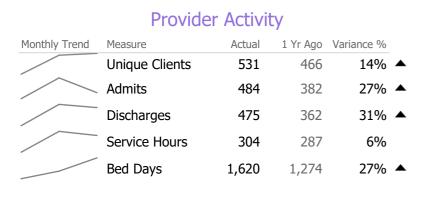
Cornell Scott-Hill Health Corporation New Haven, CT

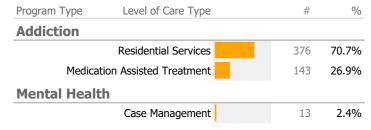
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)



▲ > 10% Over 1 Yr Ago

 \checkmark > 10% Under 1Yr Ago

Clients by Level of Care



Consumer Satisfaction Survey (Based on 269 FY22 Surveys) **Ouestion Domain** Satisfied % vs Goal% Satisfied % Goal % State Avg Respect 94% 80% 91% \checkmark V Overall 94% 80% 91% ✓ Quality and Appropriateness 93% 80% 93% Participation in Treatment 80% 92% 91% \checkmark V Outcome 80% 83% 88% ✓ Access 80% 88% 86% General Satisfaction 86% 80% 92% \checkmark Recovery 82% 80% 79% 0-80% 80-100% ✓ Goal Met Satisfied % Goal % Under Goal

Client Demographics

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	21	4%	10%	Male 🗾	342	64%	58%
26-34	137	26%	21%	Female 📒	189	36%	42%
35-44	153	29%	23%	Transgender			0%
45-54	118	22%	19%				
55-64	88	17%	20%				
65+	13	2%	8%	Race	#	%	State Avg
				White/Caucasian	393	74%	▲ 62%
Ethnicity	#	%	State Avg	Black/African American	88	17%	17%
Non-Hispanic	450	85%	▲ 69%	Other <mark> </mark>	45	8%	12%
Hisp-Puerto Rican	46	9%	11%	Unknown	2	0%	6%
Hispanic-Other	28	5%	8%	Am. Indian/Native Alaskan	1	0%	1%
				Asian	1	0%	1%
Unknown	5	1%		Multiple Races	1	0%	1%
Hispanic-Cuban	1	0%	0%	Hawaiian/Other Pacific Islander			0%
Hispanic-Mexican	1	0%	1%	- -			
	Unique C	lients	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.

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

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

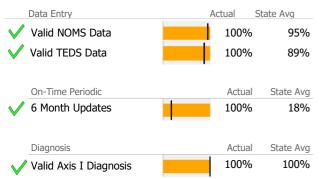
	^ >	10% Over	r		< 10% l	Jndei	r		
Act	ual	Goal	\checkmark	Goal N	Met		Belo	w Goal	

* State Avg based on Active Outreach & Engagement Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3	4	-25%	▼
Admits	-	1	-100%	▼
Discharges	-	-		

Data Submission Quality



Discharge Outcomes

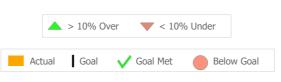
 \checkmark

 \checkmark

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	20%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		3	100%	55%	40%	45%
Not Arrested		3	100%	75%	75%	25%
Employed		2	67%	50%	23%	17%
Stable Living Situation		3	100%	95%	65%	5%
Self Help	— '	1	33%	60%	23%	-27%

Data Submitted to DMHAS by Month

	Jui	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
	1 or mo	ore Recor	ds Subr	nitted to DMHAS



* State Avg based on Active Naltrexone Programs

Cornell Scott-Hill Health Corporation Mental Health - Case Management - Outreach & Engagement Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

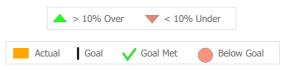
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	13	0%
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Service Engagement

ŀ	Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
e a	at least 1 Service within 180 days		0	0%	50%	88%	-50% 🔻

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
Services				0%
	1 or mo	re Recor	ds Subn	nitted to DMHAS



* State Avg based on Active Outreach & Engagement Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
	1 or mo	ore Recor	ds Subr	nitted to DMHAS



* State Avg based on Active Peer Based Mentoring Programs

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

SCRC Residential Detox 986600

Cornell Scott-Hill Health Corporation Addiction - Residential Services - Medically Monitored Detox 3.7D Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

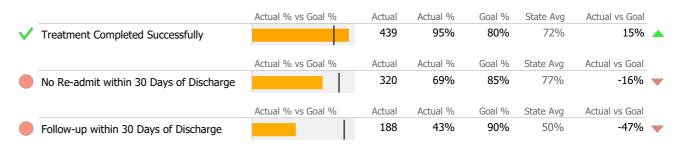
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	376	328	15%	
Admits	463	362	28%	
Discharges	464	357	30%	
Bed Days	1,620	1,274	27%	

Data Submission Quality

Data Entry	Actual	State Avg
🗸 Valid NOMS Data	100%	6 85%
Valid TEDS Data	100%	6 99%
On-Time Periodic	Actua	al State Avg
6 Month Updates	N//	A N/A
Diagnosis	Actua	I State Avg
Valid Axis I Diagnosis	100%	6 100%

Discharge Outcomes



Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization	Rate		24	4 days	0.1	73%	90%	80%	-17%	▼
	< 90%	90-110%		>110%						

Data Submitted to DMHAS by Month



	> 10% 0	ver 🔻 < 10 ⁰	% Under	
Actual	Goal	V Goal Met	Belo	w Goal

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

Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	141	122	16%	
Admits	21	19	11%	
Discharges	11	5	120%	
Service Hours	304	287	6%	

Data Submission Quality

Data Entry	Actual	State Avg
🗸 Valid NOMS Data	100%	6 94%
Valid TEDS Data	100%	6 93%
On-Time Periodic	Actua	I State Avg
V 6 Month Updates	100%	<i>2</i> 3%
Diagnosis	Actua	l State Avg
Valid Axis I Diagnosis	100%	6 100%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Treatment Completed Successfully		8	73%	50%	34%	23%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Abstinence/Reduced Drug Use		128	91%	55%	33%	36%	
\checkmark	Not Arrested		140	99%	75%	49%	24%	
\checkmark	Employed		81	57%	50%	19%	7%	
\checkmark	Stable Living Situation		139	99%	95%	46%	4%	
	Self Help	_ .	15	11%	60%	10%	-49%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		129	99%	90%	34%	9%	

Data Submitted to DMHAS by Month



	> 10% 0	ver 🔻 < 10°	% Under	
Actual	Goal	V Goal Met	Belov	w Goal

* State Avg based on Active Buprenorphine Maintenance Programs