Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

▲ > 10% Over State Avg

▼ > 10% Under State Avg

Provider Activity Consumer Satisfaction Survey (Based on 251 FY21 Surveys) Monthly Trend Actual 1 Yr Ago Variance % Measure **Ouestion Domain** Satisfied % vs Goal% Satisfied % Goal % State Ava **Unique Clients** 2,374 71% 🔺 1,391 Quality and Appropriateness 97% 80% 93% 77% 🔺 1,635 925 Admits Participation in Treatment 97% 80% 92% General Satisfaction 97% 80% 92% 64% Discharges 1,254 766 Overall 96% 80% 91% Service Hours 22% 🔺 7,597 6,204 88% Access 95% 80% **Bed Days** 24,792 25,945 -4% Respect 95% 80% 91% Outcome 92% 80% 83% ▲ > 10% Over 1 Yr Ago > 10% Under 1Yr Ago Recovery 83% 80% 79% Clients by Level of Care Goal % ✓ Goal Met Satisfied % 0-80% 80-100% Under Goal Program Type Level of Care Type % Client Demographics Forensic SA 1,374 Forensics Community-based 56.7% Gender Age # % State Avg % State Avg **Mental Health** 16% 1,471 62% 59% 18-25 375 10% Male Outpatient 215 8.9% Female 38% 41% 26-34 27% 22% 888 651 Case Management 214 8.8% Transgender 0% 22% 35-44 532 23% **Residential Services** 120 5.0% 45-54 395 17% 19% **Addiction** 55-64 320 14% 19% Race % State Avg Residential Services 222 9.2% 65+ 97 4% 8% White/Caucasian 1,086 46% 62% Outpatient 4.7% 115 Unknown | 642 27% 6% **Ethnicity** State Avg Case Management 94 3.9% # % Black/African American 416 18% 17% Unknown 1 1,122 47% 12% Recovery Support 13 0.5% Other | 189 8% 13% Non-Hispanic 959 40% 68% **Forensic MH** Multiple Races 21 1% 1% 8% Forensics Community-based 36 1.5% Hispanic-Other 187 8% Asian 0% 1% 10 Residential Services 21 0.9% Hisp-Puerto Rican 4% 98 11% Am. Indian/Native Alaskan 8 0% 0% 0% Hispanic-Mexican Hawaiian/Other Pacific Islander 0% 0% 2 Hispanic-Cuban 3 0% 0%

Unique Clients State Avg

BOS 72

Connection Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	11	5	120%	•
Admits	4	5	-20%	•
Discharges	2	-		
Service Hours	203	19		

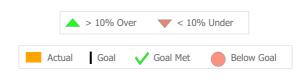
Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/	Stable Living Situation		10	91%	85%	88%	6%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Clients Receiving Services		9	100%	90%	97%	10%

Data Submission Quality







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

1 or more Records Submitted to DMHAS

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

* State Avg based on 24 Active Group Home Programs

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Unique Clients** 10 9 11% Treatment Completed Successfully 100% 80% 72% 20% 🔺 Admits 1 Actual % vs Goal % Goal % Actual Actual % State Avg Actual vs Goal Discharges 1 1 100% 85% 88% 15% No Re-admit within 30 Days of Discharge **Bed Days** 2,430 2,466 -1% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge 100% 90% 67% 10% **Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 95% Valid NOMS Data 99% 8 80% 60% 82% 20% Social Support 10 100% 90% 98% 10% Stable Living Situation On-Time Periodic Actual State Avg 6 Month Updates 100% 89% **Bed Utilization** Co-occurring Actual State Avg 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal 100% 86% MH Screen Complete Avg Utilization Rate 1,697 days 0.3 111% 90% 87% 21% 📤 SA Screen Complete 100% 95% < 90% 90-110% >110% Diagnosis State Avg Actual 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 11% Discharges 11% ✓ Goal Met Actual Goal Below Goal

Forensic MH - Forensics Community-based - Day Reporting

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

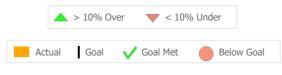
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	34	6%	
Admits	23	13	77%	•
Discharges	21	13	62%	•
Service Hours	1,640	1,686	-3%	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	NaN
On-Time Periodic	Actua	l State Avg
√ 6 Month Updates	0%	0%

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admission	S										78%
Discharge	S										89%
Services											67%
		1 or mo	ore Recor	ds Subr	nitted to	DMHAS					



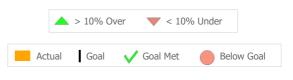
^{*} State Avg based on 1 Active Day Reporting Programs

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	86	82	5%
Admits	62	67	-7%
Discharges	61	62	-2%
Bed Days	6,413	6,278	2%

Data S	ubm	itted	to	DMH	IAS I	оу М	onth	1		
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
	1 or mo	re Recor	ds Subr	mitted to	DMHAS					



^{*} State Avg based on 4 Active Shelter Programs

Groton Pilots

Connection 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 - March 2022 (Data as of Jun 27, 2022)

Actual %

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	19	19	0%
Admits	1	1	0%
Discharges	3	1	200% 🔺
Service Hours	122	238	-49% ~

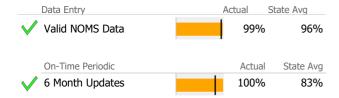
Recovery

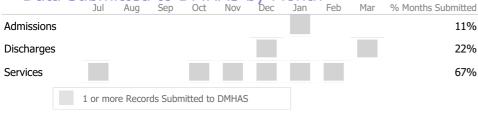
National Recovery Measures (NOMS)

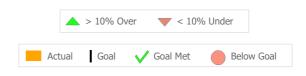
V	Stable Living Situation		18	95%	85%	88%	10%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Clients Receiving Services		16	100%	90%	97%	10%

Actual % vs Goal %

Data Submission Quality







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

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 17 23 -26% 9 69% 70% 69% -1% Treatment Completed Successfully 12 Admits 17 -29% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 13 15 -13% 13 100% 85% 91% 15% No Re-admit within 30 Days of Discharge **Bed Days** 1.733 -17% 2,084 Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 78% 90% 69% -12% **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 99% 86% 13 72% 70% 66% 2% Abstinence/Reduced Drug Use Valid TEDS Data 100% 93% **Bed Utilization** On-Time Periodic Actual State Avg 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal 6 Month Updates 100% 8% Avg Utilization Rate 79% 90% 89% 169 days 0.3 -11% **V** Co-occurring Actual State Avg >110% < 90% 90-110% 100% 95% MH Screen Complete SA Screen Complete 100% 92% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Nov Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 78% 78% Discharges ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Jefferson Commons

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

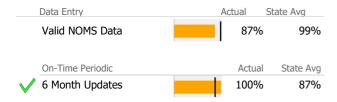
Program Activity

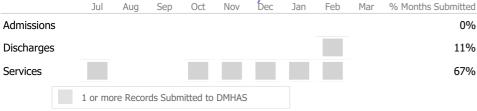
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	9	-11%	•
Admits	-	2	-100%	•
Discharges	1	2	-50%	•
Service Hours	107	85	26%	•

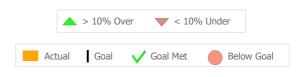
Recovery



Data Submission Quality







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

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

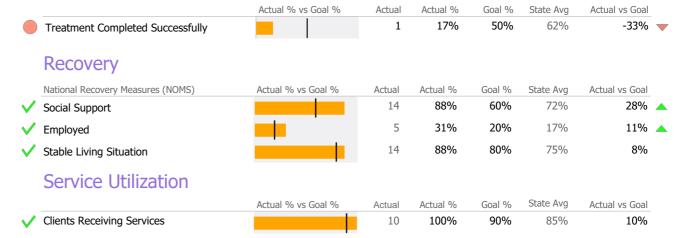
Program Activity

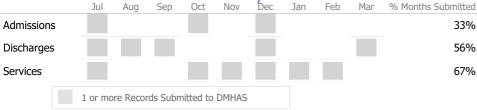
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16	34	-53% ▼
Admits	4	15	-73% ▼
Discharges	6	20	-70% ▼
Service Hours	69	94	-26% ▼

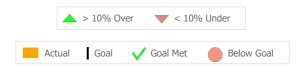
Data Submission Quality

Data Entry	Actual 9	State Avg
Valid NOMS Data	83%	95%
On-Time Periodic	Actual	State Avg
6 Month Updates	11%	59%

Discharge Outcomes







^{*} State Avg based on 30 Active Standard Case Management Programs

Litchfield Next Steps

Connection Inc.

Measure

Admits

Discharges

Service Hours

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

90%

97%

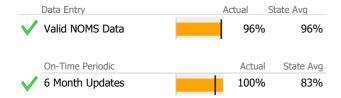
10%

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Recovery National Recovery Measures (NOMS) Actual vs Goal Actual % vs Goal % Actual % Goal % State Avg Actual Variance % 1 Yr Ago 9 90% 85% 88% 5% Stable Living Situation Unique Clients 10 10 0% Service Utilization 1 2 -100% State Avg Actual % Actual % vs Goal % Actual Goal % Actual vs Goal

Clients Receiving Services

Data Submission Quality

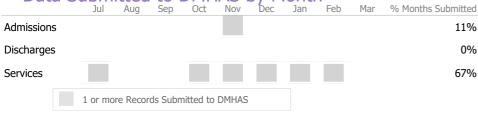


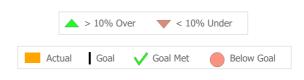
83

134

-38% 🔻

Data Submitted to DMHAS by Month





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

10

100%

Middlesex PILOTS Dev. 813-553 (Inactive)

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Goal %

State Avg

Actual vs Goal

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Actual %

Actual

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	11	-27%	•
Admits	2	3	-33%	•
Discharges	8	6	33%	•
Service Hours	81	64	26%	•

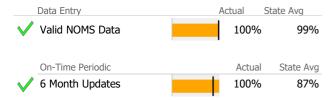
Recovery

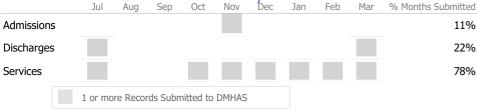
National Recovery Measures (NOMS)

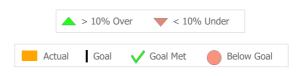
V	Stable Living Situation		8	100%	85%	95%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
/	Clients Receiving Services		7	100%	90%	96%	10%	

Actual % vs Goal %

Data Submission Quality







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

Middletown Pilots

Connection Inc.

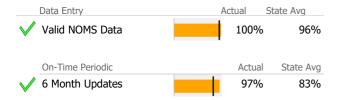
Mental Health - Case Management - Supportive Housing - Scattered Site

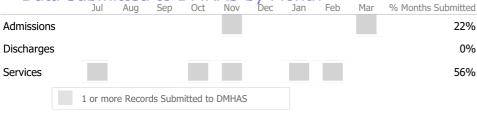
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

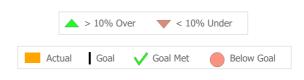
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Measure Actual 1 Yr Ago Variance % 27 82% 85% 88% -3% Stable Living Situation Unique Clients 33 31 6% 3 Service Utilization 10 Admits **-70% ▼** 7 Discharges -100% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 31 94% 90% 97% 4% 473 279 Service Hours 70% 🔺

Data Submission Quality







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

Goal %

State Avg

Actual vs Goal

Mental Health - Case Management - Supportive Housing - Development

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Actual %

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	15	15	0%
Admits	3	-	
Discharges	-	-	
Service Hours	116	71	63% 🔺

Recovery

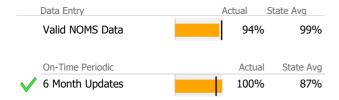
National Recovery Measures (NOMS)

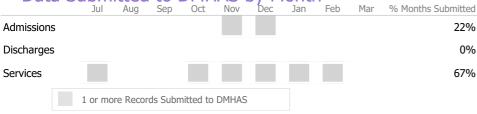
Stable Living Situat	ion		14	93%	85%	95%	8%
Service Util	ization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Se	ervices		15	100%	90%	96%	10%

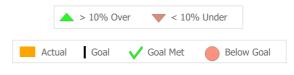
Actual

Actual % vs Goal %

Data Submission Quality







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

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 10 27 -63% 9 90% 70% 69% 20% 🔺 Treatment Completed Successfully 3 Admits 20 -85% 🔻 Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 10 19 **-47% ▼** 6 60% 85% 91% -25% No Re-admit within 30 Days of Discharge **Bed Days** 393 637 -38% Actual % vs Goal % Actual % Actual vs Goal Actual Goal % State Avg Follow-up within 30 Days of Discharge 78% 90% 69% -12% **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 100% 86% 10 100% 70% 66% 30% 🔺 Abstinence/Reduced Drug Use Valid TEDS Data 100% 93% **Bed Utilization** On-Time Periodic State Avg Actual 12 Months Trend 6 Month Updates Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal N/A 8% Avg Utilization Rate 115 days 90% -72% **T** 8.0 18% 89% Co-occurring Actual State Avg < 90% 90-110% >110% 100% 95% MH Screen Complete SA Screen Complete 100% 92% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 22% 33% Discharges ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Mental Health - Residential Services - Residential Support

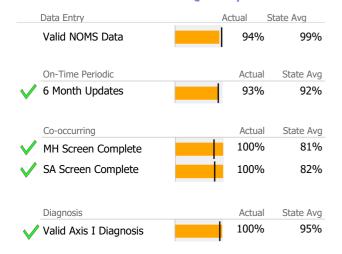
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

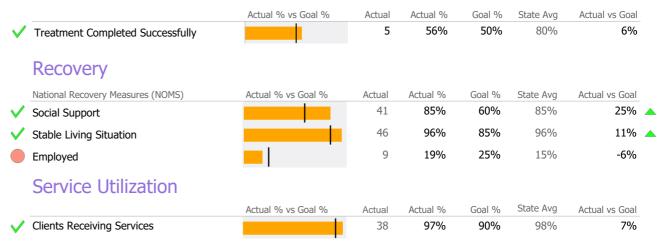
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	48	57	-16%	•
Admits	13	18	-28%	•
Discharges	9	17	-47%	•
Service Hours	1,446	969	49%	•

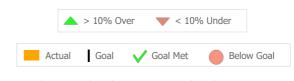
Data Submission Quality



Discharge Outcomes







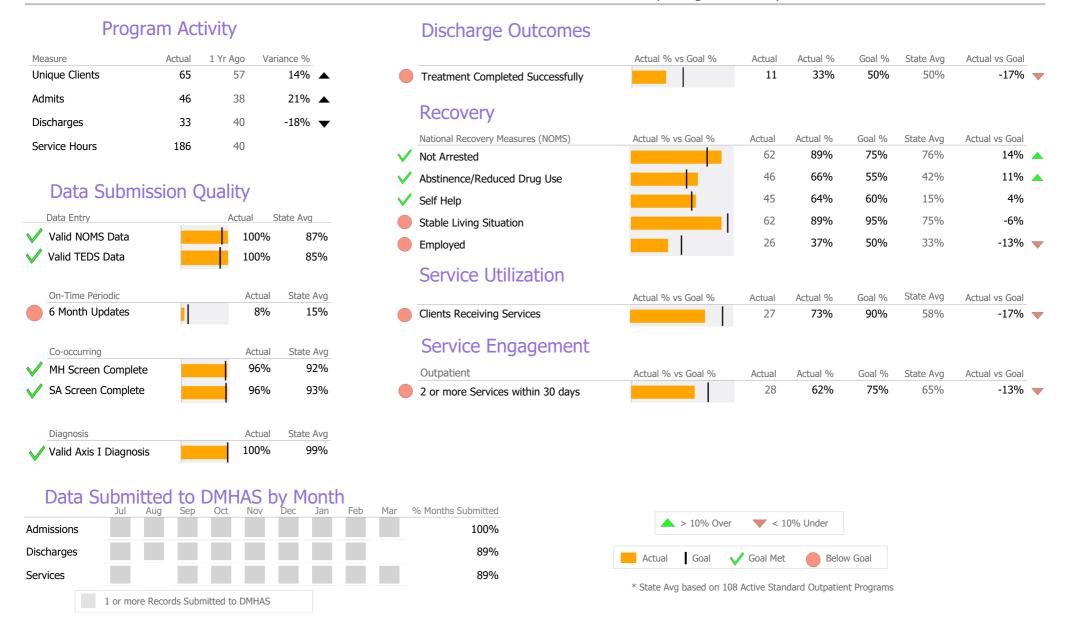
^{*} State Avg based on 25 Active Residential Support Programs

1 or more Records Submitted to DMHAS

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 215 130 65% Treatment Completed Successfully 52 43% 50% 41% -7% Admits 138 106 30% Recovery Discharges 120 63 90% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 780 487 60% 193 88% 60% 61% 28% 🔺 Social Support 46% 30% 25% 16% 🔺 100 **Employed Data Submission Quality** 92% 95% -3% Stable Living Situation 202 72% Data Entry Actual State Avg Service Utilization Valid NOMS Data 99% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 78% 90% 82% -12% On-Time Periodic Actual State Avg 6 Month Updates 2% 53% Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Actual State Avg Co-occurring 89% 60 44% 75% 78% -31% 90% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 89% 90% 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 89% Services * State Avg based on 74 Active Standard Outpatient Programs

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)



Ondusky Center

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Goal %

State Avg

Actual vs Goal

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Actual %

Actual

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	10	-20%	•
Admits	1	1	0%	
Discharges	-	3	-100%	•
Service Hours	73	122	-40%	•

Recovery

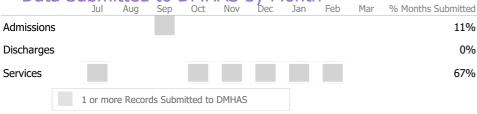
National Recovery Measures (NOMS)

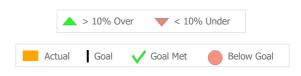
Stable Living Situation		8	100%	85%	95%	15%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		8	100%	90%	96%	10%

Actual % vs Goal %

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	6 99%
On-Time Periodic	Actua	al State Avg
6 Month Updates	100%	6 87%





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

Outrch&Engagement-HmOutr904299

Connection Inc.

Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	45	40	13%	•
Admits	19	18	6%	
Discharges	22	20	10%	
Service Hours	273	186	47%	•

Service Engagement



Dat	u Ju		iticu				,	וטו וט	-		0/ 14 11 0 1 111 1
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admission	S										89%
Discharges	S										100%
Services											67%
	1 or more Records Submitted to DMHAS										



^{*} State Avg based on 48 Active Outreach & Engagement Programs

Park St. Inn.Grp Res 904-241

1 or more Records Submitted to DMHAS

Connection Inc.

Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

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

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 13 14 -7% N/A N/A 75% 67% N/A Treatment Completed Successfully Admits Actual % vs Goal % Actual % Goal % State Avg Actual Actual vs Goal Discharges 1 -100% N/A N/A 85% 81% N/A No Re-admit within 30 Days of Discharge **Bed Days** 3,562 3,780 -6% Actual % vs Goal % Actual % State Avg Actual vs Goal Actual Goal % Follow-up within 30 Days of Discharge N/A N/A 90% 85% N/A **Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 100% 99% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 87% 90% 15 2,392 days 0.4 89% -3% On-Time Periodic Actual State Avg 90-110% >110% 6 Month Updates 31% 84% Actual State Avg Co-occurring 92% N/A MH Screen Complete SA Screen Complete N/A 90% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 0% Discharges 0% ✓ Goal Met Actual Goal Below Goal

Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 15 15 0% 100% 60% 72% 40% 🔺 Treatment Completed Successfully 3 5 67% Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 33% 🔺 Discharges 3 2 50% 90% 79% -40% Follow-up within 30 Days of Discharge **Bed Days** 3,015 3,504 -14% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** Social Support 15 100% 60% 85% 40% Data Entry Actual State Avg 15 95% 95% 5% 100% Stable Living Situation Valid NOMS Data 99% 78% 7% 25% 12% -18% **Employed** 1 On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 89% 90% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 92% 90% 92% State Avg 1,029 days 0.3 2% 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 % Months Submitted > 10% Over < 10% Under</p> Admissions 56% Discharges 44% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS * State Avg based on 80 Active Supervised Apartments Programs

Goal %

50%

State Avg

80%

Actual vs Goal

50% 🔺

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Actual %

100%

Actual

Program Activity Actual 1 Yr Ago Variance % 35 37 -5% Discharge Outcomes Treatment Completed Successfully

Measure Unique Clients 35 37 -5% 6 9 Admits -33% 🔻 8 Discharges 4 -50% Service Hours 710 711 0%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	9	96% 99%
On-Time Periodic	Ad	ctual State Avg
6 Month Updates	7	70% 92%
Co-occurring	Ad	ctual State Avg
MH Screen Complete	10	00% 81%
✓ SA Screen Complete	10	00% 82%
Diagnosis	Ad	ctual State Avg
✓ Valid Axis I Diagnosis	10	95%

Recovery



Actual % vs Goal %

Service Utilization







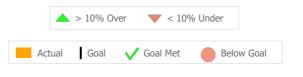
^{*} State Avg based on 25 Active Residential Support Programs

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,374	407	238%	•
Admits	1,106	338	227%	•
Discharges	746	196	281%	•

Data 9	Subm	itted	to	DMH	IAS t	ру М	onth	1		
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
	1 or mo	re Recor	ds Subr	nitted to	DMHAS					



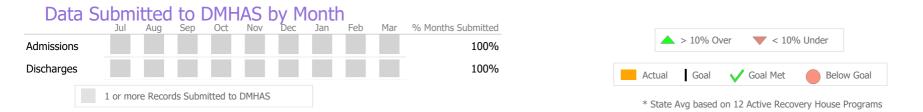
^{*} State Avg based on 16 Active Pre-trial Intervention Programs Programs

Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Unique Clients** 110 99 11% 67 73% 85% 79% -12% Treatment Completed Successfully 10% 87 79 Admits 92 83 11% Discharges **Bed Utilization** Bed Days 5,802 10% 5,273 12 Months Trend Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 158 days 0.2 78% 90% 65% -12% **T** < 90% 90-110% >110%



Ross Center

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Goal %

State Avg

Actual vs Goal

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Actual %

Actual

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	14	-7%
Admits	-	2	-100% ▼
Discharges	-	1	-100% ▼
Service Hours	110	98	12% 🔺

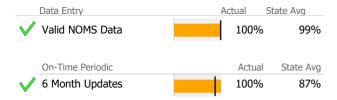
Recovery

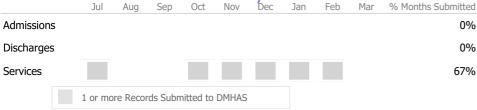
National Recovery Measures (NOMS)

Stable Living Situation		13	100%	85%	95%	15%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		13	100%	90%	96%	10%

Actual % vs Goal %

Data Submission Quality







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

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

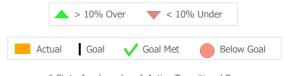
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	21	13	62%	•
Admits	16	11	45%	•
Discharges	14	5	180%	•
Bed Days	1,444	620	133%	•

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	100%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	N/A

Data		IIILLCU					·IOIIC			
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										89%
Discharges										78%
	1 or n	nore Recor	ds Sub	mitted t	o DMHA	S				



* State Avg based on 1 Active Transitional Programs

West Village

Connection Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Goal %

State Avg

Actual vs Goal

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Actual %

Actual

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	40	-10%	
Admits	2	9	-78% ▼	•
Discharges	3	7	-57% 🔻	•
Service Hours	555	528	5%	

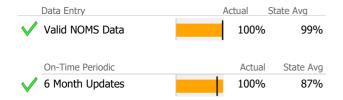
Recovery

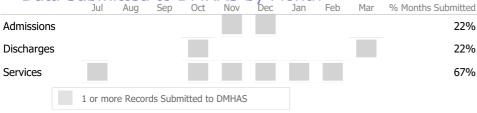
National Recovery Measures (NOMS)

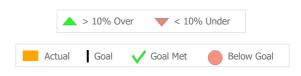
V	Stable Living Situation		35	97%	85%	95%	12%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
V	Clients Receiving Services		33	100%	90%	96%	10%

Actual % vs Goal %

Data Submission Quality







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

Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	94	140	-33% ▼	
Admits	37	75	-51% 🔻	
Discharges	52	88	-41% ▼	
Service Hours	433	347	25% 🔺	

Service Engagement



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										89%
Services										67%
	1 or mo	ore Recor	ds Subr	nitted to	DMHAS					



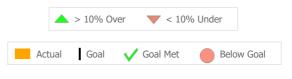
^{*} State Avg based on 22 Active Outreach & Engagement Programs

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	23	-43%	•
Admits	12	13	-8%	
Discharges	6	17	-65%	•





Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 50 59 -15% 9 39% 50% 50% -11% Treatment Completed Successfully Admits 28 47 -40% **T** Recovery 23 Discharges 36 -36% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 138 47 196% 31 61% 55% 42% 6% Abstinence/Reduced Drug Use 40 78% 75% 76% 3% Not Arrested **Data Submission Quality** 95% Stable Living Situation 47 92% 75% -3% Data Entry Actual State Avg 23 45% 15% -15% 60% Self Help Valid NOMS Data 95% 87% 16 31% 50% 33% -19% **Employed** Valid TEDS Data 100% 85% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 0% 15% Clients Receiving Services 13 46% 90% 58% -44% -Service Engagement Co-occurring Actual State Avg 97% 92% MH Screen Complete Outpatient Actual vs Goal Actual % vs Goal % Actual Actual % Goal % State Ava SA Screen Complete 97% 93% 14 52% 75% 65% -23% 2 or more Services within 30 days Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Feb Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 78% 78% Discharges ✓ Goal Met Actual Goal Below Goal Services 89% * State Avg based on 108 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS