

Discharge Outcomes





^{*} State Avg based on 80 Active Supervised Apartments Programs

Discharges

1 or more Records Submitted to DMHAS

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

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

Mental Health - Residential Services - Supervised Apartments

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** -14% Treatment Completed Successfully 100% 60% 75% 40% 🔺 2 3 -33% 🔻 Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 0% Discharges 1 1 Follow-up within 30 Days of Discharge 100% 90% 81% 10% 773 940 **Bed Days** -18% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** 5 23% Social Support 83% 60% 86% Data Entry Actual State Avg 6 95% 96% 5% 100% Stable Living Situation Valid NOMS Data 100% 77% 0 0% 25% 13% -25% **Employed** On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 93% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 437 days 70% 90% 94% -20% **T** 0.6 Co-occurring Actual State Avg 100% 98% MH Screen Complete >110% 90-110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Nov ▲ > 10% Over < 10% Under</p> Admissions 33%

Actual

Goal

✓ Goal Met

* State Avg based on 80 Active Supervised Apartments Programs

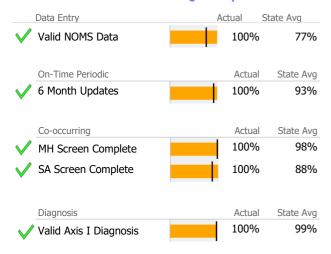
Below Goal

17%

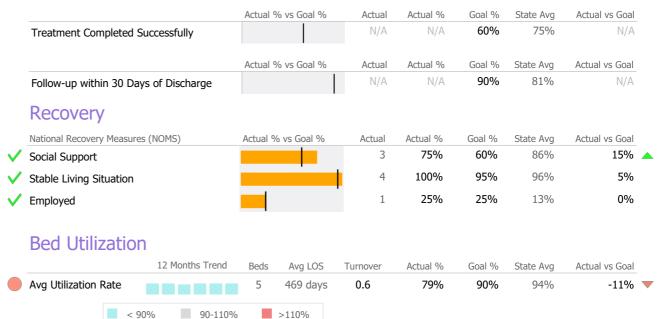
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	6	-33%	•
Admits	1	2	-50%	•
Discharges	-	1	-100%	•
Bed Days	724	866	-16%	•

Data Submission Quality

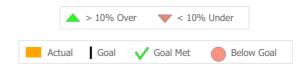


Discharge Outcomes









^{*} State Avg based on 80 Active Supervised Apartments Programs

1 or more Records Submitted to DMHAS

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

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 6 -17% N/A N/A 60% 75% N/A Treatment Completed Successfully 2 Admits 1 -50% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 1 -100% N/A N/A 90% 81% N/A Follow-up within 30 Days of Discharge 788 -8% **Bed Days** 853 Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Data Submission Quality** 5 40% Social Support 100% 60% 86% Data Entry Actual State Avg 5 95% 96% 5% 100% Stable Living Situation Valid NOMS Data 100% 77% 20% 25% 13% -5% **Employed** 1 On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 93% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 1,082 days 86% 90% 94% 0.6 -4% Co-occurring Actual State Avg 100% 98% MH Screen Complete 90-110% >110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 17% Discharges 0% ✓ Goal Met Actual Goal Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Next Step Legion & NSP 409550

Reliance Health Inc.

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)

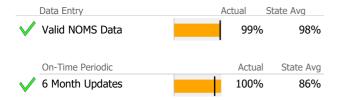
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	21	20	5%	
Admits	1	3	-67%	•
Discharges	4	1	300%	•
Service Hours	294	170	73%	•

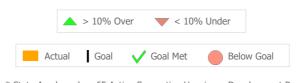
Recovery

/	Clients Receiving Services		17	100%	90%	95%	10%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Service Utilization						
V	Stable Living Situation		18	86%	85%	94%	1%
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal

Data Submission Quality







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

Next Steps Supp Housing 409-551

Reliance Health Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Goal %

State Avg

Actual vs Goal

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

Actual %

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	33	36	-8%
Admits	1	3	-67% ▼
Discharges	-	5	-100% ▼
Service Hours	536	523	2%

Recovery

National Recovery Measures (NOMS)

/	Stable Living Situation		31	94%	85%	88%	9%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Clients Receiving Services		33	100%	90%	96%	10%

Actual % vs Goal %

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	96%
On-Time Periodic	Actua	State Avg
6 Month Updates	100%	83%





^{*} State Avg based on 109 Active Supportive Housing - Scattered Site Programs

Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

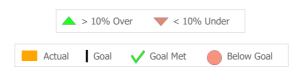
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	48	45	7%	
Admits	24	16	50%	•
Discharges	25	18	39%	•
Service Hours	137	119	15%	_

Service Engagement



Data	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							83%
Services							100%
	1 or mo	re Record	ds Subm	itted to	DMHAS		



^{*} State Avg based on 47 Active Outreach & Engagement Programs

Mental Health - Case Management - Outreach & Engagement

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	24	34	-29% ▼	
Admits	14	20	-30% ▼	
Discharges	14	19	-26% ▼	
Service Hours	69	112	-38% ▼	

Service Engagement



Data	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							83%
Services							100%
	1 or mo	re Record	ds Subm	nitted to	DMHAS	;	



^{*} State Avg based on 47 Active Outreach & Engagement Programs

Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

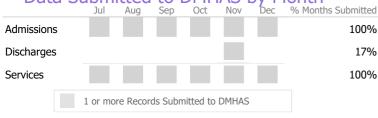
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

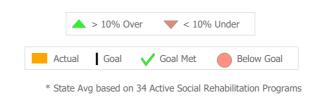
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	68	88	-23% 🔻	•
Admits	11	24	-54% ▼	•
Discharges	3	19	-84% ▼	•
Service Hours	24	22	11% 🔺	
Social Rehab/PHP/IOP Days	698	800	-13% 🔻	,

Service Utilization







PILOTS Development 409-555

Reliance Health Inc.

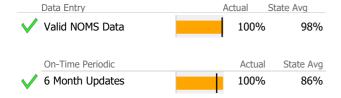
Mental Health - Case Management - Supportive Housing - Development

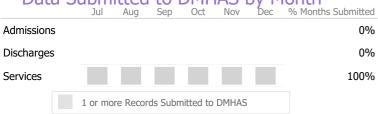
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

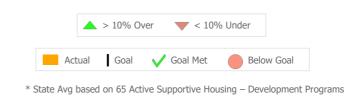
Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % Actual vs Goal Actual State Avg Variance % Measure 1 Yr Ago 100% 85% 94% 15% Stable Living Situation **Unique Clients** 0% Service Utilization Admits Discharges State Ava Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 100% 90% 95% 10% 88 Service Hours 50 **78%**

Data Submission Quality







Pilots Supp. Housing 409-552Y

Reliance Health Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

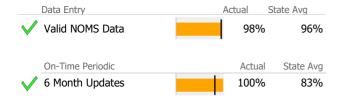
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16	17	-6%
Admits	1	2	-50% ▼
Discharges	1	2	-50% ▼
Service Hours	193	101	91% 🔺

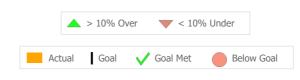
Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Stable Living Situation		16	100%	85%	88%	15% 🔺
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/	Clients Receiving Services		15	100%	90%	96%	10%

Data Submission Quality







^{*} State Avg based on 109 Active Supportive Housing – Scattered Site Programs

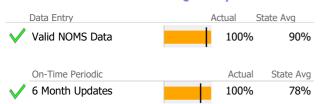
Forensic MH - Case Management - Standard Case Management

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

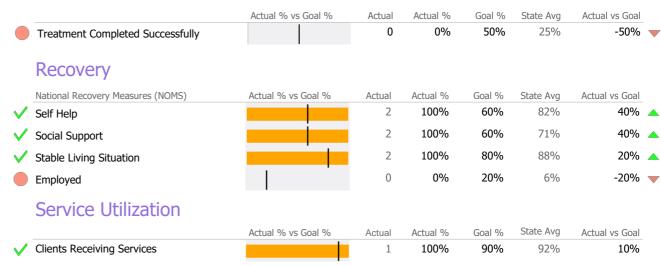
Program Activity

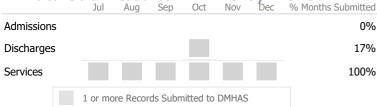
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	2	3	-33% ▼
Admits	-	-	
Discharges	1	-	
Service Hours	5	5	-3%

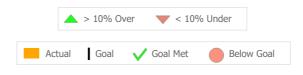
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 3 Active Standard Case Management Programs

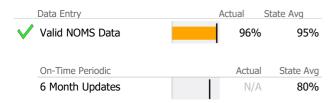
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

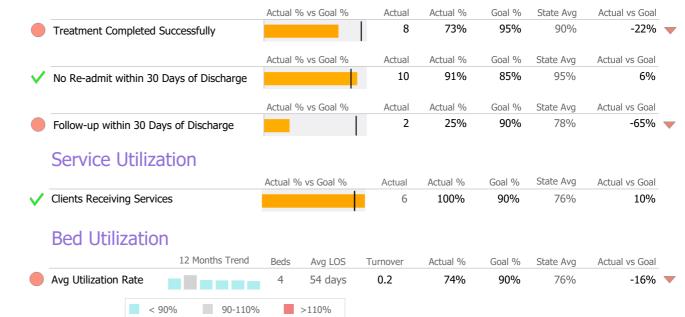
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	17	12	42%	•
Admits	15	8	88%	•
Discharges	11	8	38%	•
Service Hours	44	36	21%	•
Bed Days	544	633	-14%	•

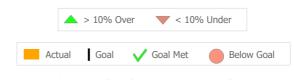
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 7 Active Transitional Programs

Mental Health - Case Management - Outreach & Engagement

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	0		
Admits	-	-	
Discharges	-	-	
Service Hours	_	_	

Data Submitted to DMHAS by Month
Jul Aug Sep Oct Nov Dec % Months Submitted Admissions 0% 0% Discharges 1 or more Records Submitted to DMHAS



^{*} State Avg based on 47 Active Outreach & Engagement Programs

Supported Education 409-271

Reliance Health Inc.

Mental Health - Education Support - Education Support

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	36	34	6%	
Admits	9	4	125%	•
Discharges	11	4	175%	•
Service Hours	152	55	179%	•

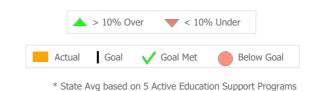
Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
/	Enrolled in Educational Program		25	69%	35%	72%	34%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		19	76%	90%	96%	-14%	

Data Submission Quality

Data Entry	Д	ctual	State Avg
Valid NOMS Data		99%	100%
On-Time Periodic		Actual	State Avg
6 Month Updates		59%	75%

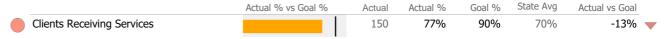
		Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions								67%
Discharges								67%
Services								100%
	1	or mor	e Record	ds Subm	itted to	DMHAS		



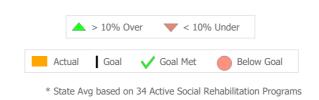
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	211	163	29%	•
Admits	40	9	344%	•
Discharges	15	11	36%	•
Service Hours	145	288	-49%	•
Social Rehab/PHP/IOP Days	1,649	226	630%	_

Service Utilization



	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							67%
Services							100%
	1 or mo	re Record	ds Subn	nitted to	DMHAS		



Mental Health - Residential Services - Supervised Apartments

1 or more Records Submitted to DMHAS

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

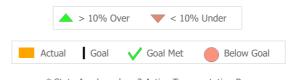
Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 21 16 31% Treatment Completed Successfully 5 56% 60% 75% -4% 5 25% 🔺 Admits 4 Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 9 5 80% 🔺 Discharges 80% 90% 81% -10% Follow-up within 30 Days of Discharge **Bed Days** 2,271 1,953 16% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Data Submission Quality** 26% Social Support 18 86% 60% 86% Data Entry Actual State Avg 6 25% 4% 29% 13% **Employed** Valid NOMS Data 97% 77% 18 86% 95% 96% -9% Stable Living Situation On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 93% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 88% 90% 352 days 0.4 94% -2% Co-occurring Actual State Avg 100% 98% MH Screen Complete 90-110% >110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 67% Discharges 83% ✓ Goal Met Actual Goal Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	47	33	42%	•
Admits	15	-		
Discharges	18	1	1700%	•

Date	JUDII	IILLEU	LU L	וויוע		Dy I'	IOHUH
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							67%



^{*} State Avg based on 2 Active Transportation Programs