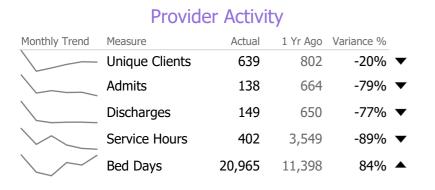
McCall Foundation Inc

Torrington, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)



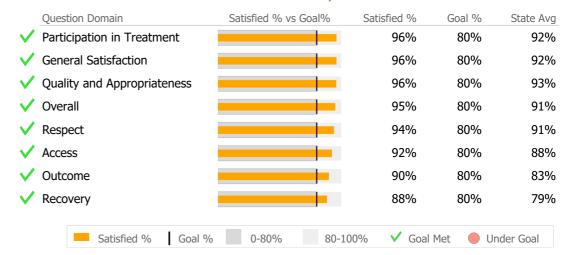
▲ > 10% Over 1 Yr Ago

 \checkmark > 10% Under 1Yr Ago

Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|--------------|------------------------|-----|-------|
| Addiction | | | |
| | Outpatient | 300 | 37.2% |
| | Residential Services | 140 | 17.4% |
| | Case Management | 136 | 16.9% |
| Medicat | ion Assisted Treatment | 135 | 16.7% |
| | Employment Services | 18 | 2.2% |
| Mental Healt | h | | |
| | Employment Services | 40 | 5.0% |
| | Residential Services | 19 | 2.4% |
| | Community Support | 15 | 1.9% |
| | Case Management | 3 | 0.4% |
| | | | |

Consumer Satisfaction Survey (Based on 981 FY22 Surveys)



Client Demographics

| Age | # | % | State Avg | Gender | # | % | State Avg |
|-------------------|----------|--------|-----------|---------------------------------|---------|----------|--------------|
| 18-25 | 29 | 5% | 9% | Male 🗾 | 386 | 60% | 58% |
| 26-34 | 188 | 29% | 20% | Female | 253 | 40% | 42% |
| 35-44 | 186 | 29% | 24% | Transgender | | | 0% |
| 45-54 | 115 | 18% | 18% | | | | |
| 55-64 📒 | 98 | 15% | 20% | | | | |
| 65+ | 23 | 4% | 9% | Race | # | % | State Avg |
| | | | | White/Caucasian | 467 | 73% | ▲ 62% |
| Ethnicity | # | % | State Avg | Unknown 🛔 | 72 | 11% | 6% |
| Non-Hispanic | 507 | 79% | 69% | Other 📘 | 50 | 8% | 13% |
| Unknown | 74 | 12% | 11% | Black/African American | 41 | 6% | ▼ 17% |
| Hispanic-Other | 48 | 8% | 8% | Am. Indian/Native Alaskan | 5 | 1% | 1% |
| Hisp-Puerto Rican | 8 | 1% | 11% | Asian | 4 | 1% | 1% |
| · . | | | | Multiple Races | | | 1% |
| Hispanic-Mexican | 2 | 0% | 1% | Hawaiian/Other Pacific Islander | | | 0% |
| Hispanic-Cuban | | | 0% | | | | |
| - | Unique C | lients | State Avg | ▲ > 10% Over State Avg | > 10% L | Inder St | tate Avg |

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

Carnes Weeks

McCall Foundation Inc Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 31 | 167 | -81% 🔻 |
| Admits | 7 | 156 | -96% 🔻 |
| Discharges | 17 | 159 | -89% 🔻 |
| Bed Days | 2,670 | 3,484 | -23% 🔻 |

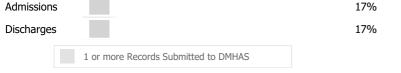
Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 98% | 89% |
| Valid TEDS Data | 88% | 94% |
| On-Time Periodic | Actua | State Avg |
| 6 Month Updates | 0% | 0% |
| Diagnosis | Actua | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

| | | Actual of | % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|---|-----------|-------------|----------|----------|--------|-----------|----------------|---|
| | Treatment Completed Successfully | | | 0 | 0% | 80% | 68% | -80% | |
| | | Actual of | % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | No Re-admit within 30 Days of Discharge | | | 17 | 100% | 85% | 90% | 15% | |
| | | Actual of | % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Follow-up within 30 Days of Discharge | | | N/A | N/A | 90% | 61% | N/A | |
| | Recovery | | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % | % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Self Help | | | 13 | 42% | 60% | 65% | -18% | |
| | Abstinence/Reduced Drug Use | | | 11 | 35% | 70% | 31% | -35% | |
| | Bed Utilization | | | | | | | | |
| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Avg Utilization Rate | 20 | 190 days | 0.4 | 73% | 90% | 79% | -17% | • |
| | < 90% 90-110% | | >110% | | | | | | |

Data Submitted Jul to Aug DMHAS Sep by Month Nov dmissions 17%



| | > 10% 0 | ver v < 100 | % Under |
|--------|---------|--------------------|---------|
| Actual | Goal | 🗸 Goal Met | Below G |

* State Avg based on 9 Active SA Intensive Res. Rehabilitation 3.7 Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 35 | 35 | 0% |
| Admits | 9 | 35 | -74% 🔻 |
| Discharges | 12 | 12 | 0% |
| Service Hours | 14 | 154 | -91% 🔻 |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|--------|--------------|
| Valid NOMS Data | 96% | 6 94% |
| | • | |
| On-Time Periodic | Actua | al State Avg |
| 6 Month Updates | 9% | % 39% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 2 | 17% | 50% | 66% | -33% |
| Recovery | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Stable Living Situation | | 29 | 83% | 80% | 72% | 3% |
| Employed | | 8 | 23% | 20% | 24% | 3% |
| Self Help | | 18 | 51% | 60% | 47% | -9% |
| Service Utilization | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Clients Receiving Services | | 20 | 87% | 90% | 70% | -3% |



| | > 10% 0 | ver 🔻 < 10% | 6 Under |
|--------|---------|-------------|------------|
| Actual | Goal | 🗸 Goal Met | Below Goal |
| Actual | Goal | V Goal Met | Below Goal |

* State Avg based on 13 Active Standard Case Management Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

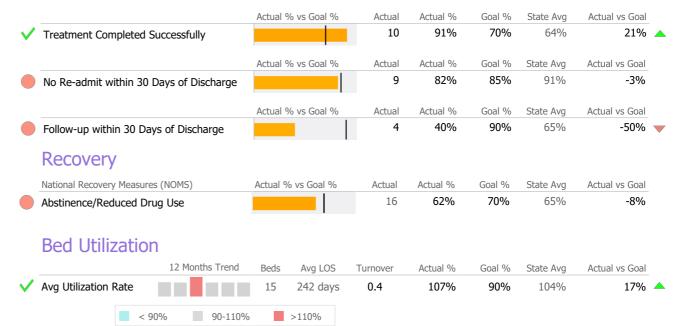
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 26 | 2 | 1200% | |
| Admits | 4 | 2 | 100% | |
| Discharges | 11 | - | | |
| Bed Days | 2,957 | 128 | 2210% | |

Data Submission Quality

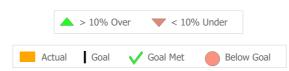
| Data Entry | Actual 9 | State Avg |
|------------------------|----------|-----------|
| Valid NOMS Data | 92% | 89% |
| Valid TEDS Data | 90% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 3% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes



Data Submitted to DMHAS by Month

| | | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted | |
|------------|---|---------|-----------|---------|-----------|-------|-----|--------------------|--|
| Admission | S | | | | | | | 17% | |
| Discharges | 5 | | | | | | | 33% | |
| | 1 | l or mo | ore Recor | ds Subn | nitted to | DMHAS | | | |



* State Avg based on 24 Active Intermediate/Long Term Res.Tx 3.5 Programs

McCall Foundation Inc Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5 Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 52 | 11 | 373% | |
| Admits | 19 | 9 | 111% | |
| Discharges | 14 | - | | |
| Bed Days | 6,193 | 1,287 | 381% | |

Data Submission Quality

| Data Entry | Actual S | State Avg |
|------------------------|----------|-----------|
| Valid NOMS Data | 97% | 89% |
| Valid TEDS Data | 99% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 3% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

| | | Actual % | vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|---|----------|-----------|----------|----------|--------|-----------|----------------|--|
| \checkmark | Treatment Completed Successfully | | | 10 | 71% | 70% | 64% | 1% | |
| | | Actual % | vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | No Re-admit within 30 Days of Discharge | | | 12 | 86% | 85% | 91% | 1% | |
| _ | | Actual % | vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Follow-up within 30 Days of Discharge | | | 7 | 70% | 90% | 65% | -20% | |
| | Recovery | | | | | | | | |
| ľ | National Recovery Measures (NOMS) | Actual % | vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Abstinence/Reduced Drug Use | | | 36 | 69% | 70% | 65% | -1% | |
| | Bed Utilization | | | | | | | | |
| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
| / / | Avg Utilization Rate | 19 | 275 days | 0.2 | 177% | 90% | 104% | 87% | |
| | < 90% 90-110% | > | 110% | | | | | | |

Data Submitted to DMHAS by Month



| | > 10% 0\ | ver 🔍 < 10% | 6 Under |
|--------|----------|-------------|------------|
| Actual | Goal | 🗸 Goal Met | Below Goal |

* State Avg based on 24 Active Intermediate/Long Term Res.Tx 3.5 Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 55 | 9 | 511% | |
| Admits | 14 | 3 | 367% | |
| Discharges | 23 | - | | |
| Service Hours | 16 | 6 | 159% | |

Data Submission Quality

| Data Entry | Actual S | State Avg |
|------------------------|----------|-----------|
| 🗸 Valid NOMS Data | 97% | 90% |
| Valid TEDS Data | 99% | 80% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 15% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| / Treatment Completed Successfully | | 15 | 65% | 50% | 43% | 15% | - |
| Recovery | | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Not Arrested | | 47 | 85% | 75% | 65% | 10% | |
| Abstinence/Reduced Drug Use | | 33 | 60% | 55% | 33% | 5% | |
| Self Help | | 33 | 60% | 60% | 15% | 0% | |
| Employed | | 5 | 9% | 50% | 30% | -41% | |
| Stable Living Situation | · · · | 25 | 45% | 95% | 65% | -50% | |
| Service Utilization | | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Clients Receiving Services | | 9 | 28% | 90% | 52% | -62% | |
| Service Engagement | | | | | | | |
| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | _ |
| 2 or more Services within 30 days | | 1 | 7% | 75% | 64% | -68% | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|---------|----------|---------|-----------|-------|-----|--------------------|
| Admissions | | | | | | | 33% |
| Discharges | | | | | | | 33% |
| Services | | | | | | | 33% |
| | 1 or mo | re Recor | ds Subn | nitted to | DMHAS | | |

| | > 10% 0 | ver 🔻 < 109 | % Under | |
|--------|---------|-------------|----------|----|
| Actual | Goal | V Goal Met | Below Go | al |

* State Avg based on 111 Active Standard Outpatient Programs

Employment Services Torrington

McCall Foundation Inc

Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 40 | | |
| Admits | 40 | - | |
| Discharges | 8 | - | |
| Service Hours | 71 | - | |

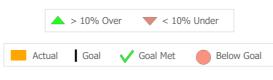
Recovery

| / | | | | | | | |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Employed | | 12 | 30% | 35% | 48% | -5% | |
| Service Utilization | | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Clients Receiving Services | | 14 | 44% | 90% | 92% | -46% | ▼ |

Data Submission Quality

| Data Entry | Actua | al S | tate Avg |
|------------------|-------|--------|-----------|
| Valid NOMS Data | 1 | .00% | 92% |
| On-Time Periodic | A | Actual | State Avg |
| 6 Month Updates | | N/A | 79% |





* State Avg based on 44 Active Employment Services Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 6 | 4 | 50% 🔺 |
| Admits | 2 | - | |
| Discharges | 1 | - | |
| Bed Days | 797 | 736 | 8% |

Data Submission Quality

| Data Entry | Actu | al S | tate Avg |
|------------------------|------|--------|-----------|
| Valid NOMS Data | 1 | .00% | 98% |
| | | | |
| On-Time Periodic | / | Actual | State Avg |
| 6 Month Updates | | 0% | 82% |
| | | | |
| Diagnosis | / | Actual | State Avg |
| Valid Axis I Diagnosis | 1 | .00% | 99% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|--------------------|-------------|----------------|----------------------|------------------|------------------------|---|
| Treatment Completed Successfully | | 0 | 0% | 75% | 65% | -75% | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | | | | | | | |
| No Re-admit within 30 Days of Discharge | | 0 | 0% | 85% | 84% | -85% | ▼ |
| No Re-admit within 30 Days of Discharge | Actual % vs Goal % | 0 Actual | 0% Actual % | 85% Goal % | 84% State Avg | -85% Actual vs Goal | - |

Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------|------|-----------------|------|------------|----------|----------|--------|-----------|----------------|
| Avg Utilization | Rate | | 5 | 1,703 days | 0.5 | 87% | 90% | 88% | -3% |
| | < 9 | 0% 90-110% | | >110% | | | | | |

Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec % Months Submitted Admissions 33%

| Discharges | | 17% |
|------------|--------------------------------------|-----|
| | 1 or more Records Submitted to DMHAS | |

| | > 10% Ov | ver 🔻 < 100 | % Under | |
|--------|----------|-------------|---------|------|
| Actual | Goal | 🗸 Goal Met | Below G | ioal |

* State Avg based on 33 Active MH Intensive Res. Rehabilitation Programs

McCall Foundation Inc Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5 Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 9 | | |
| Admits | 3 | - | |
| Discharges | 2 | - | |
| Bed Days | 1,263 | - | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 90% | 89% |
| Valid TEDS Data | 50% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 3% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

| | Actual % | b vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|----------|-------------|----------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | | 0 | 0% | 70% | 64% | -70% |
| | Actual % | vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| No Re-admit within 30 Days of Discharge | | | 1 | 50% | 85% | 91% | -35% |
| | Actual % | vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Follow-up within 30 Days of Discharge | | | N/A | N/A | 90% | 65% | N/A |
| Recovery | | | | | | | |
| National Recovery Measures (NOMS) | Actual % | vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Abstinence/Reduced Drug Use | | | 5 | 56% | 70% | 65% | -14% |
| Bed Utilization | | | | | | | |
| 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
| Avg Utilization Rate | 7 | 187 days | 0.4 | 98% | 90% | 104% | 8% |
| < 90% 90-110% | | >110% | | | | | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|---------|-----------|---------|-----------|-------|-----|--------------------|
| Admissions | | | | | | | 17% |
| Discharges | | | | | | | 17% |
| | 1 or mo | ore Recor | ds Subn | nitted to | DMHAS | | |

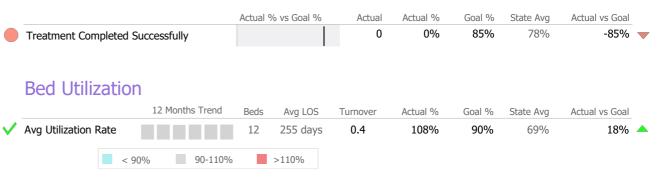
| | > 10% Ov | rer 🔍 < 10% | 6 Under |
|--------|----------|-------------|------------|
| Actual | Goal | V Goal Met | Below Goal |

* State Avg based on 24 Active Intermediate/Long Term Res.Tx 3.5 Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 14 | 22 | -36% 🔻 |
| Admits | 1 | 12 | -92% 🔻 |
| Discharges | 1 | 10 | -90% 🔻 |
| Bed Days | 2,382 | 2,074 | 15% 🔺 |

Discharge Outcomes



Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|---------|----------|---------|-----------|-------|-----|--------------------|
| Admissions | | | | | | | 17% |
| Discharges | | | | | | | 17% |
| | 1 or mo | re Recor | ds Subr | nitted to | DMHAS | | |

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

* State Avg based on 12 Active Recovery House Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 15 | 26 | -42% | ▼ |
| Admits | - | 13 | -100% | ▼ |
| Discharges | - | 11 | -100% | ▼ |

Data Submission Quality

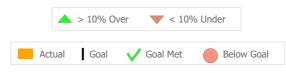
| | Data Entry | Actual | State Avg |
|--------------|------------------------|--------|-----------|
| | Valid NOMS Data | N/A | 96% |
| | Valid TEDS Data | N/A | 93% |
| | | | |
| | On-Time Periodic | Actual | State Avg |
| | 6 Month Updates | 0% | 12% |
| | | | |
| | Diagnosis | Actual | State Avg |
| \checkmark | Valid Axis I Diagnosis | 100% | 100% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 13% | N/A |
| Recovery | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Not Arrested | | 10 | 67% | 75% | 77% | -8% |
| Employed | 💻 . | 4 | 27% | 50% | 23% | -23% 🔻 |
| Abstinence/Reduced Drug Use | | 2 | 13% | 55% | 44% | -42% 🔻 |
| Self Help | | 2 | 13% | 60% | 26% | -47% 🔷 |
| Stable Living Situation | | 7 | 47% | 95% | 67% | -48% 🔻 |

Data Submitted to DMHAS by Month

| | | Jui | Aug | Sch | OCL | 1404 | DCC | 70 FIORERS Submitted |
|------------|---|---------|----------|----------|-----------|-------|-----|----------------------|
| Admission | S | | | | | | | 0% |
| Discharges | 5 | | | | | | | 0% |
| | | 1 or mo | re Recor | ds Subrr | nitted to | DMHAS | | |

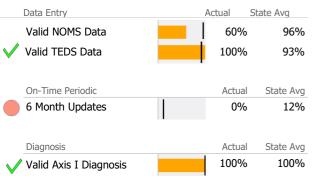


* State Avg based on 6 Active Naltrexone Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|--|
| Unique Clients | 3 | 2 | 50% | |
| Admits | 1 | - | | |
| Discharges | 1 | - | | |

Data Submission Quality

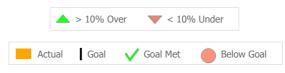


Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|-----------------------------------|---------------------------------------|--------|----------|--------|-----------|----------------|--|
| Treatment Completed Successfully | | 0 | 0% | 50% | 13% | -50% | |
| Recovery | | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Abstinence/Reduced Drug Use | | 1 | 33% | 55% | 44% | -22% | |
| Not Arrested | | 1 | 33% | 75% | 77% | -42% | |
| Employed | | 0 | 0% | 50% | 23% | -50% | |
| Self Help | | 0 | 0% | 60% | 26% | -60% | |
| Stable Living Situation | · · · · · · · · · · · · · · · · · · · | 0 | 0% | 95% | 67% | -95% | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|---------|-----------|---------|-----------|-------|-----|--------------------|
| Admissions | 5 | | | | | | 17% |
| Discharges | | | | | | | 17% |
| | 1 or me | ore Recor | ds Subn | nitted to | DMHAS | | |



* State Avg based on 6 Active Naltrexone Programs

MATx Main Campus

McCall Foundation Inc Addiction - Medication Assisted Treatment - Buprenorphine Maintenance Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 77 | 123 | -37% | • |
| Admits | 3 | 46 | -93% | • |
| Discharges | 8 | 56 | -86% | • |
| Service Hours | 86 | 796 | -89% | • |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|--------------|
| Valid NOMS Data | 98% | 6 92% |
| Valid TEDS Data | 50% | 6 91% |
| On-Time Periodic | Actua | al State Avg |
| 6 Month Updates | 0% | 6 30% |
| Diagnosis | Actua | al State Avg |
| Valid Axis I Diagnosis | 100% | 6 100% |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| | Treatment Completed Successfully | | 1 | 12% | 50% | 35% | -38% | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Not Arrested | | 73 | 95% | 75% | 64% | 20% | |
| \checkmark | Employed | | 45 | 58% | 50% | 27% | 8% | |
| | Stable Living Situation | | 69 | 90% | 95% | 61% | -5% | |
| | Abstinence/Reduced Drug Use | | 27 | 35% | 55% | 44% | -20% | |
| | Self Help | | 17 | 22% | 60% | 13% | -38% | ▼ |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Clients Receiving Services | | 51 | 74% | 90% | 49% | -16% | ▼ |

Data Submitted to DMHAS by Month

| | | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----|--------|---------|---------|-----------|-------|-----|--------------------|
| Admission | 5 | | | | | | | 17% |
| Discharges | 5 | | | | | | | 17% |
| Services | | | | | | | | 33% |
| | 1 c | or mor | e Recor | ds Subr | nitted to | DMHAS | | |

| | > 10% Ov | er 🔻 < 10% | 6 Under |
|--------|----------|------------|------------|
| Actual | Goal | V Goal Met | Below Goal |

* State Avg based on 19 Active Buprenorphine Maintenance Programs

McCall House

McCall Foundation Inc Addiction - Residential Services - Transitional/Halfway House 3.1 Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 17 | 48 | -65% 🔻 |
| Admits | 2 | 35 | -94% 🔻 |
| Discharges | 3 | 40 | -93% 🔻 |
| Bed Days | 2,577 | 2,601 | -1% |

Data Submission Quality

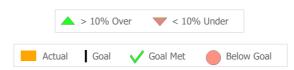
| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| 🗸 Valid NOMS Data | 96% | 95% |
| Valid TEDS Data | 80% | 93% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 0% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 100% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|----------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 0 | 0% | 85% | 60% | -85% |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| No Re-admit within 30 Days of Discharge | | 3 | 100% | 85% | 81% | 15% |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 67% | N/A |
| Recovery | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Abstinence/Reduced Drug Use | | 10 | 59% | 70% | 76% | -11% |
| Employed | | 8 | 47% | 60% | 48% | -13% |
| Bed Utilization | | | | | | |
| 12 Months Trend | Beds Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
| Avg Utilization Rate | 13 252 days | 0.4 | 108% | 90% | 96% | 18% |
| Avg ounzation Nate | | | | | | |

Data Submitted to DMHAS by Month

| | - | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitte | ed |
|------------|-----|-------|-----------|---------|-----------|-------|-----|-------------------|----|
| Admissions | 5 | | | | | | | 170 | % |
| Discharges | | | | | | | | 179 | % |
| | 1 0 | or mo | ore Recor | ds Subn | nitted to | DMHAS | | | |



* State Avg based on 9 Active Transitional/Halfway House 3.1 Programs

Migeon Pilots Development

McCall Foundation Inc

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 3 | 4 | -25% 🔻 |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | - | 5 | -100% 🔻 |

Recovery

| , | | | | | | | |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Stable Living Situation | | 2 | 67% | 85% | 96% | -18% | |
| Service Utilization | | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Clients Receiving Services | | 0 | 0% | 90% | 96% | N/A | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|--------|-----------|
| Valid NOMS Data | N/A | 99% |
| | | |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 84% |

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

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

* State Avg based on 64 Active Supportive Housing – Development Programs

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 7 | 4 | 75% | |
| Admits | 1 | 2 | -50% | ▼ |
| Discharges | 1 | - | | |
| Bed Days | 1,039 | 536 | 94% | |

Data Submission Quality

| Data Entry | Actual S | State Avg |
|------------------------|----------|-----------|
| Valid NOMS Data | 100% | 98% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 20% | 77% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|----------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 1 | 100% | 80% | 62% | 20% |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| No Re-admit within 30 Days of Discharge | | 1 | 100% | 85% | 91% | 15% |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Follow-up within 30 Days of Discharge | | 1 | 100% | 90% | 76% | 10% |
| Recovery | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Social Support | | 7 | 100% | 60% | 86% | 40% |
| Stable Living Situation | · · · · | 7 | 100% | 90% | 98% | 10% |
| Bed Utilization | | | | | | |
| 12 Months Trend | Beds Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
| 12 PIONUIS FICIU | | | | | | |
| Avg Utilization Rate | 6 373 days | 0.5 | 94% | 90% | 88% | 4% |

| Data | Submitted Jul Aug | to DMHAS by M Sep Oct Nov Dec | 10nth % Months Submitted |
|------------|----------------------|----------------------------------|-----------------------------|
| Admissions | | | 17% |
| Discharges | | | 17% |
| | 1 or more Record | ds Submitted to DMHAS | |

| | > 10% 0 | ver 🔻 < 109 | % Under | |
|--------|---------|-------------|---------|--------|
| Actual | Goal | 🗸 Goal Met | Belo | w Goal |

* State Avg based on 24 Active Group Home Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 3 | 3 | 0% |
| Admits | - | 1 | -100% 🔻 |
| Discharges | - | - | |
| Service Hours | 21 | 46 | -54% 🔻 |

Data Submission Quality

| | Data Entry | | Actual | State Avg |
|--------------|------------------------|---|--------|-------------|
| | Valid NOMS Data | | N/A | 88% |
| | On-Time Periodic | | Actua | I State Avg |
| | 6 Month Updates | 1 | 0% | |
| | o Month Opdates | | 070 | 0570 |
| | Diagnosis | | Actua | I State Avg |
| \checkmark | Valid Axis I Diagnosis | | 100% | 97% |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| | Treatment Completed Successfully | | N/A | N/A | 65% | 55% | N/A | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Social Support | | 3 | 100% | 60% | 78% | 40% | |
| \checkmark | Stable Living Situation | | 3 | 100% | 80% | 86% | 20% | |
| \checkmark | Employed | | 1 | 33% | 20% | 14% | 13% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Clients Receiving Services | | 3 | 100% | 90% | 96% | 10% | |

Data Submitted to DMHAS by Month

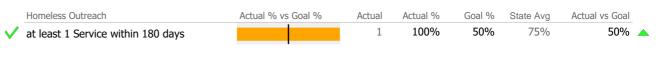




Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 15 | 10 | 50% 🔺 |
| Admits | 1 | 1 | 0% |
| Discharges | 5 | 5 | 0% |
| Service Hours | - | - | |

Service Engagement



Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|---------|-----------|---------|-----------|-------|-----|--------------------|
| Admissions | | | | | | | 17% |
| Discharges | | | | | | | 17% |
| Services | | | | | | | 33% |
| | 1 or mo | ore Recor | ds Subr | nitted to | DMHAS | | |

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

* State Avg based on 24 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 | 5 | 2 | 150% | |
| Admits | - | - | | |
| Discharges | - | - | | |

Data Submission Quality

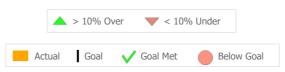
| | Data Entry | Actual | State Avg |
|--------------|------------------------|--------|-----------|
| | Valid NOMS Data | N/A | 92% |
| | Valid TEDS Data | N/A | 91% |
| | | | |
| | On-Time Periodic | Actual | State Avg |
| | 6 Month Updates | 0% | 30% |
| | | | |
| | Diagnosis | Actual | State Avg |
| \checkmark | Valid Axis I Diagnosis | 100% | 100% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 35% | N/A |
| Recovery | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Abstinence/Reduced Drug Use | | 2 | 40% | 55% | 44% | -15% 🔷 |
| Not Arrested | | 3 | 60% | 75% | 64% | -15% 🔷 |
| Self Help | | 2 | 40% | 60% | 13% | -20% 🔷 |
| Employed | | 0 | 0% | 50% | 27% | -50% 🗡 |
| Stable Living Situation | I | 2 | 40% | 95% | 61% | -55% 🔻 |

Data Submitted to DMHAS by Month

| | | Jui | Aug | Sep | UCT | INOV | Dec | % Months Submitted |
|------------|---|---------|----------|---------|-----------|-------|-----|--------------------|
| Admission | S | | | | | | | 0% |
| Discharges | 5 | | | | | | | 0% |
| | | 1 or mo | re Recor | ds Subm | nitted to | DMHAS | | |



* State Avg based on 19 Active Buprenorphine Maintenance Programs

SOR Employment

McCall Foundation Inc

Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 18 | 53 | -66% | ▼ |
| Admits | 4 | 31 | -87% | ▼ |
| Discharges | 8 | 45 | -82% | ▼ |
| Service Hours | - | 90 | -100% | ▼ |

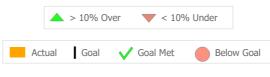
Data Submission Quality

| | Data Entry | Actual S | tate Avg |
|--------------|------------------|----------|-----------|
| \checkmark | Valid NOMS Data | 100% | 90% |
| | | | |
| | On-Time Periodic | Actual | State Avg |
| | 6 Month Updates | 0% | 46% |

Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| \checkmark | Employed | | 7 | 39% | 35% | 28% | 4% |
| | Service Utilization | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| | Clients Receiving Services | | 0 | 0% | 90% | 85% | N/A 🚽 |





* State Avg based on 10 Active Employment Services Programs

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 36 | 25 | 44% | |
| Admits | - | 15 | -100% | ▼ |
| Discharges | 3 | 6 | -50% | ▼ |
| Service Hours | - | 20 | -100% | ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|--------------|
| Valid NOMS Data | 87% | % 92% |
| Valid TEDS Data | 83% | % 91% |
| On-Time Periodic | Actua | al State Avg |
| 6 Month Updates | 0% | 6 30% |
| Diagnosis | Actua | al State Avg |
| Valid Axis I Diagnosis | 100% | % 100% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| Treatment Completed Successfully | | 0 | 0% | 50% | 35% | -50% | |
| Recovery | | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Not Arrested | | 26 | 72% | 75% | 64% | -3% | |
| Employed | 💻 Ė | 8 | 22% | 50% | 27% | -28% | |
| Abstinence/Reduced Drug Use | | 6 | 17% | 55% | 44% | -38% | |
| Self Help | — | 6 | 17% | 60% | 13% | -43% | |
| Stable Living Situation | | 15 | 42% | 95% | 61% | -53% | |
| Service Utilization | | | | | | | |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| Clients Receiving Services | | 0 | 0% | 90% | 49% | N/A | |
| | | | | | | | |

Data Submitted to DMHAS by Month

| | | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|-----------|---|---------|-----------|---------|-----------|-------|-----|--------------------|
| Admission | s | | | | | | | 0% |
| Discharge | S | | | | | | | 17% |
| Services | | | | | | | | 33% |
| | | 1 or mo | ore Recor | ds Subn | nitted to | DMHAS | | |

| | > 10% 0 | ver 🔻 < 10% | 6 Under |
|--------|---------|-------------|------------|
| Actual | Goal | V Goal Met | Below Goal |

* State Avg based on 19 Active Buprenorphine Maintenance Programs

McCall Foundation Inc

Addiction - Case Management - Standard Case Management

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 15 | 17 | -12% 🔻 |
| Admits | 4 | 13 | -69% 🔻 |
| Discharges | 4 | 11 | -64% 🔻 |
| Service Hours | - | 49 | -100% 🔻 |

Data Submission Quality

| Data Entry | Actual S | tate Avg |
|------------------|----------|-----------|
| Valid NOMS Data | 80% | 94% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 39% |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| | Treatment Completed Successfully | | 0 | 0% | 50% | 66% | -50% | - |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Employed | | 8 | 53% | 20% | 24% | 33% | |
| \checkmark | Stable Living Situation | | 13 | 87% | 80% | 72% | 7% | |
| | Self Help | | 3 | 20% | 60% | 47% | -40% | - |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Clients Receiving Services | | 0 | 0% | 90% | 70% | N/A | |



| ▲ > 10% Over ▼ < 10% Under | |
|-------------------------------|----------|
| Actual 🖌 Goal 🗸 Goal Met 🛑 Be | low Goal |

* State Avg based on 13 Active Standard Case Management Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 240 | 421 | -43% 🔻 |
| Admits | 13 | 241 | -95% 🔻 |
| Discharges | 17 | 257 | -93% 🔻 |
| Service Hours | 25 | 2,266 | -99% 🔻 |

Data Submission Quality

| Actual S | State Avg |
|----------|------------------|
| 94% | 90% |
| 90% | 80% |
| Actual | State Avg |
| 1% | 15% |
| Actual | State Avg |
| 100% | 99% |
| | Actual Actual |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| | Treatment Completed Successfully | | 2 | 12% | 50% | 43% | -38% | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Not Arrested | | 222 | 92% | 75% | 65% | 17% | |
| | Employed | · | 118 | 49% | 50% | 30% | -1% | |
| | Stable Living Situation | · · · | 207 | 86% | 95% | 65% | -9% | |
| | Self Help | | 78 | 32% | 60% | 15% | -28% | |
| | Abstinence/Reduced Drug Use | | 64 | 27% | 55% | 33% | -28% | ▼ |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Clients Receiving Services | | 15 | 7% | 90% | 52% | -83% | |
| | Service Engagement | | | | | | | |
| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | 2 or more Services within 30 days | | 3 | 23% | 75% | 64% | -52% | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|---------|-----------|---------|-----------|-------|-----|--------------------|
| Admissions | | | | | | | 17% |
| Discharges | | | | | | | 33% |
| Services | | | | | | | 50% |
| | 1 or mo | ore Recor | ds Subn | nitted to | DMHAS | | |

| | > 10% 0 | ver 🔻 < 109 | % Under |
|--------|---------|-------------|------------|
| Actual | Goal | 🗸 Goal Met | Below Goal |

* State Avg based on 111 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 19 | 4 | 375% | |
| Admits | 3 | - | | |
| Discharges | 1 | 2 | -50% | ▼ |
| Service Hours | 15 | 10 | 46% | |

Data Submission Quality

| Data Entry | Actua | al Sta | ate Avg |
|------------------------|-------|--------|-----------|
| Valid NOMS Data | | 70% | 90% |
| Valid TEDS Data | | 81% | 80% |
| On-Time Periodic | ļ | Actual | State Avg |
| 6 Month Updates | | 0% | 15% |
| Diagnosis | ŀ | Actual | State Avg |
| Valid Axis I Diagnosis | 1 | .00% | 99% |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| \checkmark | Treatment Completed Successfully | | 1 | 100% | 50% | 43% | 50% | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Not Arrested | | 18 | 95% | 75% | 65% | 20% | |
| \checkmark | Employed | | 11 | 58% | 50% | 30% | 8% | |
| | Abstinence/Reduced Drug Use | | 10 | 53% | 55% | 33% | -2% | |
| | Stable Living Situation | I | 9 | 47% | 95% | 65% | -48% | |
| | Self Help | | 1 | 5% | 60% | 15% | -55% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Clients Receiving Services | | 8 | 44% | 90% | 52% | -46% | |
| | Service Engagement | | | | | | | |
| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | 2 or more Services within 30 days | | 3 | 100% | 75% | 64% | 25% | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|---------|-----------|---------|-----------|-------|-----|--------------------|
| Admissions | | | | | | | 17% |
| Discharges | | | | | | | 17% |
| Services | | | | | | | 33% |
| | 1 or mo | ore Recor | ds Subn | nitted to | DMHAS | | |

| | > 10% 0 | ver 🔻 < 109 | % Under | |
|--------|---------|-------------|----------|-----|
| Actual | Goal | V Goal Met | Below Go | bal |

* State Avg based on 111 Active Standard Outpatient Programs

McCall Foundation Inc Addiction - Case Management - Outreach & Engagement

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 74 | 130 | -43% 🔻 |
| Admits | 6 | 47 | -87% 🔻 |
| Discharges | 8 | 36 | -78% 🔻 |
| Service Hours | - | 19 | -100% 🔻 |

Service Engagement



Data Submitted to DMHAS by Month

| | | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|------------|-----------------|-----|-----|-----|-----------|-------|-----|--------------------|
| Admissions | ; | | | | | | | 17% |
| Discharges | | | | | | | | 17% |
| Services | | | | | | | | 50% |
| | sions and arges | | | | nitted to | DMHAS | | |

| | × > 10% Ov | ver 🔻 < 10 | % Under | |
|--------|------------|------------|---------|--------|
| Actual | Goal | V Goal Met | Belo | w Goal |

* State Avg based on 24 Active Outreach & Engagement Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 6 | 3 | 100% 🔺 |
| Admits | 1 | - | |
| Discharges | - | - | |
| Bed Days | 1,087 | 552 | 97% 🔺 |

Mental Health - Residential Services - Group Home

Data Submission Quality

| Data Entry | Actual S | State Avg |
|------------------------|----------|-----------|
| Valid NOMS Data | 100% | 98% |
| | | |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 77% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |

Discharge Outcomes

< 90%

| | | Actual % | % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-------------------------|-------------------|----------|-------------|----------|----------|--------|-----------|----------------|
| Treatment Completed | Successfully | | | N/A | N/A | 80% | 62% | N/A |
| | | Actual % | % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| No Re-admit within 30 | Days of Discharge | | | N/A | N/A | 85% | 91% | N/A |
| | | Actual % | % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Follow-up within 30 D | ays of Discharge | | | N/A | N/A | 90% | 76% | N/A |
| Recovery | | | | | | | | |
| National Recovery Measu | res (NOMS) | Actual % | vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Social Support | | | | 5 | 83% | 60% | 86% | 23% |
| Stable Living Situation | | | | 5 | 83% | 90% | 98% | -7% |
| Bed Utilizatio | n | | | | | | | |
| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
| Avg Utilization Rate | | 6 | 486 days | 0.5 | 98% | 90% | 88% | 8% |
| | | | | | | | | |

| Data | Submitted to DMHAS by Month | bmitted |
|------------|--------------------------------------|---------|
| Admissions | | 17% |
| Discharges | | 0% |
| | 1 or more Records Submitted to DMHAS | |

| | > | 10% Ove | er | ▼ < 10% | Under | |
|------|----|---------|--------------|----------|-------|--------|
| Actu | al | Goal | \checkmark | Goal Met | Belo | w Goal |

90-110%

* State Avg based on 24 Active Group Home Programs

>110%

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 12 | 12 | 0% |
| Admits | - | 2 | -100% 🔻 |
| Discharges | 1 | - | |
| Service Hours | 154 | 89 | 73% 🔺 |

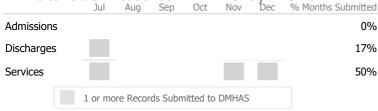
Data Submission Quality

| Data Entry | Act | ual S | tate Avg |
|------------------------|-----|--------|-----------|
| 🗸 Valid NOMS Data | | 100% | 88% |
| | | | |
| On-Time Periodic | | Actual | State Avg |
| 6 Month Updates | | 0% | 83% |
| Diagnosis | | Actual | State Avg |
| Valid Axis I Diagnosis | | 100% | 97% |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| | Treatment Completed Successfully | | 0 | 0% | 65% | 55% | -65% | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Social Support | | 11 | 92% | 60% | 78% | 32% | |
| \checkmark | Stable Living Situation | | 12 | 100% | 80% | 86% | 20% | |
| | Employed | | 1 | 8% | 20% | 14% | -12% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Clients Receiving Services | | 11 | 100% | 90% | 96% | 10% | |

Data Submitted to DMHAS by Month





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