**United Services Inc.**
Dayville, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 2,567 | 2,464 | 4% | |
| | Admits | 1,117 | 871 | 28% | ▲ |
| | Discharges | 967 | 833 | 16% | ▲ |
| | Service Hours | 21,559 | 16,492 | 31% | ▲ |
| | Bed Days | 2,710 | 2,349 | 15% | ▲ |
| | S.Rehab/PHP/IOP | 2,081 | 1,592 | 31% | ▲ |

▲ > 10% Over 1 Yr Ago    ▼ > 10% Under 1Yr Ago

## Consumer Satisfaction Survey  (Based on 328 FY23 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✔ | Quality and Appropriateness | | 93% | 80% | 93% |
| ✔ | Participation in Treatment | | 92% | 80% | 92% |
| ✔ | Respect | | 90% | 80% | 91% |
| ✔ | Overall | | 90% | 80% | 91% |
| ✔ | General Satisfaction | | 88% | 80% | 92% |
| ✔ | Access | | 87% | 80% | 88% |
| ● | Outcome | | 70% | 80% | 83% |
| ● | Recovery | | 67% | 80% | 79% |

Legend: ▬ Satisfied % | Goal % ▬ 0-80% ▬ 80-100% ✔ Goal Met ● Under Goal

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Outpatient | 1,843 | 54.4% |
| | Community Support | 473 | 14.0% |
| | Crisis Services | 206 | 6.1% |
| | Social Rehabilitation | 170 | 5.0% |
| | Case Management | 142 | 4.2% |
| | Employment Services | 99 | 2.9% |
| | Consultation | 46 | 1.4% |
| | ACT | 23 | 0.7% |
| | Residential Services | 20 | 0.6% |
| **Forensic MH** | | | |
| | Forensics Community-based | 203 | 6.0% |
| **Addiction** | | | |
| | Outpatient | 94 | 2.8% |
| | Medication Assisted Treatment | 51 | 1.5% |
| | Employment Services | 20 | 0.6% |

## Client Demographics

| Age | # | % | State Avg |
|---|---|---|---|
| 18-25 | 312 | 12% | 8% |
| 26-34 | 442 | 17% | 19% |
| 35-44 | 502 | 20% | 24% |
| 45-54 | 395 | 15% | 18% |
| 55-64 | 528 | 21% | 19% |
| 65+ | 386 | 15% | 10% |

| Gender | # | % | | State Avg |
|---|---|---|---|---|
| Female | 1,477 | 58% | ▲ | 41% |
| Male | 1,089 | 42% | ▼ | 59% |
| Transgender | | | | 0% |

| Ethnicity | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 2,053 | 80% | ▲ | 65% |
| Hisp-Puerto Rican | 318 | 12% | | 10% |
| Hispanic-Other | 99 | 4% | | 10% |
| Unknown | 67 | 3% | ▼ | 14% |
| Hispanic-Mexican | 30 | 1% | | 1% |
| Hispanic-Cuban | | | | 0% |

| Race | # | % | | State Avg |
|---|---|---|---|---|
| White/Caucasian | 1,973 | 77% | ▲ | 60% |
| Other | 395 | 15% | | 12% |
| Black/African American | 79 | 3% | ▼ | 17% |
| Unknown | 50 | 2% | | 8% |
| Multiple Races | 31 | 1% | | 1% |
| Asian | 18 | 1% | | 1% |
| Am. Indian/Native Alaskan | 17 | 1% | | 1% |
| Hawaiian/Other Pacific Islander | 4 | 0% | | 0% |

Legend: ▬ Unique Clients | State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

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

**Addiction Recovery-DAC**
United Services Inc.
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 38 | 37 | 3% | |
| Admits | 18 | 13 | 38% | ▲ |
| Discharges | 15 | 14 | 7% | |
| Service Hours | 157 | 172 | -9% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 97% | 88% |
| ✓ | Valid TEDS Data | 97% | 75% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 92% | 10% |

| 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 | | 3 | 20% | 50% | 53% | -30% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Not Arrested | | 39 | 100% | 75% | 53% | 25% | ▲ |
| ✓ | Abstinence/Reduced Drug Use | | 27 | 69% | 55% | 28% | 14% | ▲ |
| ✓ | Stable Living Situation | | 37 | 95% | 95% | 55% | 0% | |
| 🔴 | Employed | | 13 | 33% | 50% | 28% | -17% | ▼ |
| 🔴 | Self Help | | 11 | 28% | 60% | 15% | -32% | ▼ |
| 🔴 | Improved/Maintained Function Score | | 14 | 52% | 75% | 41% | -23% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 24 | 100% | 90% | 37% | 10% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 13 | 72% | 75% | 45% | -3% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 83% |
| Discharges | | | | | | | 83% |
| Services | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 101 Active Standard Outpatient Programs

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

**Addiction Recovery-WAC**
United Services Inc.
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 56 | 51 | 10% | |
| Admits | 22 | 31 | -29% | ▼ |
| Discharges | 26 | 19 | 37% | ▲ |
| Service Hours | 251 | 263 | -5% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 99% | 88% |
| ✓ | Valid TEDS Data | 100% | 75% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 94% | 10% |

| 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 | | 12 | 46% | 50% | 53% | -4% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Not Arrested | | 56 | 97% | 75% | 53% | 22% | ▲ |
| ✓ | Abstinence/Reduced Drug Use | | 37 | 64% | 55% | 28% | 9% | |
| ✓ | Employed | | 29 | 50% | 50% | 28% | 0% | |
| ● | Stable Living Situation | | 54 | 93% | 95% | 55% | -2% | |
| ● | Self Help | | 22 | 38% | 60% | 15% | -22% | ▼ |
| ● | Improved/Maintained Function Score | | 22 | 51% | 75% | 41% | -24% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 32 | 100% | 90% | 37% | 10% |

## Service Engagement

| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 17 | 77% | 75% | 45% | 2% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | | ▢ | ▢ | ▢ | 83% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 101 Active Standard Outpatient Programs

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

**Adult Outpatient Services- Dayville**
United Services Inc.
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 941 | 1,039 | -9% |
| Admits | 190 | 178 | 7% |
| Discharges | 197 | 213 | -8% |
| Service Hours | 3,475 | 3,703 | -6% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 98% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 98% | 52% |

| 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 | | 73 | 37% | 50% | 38% | -13% ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Social Support | | 734 | 77% | 60% | 63% | 17% ▲ |
| ✔ Employed | | 337 | 36% | 30% | 25% | 6% |
| ✔ Stable Living Situation | | 920 | 97% | 95% | 72% | 2% |
| ● Improved/Maintained Function Score | | 177 | 22% | 75% | 41% | -53% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 751 | 100% | 90% | 84% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 127 | 67% | 75% | 61% | -8% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 100% |
| Discharges | | | | | | | 100% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

█ Actual    | Goal    ✔ Goal Met    ● Below Goal

\* State Avg based on 77 Active Standard Outpatient Programs

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

**Adult Outpatient Services- Willimantic**
United Services Inc.
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 827 | 810 | 2% | ▼ |
| Admits | 215 | 173 | 24% | ▲ |
| Discharges | 166 | 198 | -16% | ▼ |
| Service Hours | 3,763 | 3,449 | 9% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 98% | 52% |

| 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 | | 56 | 34% | 50% | 38% | -16% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 768 | 92% | 60% | 63% | 32% | ▲ |
| ✓ | Employed | | 330 | 40% | 30% | 25% | 10% | ▲ |
| ✓ | Stable Living Situation | | 809 | 97% | 95% | 72% | 2% | |
| 🔴 | Improved/Maintained Function Score | | 188 | 28% | 75% | 41% | -47% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 665 | 100% | 90% | 84% | 10% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 171 | 81% | 75% | 61% | 6% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 100% |
| Discharges | | | | | | | 100% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual   | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 77 Active Standard Outpatient Programs

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

**Behavioral Health Homes**
United Services Inc.
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 107 | 110 | -3% | ▲ |
| Admits | 10 | 17 | -41% | ▼ |
| Discharges | 6 | 14 | -57% | ▼ |
| Service Hours | 493 | 366 | 35% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 98% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 99% | 52% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 99% | 97% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 5 | 83% | 50% | 38% | 33% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 99 | 92% | 60% | 63% | 32% | ▲ |
| ✓ | Stable Living Situation | | 106 | 98% | 95% | 72% | 3% | |
| ● | Employed | | 19 | 18% | 30% | 25% | -12% | ▼ |
| ● | Improved/Maintained Function Score | | 5 | 5% | 75% | 41% | -70% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 102 | 100% | 90% | 84% | 10% | |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 7 | 70% | 75% | 61% | -5% |

## Data Submitted to DMHAS by Month
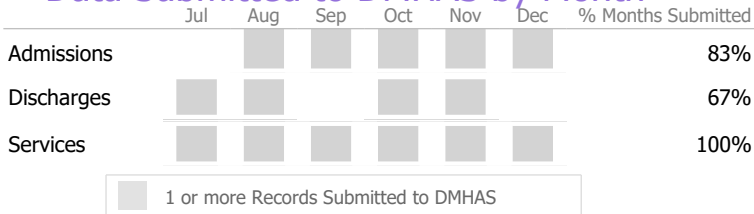
| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | ■ | ■ | ■ | ■ | ■ | 83% |
| Discharges | ■ | ■ | | ■ | ■ | | 67% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 77 Active Standard Outpatient Programs

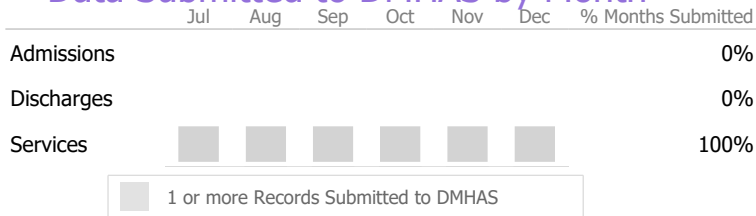Variances in data may be indicative of operational adjustments related to the pandemic.

**BHH CHILDREN Program**
United Services Inc.
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 2 | 3 | -33% | ▼ |
| Admits | - | - | | |
| Discharges | - | 1 | -100% | ▼ |
| Service Hours | 3 | 10 | -65% | ▼ |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 at least 1 Service within 180 days | | 0 | 0% | 50% | 92% | -50% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 0% |
| Discharges | | | | | | | 0% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

\* State Avg based on 54 Active Outreach & Engagement Programs

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

**Brick Row**
United Services Inc.
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 27 | 21 | 29% | ▲ |
| Admits | 6 | 3 | 100% | ▲ |
| Discharges | 3 | 1 | 200% | ▲ |
| Service Hours | 519 | 130 | | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 23 | 85% | 85% | 92% | 0% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 23 | 96% | 90% | 96% | 6% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 91% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 85% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | ▢ | ▢ | ▢ | | ▢ | 67% |
| Discharges | | | ▢ | ▢ | | ▢ | 50% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| ▮ Actual | | Goal | ✓ Goal Met | ● Below Goal |

\* State Avg based on 68 Active Supportive Housing – Development Programs

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

**Cedarwoods**
United Services Inc.
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)
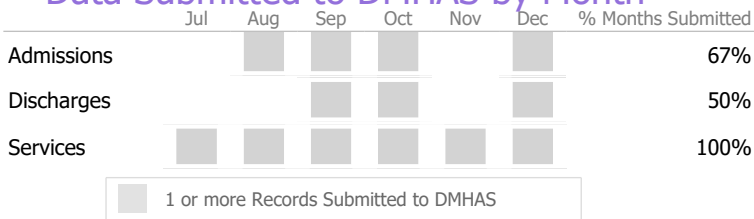
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 9 | -11% | ▼ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | - | - | | |
| Service Hours | 70 | 48 | 47% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 7 | 88% | 85% | 86% | 3% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 8 | 100% | 90% | 91% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 96% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 86% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 0% |
| Discharges | | | | | | | 0% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

☐ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 118 Active Supportive Housing – Scattered Site Programs

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

**Clubhouse Apartments YAS**
United Services Inc.
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)
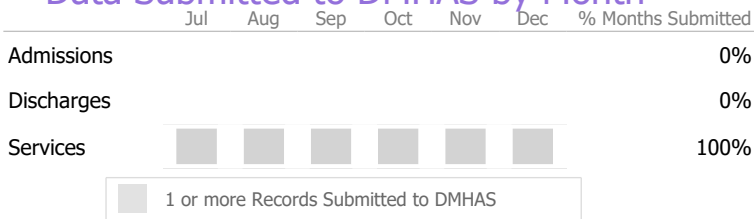
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 4 | 3 | 33% | ▲ |
| Admits | 2 | 3 | -33% | ▼ |
| Discharges | 1 | 1 | 0% | |
| Bed Days | 421 | 189 | 123% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 100% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 90% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 0 | 0% | 50% | 69% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 3 | 75% | 60% | 87% | 15% | ▲ |
| 🔴 | Stable Living Situation | | 3 | 75% | 85% | 97% | -10% | |
| 🔴 | Employed | | 0 | 0% | 25% | 15% | -25% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| 🔴 | Avg Utilization Rate | | 3 | 297 days | 0.5 | 76% | 90% | 67% | -14% | ▼ |

| ■ < 90% | ■ 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% Over | ▼ < 10% Under |
|---|---|

| ■ Actual | ❘ Goal | ✔ Goal Met | 🔴 Below Goal |
|---|---|---|---|

\* State Avg based on 22 Active Residential Support Programs

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

**Community Support Dayville**
United Services Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 234 | 89 | 163% | ▲ |
| Admits | 122 | 33 | 270% | ▲ |
| Discharges | 47 | 15 | 213% | ▲ |
| Service Hours | 3,275 | 1,201 | 173% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 98% | 91% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 95% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 99% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 9 | 19% | 65% | 52% | -46% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 183 | 78% | 60% | 79% | 18% | ▲ |
| ✔ | Stable Living Situation | | 211 | 90% | 80% | 87% | 10% | |
| ✔ | Employed | | 47 | 20% | 20% | 15% | 0% | |
| 🔴 | Improved/Maintained Function Score | | 52 | 39% | 65% | 54% | -26% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 188 | 100% | 90% | 97% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 100% |
| Discharges | | | | | | | 100% |
| Services | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 35 Active CSP Programs

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

**Community Support Mansfield**
United Services Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 241 | 201 | 20% | ▲ |
| Admits | 55 | 56 | -2% | |
| Discharges | 73 | 38 | 92% | ▲ |
| Service Hours | 3,449 | 2,549 | 35% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 99% | 91% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 98% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 98% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 41 | 56% | 65% | 52% | -9% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 205 | 84% | 60% | 79% | 24% | ▲ |
| ✓ | Stable Living Situation | | 216 | 89% | 80% | 87% | 9% | |
| 🔴 | Employed | | 37 | 15% | 20% | 15% | -5% | |
| 🔴 | Improved/Maintained Function Score | | 48 | 24% | 65% | 54% | -41% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 170 | 100% | 90% | 97% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 100% |
| Discharges | | | | | | | 100% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

Actual  | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 35 Active CSP Programs

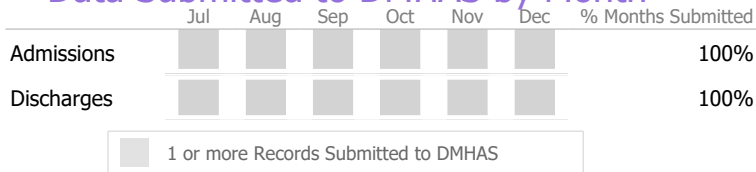Variances in data may be indicative of operational adjustments related to the pandemic.

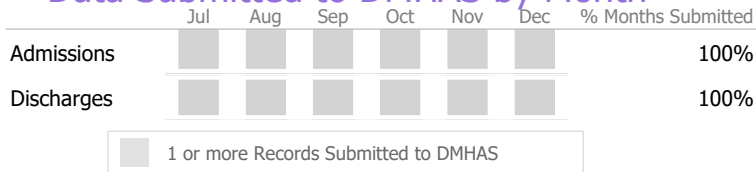**Crisis Assessment- Dayville**
United Services Inc.
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 95 | 70 | 36% | ▲ |
| Admits | 77 | 54 | 43% | ▲ |
| Discharges | 60 | 66 | -9% | |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Evaluation within 1.5 hours of Request | | 49 | 96% | 75% | 76% | 21% | ▲ |
| ✓ | Community Location Evaluation | | 47 | 92% | 80% | 79% | 12% | ▲ |
| ✓ | Follow-up Service within 48 hours | | 26 | 100% | 90% | 87% | 10% | |

▲ > 10% Over     ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

*State Avg based on 26 Active Mobile Crisis Team Programs*

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 100% |
| Discharges | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

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

**Crisis Assessment- Willimantic**
United Services Inc.
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 112 | 43 | 160% | ▲ |
| Admits | 105 | 38 | 176% | ▲ |
| Discharges | 87 | 44 | 98% | ▲ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Evaluation within 1.5 hours of Request | | 66 | 90% | 75% | 76% | 15% | ▲ |
| ✓ | Community Location Evaluation | | 60 | 82% | 80% | 79% | 2% | |
| ✓ | Follow-up Service within 48 hours | | 42 | 100% | 90% | 87% | 10% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 100% |
| Discharges | | | | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 26 Active Mobile Crisis Team Programs

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

**Employment Services**
United Services Inc.
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 39 | 42 | -7% | |
| Admits | 13 | 20 | -35% | ▼ |
| Discharges | 23 | 19 | 21% | ▲ |
| Service Hours | 133 | 218 | -39% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Employed | | 18 | 46% | 35% | 43% | 11% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 16 | 100% | 90% | 93% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 97% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 89% | 77% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | | | ▪ | 67% |
| Discharges | | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under
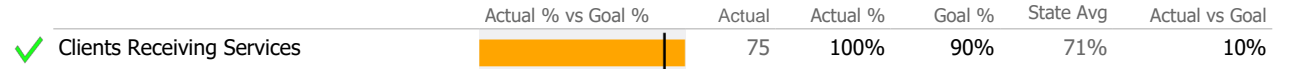
Actual  | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 37 Active Employment Services Programs

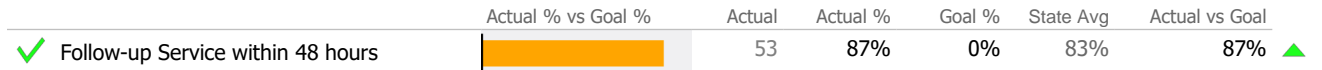Variances in data may be indicative of operational adjustments related to the pandemic.

**Jail Diversion**
United Services Inc.
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)
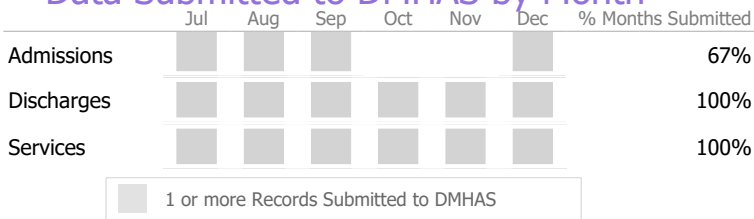
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 203 | 79 | 157% | ▲ |
| Admits | 146 | 27 | 441% | ▲ |
| Discharges | 140 | 17 | 724% | ▲ |
| Service Hours | 248 | 66 | | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 75 | 100% | 90% | 71% | 10% |

## Jail Diversion

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Follow-up Service within 48 hours | | 53 | 87% | 0% | 83% | 87% ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS
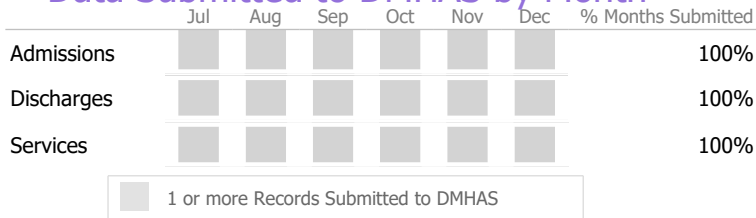
▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

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

**Mansfield MAT**
United Services Inc.
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 15 | 14 | 7% | |
| Admits | 1 | 4 | -75% | ▼ |
| Discharges | 3 | 1 | 200% | ▲ |
| Service Hours | 85 | 101 | -15% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 96% |
| ✓ Valid TEDS Data | | 100% | 60% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 39% |

| 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 | | 2 | 67% | 50% | 47% | 17% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Abstinence/Reduced Drug Use | | 15 | 100% | 55% | 52% | 45% | ▲ |
| ✓ | Not Arrested | | 15 | 100% | 75% | 66% | 25% | ▲ |
| ● | Employed | | 7 | 47% | 50% | 30% | -3% | |
| ● | Stable Living Situation | | 12 | 80% | 95% | 61% | -15% | ▼ |
| ● | Self Help | | 3 | 20% | 60% | 20% | -40% | ▼ |
| ● | Improved/Maintained Function Score | | 4 | 29% | 75% | 27% | -46% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 12 | 100% | 90% | 53% | 10% | |

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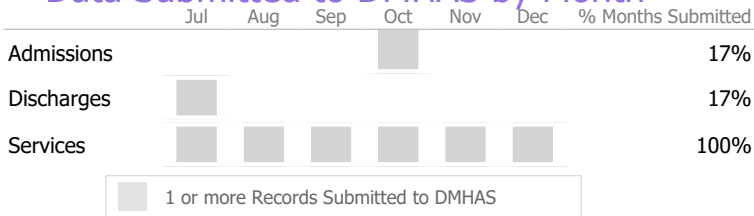
| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | ▪ | | | 17% |
| Discharges | ▪ | | | | | | 17% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under
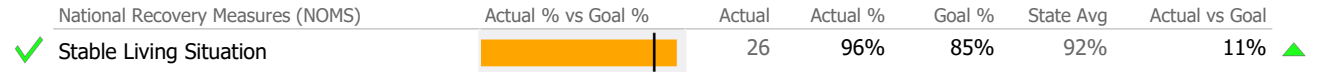
■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 19 Active Buprenorphine Maintenance Programs

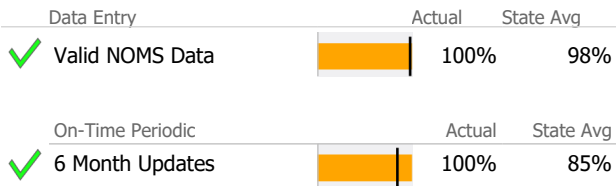Variances in data may be indicative of operational adjustments related to the pandemic.

**Mill on Killingly**
United Services Inc.
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 27 | 24 | 13% | ▲ |
| Admits | 1 | 2 | -50% | ▼ |
| Discharges | 1 | 3 | -67% | ▼ |

## Recovery
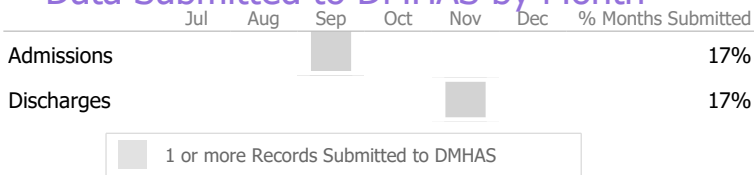
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 26 | 96% | 85% | 92% | 11% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 85% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | ■ | | | | 17% |
| Discharges | | | | | ■ | | 17% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 68 Active Supportive Housing – Development Programs

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

**Milner House**
United Services Inc.
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 12 | 18 | -33% | ▼ |
| Admits | 4 | 11 | -64% | ▼ |
| Discharges | 4 | 6 | -33% | ▼ |
| Bed Days | 1,410 | 1,647 | -14% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 4 | 100% | 80% | 86% | 20% | ▲ |
| ✓ | No Re-admit within 30 Days of Discharge | | 4 | 100% | 85% | 85% | 15% | ▲ |
| ✓ | Follow-up within 30 Days of Discharge | | 4 | 100% | 90% | 83% | 10% | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 97% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 100% |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 9 | 75% | 60% | 84% | 15% | ▲ |
| ✓ | Stable Living Situation | | 12 | 100% | 90% | 97% | 10% | |
| ● | Improved/Maintained Function Score | | 6 | 67% | 95% | 64% | -28% | ▼ |

## Bed Utilization

| | | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | Avg Utilization Rate | | 14 | 409 days | 0.7 | 55% | 90% | 80% | -35% | ▼ |

| ▢ < 90% | ▢ 90-110% | ▣ >110% |
|---|---|---|

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | ▢ | | ▢ | ▢ | 50% |
| Discharges | | ▢ | | | ▢ | | 33% |

▢ 1 or more Records Submitted to DMHAS
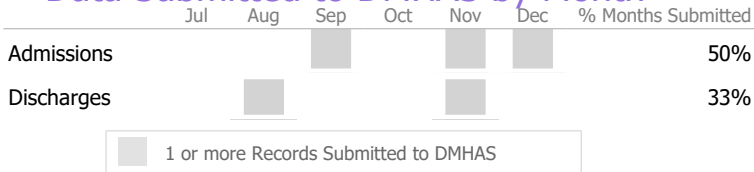
| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▢ Actual | | Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|---|

* State Avg based on 22 Active Group Home Programs

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

**Next Steps**
United Services Inc.
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 9 | 8 | 13% | ▲ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | - | - | | |
| Service Hours | 170 | 96 | 77% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | Stable Living Situation | | 7 | 78% | 85% | 86% | -7% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 9 | 100% | 90% | 91% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 97% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 86% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 0% |
| Discharges | | | | | | | 0% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under
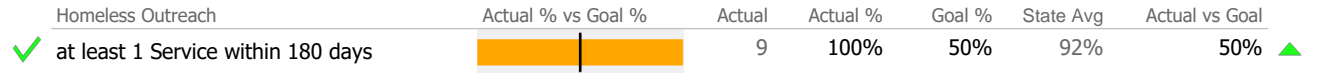
■ Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 118 Active Supportive Housing – Scattered Site Programs

Variances in data may be indicative of operational adjustments related to the pandemic.
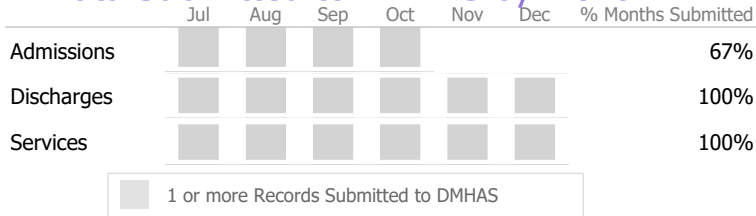
**Senior Outreach and Engagement**
United Services Inc.
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)
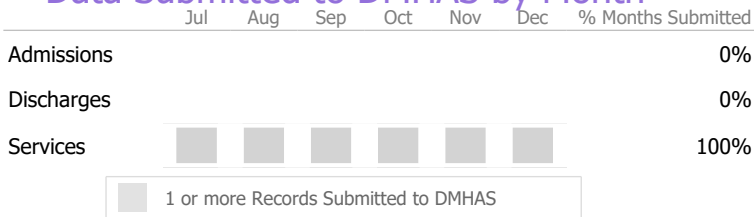
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 63 | 38 | 66% | ▲ |
| Admits | 9 | 17 | -47% | ▼ |
| Discharges | 19 | 12 | 58% | ▲ |
| Service Hours | 770 | 345 | 123% | ▲ |

## Service Engagement

| Homeless Outreach | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | at least 1 Service within 180 days | ▮▮▮ | 9 | 100% | 50% | 92% | 50% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | | | 67% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▮ Actual | ▐ Goal | ✔ Goal Met | ● Below Goal |
|---|---|---|---|

\* State Avg based on 54 Active Outreach & Engagement Programs

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

**Shelter Outreach**
United Services Inc.
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 7 | 5 | 40% | ▲ |
| Admits | 3 | - | | |
| Discharges | 1 | 2 | -50% | ▼ |
| Service Hours | 52 | 18 | 188% | ▲ |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ at least 1 Service within 180 days | | 3 | 100% | 50% | 92% | 50% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | ▪ | | | 17% |
| Discharges | ▪ | | | | | | 17% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 54 Active Outreach & Engagement Programs
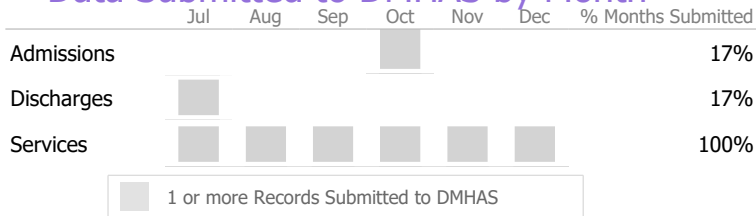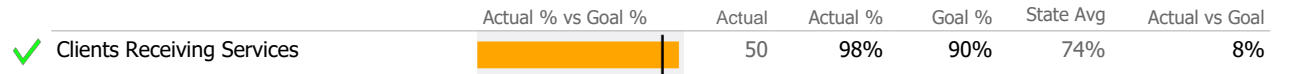
Variances in data may be indicative of operational adjustments related to the pandemic.

**Social Club**
United Services Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 72 | 58 | 24% | ▲ |
| Admits | 15 | 14 | 7% | |
| Discharges | 21 | 13 | 62% | ▲ |
| Service Hours | 17 | 10 | 69% | ▲ |
| Social Rehab/PHP/IOP Days | 1,184 | 1,100 | 8% | |

## Service Utilization
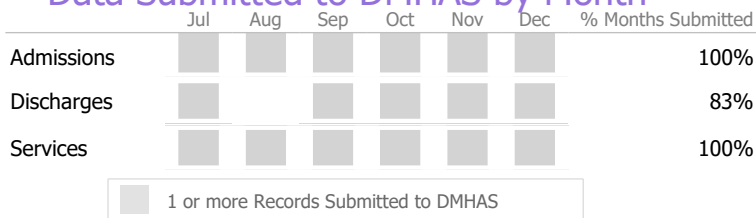
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 50 | 98% | 90% | 74% | 8% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | | ▢ | ▢ | ▢ | ▢ | 83% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▉ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

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

**Social Rehabilitation**
United Services Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

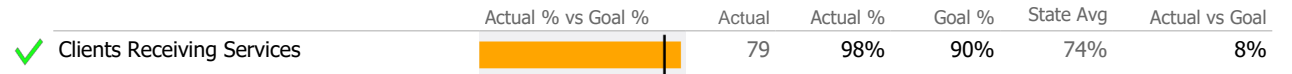Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 99 | 76 | 30% | ▲ |
| Admits | 36 | 21 | 71% | ▲ |
| Discharges | 18 | 13 | 38% | ▲ |
| Service Hours | 823 | 605 | 36% | ▲ |
| Social Rehab/PHP/IOP Days | 897 | 492 | 82% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 79 | 98% | 90% | 74% | 8% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |
| Discharges | | ▪ | ▪ | ▪ | ▪ | ▪ | 83% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

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

**SOR - Employment**
United Services Inc.
Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)
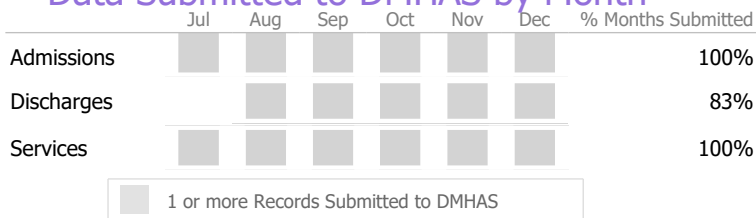
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 20 | 17 | 18% | ▲ |
| Admits | 9 | 9 | 0% | |
| Discharges | 13 | 13 | 0% | |
| Service Hours | 183 | 25 | | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Employed | | 13 | 65% | 35% | 29% | 30% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 7 | 100% | 90% | 87% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 94% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 64% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 67% |
| Discharges | | | | | | | 50% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual   | Goal   ✓ Goal Met   ● Below Goal
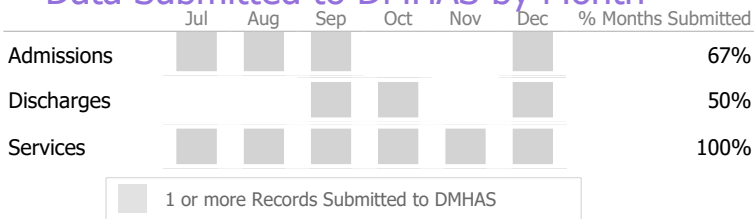
* State Avg based on 9 Active Employment Services Programs

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

**SOR E-MAT**
United Services Inc.
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 36 | 24 | 50% | ▲ |
| Admits | 12 | 4 | 200% | ▲ |
| Discharges | 3 | 3 | 0% | |
| Service Hours | 246 | 243 | 1% | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 2 | 67% | 50% | 47% | 17% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Abstinence/Reduced Drug Use | | 33 | 92% | 55% | 52% | 37% | ▲ |
| ✓ | Not Arrested | | 36 | 100% | 75% | 66% | 25% | ▲ |
| ● | Stable Living Situation | | 34 | 94% | 95% | 61% | -1% | |
| ● | Employed | | 13 | 36% | 50% | 30% | -14% | ▼ |
| ● | Self Help | | 8 | 22% | 60% | 20% | -38% | ▼ |
| ● | Improved/Maintained Function Score | | 1 | 4% | 75% | 27% | -71% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 98% | 96% |
| ✓ | Valid TEDS Data | 96% | 60% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 39% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 100% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 33 | 100% | 90% | 53% | 10% | |

## Data Submitted to DMHAS by Month
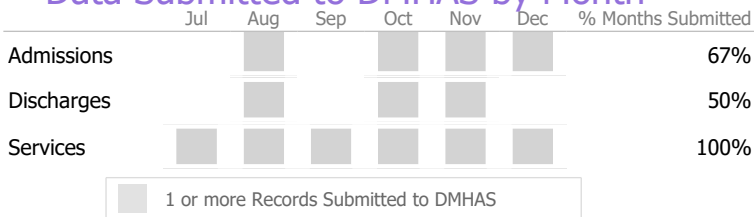
| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | ▣ | | ▣ | ▣ | ▣ | 67% |
| Discharges | | ▣ | | ▣ | ▣ | | 50% |
| Services | ▣ | ▣ | ▣ | ▣ | ▣ | ▣ | 100% |

▣ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 19 Active Buprenorphine Maintenance Programs

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

**SOR-MAT-Naltrexone**
United Services Inc.
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 45% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Abstinence/Reduced Drug Use | | N/A | N/A | 55% | 40% | -55% ▼ |
| Employed | | N/A | N/A | 50% | 38% | -50% ▼ |
| Improved/Maintained Function Score | | N/A | N/A | 75% | 25% | -75% ▼ |
| Not Arrested | | N/A | N/A | 75% | 60% | -75% ▼ |
| Self Help | | N/A | N/A | 60% | 42% | -60% ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 52% | -95% ▼ |

## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| Valid NOMS Data | | N/A | 100% |
| Valid TEDS Data | | N/A | 100% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| 6 Month Updates | | N/A | 8% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Clients Receiving Services | | N/A | N/A | 90% | 28% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 0% |
| Discharges | | | | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 6 Active Naltrexone Programs

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

**TBI Community Services**
United Services Inc.
Mental Health - Consultation - Consultation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 46 | 47 | -2% |
| Admits | 13 | 15 | -13% ▼ |
| Discharges | 8 | 8 | 0% |
| Service Hours | 14 | 14 | -2% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | | | ▢ | | ▢ | ▢ | 50% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS
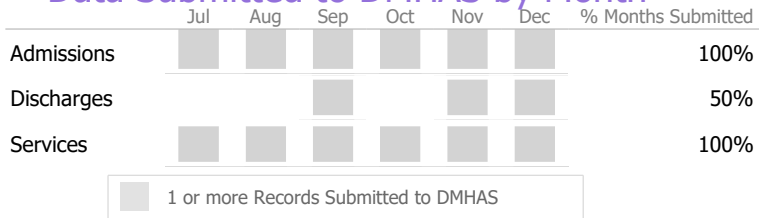
▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 10 Active Consultation Programs

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

**Work Services**
United Services Inc.
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 60 | 57 | 5% | |
| Admits | 25 | 27 | -7% | |
| Discharges | 24 | 25 | -4% | |
| Service Hours | 639 | 475 | 35% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 32 | 53% | 35% | 43% | 18% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 36 | 100% | 90% | 93% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 96% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 77% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 100% |
| Discharges | | | | | | | 100% |
| Services | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 37 Active Employment Services Programs

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

**YAS ACT**
United Services Inc.
Mental Health - ACT - Assertive Community Treatment

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 23 | 16 | 44% | ▲ |
| Admits | 6 | 5 | 20% | ▲ |
| Discharges | 6 | 1 | 500% | ▲ |
| Service Hours | 2,720 | 1,691 | 61% | ▲ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 3 | 50% | 65% | 53% | -15% | ▼ |
| ✓ | No Re-admit within 30 Days of Discharge | | 6 | 100% | 85% | 83% | 15% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 1 | 33% | 90% | 51% | -57% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 95% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 86% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 98% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 21 | 91% | 60% | 77% | 31% | ▲ |
| ✓ Stable Living Situation | | 21 | 91% | 60% | 89% | 31% | ▲ |
| ✓ Employed | | 5 | 22% | 15% | 15% | 7% | |
| 🔴 Improved/Maintained Function Score | | 4 | 24% | 85% | 27% | -61% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 17 | 100% | 90% | 98% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | 67% |
| Discharges | | | | | | | 83% |
| Services | | | | | | | 100% |

1 or more Records Submitted to DMHAS
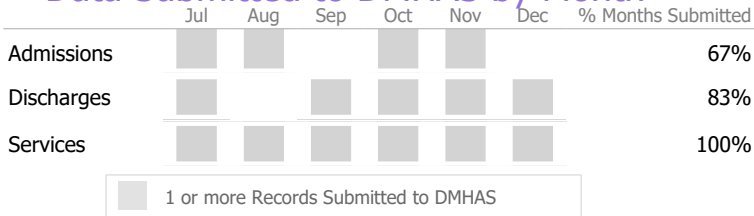
▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 23 Active Assertive Community Treatment Programs

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

**YAS Transitional Living**
United Services Inc.
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - December 2023  (Data as of Mar 26, 2024)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 6 | 6 | 0% | |
| Admits | 2 | 2 | 0% | |
| Discharges | 2 | 3 | -33% | ▼ |
| Bed Days | 879 | 513 | 71% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 89% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 86% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 0 | 0% | 60% | 66% | -60% | ▼ |

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| | Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 86% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 6 | 100% | 60% | 86% | 40% | ▲ |
| ✔ Stable Living Situation | | 6 | 100% | 95% | 96% | 5% | |
| 🔴 Employed | | 1 | 17% | 25% | 13% | -8% | |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 6 | 215 days | 0.5 | 80% | 90% | 91% | -10% |

| | |
|---|---|
| 🟦 < 90% | ⬜ 90-110% | 🟥 >110% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|---|---|---|---|---|---|---|---|
| Admissions | ⬜ | ⬜ | | | | | 33% |
| Discharges | | | ⬜ | | ⬜ | | 33% |

⬜ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| 🟧 Actual | ❘ Goal | ✔ Goal Met | 🔴 Below Goal |
|---|---|---|---|

* State Avg based on 83 Active Supervised Apartments Programs

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