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| Organizations Reporting |
|---|
| Access Agency |
| Adelbrook |
| (The) Alliance |
| BH Care |
| Boys & Girls Village (BGV) |
| Bridgeport Hospital - Child First |
| Bridge Family Center |
| Bridges Healthcare |
| CT Alliance of Foster and Adoptive Families (CAFAF) |
| Carelon |
| Catalyst |
| Children and Family Agency (CTCFA) |
| Childrens Community Programs of CT (CCP) |
| Community Child Guidance Clinic (CCGC) |
| Community Guidance Clinic of Central CT (CGCCC) |
| Community Health Resources (CHR) |
| Community Mental Health Associates (CMHA) |
| CJR |
| CLICC, Inc. |
| Clifford Beers |
| Clifford Beers - Youth Continuum |
| Clifford Beers-Mid-Fairfield Child Guidance |
| CommuniCare |
| Community Resources for Justice - Family ReEntry (CRJ) |
| Family Centered Services (FCS) |
| Family and Children's Agency (FCA) |
| Family and Children's Aid (FCAid) |
| Generations Family Health Center, Inc. |
| Gilead Community Services |
| Human Services Council |

| Service Types Included in Report |
|---|
| CAFAF |
| Care Mgmt Entity - ICC |
| Care Coordination |
| Caregiver Support Team |
| Child Outpatient Services |
| C-KIN |
| Community Support for Families |
| Crossroads - YAS |
| Early Childhood Services - Child First |
| Extended Day Treatment |
| Family Based Recovery |
| Fatherhood Engagement Services |
| Fatherhood Engagement Services (DOC) |
| First Episode Psychosis |
| Foster Care Support Groups |
| Functional Family Therapy |
| Functional Family Therapy-Foster Care |
| HYPE |
| Integrated Family Care & Support |
| IPV-FAIR |
| Intensive Family Preservation |
| Intensive Transition Care Management Coordination |
| Juvenile Review Board |
| Mobile Crisis Intervention Services |
| Multidimensional Family Therapy (MDFT) |
| Multidimensional Family Therapy-R (MDFTR) |
| Multidisciplinary Exam Team (MDE) |
| Multidisciplinary Teams (MDT) |
| Multisystemic Therapy (MST) |
| Multisystemic Therapy Building Stronger Families (BSF) |

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| Organizations Reporting |
|---|
| Justice Resource Institute (JRI) |
| Klingberg Family Centers |
| Love-146 |
| Marrakech |
| Middlesex Health |
| NAFI, Inc. |
| Optimus Health Care |
| Our Piece of the Pie |
| Rape Crisis Center of Milford |
| Sexual Abuse Crisis Center of Eastern CT |
| St. Francis |
| The Children's Center of Hamden |
| The Connection |
| Urban Community Alliance |
| United Community and Family Services (UCFS) |
| United Services (USI) |
| The Village |
| Waterford Country School |
| Wellmore |
| Wheeler Clinic |
| Yale New Haven |
| |

| Service Types Included in Report |
|---|
| Multisystemic Therapy-BSF-IPV |
| Multisystemic Therapy Emerging Adults (EA) |
| Multisystemic Therapy-Problem Sexual Behavior (PSB) |
| Outpatient Psychiatric Clinic for Children |
| Parenting Support Services |
| Prevention Care Management Entity (PCME) |
| Permanency & Placement Services Planning (PPSP) |
| Quality Parenting Centers |
| Reunification & Therapeutic Family Time |
| Residential Treatment Center |
| SAFE-FR |
| Start Program |
| STTAR |
| SubAcute Stabilization Center |
| Supporting Housing for Families |
| Survivor Care |
| SSTRY |
| Therapeutic Group Home |
| TLCC |
| Transitional Peer Support |
| Transitional Services Emerging Adults |
| Urban Trauma Center |
| Urgent Crisis Center |
| Voluntary Care Management |
| Wendy's Wonderful Kids |
| Work to Learn / Launch |
| Youth Link Mentoring |

| Program Name: CT Alliance of Foster and Adoptive Families (CAFAF) | | | | | | |
|---|---|---|---|---|---|---|
| Geographic Location Covered: State of Connecticut | | | | | | |
| DCF open case needed for referral or admission? | No | | | | | |
| Is Program 3rd Party Billable? | No | | | | | |
| | | | | | | |
| Program Utlization | SFY 2023 | | | SFY2024 | | |
| All foster and adoptive families in CT | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 2357 | 2357 | 100 | 2188 | 2188 | 100 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

No declines; all foster and adoptive families use our services

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | N/A | N/A |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | N/A | N/A |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

We do not provide direct services to children; therefore Not Applicable.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **2330184** | **2407566** |
| Total Program expenditures | 2379386 | 2397833 |
| Total Clients Served | 2357 | 2188 |
| Expenditures per [case] | 1009.5 | 1,095.90 |

All licensed foster homes

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | | 1285777 | 1334781 | 1312218 | 1336885 |
| Benefits | | 325650 | 305752 | 340496 | 324248 |
| Overhead | | 294607 | 600570 | 610377 | 588130 |
| Training | | 98500 | 138283 | 144475 | 148570 |
| | **Total** | 2330184 | 2379386 | 2407566 | 2397833 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Care Management Entity (ICC) | | |
|---|---|---|
| Geographic Location Covered: | | |
| DCF open case needed for referral or admission? | n | |
| Is Program 3rd Party Billable? | n | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 144 ICC/300 Peer | 121 ICC | 87% | 144 ICC/300 Peer | 87 ICC | 60% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: There was a total of 151 referrals during the SFY2024. However, with staffing shortages among several regions, a waitlist was started and referrals were put on hold to ensure sufficient coverage for the families being served. Peer utilization and caseloads were not tracked in SFY2023 or SFY2024, but they are being tracked in SFY2025.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Workforce limitations were temporary, staffing has increased in SFY2025 to date.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 168 | 151 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 119 | 87 |
| Clients completing treatment plan | 78 | 48 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
In SFY2023, there were 49 youth closed without receiving services (referral only) due to the following-youth no longer eligible (17), parent/guardian declined services (15), unable to contact family (11), youth engaged in other supports (6).
In SFY2024, there were 64 referrals closed without receiving services (referral only) due to the following reasons-unable to contact family (22), parent/guardian declined services (19), youth no longer eligible (19), youth engaged in other supports (4).

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 86 | 59 | Discharged in SFY and received initial assessment |
| [Cases] eligible for treatment | 86 | 59 | Eligible for treatment and discharged in SFY |
| [Cases] achieving treatment goal | 57 | 42 | |
| Percent achieving contracted treatment expectation: Actual | 66.30% | 71.20% | |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A | Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **2,417,586** | **2,667,817** |
| Total Program expenditures | 2,401,114 | 2,466,201 |
| Total Clients Served | 121 | 87 |
| Expenditures per [case] | 19,844 | 28,347 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 1,371,780 | 1,370,035 | 1,413,497 | 1,307,616 |
| Benefits | 5200 | 388,686 | 414,915 | 415,264 | 396,379 |
| Overhead | 7150 | 419,566 | 419,566 | 532,047 | 532,047 |
| Training | 5905 | - | - | 1,000 | 426 |
| | **Total** | 2,180,032 | 2,204,516 | 2,361,808 | 2,236,469 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | N | N |

| Program Name: Bridges Healthcare - Care Coordination | | |
|---|---|---|
| Geographic Location Covered: Milford, Orange, West Haven, Bethany, Woodbridge, Ansonia, Derby, Seymour and Shelton | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 81 | 65 | 80% | 81 | 66 | 82% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Recovery from the Pandemic in FY23. Lower referrals in spite of consistent outreach efforts. Family commitment to active participation in the wraparound process is a challenge.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Program experienced vacant staff open positions.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 82 | 93 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 65 | 66 |
| Clients completing treatment plan | 65 | 66 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Primarily because client do not follow through with the referral and are not interested in actively participating in the wraparound model. Sometimes clients do not meet the admission criteria or staff are unable to reach and engage the caregiver.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 65 | 66 |
| [Cases] eligible for treatment | 65 | 66 |
| [Cases] achieving treatment goal | 11 | 13 |
| Percent achieving contracted treatment expectation: Actual | 41% | 72% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 667,123 | 713,646 |
| Total Program expenditures | 667,123 | 713,646 |
| Total Clients Served | 65 | 66 |
| Expenditures per [case] | 10,263.43 | 10,812.82 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 341,100 | 341,100 | 353,062 | 353,062 |
| Benefits | 5200 | 128,373 | 128,373 | 132,919 | 132,919 |
| Other Direct | Various Accounts | 80,101 | 80,101 | 110,556 | 110,556 |
| Overhead | 7100 | 115,849 | 115,849 | 116,409 | 116,409 |
| Training | 5905 | 1,700 | 1,700 | 700 | 700 |
| | **Total** | 667123 | 667123 | 713646 | 713646 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| Program Name: Community Health Resources - Care Coordination | | |
|---|---|---|
| Geographic Location Covered: Willimantic, Manchester | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 165 | 176 | 107% | 165 | 202 | 122% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: N/A

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: N/A, the trend is stable across both years. The actual numbers include only distinct caregivers that were served in the period and do not include distinct children that were served in the period. If we add the distinct children, the totals would be 351 in FY23 and 392 in FY24.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 124 | 140 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 176 | 202 |
| Clients completing treatment plan | 115 | 88 |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 112 | 141 |
| [Cases] eligible for treatment | 112 | 141 |
| [Cases] achieving treatment goal | 107 | 78 |
| Percent achieving contracted treatment expectation: Actual | 93% | 87% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $936,370 | $939,288 |
| Total Program expenditures | $956,517 | $1,010,622 |
| Total Clients Served | 176 | 202 |
| Expenditures per [case] | $5,435 | $5,003 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $563,873 | $551,981 | $556,938 | $576,314 |
| Benefits | 5200 | $172,424 | $180,453 | $169,493 | $179,204 |
| Overhead | 7000 | $132,530 | $129,970 | $154,074 | $153,453 |
| Training | 5905 | $500 | $167 | $500 | $408 |
| | **Total** | $869,327 | $862,571 | $881,005 | $909,379 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Clifford Beers - New Haven Trauma Coalition - Care Coordination ONLY** | | |
| **Geographic Location Covered: New Haven** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **Yes** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **60** | **71** | **118.33%** | **60** | **71** | **118.33%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 101 | 95 |
| Clients receiving evaluation only | 9 | 4 |
| Clients receiving services | 71 | 71 |
| Clients completing treatment plan | 25 | 21 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

There were staffing vacancies for several months in each of these years, however, referrals were steady and team members supported each other with holding families during vacancies and transitions.

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 4 | 22 | |
| [Cases] eligible for treatment | 62 | 67 | score 21+ CPSS V |
| [Cases] achieving treatment goal | 28 | 37 | |
| Percent achieving contracted treatment expectation: Actual | 57.10% | 64.90% | Pulled from PIE; of discharged clients only |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 | |
|---|---|---|---|
| Total Program allocations | $789,547 | $1,061,770 | |
| Total Program expenditures | $784,257 | $1,252,735 | |
| Total Clients Served | Not includive | Not inclusive | Clinical and CBITS not in PIE |
| Expenditures per [case] | Not reported | Not reported | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 789,547 | 446,936 | 1,061,770 | 698,770 |
| Benefits | | | 94,416 | | 148,151 |
| Overhead | | | 242,905 | | 404,106 |
| Training | | | | | 1,707 |
| | Total | 789,547 | 784,257 | 1,061,770 | 1,252,735 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Clifford Beers - Care Coordination** | | |
| **Geographic Location Covered: New Haven, Hamden, North Haven, East Haven, Branford, North Branford, Northford, Guilford, and** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **No** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **90** | **106** | **117.78%** | **90** | **125** | **138.89%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** | |
|---|---|---|---|
| Referrals | 260 | 244 | |
| Clients receiving evaluation only | 4 | 3 | |
| Clients receiving services | 106 | 125 | *Taken from CC Youth Report. in PIE. |
| Clients completing treatment plan | 67 | 62 | completed treatment |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Reasons: Families are referred but then decline services, referral is made but family does not respond when Lead CC calls to process, outside catchment area, duplication of referrals, sibling referrals (we work with the whole family-no need for siblings to be referred at the same time), families have successful intake and then no longer participate in services, DCF involvement (this is considered a duplication of services), we have to close after intake because DCF opens, families have to reach the 90 day mark in PIE in order for us to count them as part of our contractual number, referrals for financial need only are not eligible for services, family was not made aware that the referral was being made, child is placed in an out of home setting

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 13 | 31 |
| [Cases] eligible for treatment | 102 | 122 |
| [Cases] achieving treatment goal | 66 | 61 |
| Percent achieving contracted treatment expectation: Actual | 90.40% | 72.60% |
| Percent achieving contracted treatment expectation: Contract | 60% | 60% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 427,881 | 478,286 |
| Total Program expenditures | 390,980 | 747,552 |
| Total Clients Served | 106 | 125 |
| Expenditures per [case] | 3,688 | 5,980 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 427,881 | 214,586 | 478,286 | 400,141 |
| Benefits | | | 46,096 | | 82,522 |
| Overhead | | | 130,299 | | 264,589 |
| Training | | | | | 300 |
| | **Total** | 427,881 | 390,980 | 478,286 | 747,552 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name:UCFS -** Care Coordination Program | | |
| **Geographic Location Covered:** New London County | | |
| **DCF open case needed for referral or admission?** | No | |
| **Is Program 3rd Party Billable?** | No | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **68** | **56** | **82%** | **68** | **68** | **100%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract:**

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 96 | 104 |
| Clients receiving evaluation only | 40 | 36 |
| Clients receiving services | 56 | 68 |
| Clients completing treatment plan | 31 | 43 |

**Narrative explanation for the reasons that referrals go unserved:** Families decline services, inability to contact family, family no longer needs services, crisis resolved, moved, child hospitalized.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 56 | 68 |
| [Cases] eligible for treatment | 56 | 68 |
| [Cases] achieving treatment goal | 31 | 43 |
| Percent achieving contracted treatment expectation: Actual | 55% | 63% |
| Percent achieving contracted treatment expectation: Contract | 46% | 63% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **547725** | **550732** |
| Total Program expenditures | 492082.69 | 623572.91 |
| Total Clients Served | 56 | 68 |
| Expenditures per [case] | 8,787.19 | 9,170.19 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 323,898 | 303,161 | 355,144 | 364,559 |
| Benefits | | 107,011 | 87,511 | 95,346 | 99,761 |
| Overhead | | 116,017 | 101,411 | 99,842 | 159,253 |
| Training | | 800 | - | 400 | - |
| | **Total** | 547,725 | 492,083 | 550,732 | 623,573 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name:Wellmore - Care Coordination | | |
|---|---|---|
| Geographic Location Covered: Region 5 | | |
| DCF open case needed for referral or admission? | no | |
| Is Program 3rd Party Billable? | no | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 141 | 89 | 63% | 141 | 94 | 67% |

Wellmore's Care Coordination program experienced significant staff turnover and vacancy time throughout the two fiscal years evaluated. There was low workforce availability and fewer candidates were willing to do home-based work post-Covid. Care Coordination utilizes the Wraparound model which requires specialized training, limiting the potential to 'move someone over' to cover vacancies. Wellmore's HR provided innovative recruitment strategies, completed cold-call recruiting, offered sign-on incentives and retention incentives to encourage hiring and longevity of staff. Coach/Trainer carried cases where staff had resigned to ensure families received full intervention support. There is ongoing need for the service. Program was fully staffed as of 11/1/24

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 139 | 134 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 68 | 63 |
| Clients completing treatment plan | 58 | 56 |

Data associated with these charts is pulling ONLY those clients who were admitted and discharged during each fiscal year. Many clients have cases that cross the fiscal year end date, starting in one first year and closing in another. For clients served by evidence based practices or using EB models like Wraparound within CC, this is quite common as the length of stay for Care Coordination averages 5-6 months.

If a family was unable to be served due to staff vacancy or turnover, the team leader helped the referral source to identify additional resources or programs for support. Several families each fiscal year identified that they did not want the service, were unable to be contacted, or no longer had need as a result of the support of the team leader. If a family member's care coordinator left, the family was transferred to another care coordinator or the Coach/Trainer to ensure continuity and services until their identified goals were met. The top two reasons why a family did not transition from referral to an episode of care were that the family withdrew (did not want the service)(FY23=25%, FY24=14%) or were unavailable to outreach to initiate care (FY23=15%, FY24=25%).

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 68 | 63 |
| [Cases] eligible for treatment | 29 | 32 |
| [Cases] achieving treatment goal | 29 | 32 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | 75% | 75% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,001,198** | **1,045,224** |
| Total Program expenditures | 913,969 | 871,635 |
| Total Clients Served | 68 | 63 |
| Expenditures per [case] | 13,441 | 13,835 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | $592,003 | $469,586 | $651,646 | $443,758 |
| Benefits | 5200 | $141,311 | $132,651 | $154,196 | $111,753 |
| Overhead | 5400 to 5909; 5990 to 7150 | $267,615 | $310,981 | $238,422 | $316,124 |
| Training | 5910 | $270 | $751 | $960 | $0 |
| | **Total** | $1,001,198 | $913,969 | $1,045,224 | $871,635 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wheeler - Care Coordination New Britain** | | |
| **Geographic Location Covered: Greater New Britain Area (Region 6)** | | |
| **DCF open case needed for referral or admission?** | **NO** | |
| **Is Program 3rd Party Billable?** | **NO** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 77 | 64 | 83% | 77 | 101 | 131% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: staff vacancies SFY 2023
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: workforce limitations SFY 2023

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | data not being collected | 148 |
| Clients receiving evaluation only | data not being collected | 14 |
| Clients receiving services | 64 | 101 |
| Clients completing treatment plan | 36 | 73 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Staff vacancies, families didn't agree with program requirements or time commitment and client did not meet the admission criteria

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 48 | 87 |
| [Cases] eligible for treatment | 48 | 73 |
| [Cases] achieving treatment goal | 29 of 33 discharge | 43 of 59 discharge |
| Percent achieving contracted treatment expectation: Actual | 88% | 73% |
| Percent achieving contracted treatment expectation: Contract | 75% | 75% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,152,826** | **1,161,263** |
| Total Program expenditures | 1,280,976 | 1,340,427 |
| Total Clients Served | 64.00 | 101.00 |
| Expenditures per [case] | 20,015.25 | 13,271.55 |

**Includes Care Coordination Hartford - One funding source**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 628,061 | 553,858 | 720,164 | 732,207 |
| Benefits | 5200 | 169,381 | 160,848 | 210,783 | 224,995 |
| Overhead | All others | 352,684 | 564,693 | 229,116 | 382,502 |
| Training | 5905 | 2,700 | 1,577 | 1,200 | 723 |
| | **Total** | 1,152,826 | 1,280,976 | 1,161,263 | 1,340,427 |

**Includes Care Coordination Hartford - One funding source**

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Wheeler - Care Coordination Hartford | | |
|---|---|---|
| Geographic Location Covered: Hartford and West Hartford (Region 4) | | |
| DCF open case needed for referral or admission? | NO | |
| Is Program 3rd Party Billable? | NO | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 60 | 40 | 67% | 60 | 57 | 95% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: staff vacancies SFY 2023

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: workforce limitations SFY 2023

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | Data not being collected | 91 |
| Clients receiving evaluation only | Data not being collected | 3 |
| Clients receiving services | 40 | 57 |
| Clients completing treatment plan | 20 | 32 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

SFY 23, the highest reasons for referrals not resulting in services were no contact/response and youth and family already had the supports needed in place. Additional reasons included DCF involvement (ineligible), referral out of our area, higher level of clinical care needed, medical concerns of parent, moving or moved out of area, and youth placed in residential treatment.

SFY 24, the highest reasons for referrals not resulting in services were needed services already in place, no contact/response and client moved out of area. Additional reasons included out of home placement of youth, higher level of care needed, incomplete referral, early childhood services more appropriate and parent health concerns.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 26 | 37 |
| [Cases] eligible for treatment | 26 | 37 |
| [Cases] achieving treatment goal | 14 of 20 discharge | 17 of 30 discharge |
| Percent achieving contracted treatment expectation: Actual | 70% | 57% |
| Percent achieving contracted treatment expectation: Contract | 75% | 75% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

* There were 68 discharges in SFY 23 and 110 discharges in SFY2024

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

See Care Coordination New Britain

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | 0 | 0 | 0 | 0 |

See Care Coordination New Britain

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Health Resources - Caregiver Support Team (Program closed 6/30/24 results for FY24 found in CKIN) | | |
|---|---|---|
| Geographic Location Covered: Hartford, Manchester | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 326 | 190 | 58% | NA | NA | NA |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Referrals were last accepted as of 4/30/23, although referrals slowed down well before that date as the department knew the program would be shifting to a new model.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: N/A as program model no longer exists. There was a change in staff qualifications with the transition of CST to CKIN.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 140 | NA |
| Clients receiving evaluation only | 0 | NA |
| Clients receiving services | 190 | NA |
| Clients completing treatment plan | 120 | NA |

**Narrative explanation for the reasons that referrals go unserved**

DCF shut down referrals to CST starting 4/30/23. With the transition to CKIN, CHR was not able to hire for any vacancies under CST.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 127 | NA |
| [Cases] eligible for treatment | 100% | NA |
| [Cases] achieving treatment goal | 77% | NA |
| Percent achieving contracted treatment expectation: Actual | 77% | NA |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $1,484,118 | NA |
| Total Program expenditures | $1,515,633 | NA |
| Total Clients Served | 190 | NA |
| Expenditures per [case] | $7,977 | NA |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $990,976 | $642,357 | NA | NA |
| Benefits | 5200 | $243,675 | $178,291 | NA | NA |
| Overhead | 7000 | $165,845 | $173,455 | NA | NA |
| Training | 5905 | $12,540 | $6,697 | NA | NA |
| | **Total** | $1,413,036 | $1,000,800 | NA | NA |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | NA |
| Data collection | Y | NA |
| Quality assurance expectations | Y | NA |

| Program Name: Family and Children's Agency - Caregiver Support Team (CST)(transitioned to CKIN 2024) | | |
|---|---|---|
| Geographic Location Covered: Region 1 | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| CST closed at the end of SFY 2023 | 80 | 55 | 68.75% | N/A | N/A | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
**The reasons for the decline or low utilization:**
Families reported either not needed CST at the time of referral or chose to only complete 21 day assessment and close without Support Plan/goals
**Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:** n/a as CKIN is the new model for 2024 FY

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 70 | N/A |
| Clients receiving evaluation only | 15 | N/A |
| Clients receiving services | 33 | N/A |
| Clients completing treatment plan | 33 | N/A |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 55 | N/A |
| [Cases] eligible for treatment | 55 | N/A |
| [Cases] achieving treatment goal | 33 | N/A |
| Percent achieving contracted treatment expectation: Actual | 60% | N/A |
| Percent achieving contracted treatment expectation: Contract | 100% | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **609,251** | N/A |
| Total Program expenditures | 609,298 | N/A |
| Total Clients Served | 48 | N/A |
| Expenditures per [case] | 12,694 | N/A |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 385,966.74 | 385,996.63 | | |
| Benefits | 5200 | 96,379.15 | 96,386.62 | | |
| Transportation | 5500 | 4,248.22 | 4,248.55 | | |
| Facilities | 5700 | 5,031.68 | 5,032.07 | | |
| Other Expenses | 5900 | 5,961.23 | 5,961.69 | | |
| Overhead | 7100 | 111,663.98 | 111,672.63 | | |
| Training | | | | | |
| | **Total** | 609,251.00 | 609,298.19 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | N/A |
| Data collection | Y | N/A |
| Quality assurance expectations | Y | N/A |

| | | |
|---|---|---|
| **Program Name: Wellmore Community Support for Families** | | |
| **Geographic Location Covered: Region 5** | | |
| **DCF open case needed for referral or admission?** | **yes** | |
| **Is Program 3rd Party Billable?** | **no** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **324** | **243** | **75%** | **324** | **318** | **98%** |

Staffing transitions for both Wellmore and DCF made the workflow around referrals more challenging during FY23 and FY24. The CSF team leader met frequently with DCF regional contacts and area office contacts throughout the year to facilitate referrals; several outreach efforts around education were provided to new DCF

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 334 | 368 |
| Clients receiving evaluation only | 9 | 12 |
| Clients receiving services | 194 | 245 |
| Clients completing treatment plan | 126 | 149 |

Data associated with these charts is pulling ONLY those clients who were admitted and discharged during each fiscal year. Many clients have cases that cross the fiscal year end date, starting in one first year and closing in another. The length of stay for CSF ranges from 3-6 months. The two major reasons a family would not engage in CSF services were that the family withdrew (stated they did not want the service) (FY23=14%, FY24=7%) or they were unavailable for outreach to initiate care (FY23=19%, FY24=14%)

Despite significant staffing vacancies throughout both fiscal years, many clients were able to be evaluated and served through CSF. As it is a voluntary program, clients can choose to not engage. Our CSF team works hard to encourage and engage with clients around their identified needs and support acquisition of new

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 194 | 248 |
| [Cases] eligible for treatment | 34 | 68 |
| [Cases] achieving treatment goal | 28 | 56 |
| Percent achieving contracted treatment expectation: Actual | 82% | 82% |
| Percent achieving contracted treatment expectation: Contract | 90% | 90% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 1,418,067 | 1,533,366 |
| Total Program expenditures | 993,935 | 1,116,571 |
| Total Clients Served | 243 | 318 |
| Expenditures per [case] | $4,090.27 | $3,511.23 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 872,371 | 541,303 | 910,255 | 620,788 |
| Benefits | 5200 | 208,235 | 137,570 | 215,301 | 155,827 |
| Overhead | 5400 to 5909; 5990 to 7150 | 336,898 | 315,010 | 407,738 | 339,956 |
| Training | 5910 | 563 | 52 | 72 | - |
| | Total | 1,418,067 | 993,935 | 1,533,366 | 1,116,571 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wellmore - Early Childhood Svc - Child First** | | |
| **Geographic Location Covered: Greater Waterbury** | | |
| **DCF open case needed for referral or admission?** | **no** | |
| **Is Program 3rd Party Billable?** | **partially** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **54** | **76** | **141%** | **54** | **65** | **120%** |

The Child First team (two teams (clinician and MHC) and the supervisor) experienced stable staffing throughout this two year period. They were able to exceed the number of cases required of them, while also participating actively within the Randomized Control Trial for Child First. The need to Child First services in the Greater Waterbury area always far exceeds capacity.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 86 | 97 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 49 | 53 |
| Clients completing treatment plan | 49 | 53 |

some of these were randomized to control arm for the RCT

Data associated with these charts is pulling ONLY those clients who were admitted and discharged during each fiscal year. Many clients have cases that cross the fiscal year end date, starting in one first year and closing in another. For clients served by evidence based practices, this is quite common as the length of stay for Child First averages between 6-9 months.

Because of participation in the randomized control trial, most cases referred to Child First went through a random assignment either to Child First or the control arm of the study. There were exceptions to the assignment protocol for newborns and a few other psychosocial stressors. The Team Leader also had a few "challenge" slots that could be used sparingly for those families with extraordinary identified need or trauma. The top two reasons why a family did not transition from referral to Child First case were that the family withdrew (did not wish to engage in services) (FY23=34%, FY24=7%) and the family was unavailable to outreach regarding initiation of care (FY23=2%, FY24=11%).

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 49 | 53 |
| [Cases] eligible for treatment | 11 | 14 |
| [Cases] achieving treatment goal | 7 | 9 |
| Percent achieving contracted treatment expectation: Actual | 64% | 64% |
| Percent achieving contracted treatment expectation: Contract | 75% | 75% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$990,617** | **$1,010,621** |
| Total Program expenditures | $719,498 | $765,471 |
| Total Clients Served | 76 | 65 |
| Expenditures per [case] | $9,467.08 | $11,776.48 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $566,045 | $377,313 | $596,698 | $399,121 |
| Benefits | 5200 | $134,245 | $93,370 | $143,271 | $100,442 |
| Overhead | 5400 to 5909; 5990 to 7150 | $221,343 | $187,239 | $205,737 | $224,481 |
| Training | 5910 | $68,984 | $61,576 | $64,914 | $41,428 |
| | **Total** | $990,617 | $719,498 | $1,010,621 | $765,471 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Bridges Healthcare - Child Outpatient Services | | |
|---|---|---|
| Geographic Location Covered: Catchment area is Milford, Orange and West Haven. Also Stratford and other towns if needed. | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | Yes |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 310 | 307 | 99% | 310 | 473 | 153% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Contract was essentially met for FY23 and exceeded in FY24. Bridges remained at or above our contracted utilization for both years despite the increased open positions.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: None.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 288 | 506 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 307 | 473 |
| | 307 | 473 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

For FY23 there were three (3) open positions and in FY24, due to expansion services there were eight (8) open positions.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 172 | 313 |
| [Cases] eligible for treatment | 172 | 313 |
| [Cases] achieving treatment goal | 70 | 107 |
| Percent achieving contracted treatment expectation: Actual | 65% | 65% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 314,765 | 322,792 |
| Total Program expenditures | 938,263 | 1,040,850 |
| Total Clients Served | 307 | 473 |
| Expenditures per [case] | 3,056.23 | 2,200.53 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 177,475 | 528,988 | 164,039 | 528,988 |
| Benefits | 5200 | 64,624 | 192,620 | 59,731 | 192,620 |
| Other Direct | Various Accounts | 16,397 | 48,937 | 42,895 | 138,246 |
| Overhead | 7100 | 55,665 | 165,918 | 53,469 | 172,426 |
| Training | 5905 | 604 | 1,800 | 2,658 | 8,570 |
| | **Total** | 314765 | 938263 | 322792 | 1040850 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| Program Name: CGC NB | | |
|---|---|---|
| Geographic Location Covered: | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | Yes |

| Program Utlization | SFY 2023 | SFY2024 |
|---|---|---|

| Program Name: Community Health Resources - ConnectiKin (See CST for FY2023 results) | | |
|---|---|---|
| Geographic Location Covered: Hartford, Manchester | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | NA | NA | NA | 326 | 91 | 28% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: CKIN is a new program that officially launched in August 2023. In FY24, CHR received 149 referrals, of which 91 resulted in an evaluation. 58 referrals were referral only, however there is work that goes into processing the referral and attempting to engage the families in services that is not reflected under program utilization. As this program type is caregiver led, sometimes engagement attempts after referral do not lead to an open episode of care.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: This is a new program type that DCF is still learning who to refer and when to refer so that families are more likely to engage in care. The program has not been around long enough to evaluate trends.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | NA | 149 |
| Clients receiving evaluation only | NA | 8 |
| Clients receiving services | NA | 91 |
| Clients completing treatment plan | NA | 40 |

**Narrative explanation for the reasons that referrals go unserved**

CHR received it's first referral to CKIN on 9/1/23 and can only accept referrals from DCF. Referral to treatment does not result in automatic episode of care due to the model being 100% caregiver lead. This is a departure from CST, which mandated a 30 day involvement from caregivers. The qualifications of staff in this program were changed by DCF from master's level clinical staff in CST to kinship navigators with lived experience; this led to challenges in retention of staff when the program shifted from CST to CKIN between FYs 23 and 24. There are also limitations around staff being able to take cases until they have received certain model required training, however we have been able to provide services to all families referred that are open to services.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | NA | 149 |
| [Cases] eligible for treatment | NA | 61% |
| [Cases] achieving treatment goal | NA | 75% |
| Percent achieving contracted treatment expectation: Actual | NA | 75% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | NA | $1,521,963 |
| Total Program expenditures | NA | $1,247,374 |
| Total Clients Served | NA | 91 |
| Expenditures per [case] | NA | $13,707 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | NA | NA | $988,554 | $681,102 |
| Benefits | 5200 | NA | NA | $223,836 | $191,761 |
| Overhead | 7000 | NA | NA | $209,790 | $194,800 |
| Training | 5905 | NA | NA | $10,000 | $7,630 |
| | **Total** | NA | NA | $1,432,180 | $1,075,293 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | NA | Y |
| Data collection | NA | Y |
| Quality assurance expectations | NA | Y |

| **Program Name: Family Centered Services -** CST/CKIN | | |
|---|---|---|
| **Geographic Location Covered:** Region 2 - Greater New Haven Area (Family Centered Services of CT and Bridges Healthcare) | | |
| **DCF open case needed for referral or admission?** | Yes | |
| **Is Program 3rd Party Billable?** | No | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **120** | **117** | **98%** | **180** | **66** | **37%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

**The reasons for the decline or low utilization:** SFY 2023 had quite a high utilization rate, however SFY 2024 had a much lower utilization rate as the program had just transitioned from CST to CKIN and all agencies and regions had to start from scratch with building caseloads when we usually have rollover from the previous year and pre-existing relationships with families and workers familiar with CST. SFY 2025 has already seen a sizeable increase in the percentage of utilization now that the program is more established.

**Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:** This trend does not reflect a decreased need for this service type as CKIN as an entirety had just been implemented statewide and began with extremely low numbers. This is expected to increase as time goes on, and already has in SFY 2025 as caseloads grow and the program becomes more well-known.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 57 | 81 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 117 | 64 |
| Clients completing treatment plan | 64 | 11 |

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 57 | 63 |
| [Cases] eligible for treatment | 100% | 100% |
| [Cases] achieving treatment goal | 64 | 11 |
| Percent achieving contracted treatment expectation: Actual | 89% | 17% |
| Percent achieving contracted treatment expectation: Contract | 90% | 90% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **149,333** | **115,624** |
| Total Program expenditures | 917,496 | 971,624 |
| Total Clients Served | 117 | 66 |
| Expenditures per [case] | 7841.85 | 14721.58 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 366,717 | 345,466 | 331,283 | 407,001 |
| Benefits | 5200 | 71,460 | 61,893 | 66,257 | 84,616 |
| Overhead | 7000 | 106,919 | 114,184 | 127,356 | 81,687 |
| Training | 5905 | 6,000 | 5,555 | 6,000 | 1,910 |
| | **Total** | 551,096 | 527,098 | 530,896 | 575,214 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name: Family and Children's Agency C-KIN | | | | | | |
|---|---|---|---|---|---|---|
| Geographic Location Covered: Region 1 | | | | | | |
| DCF open case needed for referral or admission? | Y | | | | | |
| Is Program 3rd Party Billable? | N | | | | | |
| | | | | | | |
| Program Utlization | SFY 2023 | | | SFY2024 | | |
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| C-Kin started in 8/2023 | N/A | N/A | N/A | 80 | 39 | 48.75% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

**The reasons for the decline or low utilization:**

CKIN is a voluntary service versus the previous Caregiver Support Team model which required families to complete at least the assessment period. As a result, more than half of the families referred either verbally declined the need for services prior to an intake or were unable to be reached in attempt to discuss CKIN and plan an intake. In addition, CORE, ICPC and families that had previously received CST services were deemed ineligible for referral by DCF. DCF within region 1 also reported during various months that placements in kinship homes had decreased.

**Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:**

DCF may have to re-evaluate level of need within Region 1 as the CKIN assessment nor service is mandatory. They may also have to re-evaluate placement data to assess the level of contracted CKIN slots may be needed in the region.

| Referrals to Program (cases) | SFY2023 | SFY2024 | |
|---|---|---|---|
| Referrals | N/A | 80 | |
| Clients receiving evaluation only | N/A | 1 | |
| Clients receiving services | N/A | 39 intakes held | |
| Clients completing treatment plan | N/A | 28 | ***11 clients remained open past 6/30/24** |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria):

As stated above, more than half of the families referred either verbally declined the need for services prior to an intake or were unable to be reached in attempt to discuss CKIN and plan an intake.

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | N/A | 39 | |
| [Cases] eligible for treatment | N/A | 39 | |
| [Cases] achieving treatment goal | N/A | 28 | ***11 clients remained open past 6/30/24** |
| Percent achieving contracted treatment expectation: Actual | N/A | 35% **of families that were opened and discharged during the FY 2024** | |
| Percent achieving contracted treatment expectation: Contract | N/A | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | N/A | **624,787** |
| Total Program expenditures | N/A | 625,708 |
| Total Clients Served | N/A | 39 |
| Expenditures per [case] | N/A | $16,043.78 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | | | 388,726 | 388,726 |
| Benefits | 5200 | | | 93,460 | 93,460 |
| Transportation | 5500 | | | 4,792 | 4,792 |
| Materials and Supplies | 5600 | | | 478 | 478 |
| Facilities | 5700 | | | 12,318 | 13,238 |
| Communications | 5901 | | | 2,169 | 2,169 |
| Lease Office Equipment | 5907 | | | 441 | 441 |
| Other (not including training) | 5990 | | | 1,992 | 1,992 |
| Overhead | 7000 | | | 120,011 | 120,011 |
| Training | 5990 | | | 400 | 400 |
| | **Total** | - | - | 624,787 | 625,708 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N/A | Y |
| Data collection | N/A | Y |
| Quality assurance expectations | N/A | Y |

| | | |
|---|---|---|
| **Program Name: Family and Children's Aid - Caregiver Support Team - Kinship Navigator** | | |
| **Geographic Location Covered: Danbury, Torrington, Waterbury** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **no** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | | | | 216 | 82 | 38% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract :** CKin was launched in August of 2023. We received our first CKin referral on August 23, 2023. Since that time 82 referrals have been made to the program by DCF who remains our only referral source at this time. The reasons for the decline or low utilization: **:** CKin is a newly launched program that does not yet receive referrals from all potential sources such as families who receive custody through Probate Court. Connecting with the families to explain our program has also been a barrier as the program is voluntary. Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: At this time there is not enough data to make a fair evaluation to determine if the services type is needed due to the program being so new. Our only referral source remains DCF at this time and the population we are able to service are first time Kinship caregivers due to CKin being in the evaluation stage.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | | 82 |
| Clients receiving evaluation only | | 34 |
| Clients receiving services | | 47 |
| Clients completing treatment plan | | 12 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) While we do not have enough data at this time to know why referrals go unserved, some of the barriers we see are families being told the service is voluntary, DCF being our only referral source, 1st time Kinship Caregivers are our target population, referral source not having a full understanding of the CKin program and families not calling back despite several attempts over 30 days to reach them. CKin is family lead allowing families to determine their level of services. All families who chose to enter into the partnering level and create a Care Coordination Plan achieved their treatment goals as they decide if they have successfully completed their goals.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | 47 |
| [Cases] eligible for treatment | | 81 |
| [Cases] achieving treatment goal | | 12 |
| Percent achieving contracted treatment expectation: Actual | | 15% |
| Percent achieving contracted treatment expectation: Contract | | 6% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | **1102854** |
| Total Program expenditures | | 838318 |
| Total Clients Served | | 47 |
| Expenditures per [case] | | 17,836.55 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | | | 752295 | 581131 |
| Benefits | 5200 | | | 188742 | 125546 |
| Overhead | 7100 | | | 74237 | 58647 |
| Training | 5905 | | | 10000 | 119 |
| | **Total** | 0 | 0 | 1025274 | 765443 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | Y |
| Data collection | | Y |
| Quality assurance expectations | | Y |

| | | |
|---|---|---|
| **Program Name: UCFS-** CKIN | | |
| **Geographic Location Covered:** DCF Region 3 | | |
| **DCF open case needed for referral or admission?** | Kinship foster family | |
| **Is Program 3rd Party Billable?** | No | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **145** | **107** | **74%** | **240** | **83** | **35%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract:**
SFY 2023: CST services ended to change to CKIN. We were instructed to not take any new clients after April 30th 2023.
SFY 2024: Our contracted numbers increased from 145 to 240, while decreasing the number of available families (no longer able to work with ICPC, core families, or former CST families.
CKIN services began August 1st 2023. Our 1st referral was Aug 24th.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** | |
|---|---|---|---|
| Referrals | 90 | 104 | Referrals received |
| Clients receiving evaluation only | 10 | 8 | Intake completed but did not accept services |
| Clients receiving services | 60 | 51 | Servies accepted |
| Clients completing treatment plan | 74 | 23 | |

**Narrative explanation for the reasons that referrals go unserved:**
Referrals:
Referral only= Never met with family (ex: DCF withdrew referral, family could not be contacted, family did not want services at the time, or did not meet criteria).

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 70 | 59 |
| [Cases] eligible for treatment | 88 | 100 |
| [Cases] achieving treatment goal | 56 | 15 |
| Percent achieving contracted treatment expectation: Actual | 52% | 18% |
| Percent achieving contracted treatment expectation: Contract | 39% | 6% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1115007** | **1143440** |
| Total Program expenditures | 1010342.25 | 997039.15 |
| Total Clients Served | 60 | 51 |
| Expenditures per [case] | 16,839.04 | 19,549.79 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | | |
|---|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures | |
| Salaries | | 724274.524 | 662859 | 753799.04 | 617165.5 | |
| Benefits | | 209432.031 | 161886.7 | 162137.33 | 149730.03 | |
| Overhead | | 177400.445 | 182368.6 | 223603.63 | 226645 | 0 |
| Training | | 3900 | 3227.95 | 3900 | 3498.62 | |
| | **Total** | 1115007 | 1010342.25 | 1143440 | 997039.15 | |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name: Wheeler - C-KIN, Kinship Navigation.Formerly CST, Caregiver Support Team.** | | |
| **Geographic Location Covered: DCF Region 6, Meriden/New Britain** | | |
| **DCF open case needed for referral or admission?** | **(Y)** | |
| **Is Program 3rd Party Billable?** | **(N)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **82** | **64** | **78%** | **144** | **45** | **31%*** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
CST contract ended at the completion of SFY 2022-2023. CKIN contract began, SFY 2023-2024. Contracted 144 to increase capacity of referrals, i.e. from public inquiry/probate cases/211, * this level of service is not active at this time as the second phase of the program to accept probate cases not begun.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 66 | 97 |
| Clients receiving evaluation only | n/a | n/a |
| Clients receiving services | 64 | 45 |
| Clients completing treatment plan | 64 | 32 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
*Clients receiving services include total number served including families already working with the program during that year.
SSFY2023: 24 not served ( 21 referrals declined , 3 could not be reached) 64 families were served, 64 successfully discharged from services, all were discharged because CST contract ended at the conclusion of SFY 2023, CKIN, began 8/1/2023 with all new referrals.
SSFY2024: 52 not served: (41 referrals declined 1 referrals req. higher level of care (FFT) and 10 could not be reached) 45 families received services and 32 families completed their service plan/discharged in SY 2024. Of the 45 families that received services , 32 were discharged all completed their service plan.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 64 | 45 |
| [Cases] eligible for treatment | 64 | 45 |
| [Cases] achieving treatment goal | 64 | 32 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100%* |
| Percent achieving contracted treatment expectation: Contract | ** | ** |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **629,220** | **645,265** |
| Total Program expenditures | 887,520 | 709,177 |
| Total Clients Served | 64.00 | 45.00 |
| Expenditures per [case] | 13,867.50 | 15,759.49 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 395,968 | 287,458 | 343,599 | 277,291 |
| Benefits | 5200 | 98,992 | 93,821 | 142,618 | 60,743 |
| Overhead | All others | 133,359 | 505,846 | 157,857 | 370,803 |
| Training | 5905 | 900 | 395 | 1,191 | 340 |
| | **Total** | 629,220.00 | 887,520.00 | 645,265.00 | 709,177.00 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Health Resources - Community Support for Families | | |
|---|---|---|
| Geographic Location Covered: Middletown, Norwich, Willimantic | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 360 | 394 | 109% | 360 | 363 | 101% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: N/A, program exceeded contract capacity and demonstrates need for more access.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: N/A, the trend is stable across both years. The actual numbers only include distinct caregivers that were served. In FY23, we also served 794 unique children and in FY24 we served 701 unique children in addition to the unique caregivers reflected in the numbers above.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 452 | 421 |
| Clients receiving evaluation only | 50 | 23 |
| Clients receiving services | 394 | 363 |
| Clients completing treatment plan | 332 | 214 |

**Narrative explanation for the reasons that referrals go unserved**

N/A, referrals do not go unserved. As the program is voluntary, some families will opt to not participate after the initial evaluation.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 325 | 281 |
| [Cases] eligible for treatment | 275 | 258 |
| [Cases] achieving treatment goal | 232 | 146 |
| Percent achieving contracted treatment expectation: Actual | 82% | 76% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $1,649,977 | $1,692,051 |
| Total Program expenditures | $1,690,862 | $1,541,360 |
| Total Clients Served | 394 | 363 |
| Expenditures per [case] | $4,292 | $4,246 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $981,082 | $943,650 | $975,511 | $824,803 |
| Benefits | 5200 | $295,387 | $304,915 | $290,566 | $253,378 |
| Overhead | 7000 | $234,032 | $229,440 | $246,994 | $233,912 |
| Training | 5905 | $350 | $135 | $350 | $341 |
| | Total | $1,510,851 | $1,478,140 | $1,513,422 | $1,312,434 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Clifford Beers - Community Support for Families | | |
|---|---|---|
| Geographic Location Covered: New Haven, Milford | | |
| DCF open case needed for referral or admission? | (y/n) | Yes |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 180 | 123 | 68.33% | 180 | 174 | 96.67% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

Referrals come directly from DCF

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 123 | 174 |
| Clients receiving evaluation only | 20 | 16 |
| Clients receiving services | 123 | 174 |
| Clients completing treatment plan | 41 | 74 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 96 | 151 |
| [Cases] eligible for treatment | 103 | 158 |
| [Cases] achieving treatment goal | 48 | 86 |
| Percent achieving contracted treatment expectation: Actual | 64.90% | 81.10% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

*No intakes found in CL, the numbers refer to the number of intake OHIOs in PIE

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $172,465.00 | $634,739.43 |
| Total Program expenditures | $138,423.48 | $754,390.72 |
| Total Clients Served | 123 | 174 |
| Expenditures per [case] | $1,125.39 | $4,335.58 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 172,465 | 73,436 | 634,739 | 429,103 |
| Benefits | | | 15,832 | | 88,844 |
| Overhead | | | 49,156 | | 236,444 |
| Training | | | | | |
| | Total | 172,465 | 138,423 | 634,739 | 754,391 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: CommuniCare Community Support for Families | | |
|---|---|---|
| Geographic Location Covered: Region 2 | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 180 | 177 | 98% | 180 | 166 | 92% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

While we were just short of the contracted expectations of family participation in the CSF program, the program works diligently to engage with families quickly after referral is received. There are some cases that are referred where the family isn't really interested in engaging with the service as much as they are in having their DCF case closed. In addition, sometimes the needs of the families are greater than what the service can provide. I.e. families with homelessness and a history of evictions making it difficult for the team to realistically help them achieve their housing goals in the six month time frame that the service is in place for.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 199 | 187 |
| Clients receiving evaluation only | 26 | 22 |
| Clients receiving services | 151 | 144 |
| Clients completing treatment plan | 106 | 97 |

**Narrative explanation for the reasons that referrals go unserved**

As mentioned above, some areas of need surpass the realistic abilities of the service staff in the CSF program. At times, the resources aren't available in the region, or the family presents with a history that make it difficult to achieve the goals.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 177 | 166 |
| [Cases] eligible for treatment | 151 | 144 |
| [Cases] achieving treatment goal | 114 | 107 |
| Percent achieving contracted treatment expectation: Actual | 75% | 74% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **690,346** | **759,130** |
| Total Program expenditures | 616,881 | 634,216 |
| Total Clients Served | 151 | 144 |
| Expenditures per [case] | 4,085.30 | 4,404.28 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 439,385 | 364,250 | 447,020 | 394,501 |
| Benefits | 5200 | 114,240 | 95,854 | 125,388 | 101,383 |
| Overhead | VARIOUS | 135,666 | 155,680 | 182,219 | 137,179 |
| Training | 5905 | 1,055 | 1,097 | 424 | 1,153 |
| | **Total** | 690346 | 616881 | 755051 | 634216 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name:Wheeler - Community Support for Families** | | |
| **Geographic Location Covered:REGION 4 Hartford and Manchester** | | |
| **DCF open case needed for referral or admission?** | **Y** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **324** | **374** | **115%** | **324** | **325** | **100%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 316 | 270 |
| Clients receiving evaluation only | 33 | 28 |
| Clients receiving services | 374 | 325 |
| Clients completing treatment plan | 341 | 297 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 341 | 297 |
| [Cases] eligible for treatment | 316 | 270 |
| [Cases] achieving treatment goal | 195 | 164 |
| Percent achieving contracted treatment expectation: Actual | 83%** | 86%** |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |
| **Cases in line 28 referring to discharged clients in the year. Of those D/C in each FY, the stated % met treatment goals.** | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,040,246** | **1,066,772** |
| Total Program expenditures | 1,026,492 | 1,096,494 |
| Total Clients Served | 374.00 | 325.00 |
| Expenditures per [case] | 2,744.63 | 3,373.83 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 603,241 | 570,548 | 653,877 | 619,013 |
| Benefits | 5200 | 211,996 | 208,312 | 197,845 | 190,702 |
| Overhead | All others | 223,081 | 246,756 | 215,050 | 286,302 |
| Training | 5905 | 1,929 | 875 | - | 478 |
| | **Total** | 1,040,246 | 1,026,492 | 1,066,772 | 1,096,494 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name:Wheeler - Community Support for Families** | | |
| **Geographic Location Covered: REGION 6 New Britain and Meriden** | | |
| **DCF open case needed for referral or admission?** | **Y** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **396** | **267** | **67%** | **396** | **303** | **77%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

**The reasons for the decline or low utilization**: CSF Region 6 has surpassed program capacity by allowing high caseloads in 2019 (served 410), 2020 (served 450) and 2021(served 458). Starting in FY 2022, DCF and CSF in region 6 agreed to honor the scope of service which dictates a case load of 12 and 5 days for a initial transition meeting with families. Caseloads had been historically between 17-20 cases so as to manage all the referrals that were sent to CSF Region 6. The initial meeting times were being delayed because of the high caseloads and DCF agreed they wanted cases moving to CSF faster/in the 5 days so they committed to only sending referrals to fill open spots with each staff person carrying 12 cases. In FY 24, the program had 1 to 2 staff openings throughout the year that also impacted the number of referrals the program could take from DCF.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 211 | 274 |
| Clients receiving evaluation only | 9 | 14 |
| Clients receiving services | 267 | 303 |
| Clients completing treatment plan | 258 | 289 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) All referrals sent to the CPA are accepted in CSF. The wait days for a transition meeting may fluctuate based on case load capacity and 2 staffing vacancies on average in FY 24.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 258 | 289 |
| [Cases] eligible for treatment | 211 | 274 |
| [Cases] achieving treatment goal | 143 | 148 |
| Percent achieving contracted treatment expectation: Actual | 88%** | 93%** |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |
| **Cases in line 28 referring to discharged clients in the year. Of those D/C in each FY, the stated % met treatment goals.** | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,251,555** | **1,283,470** |
| Total Program expenditures | 1,238,154 | 1,348,746 |
| Total Clients Served | 267.00 | 303.00 |
| Expenditures per [case] | 4,637.28 | 4,451.31 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 648,258 | 590,369 | 656,299 | 659,118 |
| Benefits | 5200 | 223,851 | 215,830 | 222,940 | 212,425 |
| Overhead | All others | 379,007 | 430,343 | 403,730 | 476,325 |
| Training | 5905 | 438 | 1,612 | 500 | 878 |
| | **Total** | 1,251,555 | 1,238,154 | 1,283,470 | 1,348,746 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: The Village Community Support for Families** | | |
| **Geographic Location Covered: DCF Region 4- Hartford & Manchester offices** | | |
| **DCF open case needed for referral or admission?** | **N** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| **Number Served (cases)** | **216** | **341** | **157.87%** | **216** | **309** | **143.06%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 304 | 267 |
| Clients receiving evaluation only | 35 | 28 |
| Clients receiving services | 211 | 195 |
| Clients completing treatment plan | 211 | 195 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Families declined services, provider was unable to schedule the face-to-face, or the referring party withdrew the referral

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 341 | 309 |
| [Cases] eligible for treatment | 306 | 281 |
| [Cases] achieving treatment goal | 166 | 161 |
| Percent achieving contracted treatment expectation: Actual | 76% | 80% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **955,807** | **980,180** |
| Total Program expenditures | 964,479 | 871,887 |
| Total Clients Served | 341 | 309 |
| Expenditures per [case] | 2,828.38 | 2,821.64 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 659,055 | 556,848 | 610,681 | 528,231 |
| Benefits | 5200 | 153,098 | 129,447 | 149,128 | 129,888 |
| Overhead | 7150 | 139,597 | 115,334 | 130,920 | 117,778 |
| Training | 5905 | 3,000 | 353 | 3,000 | - |
| | **Total** | 954,750 | 801,982 | 893,729 | 775,898 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Crossroads** | | |
| **Geographic Location Covered: CT Statewide** | | |
| **DCF open case needed for referral or admission?** | **Y** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| **YASS** | **8** | **7.2** | **90.00%** | **8** | **6.5** | **81.25%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:
There were not many female referrals SFY2024 causing a lower census this reporting year.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 14 | 12 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 12 | 11 |
| Clients completing treatment plan | 10 | 9 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Clients did not meet admission criteria to be accepted to this level of care.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 12 | 11 |
| [Cases] eligible for treatment | 11 | 11 |
| [Cases] achieving treatment goal | 8 | 8 |
| Percent achieving contracted treatment expectation: Actual | 73% | 73% |
| Percent achieving contracted treatment expectation: Contract | N/A | 85% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | N/A | N/A |
| Total Program expenditures | $695,532 | $656,905 |
| Total Clients Served | 12 | 11 |
| Expenditures per [case] | $57,961 | $59,719 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | $428,219 | | $397,585 |
| Benefits | | | $92,855 | | $105,767 |
| Overhead | | | $63,203 | | $61,502 |
| Training | | | $649 | | $965 |
| | Total | $0 | $584,926 | $0 | $565,819 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Guidance Center of Central CT - Early Childhood Services- Child First | | |
|---|---|---|
| Geographic Location Covered: | | |
| DCF open case needed for referral or admission? | (y/n) | |
| Is Program 3rd Party Billable? | (y/n) | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | | | | | | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | | |
| Clients receiving evaluation only | | |
| Clients receiving services | | |
| Clients completing treatment plan | | |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|

| | | |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those

| **Total Program Expenditures** | **SFY 2023** | **SFY2024** |
|---|---|---|
| Total Program allocations | **477511** | **192164** |
| Total Program expenditures | 285346.7 | 137531.55 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| **DCF Funding and Expenditures by Account** | | **SFY 2023** | | **SFY2024** | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 203760.96 | 174790.08 | 79772.51 | 79772.51 |
| Benefits | 5200 | 57053.06 | 24196.42 | 13569.92 | 13569.92 |
| Overhead | 7000 | 26119.27 | 22149.98 | 17620.41 | 17620.41 |
| Training | 5905 | 0 | 0 | 0 | 0 |
| | **Total** | 286933.29 | 221136.48 | 110962.84 | 110962.84 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | y | y |
| Quality assurance expectations | y | y |

| Program Name: Clifford Beers - Child First (DCF funded) | | |
|---|---|---|
| Geographic Location Covered: New Haven, West Haven, East Haven, North Haven, North Branford, Branford, Orange, Milford, Woodbridge, Bethany, Derby, Ansonia, Shelton and Seymour. | | |
| DCF open case needed for referral or admission? | No | |
| Is Program 3rd Party Billable? | No | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 48 | 45 | 94% | 48 | 38 | 79% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

Child First experienced vacancy in staffing for a period of time until new staff could be hired. This caused a decline in typical utilization due to an inability to admit new clients during this period. In addition, new staff must be trained in the model prior to working with families creating a slight delay in building caseloads and admitting new clients

Another reason for a decline may be that cases are experiencing higher acuity resulting in longer lengths of stay. While the program aims to minimize this issue, DCF occasionally requests that the program extend length of treatment to address chronic issue which then reduces overall numbers.

| Referrals to Program (cases) | SFY2023 | SFY2024 | |
|---|---|---|---|
| Referrals | 88 | 118 | Pulled from CFCR |
| Clients receiving evaluation only | 3 | 2 | Pulled from CFCR OEC cases excluded |
| Clients receiving services | 45 | 38 | Pulled from PIE |
| Clients completing treatment plan | 16 | 19 | from discharged clients ONLYFY23: 16/23; FY24: 19/25 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Referrals typically do not go unserved but rather need to wait for treatment services due to the waitlist. Child First attempts to triage cases upon referral and occasionally can put other services in place while the family is waiting for the Child First clinical intervention (other services include ECCP, PAT, School Services etc.). Child First has a typical length of stay of 10 months to1 year. With an incredibly high volume of referrals, it is not always possible to serve families in a timely manner. However, referrals are prioritized for admission with high acuity cases being offered more immediate admission (which includes DCF cases)

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 45 | 38 | Pulled from PIE |
| [Cases] eligible for treatment | 45 | 38 | Pulled from PIE |
| [Cases] achieving treatment goal | 20 | 25 | From discharged clients ONLY |
| Percent achieving contracted treatment expectation: Actual | 87% | 100% | Pulled from PIE; of discharged clients only |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $515,514 | $458,732 |
| Total Program expenditures | $443,659 | $642,151 |
| Total Clients Served | 45 | 38 |
| Expenditures per [case] | $9,859.09 | $16,898.71 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 515,514 | 240,441 | 458,732 | 346,554 |
| Benefits | | | 51,626 | | 75,898 |
| Overhead | | | 151,593 | | 219,331 |
| Training | | | | | 368 |
| | **Total** | 515,514 | 443,659 | 458,732 | 642,151 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Clifford Beers - MFCG - Early Childhood Services - Child First | | |
|---|---|---|
| Geographic Location Covered: Norwalk, Westport, Weston, Wilton | | |
| DCF open case needed for referral or admission? | (y/n) | N |
| Is Program 3rd Party Billable? | (y/n) | N |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| Actuals were pulled from CFCR Report: Referrals and Intake Priority Criteria report and cross-checked with PIE report Data Extraction (Episode Data- Choose Data Elements); discrepancy was -1 for FY23 reflected in PIE and no discrepancy for FY24 | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 54 | 46 | 85.19% | 54 | 54 | 100% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

Utilization does not reflect decreased need, rather it is impacted by the following workforce limitations: Severity of need for clinical intervention and stabilization requiring longer course of treatment to address all needs AND decreased staff caseloads to prevent burnout, family's availability to meet weekly with the team at a time that's appropriate given the age of the child,

| Referrals to Program (cases) | SFY2023 | SFY2024 | |
|---|---|---|---|
| Referrals | 54 | 59 | pulled from CFCR using 'Referral & Intake Priority Criteria' report, only includes referrals with complete information that agreed to be added to the wait list, number does not include many more inquiries, incomplete referrals, and families who were referred by a provider and declined services at initial contact. |
| Clients receiving evaluation only | 0 | 2 | pulled from PIE using Data Extraction (Episode Data- Choose Data Elements) Report and filtered for episodes open during FY23 and FY24 separately |
| Clients receiving services | 46 | 54 | pulled from CFCR using 'Referral & Intake Priority Criteria' report, cross checked with PIE report described above; discrepancy was -1 for FY23 reflected in PIE and no discrepancy for FY24 |
| Clients completing treatment plan | 15 | 18 | pulled from PIE using Data Extraction (Episode Data- Choose Data Elements) Report and filtered for episodes open during FY23 and FY24 separately, cross checked with CFCR Children Served with Demographics - DETAIL report. Numerator is all cases with Reason for Discharge as 'Completed Treatment', Denominator is all discharges in the FY (NOT children served in FY), so for FY23 this is 15/25 and FY24 this is 18/26 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Referrals go unserved for the following reasons: moving out of the catchment area while on the waitlist, accessing a different service, circumstances improve and services are no longer needed, lack of response to outreach. Additionally, this year our CF site participated in a randomized control trial and there were a number of referrals assigned to receive alternative services and thus, unserved by CF.

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 46 | 54 | all cases receive initial assessment, counts were pulled from CFCR children served and cross-checked with PIE episode reports used to calculate utilization counts above |
| [Cases] eligible for treatment | 46 | 54 | all cases opened are eligible for treatment |
| [Cases] achieving treatment goal | 22 | 23 | Pulled from CFCR children served report and filtered to include the following responses in 'Discharge Reason' field: Met Some/All Treatment Goals - Completed Child First, Met Some/All Treatment Goals - Family Discontinued, Met Some/All Treatment Goals - Agency Discontinued: Clinical. Cross-checked with PIE episode data report and filtered for all cases with 'Yes' response to 'Met Treatment Goals' field. Discrepancy of -4 for FY23 and -2 for FY24 reflected in PIE, denominator is all discharges in the fiscal year (NOT children served) |
| Percent achieving contracted treatment expectation: Actual | 88.00% | 88.46% | from CFCR, numerator is all cases for which Discharge Reason is one of the following: Met Some/All Treatment Goals - Completed Child First, Met Some/All Treatment Goals - Family Discontinued, Met Some/All Treatment Goals - Agency Discontinued: Clinical. Denominator is all discharged cases within the FY. |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a | It doesn't make sense to use the formula in the orange box as the number of cases eligible for treatment is related to total children served, and due to the course of treatment being 9 months - 1 year many of these cases would not reach completion during the FY. Instead the percentage for actuals was calculated using discharges in the FY as the denominator. Furthermore, this number is not specified in our contract. |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | 46 | 54 |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: Middlesex Health - Child First** | | |
| **Geographic Location Covered: Middlesex County + Guilford and Madison** | | |
| **DCF open case needed for referral or admission?** | **No** | |
| **Is Program 3rd Party Billable?** | **No** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **24 per team (48)** | **38** | | **24 per team (48)** | **58** | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

In SFY 2023, we had staffing changes including 2 new clinicians at our site beginning in July, 2022 and August, 2022 which meant they each had 4 months to build a full caseload which impacted our overall clients served in SY 2023.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 50 | 63 |
| Clients receiving evaluation only | 1 | 2 |
| Clients receiving services | 38 | 58 |
| Clients completing treatment plan | 18 | 31 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 38 | 58 |
| [Cases] eligible for treatment | 38 | 58 |
| [Cases] achieving treatment goal | 18 | 31 |
| Percent achieving contracted treatment expectation: Actual | ? | ? |
| Percent achieving contracted treatment expectation: Contract | ? | ? |
| | | |
| | | |

All cases recieved initial assessment prior to treatment

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $493,846 | 499897 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 493846 | 265963 | 499897 | 274072 |
| Benefits | | | 95215 | | 98118 |
| Mileage | | | 9390 | | 12723 |
| Supplies | | | 14685 | | 9245 |
| Training | | | 10005 | | 6216 |
| Rent | | | 27600 | | 27600 |
| Phone | | | 2380 | | 2009 |
| Postage | | | 2 | | 48 |
| License | | | 30000 | | 30000 |
| Family Relief | | | 2025 | | 3078 |
| G&A | | | 36581 | | 36788 |
| | | | | | |
| | Total | 493846 | 493846 | 499897 | 499897 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| **Program Name: UCFS -** Child First | | | | | | |
| **Geographic Location Covered:** Windham County, New London County | | | | | | |
| **DCF open case needed for referral or admission?** | No | | | | | |
| **Is Program 3rd Party Billable?** | No | | | | | |
| | | | | | | |
| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **192*** | **72** | **37.5**** | **192*** | **74** | **38.5**** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract:** *Contract was amended to fund 8 teams (3 additional teams through ARPA), despite staffing difficulties related to the 5 teams we had be contracted to serve over the years. As a result, our contracted number of clients served per fiscal year rose from 120 to 192 (based on 8 teams). We were unable to staff the 3 additional teams but continue to be held to the expectation of 192 children served until our ARPA funds have been depleted, which would typically be 120 (for which, utilization rates were 60% and 58%, respectively, for FY23 and FY24**). In FY24 we also participated in the RCT which somewhat slowed down our ability to fill open slots.

**Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:** We feel that the 5 teams that we have traditionally been funded for is a much better fit for our catchment area and ability to find staff interested and equipt to do this type of work and who want to travel such a large catchment area. We continue to receive a sufficient number of referrals even without actively recruiting out in the community and community-based referrals have never been difficult to come by, which also supports the need for continued Child First teams in Eastern CT.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 63* | 125 |
| Clients receiving evaluation only | 3 | 5 |
| Clients receiving services | 72 | 74** |
| Clients completing treatment plan | 58 | 40 |

**Narrative explanation for the reasons that referrals go unserved:**
*In FY23, we lost all clinicians that had been covering the Windham County region due to impending cuts from alternative funding source and were unable to hire replacements, and were also awarded 3 unexpected teams through DCF-ARPA funding later in the year. As a result of staff departures due to concerns about stability of the teams' funding in the future, referral stream was paused during the course of FY23 so that DCF referrals could be prioritized and assigned when open slots arose. Staffing issues particularly related to hiring early childhood clinicians (hired 3 clinicians in June/July 2023) initiated this pause in taking new referrals from community providers. DCF referrals were still accepted.
** In FY24 we began participating in the RCT study, where each referral had a 60% change of being randomly selected for the Child First Program. 27 referrals were screened and randomly selected for the Control Group, which meant that they could not receive Child First Services, which was 21% of our total referrals.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 73 | 74 |
| [Cases] eligible for treatment | 72 | 74 |
| [Cases] achieving treatment goal | 58 | 40 |
| Percent achieving contracted treatment expectation: Actual | 80.5 | 54.50% |
| Percent achieving contracted treatment expectation: Contract | 48.3 (based on 5 teams); 29.5 (based on 8 teams) | 33.3% (based on 5 teams), 20.4 (based on 8 teams) |

Definition of contracted treatment expectation: Percent of [cases]

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1365197** | **13480963** |
| Total Program expenditures | 1024673.27 | 1348544.81 |
| Total Clients Served | 72 | 74 |
| Expenditures per [case] | 14231.57 | 18223.58 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 937822.209 | 443361.21 | 622990.99 | 622624.3 |
| Benefits | | 277066.987 | 138861.74 | 187962.34 | 178023.65 |
| Overhead | | 121507.804 | 417582.82 | 12639210 | 417318.52 |
| Training | | 28800 | 24867.5 | 30800 | 30578.34 |
| | Total | 1365197 | 1024673.27 | 13480963 | 1248544.81 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Yale New Haven - Child First - Bridgeport Hospital | | |
|---|---|---|
| Geographic Location Covered: Greater Bridgeport (Bridgeport, Fairfield, Stratford, Easton, Trumbull, Monroe) | | |
| DCF open case needed for referral or admission? | N | No, however DCF referrals are prioritized |
| Is Program 3rd Party Billable? | Y | Yes, we bill Medicaid for those children with HUSKY |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 120 | 66 | 55% | 120 | 82 | 68% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

**1) Difficulty in filling vacant home visitor (Clinician and Care Coordinator) positions.**

**2) Low number of referrals from DCF. In SFY 23 (26%) only 23 of 112 referrals were from DCF and in SFY 24 21 (18%) of 114 referrals were from DCF. We have addressed this with our local DCF office and statewide Child First liaisons. 6 months into SFY 25, we have received 45 referrals (17 from DCF) and we have served 50 families.**

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: **This trend reflects past workforce limitations and the past and present**

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 112 | 114 |
| Clients receiving evaluation only | | |
| Clients receiving services | 66 | 82 |
| Clients completing treatment plan | | |

this is identified children open on the first day of the SFY or with an intake date in that SFY (our data does not match the data in PIE)

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Referrals that do not get served are primarily due to:

The top 3 reasons referred families are not served are:

1) **Did not meet admission criteria.** This includes families who reside outside of our catchment area, a family with a child outside of our targeted age range (prenatal through 5 years). In SFY 23, this represented 5% of all referrals and 31% of DCF referrals. In SFY 24, this represented 4% of all referrals and 9% of DCF referrals.

2) **Family refused services**. In SFY 23, this represented 16% of all referrals and 15% of DCF referrals. In SFY 24, this represented 18% of all referrals and 36% of DCF referrals.

In many cases, once DCF makes the referral to Child First, they close out the case so the family makes the choice not to engage in our services as we are a voluntary program.

3) **Family did not respond.** In SFY 23, this represented 15% of all referrals and 31% of DCF referrals. In SFY 24, this represented 18% of all referrals and 27% of DCF referrals.

All cases from DCF and other referral sources are assigned to teams in a timely manner; especially when there is no waitlist. Once assigned, each family is outreached following Child First policy and guidelines which include several telephone calls to the caregiver. If there is voicemail accessibility, a voicemail is left each time we call. If we do not hear back from the family then we send a letter indicating that we are trying to get in touch and ask them to call us. If we still do not hear back from them then a second letter is sent with a date by which we need to hear back. If we continue to not hear back, the referral is closed.

Often times it is difficult to get in touch with parents due to a transient living situation, an operable phone or an incorrect phone number. We ask the referrrant (DCF or other providers) to help us engage with the family.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | 23 of 26 discharged | 39 of 42 dischar; data from PIE |
| Percent achieving contracted treatment expectation: Actual | 88% | 93% |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $ 1,137,839 | $ 1,108,344 |
| Total Program expenditures | $ 924,078 | $ 1,260,215 |
| Total Clients Served | $ 66 | $ 82 |
| Expenditures per [case] | $ 14,001 | $ 15,368 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 793,379 | 512,331 | 785,107 | 766,018 |
| Benefits | | 222,146 | 158,141 | 219,830 | 214,485 |
| Overhead | | 120,174 | 84,007 | 117,751 | 114,565 |
| Training | | 5,200 | - | 4,000 | 1,223 |
| | Total | 1,140,899 | 754,480 | 1,126,688 | 1,096,290 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wheeler - Child First** | | |
| **Geographic Location Covered: Region 6 New Britain Office towns** | | |
| **DCF open case needed for referral or admission?** | **N** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **72** | **59** | **82%** | **48** | **38** | **79%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: ***Staff vacancies &reduction in funding led to elimination of one Child First team from SFY23 to SFY24***

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: ***Data do not reflect decreased need for services as referrals remained above contracted amount.***

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 102 | 86 |
| Clients receiving evaluation only | 0 | 1 |
| Clients receiving services | 59 | 37 |
| Clients completing treatment plan | 12 | 14 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) **Loss of funding for one Child First team (two staff) from SFY2023 to SFY2024. Staff vacancies in SFY 2024.**

**Please note that an episode of care can be up to 12 months, so a client episode may span two fiscal years. Clients completing treatment documents only those completing in the fiscal year. For SFY23 #/% had and episode that began in SFY23 but completed in SFY24. For SFY24 5 clients had an episode that began in SFY2024 but will be completed in SFY25.**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 59 | 38 |
| [Cases] eligible for treatment | 59 | 38 |
| [Cases] achieving treatment goal | 15 | 22 |
| Percent achieving contracted treatment expectation: Actual | 25% | 58% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **831,121** | **523,978** |
| Total Program expenditures | 701,301 | 520,079 |
| Total Clients Served | 59 | 38 |
| Expenditures per [case] | 11,886.46 | 13,686.30 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 487,327 | 388,891 | 318,835 | 284,404 |
| Benefits | 5200 | 160,818 | 79,553 | 70,643 | 51,431 |
| Overhead | All others | 180,096 | 229,663 | 133,581 | 183,760 |
| Training | 5905 | 2,880 | 3,194 | 920 | 485 |
| | **Total** | 831,121 | 701,301 | 523,978 | 520,079 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: The Village- Child First | | |
|---|---|---|
| Geographic Location Covered: Region 4 | | |
| DCF open case needed for referral or admission? | NO | |
| Is Program 3rd Party Billable? | NO | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| Number Served | 120 | 106 | 88.33% | 48 | 41 | 85.42% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

FY2023: funding was reducing from 5 DCF teams to 2 - some teams could not continue to open cases and/or transferred positions as a result
FY2024: impact of FMLA leave - 1 Clinician for 1/2 year; Other Clinician - maternity leave, then returned and left; per model, cannot open cases without a Clinician

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 206 | 130 |
| Clients receiving evaluation only | 16 | 4 |
| Clients receiving services | 92 | 34 |
| Clients completing treatment plan | 91 | 31 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Referrals go unserved due to a lack of adequate number of Child First teams across the state to meet the demand for early childhood clinical home visiting services. There is a significant wait based on the decreased capacity as a result of the reduction in teams; FMLA and staff vacancy also had an impact on the wait.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 92 | 30 |
| [Cases] eligible for treatment | 92 | 31 |
| [Cases] achieving treatment goal | **78** | **27** |
| Percent achieving contracted treatment expectation: Actual | 85% | 87% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,023,665** | **473,722** |
| Total Program expenditures | 1,239,455 | 650,237 |
| Total Clients Served | 106 | 41 |
| Expenditures per [case] | 11,692.97 | 15,859.44 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 718,461 | 659,645 | 431,188 | 366,495 |
| Benefits | 5200 | 166,899 | 156,240 | 105,296 | 91,297 |
| Overhead | 7150 | 171,706 | 146,196 | 97,892 | 83,430 |
| Training | 5905 | 69,758 | 69,007 | 519 | 110 |
| | **Total** | 1,126,824 | 1,031,088 | 634,894 | 541,332 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Boys and Girls Village - Extended Day Treatment | | |
|---|---|---|
| Geographic Location Covered: DCF Bridgeport Office/ Greater Bridgeport Area | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 46 | 50 | 109% | 46 | 37 | 80% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: workforce limitations

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 53 | 33 |
| Clients receiving evaluation only | 2 | 4 |
| Clients receiving services | 25 | 22 |
| Clients completing treatment plan | 16 | 15 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity:

The client did not meet the admission criteria) youth require different services. guardian will not commit to schedule and participation, guardian secured other type of service, out of catchment area, parent did not respond to contact attempts

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 27 | 26 |
| [Cases] eligible for treatment | 25 | 22 |
| [Cases] achieving treatment goal | 16 | 15 |
| Percent achieving contracted treatment expectation: Actual | 64.00 | 68.18 |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 766,115 | $ 682,590 |
| Total Clients Served | 49 | 36 |
| Expenditures per [case] | $ 15,635.00 | $ 18,960.84 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 215,025 | $ 366,986 | $ 224,208 | $ 324,896 |
| Benefits | 5200 | $ 56,999 | $ 90,631 | $ 62,770 | $ 79,809 |
| Overhead | | $ 157,271 | $ 308,022 | $ 153,270 | $ 277,493 |
| Training | 5905 | $ 240 | $ 476 | $ 240 | $ 392 |
| | **Total** | $ 429,535 | $ 766,115 | $ 440,488 | $ 682,590 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | Y |
| Quality assurance expectations | N | Y |

| Program Name:Clifford Beers - MFCG- Extended Day Treatment Progarm (EDT) | | |
|---|---|---|
| Geographic Location Covered: Norwalk, Weston, Wilton, Westport, Darien, Greenwich, New Canaan, Stamford | | |
| DCF open case needed for referral or admission? | (y/n) | N |
| Is Program 3rd Party Billable? | (y/n) | Y |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 40 | 43 | 107.50% | 40 | 41 | 102.50% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 43 | 41 |
| Clients receiving evaluation only | 1 | 3 |
| Clients receiving services | 42 | 38 |
| Clients completing treatment plan | 23 | 21 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 43 | 41 |
| [Cases] eligible for treatment | 42 | 38 |
| [Cases] achieving treatment goal | 24 | 21 |
| Percent achieving contracted treatment expectation: Actual | 96.67% | 92.59% |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

used met tx goals

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | 42 | 38 |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: FCAid - Extended Day Treatment** | | |
| **Geographic Location Covered: Danbury** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **n** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **y** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 62 | 34 | 55% | 62 | 24 | 39% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: **Ongoing Staff Vacancies (TSW) / Clinician Turnover**
**Program Director Maternity Leave - limited coverage**
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 29 | 27 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 34 | 24 |
| Clients completing treatment plan | 30 | 22 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) **Client moved outside of catchment area**
**While on wait list- client started another service, no longer in need, or declined EDT**
**Unsuccessful contact attempts with guardian/ No show intake appts.**
**Service schedule conflict -unable to meet minimum treatment participation requirements**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 34 | 24 |
| [Cases] eligible for treatment | 34 | 24 |
| [Cases] achieving treatment goal | 26 | 20 |
| Percent achieving contracted treatment expectation: Actual | 76% | 83% |
| Percent achieving contracted treatment expectation: Contract | 42% | 32% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **578726** | **593484** |
| Total Program expenditures | 734258 | 742030 |
| Total Clients Served | 34 | 24 |
| Expenditures per [case] | 21,595.82 | 30,917.92 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 604812 | 437083 | 598718 | 465519 |
| Benefits | 5200 | 138838 | 108309 | 151030 | 88077 |
| Overhead | 7100 | 12037 | 11256 | 66189 | 50557 |
| Training | 5905 | 1150 | 1068 | 2000 | 1528 |
| | **Total** | 756837 | 557716 | 817937 | 605681 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Klingberg Extended Day Treatment Program | | |
|---|---|---|
| Geographic Location Covered: | | |
| DCF open case needed for referral or admission? | (y/NO) | |
| Is Program 3rd Party Billable? | (YES/n) | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 54 | 63 | 117% | 54 | 54 | 100% |

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 84 | 73 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 63 | 53 |
| Clients completing treatment plan | 50 | 26 |

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 63 | 53 | |
| [Cases] eligible for treatment | 63 | 53 | |
| [Cases] achieving treatment goal | 50/63 | 26/33 | |
| Percent achieving contracted treatment expectation: Actual | 70% | 79% | |
| Percent achieving contracted treatment expectation: Contract | 50% | 50% | Not identified in in contract |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 100.00% | 100.00% |
| Total Program expenditures | $1,009,818 | $949,920 |
| Total Clients Served | 63 | 54 |
| Expenditures per [case] | 16,028.86 | $17,591 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $591,856 | $600,754 | $587,375 | $551,774 |
| Benefits | 5200 | $102,632 | $100,324 | $103,500 | $103,048 |
| Other Expenses | 5900 | $69,651 | $81,709 | $98,842 | $93,157 |
| Overhead (indired cost) | 5300+7100 | $160,341 | $226,730 | $172,217 | $201,770 |
| Training | 5905 | $0 | $301 | $0 | $171 |
| | **Total** | $924,480 | $1,009,818 | $961,934 | $949,920 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | yes |
| Data collection | yes | yes |
| Quality assurance expectations | yes | yes |

| | | |
|---|---|---|
| **Program Name: The Children's Center of Hamden - Extended Day Treatment** | | |
| **Geographic Location Covered: DCF Region 2** | | |
| **DCF open case needed for referral or admission?** | **N** | |
| **Is Program 3rd Party Billable?** | **Y** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **124** | **100** | **80.6%** | **124** | **83** | **66.9%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

ANSWER: prior to COVID, this EDT functioned with robust utilization. Since the pandemic, the program's ability to serve youth at capacity has been compromised due to vacant positions which is impacted by salaries and funding levels. At this time, the program is beginning to see a more positive trend in employee recruitment and retention. Another factor that has impacted utilization is the turn over of workforce amongst provider agencies and DCF. The EDT is having to educate these new workers about EDT level of care.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

ANSWER: This trend does not reflect a descreased need for EDT. Extended Day Treatment successfully helps children to live in the community and not require higher levels of care. The Regional Advisory Council is planning a region-wide meeting that will orient new employees to service types and how to refer.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 86 | 94 |
| Clients receiving evaluation only | 8 | 10 |
| Clients receiving services | 100 | 83 |
| Clients completing treatment plan | 88 | 73 |

this number is higher due to the total number of clients in program during this time. (i.e clients who were already in the program prior to start of FY)

**Narrative explanation for the reasons that referrals go unserved**

(This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

ANSWER: Children referred to the Extended Day Treatment program tend not to be admitted due the child's needs not adequately assessed by the referral source and the child was assessed by the EDT as needing a higher or lower level of care. In the aftermath of COVID some families were not admitted immediately and the impact of them having to wait for admission compromised engagement.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 89 | 75 |
| [Cases] eligible for treatment | 82 | 64 |
| [Cases] achieving treatment goal | 75 | 56 |
| Percent achieving contracted treatment expectation: Actual | 96% discharged to equal or LLOC | 95% discharged to equal or LLOC |
| Percent achieving contracted treatment expectation: Contract | 80% will not require HLOC | 80% will not require HLOC |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **2,117,614** | **1,897,771** |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 1,031,780 | 701,441 | 918,406 | 868,701 |
| Benefits | 5200 | 288,589 | 195,230 | 256,878 | 197,658 |
| Overhead | 7100 | 296,320 | 252,007 | 372,971 | 501,163 |
| Training | 5905 | 1,700 | 2,931 | 7,153 | 2,797 |
| | **Total** | 1,618,389 | 1,151,609 | 1,555,408 | 1,570,319 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Wheeler - Extended Day Treatment Middletown | | |
|---|---|---|
| Geographic Location Covered: Chester, Cromwell, Deep River, Durham, East Haddam, East Hampton, Essex, Guilford, Haddam, | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | Yes |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 42 | 17 | 40 | 42 | 30 | 71 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Staffing vacancies, lack of referrals despite outreach

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 24 | 38 |
| Clients receiving evaluation only | 7 | 8 |
| Clients receiving services | 17 | 30 |
| Clients completing treatment plan | 3 | 16 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 24 | 38 |
| [Cases] eligible for treatment | 18 | 30 |
| [Cases] achieving treatment goal | 3 | 16 |
| Percent achieving contracted treatment expectation: Actual | 16% | 53% |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **391,857** | **401,849** |
| Total Program expenditures | 490,430 | 402,361 |
| Total Clients Served | 17.00 | 30.00 |
| Expenditures per [case] | 28,848.82 | 13,412.04 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 345,790 | 270,974 | 375,219 | 196,219 |
| Benefits | 5200 | 71,915 | 60,355 | 69,775 | 39,954 |
| Overhead<br>*Funding for SFY23 from DCF was $391,857 - service fees of $189,752 were used to cover the remaining budgeted expenditures<br><br>*Funding for SFY24 from DCF was $401,849 - service fees of $212,696 were used to cover the remaining budgeted expenditures | All others | (27,403) | 158,429 | (44,890) | 165,553 |
| Training | 5905 | 1,555 | 673 | 1,745 | 635 |
| | **Total** | 391,857 | 490,430 | 401,849 | 402,361 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| Program Name: Wheeler - Extended Day Treatment Plainville | | |
|---|---|---|
| Geographic Location Covered: Avon, Berlin, Bristol, Burlington, Canton, Farmington, New Britain, Newington, Plainville, Plymouth, | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | Yes |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 88 | 33 | 37.5 | 88 | 30 | 34 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Staffing vacancies

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 45 | 38 |
| Clients receiving evaluation only | 12 | 8 |
| Clients receiving services | 33 | 30 |
| Clients completing treatment plan | 16 | 16 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria):

Staffing vacancies, legal guardians no longer interested in services/have other services in place, client refusal

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 45 | 38 |
| [Cases] eligible for treatment | 40 | 32 |
| [Cases] achieving treatment goal | 16 | 16 |
| Percent achieving contracted treatment expectation: Actual | 40% | 50% |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 818,305 | **839,172** |
| Total Program expenditures | 860,254 | 904,570 |
| Total Clients Served | 33 | 30 |
| Expenditures per [case] | 26,068.30 | 30,152.34 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | | |
|---|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures | |
| Salaries | 5101 | 702,142 | 418,604 | 602,060 | 511,346 | |
| Benefits | 5200 | 224,605 | 104,346 | 155,600 | 128,716 | |
| Overhead | All others | (112,668) | 335,085 | 79,037 | 263,163 | *Funding for SFY23 from DCF was $818,305 - service fees of $514,249 were used to cover the remaining budgeted expenditures |
| Training | 5905 | 4,225 | 2,218 | 2,475 | 1,346 | |
| | **Total** | 818,305 | 860,254 | 839,172 | 904,570 | |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| | | |
|---|---|---|
| **Program Name: The Village - Extended Day Treatment-Hartford** | | |
| **Geographic Location Covered: Transportation provided to/from: Hartford, West Hartford, Bloomfield, Windsor. Surrounding towns serv** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **Yes** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **47** | **39** | **82.98%** | **47** | **21** | **44.68%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Workforce challenges resulted in low utilization. Sign-on bonuses and salary increases were implemented to promote recruitment and retention.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 54 | 60 |
| Clients receiving evaluation only | 2 | 0 |
| Clients receiving services | 37 | 21 |
| Clients completing treatment plan | 37 | 21 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Staff vacancies led to decrease in clients served. Referral numbers are lower than average since referral sources sought other services due to lengthy waitlist.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 37 | 21 |
| [Cases] eligible for treatment | 37 | 21 |
| [Cases] achieving treatment goal | 31 | 15 |
| Percent achieving contracted treatment expectation: Actual | 74% | 67% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **910,238** | **933,449** |
| Total Program expenditures | 1,017,675 | 966,043 |
| Total Clients Served | 39 | 21 |
| Expenditures per [case] | 26,094.24 | 46,002.06 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 901,150 | 603,911 | 834,110 | 545,897 |
| Benefits | 5200 | 209,337 | 139,575 | 203,690 | 131,876 |
| Overhead | 7150 | 180,531 | 130,534 | 193,376 | 129,233 |
| Training | 5905 | 7,000 | 8,400 | 7,000 | 2,962 |
| | **Total** | 1,298,018 | 882,419 | 1,238,176 | 809,968 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: The Village - Extended Day Treatment-Manchester | | |
|---|---|---|
| Geographic Location Covered: Transportation provided to/from: Manchester, East Hartford, Vernon. Surrounding towns served if transportation is provided. | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **Yes** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **16** | **26** | **162.50%** | **16** | **23** | **143.75%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Program utilization maintained throughout the last two fiscal years.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 38 | 42 |
| Clients receiving evaluation only | 1 | 0 |
| Clients receiving services | 25 | 23 |
| Clients completing treatment plan | 25 | 23 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
At times waitlist became lengthy due to program being at capacity. Alternative services sought for clients with high service needs.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 25 | 23 |
| [Cases] eligible for treatment | 25 | 23 |
| [Cases] achieving treatment goal | 16 | 12 |
| Percent achieving contracted treatment expectation: Actual | 68% | 63% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **278,194** | **285,288** |
| Total Program expenditures | 439,121 | 466,470 |
| Total Clients Served | 25 | 23 |
| Expenditures per [case] | 17,564.82 | 20,281.28 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 264,948 | 242,461 | 302,710 | 262,415 |
| Benefits | 5200 | 61,547 | 56,647 | 73,922 | 64,370 |
| Overhead | 7150 | 59,196 | 55,041 | 73,058 | 62,602 |
| Training | 5905 | 1,500 | 896 | 1,500 | 608 |
| | **Total** | 387,191 | 355,045 | 451,189 | 389,996 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: The Village Extended Day Treatment-Meriden & Middletown** | | |
| **Geographic Location Covered: Transportation provided to/from: Middletown, Cromwell, Portland, Meriden, Wallingford. Surrounding towns served if transportation is provided.** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **Yes** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **32** | **35** | **109.38%** | **32** | **26** | **81.25%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:
Workforce challenges resulted in low utilization. Sign-on bonuses and salary increases were implemented to promote recruitment and retention.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 35 | 58 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 35 | 26 |
| Clients completing treatment plan | 35 | 26 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Staff vacancies led to decrease in clients served. Referral numbers are lower than average since referral sources sought other services due to lengthy waitlist.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 35 | 26 |
| [Cases] eligible for treatment | 35 | 26 |
| [Cases] achieving treatment goal | 32 | 24 |
| Percent achieving contracted treatment expectation: Actual | 85% | 72% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **612,807** | **628,434** |
| Total Program expenditures | 832,008 | 828,694 |
| Total Clients Served | 35 | 26 |
| Expenditures per [case] | 23,771.66 | 31,872.86 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 591,438 | 421,053 | 678,911 | 423,312 |
| Benefits | 5200 | 137,391 | 93,400 | 165,790 | 96,979 |
| Overhead | 7150 | 131,479 | 105,470 | 164,664 | 111,670 |
| Training | 5905 | 4,000 | 1,389 | 4,000 | 604 |
| | **Total** | 864,308 | 621,312 | 1,013,364 | 632,566 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Health Resources - Family Based Recovery | | |
|---|---|---|
| Geographic Location Covered: Norwich, Middletown, Willimantic | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 48 | 43 | 90% | 48 | 42 | 88% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: We were notified in December 2023 that FBR would be reprocured. There was a delay in the release of the RFP, however referrals decreased from the department and then were stopped completely once the RFP was released. This impacted the utilization in FY24.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: There is not a decreased need for the service type. Once we received notice of reprocurement, given the delay of release of the RFP that caused uncertainty with program stability, we had difficulty retaining staff in the program in the later half of FY24.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 28 | 21 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 43 | 42 |
| Clients completing treatment plan | 22 | 15 |

**Narrative explanation for the reasons that referrals go unserved**

Referrals do not go unserved in this program given the high acuity and risk associated with the population referred. CHR program management reported program openings weekly to regional DCF staff; we were fully staffed and could have served more families had the department referred more families.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 29 | 24 |
| [Cases] eligible for treatment | 29 | 24 |
| [Cases] achieving treatment goal | 9 | 8 |
| Percent achieving contracted treatment expectation: Actual | 41% | 53% |
| Percent achieving contracted treatment expectation: Contract | 75% | 75% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $776,307 | $940,571 |
| Total Program expenditures | $778,736 | $835,685 |
| Total Clients Served | 43 | 42 |
| Expenditures per [case] | $18,110 | $19,897 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $455,323 | $449,207 | $551,256 | $451,378 |
| Benefits | 5200 | $122,524 | $126,879 | $148,578 | $126,068 |
| Overhead | 7000 | $110,073 | $105,514 | $137,290 | $125,003 |
| Training | 5905 | $762 | $42 | $700 | $47 |
| | **Total** | $688,682 | $681,642 | $837,824 | $702,496 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Family Centered Services - Family Based Recovery** | | |
| **Geographic Location Covered: DCF Region 2** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **24** | **19** | **79%** | **24** | **16** | **67%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Staff turnover caused some issues with meeting contracted numbers.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 19 | 16 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 19 | 16 |
| Clients completing treatment plan | 11 | 13 |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 94% | 81% |
| [Cases] eligible for treatment | 19 | 16 |
| [Cases] achieving treatment goal | 58% | 81% |
| Percent achieving contracted treatment expectation: Actual | 58% | 81% |
| Percent achieving contracted treatment expectation: Contract | 58% | 81% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **88,567** | **71,199** |
| Total Program expenditures | 351,735 | 401,334 |
| Total Clients Served | 19 | 16 |
| Expenditures per [case] | 18,512.37 | 25,083.36 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 214,387.94 | 208,408.24 | 237,548.25 | 232,145.63 |
| Benefits | 5200 | 42,116.82 | 24,963.52 | 41,219.74 | 34,175.43 |
| Overhead | 7000 | 58,922.24 | 66,530.38 | 45,226.10 | 50,226.10 |
| Training | 5905 | 1,400.00 | 962.12 | 1,000.00 | 96.43 |
| | **Total** | 316,827.00 | 300,864.26 | 324,994.09 | 316,643.59 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: UFCS -** FBR | | |
| **Geographic Location Covered:** Region 3 DCF area office, primarily the Norwich area office and Middletown shoreline, back up for Middletown | | |
| **DCF open case needed for referral or admission?** | N | |
| **Is Program 3rd Party Billable?** | N | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **24** | **23** | **96%** | **24** | **23** | **96%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Low utilization of referrals at times, we accepted almost all referrals that came into the program

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Referrals were stopped in June 2024 as we started the RFP process

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 18 | 19 |
| Clients receiving evaluation only | 0 | 2 |
| Clients receiving services | 23 | 23 |
| Clients completing treatment plan | 8 | 9 |

**Narrative explanation for the reasons that referrals go unserved**

In FY 2023 there were 2 referrals that were not opened and in FY 2024 there were 2 referrals that did not open, reasons for that could be a family refusing the services or a HLOC determined to be needed at the meeting of the family. In the cases in which a family needed a HLOC they could always be referred to FBR if that was still determined to be the need of a family.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 23 | 25 |
| [Cases] eligible for treatment | 23 | 23 |
| [Cases] achieving treatment goal | 8 | 9 |
| Percent achieving contracted treatment expectation: Actual | 35% | 39% |
| Percent achieving contracted treatment expectation: Contract | 33% | 38% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **358109** | **367241** |
| Total Program expenditures | 407271.12 | 399306.29 |
| Total Clients Served | 23 | 23 |
| Expenditures per [case] | 17,707.44 | 17,361.14 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 235689.254 | 238046.92 | 254613.39 | 238929.72 |
| Benefits | | 46473.463 | 50309.2 | 64731.23 | 66015.18 |
| Overhead | | 74946.283 | 118229.82 | 47396.38 | 93806.09 |
| Training | | 1000 | 685.18 | 500 | 555.3 |
| | **Total** | 358109 | 407271.12 | 367241 | 399306.29 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: The Village - Family Based Recovery | | |
|---|---|---|
| Geographic Location Covered: Hartford, Bloomfield, West Hartford, Windsor, Manchester, Andover, Bolton, East Granby, East Hartford, East Windsor, Ellington, Enfield, Glastonbury, Granby, Hebron, Marlborough, Somers, South Windosr, Stafford, Suffield, Tolland, Vernon, Windsor | | |
| **DCF open case needed for referral or admission?** | **Yes** | |
| **Is Program 3rd Party Billable?** | **No** | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 72 | 59 | 82% | 72 | 62 | 86% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

We are dependent on DCF referrals through RRGs. We also had several clients with longer treatment episodes (greater than six months)

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 43 | 35 |
| Clients receiving evaluation only | 8 | 7 |
| Clients receiving services | 35 | 28 |
| Clients completing treatment plan | 47 | 48 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

All clients were served or deemed eval only. We did not have vacancy issues that impacted service delivery.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 43 | 35 |
| [Cases] eligible for treatment | 51 | 55 |
| [Cases] achieving treatment goal | 14 | 20 |
| Percent achieving contracted treatment expectation: Actual | 70.00% | 76.92% |
| Percent achieving contracted treatment expectation: Contract | 75% | 75% |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 1,074,749 | 1,102,155 |
| Total Program expenditures | 1,173,828 | 1,175,107 |
| Total Clients Served | 59 | 62 |
| Expenditures per [case] | 19,895.39 | 18,953.34 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 708,297 | 705,286 | 737,087 | 677,071 |
| Benefits | 5200 | 164,537 | 164,968 | 179,997 | 165,416 |
| Overhead | 7150 | 154,696 | 147,026 | 162,635 | 157,590 |
| Training | 5905 | - | - | - | - |
| | **Total** | 1,027,530 | 1,017,281 | 1,079,719 | 1,000,078 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Clifford Beers - Fatherhood Engagement Services | | |
|---|---|---|
| Geographic Location Covered: New Haven, Milford | | |
| DCF open case needed for referral or admission? | (y/n) | |
| Is Program 3rd Party Billable? | (y/n) | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 48 | 70 | 145.83% | 48 | 56 | 116.67% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 | |
|---|---|---|---|
| Referrals | 85 | 111 | |
| Clients receiving evaluation only | 0 | 13 | only eval only clients found are in FY 25 |
| Clients receiving services | 70 | 56 | |
| Clients completing treatment plan | 40 | 35 | |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A | |
| [Cases] eligible for treatment | 70 | 56 | |
| [Cases] achieving treatment goal | 38 | 35 | *Includes partial |
| Percent achieving contracted treatment expectation: Actual | 95% | 70.00% | *Includes partial, and is a percentage of eligible discharges |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $82,584.86 | $116,449.13 |
| Total Program expenditures | $106,437.15 | $155,099.41 |
| Total Clients Served | 70 | 56 |
| Expenditures per [case] | $1,520.53 | $2,769.63 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 82,584.86 | 60,180.02 | 116,449.13 | 90,917.51 |
| Benefits | | | 12,827.52 | | 18,899.39 |
| Overhead | | | 33,429.61 | | 44,784.51 |
| Training | | | | | 498.00 |
| | Total | 82,584.86 | 106,437.15 | 116,449.13 | 155,099.41 |

| Are factors below included in | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: | CRJ - Family ReEntry - Fatherhood Engagement Services - Bridgeport | |
|---|---|---|
| Geographic Location Covered: | Greater Bridgeport Area | |
| DCF open case needed for referral or | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | $ 24.00 | $ 30.00 | 125.0% | $ 24.00 | $ 30.00 | 125.0% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 31 | 30 |
| Clients receiving evaluation only | | |
| Clients receiving services | 30 | 30 |
| Clients completing treatment plan | 30 | |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 30 | 30 |
| [Cases] eligible for treatment | 30 | 30 |
| [Cases] achieving treatment goal | 28 | 29 |
| Percent achieving contracted treatment expectation: Actual | 93% | 97% |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $ 92,086 | $ 94,434 |
| Total Program expenditures | $ 82,741 | $ 88,225 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 58,193.48 | 55,561.00 | 60,192.69 | 54,974.02 |
| Benefits | 5200 | 17,458.05 | 12,402.00 | 18,057.81 | 13,263.32 |
| Overhead | 7100 | 8,477.72 | 11,559.00 | 5,123.72 | 14,205.55 |
| Training | | | | | |
| | Total | 84,129.25 | 79,522.00 | 83,374.22 | 82,442.89 |

| Are factors below included in | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | n | n |
| Data collection | n | n |
| Quality assurance expectations | n | n |

| Program Name: Wellmore - Fatherhood Engagement Services | | |
|---|---|---|
| Geographic Location Covered: Region 5 | | |
| DCF open case needed for referral or | yes | |
| Is Program 3rd Party Billable? | no | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. | Contracted | Actual | Actual vs. |
| | 49 | 55 | 112% | 49 | 38 | 78% |

For the majority of both fiscal years evaluated, Wellmore's Fatherhood program only had one full-time employee providing services to families. There were several offers made and accepted, but then rescinded or unable to continue due to challenges with onboarding or background clearance. We are currently fully staffed as of 7/1/24.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 45 | 34 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 21 | 25 |
| Clients completing treatment plan | 21 | 25 |

We only had one full-time employee working within the Fatherhood program during both fiscal years. Data associated with these charts is pulling ONLY those clients who were admitted and discharged during each fiscal year. Many clients have cases that cross the fiscal year end date, starting in one first year and closing in another. The length of stay for Fatherhood averages 4-6 months. The top two reasons for a referral not transitioning to care were that the family withdrew (did not wish to engage in service) (FY23=11%, FY24=6%) or that the family was unavailable for outreach to initiate service (FY23=13%, FY24=28%).

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 21 | 25 |
| [Cases] eligible for treatment | 5 | 6 |
| [Cases] achieving treatment goal | 5 | 6 |
| Percent achieving contracted treatment | 100% | 100% |
| Percent achieving contracted treatment | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$230,714** | **$231,991** |
| Total Program expenditures | $196,808 | $196,393 |
| Total Clients Served | 55 | 38 |
| Expenditures per [case] | $3,578.32 | $5,168.23 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $140,648 | $105,371 | $149,905 | $102,230 |
| Benefits | 5200 | $33,573 | $28,994 | $34,981 | $33,174 |
| Overhead | 5400 to 5909, 5990 to 7150 | $56,439 | $61,826 | $46,361 | $60,197 |
| Training | 5910 | $54 | $616 | $744 | $792 |
| | **Total** | $230,714 | $196,808 | $231,991 | $196,393 |

| Are factors below included in | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: The Village - Fatherhood Engagement Services | | | | | | |
|---|---|---|---|---|---|---|
| Geographic Location Covered: DCF Region 4- Hartford & Manchester offices | | | | | | |
| DCF open case needed for referral or | (y/n) | | | | | |
| Is Program 3rd Party Billable? | (y/n) | N | | | | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. | Contracted | Actual | Actual vs. |
| | 50 | 78 | 156% | 50 | 81 | 162% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 74 | 77 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 61 | 50 |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Transient, housing instability, inappropriate referral from DCF, client overrun by multiple services, criminal charges, outside of catchment, father declines before formal consent to engage services, case is transferred, others.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 78 | 81 |
| [Cases] eligible for treatment | 78 | 81 |
| [Cases] achieving treatment goal | 55 | 38 |
| Percent achieving contracted treatment expectation: Actual | 71% | 47% |
| Percent achieving contracted treatment expectation: Contract | 70% | 70% |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **197,328** | **202,360** |
| Total Program expenditures | 223,447 | 213,184 |
| Total Clients Served | 78 | 81 |
| Expenditures per [case] | 2,864.71 | 2,631.90 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 176,354.54 | 119,134.48 | 133,591.06 | 104,788.82 |
| Benefits | 5200 | 40,967.16 | 28,058.86 | 32,622.94 | 25,914.15 |
| Overhead | 7150 | 36,259.46 | 30,348.20 | 34,090.55 | 28,602.24 |
| Training | 5905 | 5,250.00 | 3,699.51 | 2,391.00 | 2,120.00 |
| | **Total** | 258,831.16 | 181,241.05 | 202,695.55 | 161,425.21 |

| Are factors below included in | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: CRJ - Family ReEntry - Fatherhood DOC Statewide | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | y | |
| Is Program 3rd Party Billable? | n | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | $ 50.00 | $ 13.00 | 26.0% | $ 50.00 | $ 37.00 | 74.0% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: For the FSR program that combines FES services with the literacy program, in SFY2023, there were launch delays due to COVID restrictions in the facilities. Most of that fiscal year was spent in planning and implementation efforts. in SFY2024, the program launched and there were about 100 clients who engaged in the classes, but were not included in the number because they either did not or could not, due to complications with engagement with their children, take part in the literacy program. For the statewide portion of this contract, in a recent conversation with the Director of Fatherhood programs at DCF, he stated that he is working diligently to bring referrals up as there have been a number of factors that affected the underutilization. He stated that COVID caused operations both in DOC and the staffing awareness to remain stagnant and put up barriers. He stated there were new staff, unaware of the program. He also stated that they confused this program with an FSR program that is not the same contract. In addition to this, the clients who are in the Department of Corrections can often be transferred to another facility, released early, and placed into a halfway house that requires special permission to serve the client in the

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 13 | 37 |
| Clients receiving evaluation only | | |
| Clients receiving services | 12 | 37 |
| | | |

**Narrative explanation for the reasons that referrals go unserved**

include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 12 | 37 |
| [Cases] eligible for treatment | 12 | 37 |
| [Cases] achieving treatment goal | 10 | 37 |
| Percent achieving contracted treatment expectation: Actual | 83% | 100% |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $ 201,302.00 | $ 236,907.00 |
| Total Program expenditures | $ 201,302.00 | $ 194,755.28 |
| Total Clients Served | 12 | 37 |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 123,907.55 | $ 132,406.14 | $ 118,400.17 | $ 115,196.31 |
| Benefits | 5200 | $ 37,172.26 | $ 32,908.74 | $ 35,520.05 | $ 28,288.32 |
| Overhead | 7100 | $ 23,862.07 | $ 18,868.00 | $ 20,000.00 | $ 32,569.79 |
| Training | | | | | |
| | Total | $ 184,941.88 | $ 184,182.88 | $ 173,920.23 | $ 176,054.42 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | n | n |
| Data collection | n | n |
| Quality assurance expectations | n | n |

| | | |
|---|---|---|
| **Program Name: First Episode Psychosis** | | |
| **Geographic Location Covered: Statewide** | | |
| **DCF open case needed for referral or admission?** | **n** | |
| **Is Program 3rd Party Billable?** | **n** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **N/A** | **179** | **N/A** | **N/A** | **181** | **N/A** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

There is no contract capacity for this program. Actual capacity is based on the number identified as having a potential first episode psychosis and then the actual number eligible and interested in receiving services.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 179 | 181 |
| Clients receiving evaluation only | 15 | 18 |
| Clients receiving services | 164 | 163 |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Carelon provides early identification of FEP, rapid referral to evidence-based and appropriate services, and effective engagement and coordination of care. Evaluation only members are those who are either already connected or not interested in services. Carelon is not the direct service provider for treatment or clinical services for these members so there are no treatment goals created or evaluated.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **328,453** | **379,403** |
| Total Program expenditures | 220,503 | 274,403 |
| Total Clients Served | 179 | 181 |
| Expenditures per [case] | 1231.860335 | 1516.037778 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 178,946 | 163,207 | 174,834 | 158,328 |
| Benefits | 5200 | 48,401 | 44,339 | 47,221 | 43,638 |
| Overhead | 7150 | 57,000 | 57,000 | 57,002 | 57,002 |
| Training | 5905 | - | - | 100 | 117 |
| | **Total** | 284,346 | 264,546 | 279,157 | 259,085 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | N | N |

| Program Name: FCAid - Foster Care and Adoptive Family Support Groups | | |
|---|---|---|
| Geographic Location Covered: Torrington | | |
| DCF open case needed for referral or admission? | (y/n) | y |
| Is Program 3rd Party Billable? | (y/n) | n |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 20 | 15 | 75% | 20 | 18 | 90% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization*: This support group returned to in-person in 2023 following virtual for COVID. It continues to grow back to capacity.*

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | n/a | n/a |
| Clients receiving evaluation only | n/a | n/a |
| Clients receiving services | 15/grp | 18/grp |
| Clients completing treatment plan | n/a | n/a |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

this is an ongoing support group; no referral is needed

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 0 | 0 |
| [Cases] eligible for treatment | 0 | 0 |
| [Cases] achieving treatment goal | 0 | 0 |
| Percent achieving contracted treatment expectation: Actual | 0 | 0 |
| Percent achieving contracted treatment expectation: Contract | 0 | 0 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 | |
|---|---|---|---|
| Total Program allocations | **10203** | **10463** | **Amt for both Torr & Wtby** |
| Total Program expenditures | 6095 | 4190 | |
| Total Clients Served | 15/grp | 18/grp | |
| Expenditures per [case] | 406.33 | 232.78 | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 7564 | 2883 | 7564 | 2629 |
| Benefits | 5200 | 818 | 381 | 818 | 322 |
| Overhead | 7100 | 299 | 186 | 303 | 158 |
| Training | 5905 | 0 | 0 | 0 | 0 |
| | **Total** | 8681 | 3450 | 8685 | 3109 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name:FCAid - Foster Care and Adoptive Family Support Groups | | |
|---|---|---|
| Geographic Location Covered: Waterbury | | |
| DCF open case needed for referral or admission? | (y/n) | y |
| Is Program 3rd Party Billable? | (y/n) | n |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 20/grp | 0 | 0 | 20/grp | 0 | 0 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: This support group went virtual for COVID and has remained as such, thus no care for the children is needed
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | n/a | n/a |
| Clients receiving evaluation only | n/a | n/a |
| Clients receiving services | n/a | n/a |
| Clients completing treatment plan | n/a | n/a |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) this is an ongoing support group; no referral is needed

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|

| | | |
|---|---|---|
| [Cases] receiving initial assessment | 0 | 0 |
| [Cases] eligible for treatment | 0 | 0 |
| [Cases] achieving treatment goal | 0 | 0 |
| Percent achieving contracted treatment expectation: Actual | 0 | 0 |
| Percent achieving contracted treatment expectation: Contract | 0 | 0 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| **Total Program Expenditures** | **SFY 2023** | **SFY2024** | |
|---|---|---|---|
| Total Program allocations | **0** | **0** | **See Torr** |
| Total Program expenditures | | | |
| Total Clients Served | n/a | n/a | |
| Expenditures per [case] | 0 | 0 | |

| **DCF Funding and Expenditures by Account** | | **SFY 2023** | | **SFY2024** | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | | | | |
| Benefits | 5200 | | | | |
| Overhead | 7100 | | | | |
| Training | 5905 | | | | |
| | **Total** | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Health Resources - Functional Family Therapy | | |
|---|---|---|
| Geographic Location Covered: Willimantic, Hartford, Manchester | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 153 | 274 | 179% | 153 | 209 | 137% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: N/A

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: In FY24, the program faced challenges with staff retention and recruitment, in part due to the expansive geographic area it covers.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 128 | 57 |
| Clients receiving evaluation only | 6 | 9 |
| Clients receiving services | 274 | 209 |
| Clients completing treatment plan | 116 | 59 |

**Narrative explanation for the reasons that referrals go unserved**

The program has faced staffing shortages in FY23 and FY24. In FY24, the program was reduced to just one staff member and a supervisor who was managing a full caseload. Recruitment proved difficult, leading to longer wait times for services. Additionally, hiring needs to be timed with when model specific training is being offered, which at times leads to delays in staff being able to begin working with clients. As a result, families either utilized other programs or had to wait until staffing levels improved to be served. Staffing is more stable in FY25.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 121 | 65 |
| [Cases] eligible for treatment | 115 | 56 |
| [Cases] achieving treatment goal | 64 | 37 |
| Percent achieving contracted treatment expectation: Actual | 58.0% | 74.0% |
| Percent achieving contracted treatment expectation: Contract | 70% | 70% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $572,679 | $586,454 |
| Total Program expenditures | $645,382 | $423,638 |
| Total Clients Served | 274 | 209 |
| Expenditures per [case] | $2,355 | $2,027 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $410,758 | $400,245 | $419,530 | $258,666 |
| Benefits | 5200 | $106,181 | $107,625 | $102,980 | $65,056 |
| Overhead | 7000 | $95,596 | $87,081 | $95,542 | $64,859 |
| Training | 5905 | $12,100 | $9,853 | $8,000 | $0 |
| | Total | $624,636 | $604,804 | $626,052 | $388,581 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wellmore - Functional Family Therapy** | | |
| **Geographic Location Covered: Region 5, plus Meriden area and New Britain/Farmington area** | | |
| **DCF open case needed for referral or admission?** | **no** | |
| **Is Program 3rd Party Billable?** | **yes** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 99 | 27 | 27% | 99 | 44 | 44% |

Wellmore's FFT program had one clinician throughout FY23 and only successfully added a second clinician midway through FY24. We have made offers that were quite generous and creative without success prior to mid FY24. Our HR department had this program as top-priority throughout, with creative framing of offers, generous sign-on bonuses and retention offers. The workforce pool was quite low for this period of time and many indicated an unwillingness to do home-based work.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 34 | 61 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 17 | 36 |
| Clients completing treatment plan | 17 | 36 |

Data associated with these charts is pulling ONLY those clients who were admitted and discharged during each fiscal year. Many clients have cases that cross the fiscal year end date, starting in one first year and closing in another. For clients served by evidence based practices like FFT, this is quite common as the length of stay for FFT is between 4-6 months.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 17 | 36 |
| [Cases] eligible for treatment | 8 | 10 |
| [Cases] achieving treatment goal | 6 | 8 |
| Percent achieving contracted treatment expectation: Actual | 75% | 80% |
| Percent achieving contracted treatment expectation: Contract | 75% | 75% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$384,438** | **$522,545** |
| Total Program expenditures | $253,582 | $334,747 |
| Total Clients Served | $27 | $44 |
| Expenditures per [case] | $9,391.92 | $7,607.89 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $233,513 | $117,501 | $261,827 | $170,653 |
| Benefits | 5200 | $55,379 | $31,607 | $60,988 | $44,256 |
| Overhead | 5400 to 5909; 5990 to 7150 | $78,712 | $94,856 | $191,655 | $114,865 |
| Training | 5910 | $16,835 | $9,618 | $8,075 | $4,973 |
| | **Total** | $384,438 | $253,582 | $522,545 | $334,747 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Boys & Girls Village - Functional Family Therapy- Foster Care | | |
|---|---|---|
| Geographic Location Covered: MILFORD AREA OFFICE | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 48 | 52 | 108% | 48 | 56 | 117% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 52 | 56 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 52 | 56 |
| Clients completing treatment plan | | |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 34 | 48 |
| [Cases] eligible for treatment | 34 | 48 |
| [Cases] achieving treatment goal | 22 | 27 |
| Percent achieving contracted treatment expectation: Actual | 65% | 56% |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 874,795 | $ 1,271,327 |
| Total Clients Served | 42 | 52 |
| Expenditures per [case] | $ 20,828.45 | $ 24,448.60 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 522,863 | $ 503,589 | $ 822,851 | $ 749,873 |
| Benefits | 5200 | $ 125,487 | $ 95,290 | $ 230,398 | $ 164,653 |
| Overhead | | $ 342,430 | $ 275,916 | $ 259,710 | $ 356,801 |
| Training | 5905 | $ - | $ - | $ - | $ - |
| | **Total** | $ 990,780 | $ 874,795 | $ 1,312,959 | $ 1,271,327 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Health Resources - Functional Family Therapy - Foster Care | | |
|---|---|---|
| Geographic Location Covered: Willimantic | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 36 | 26 | 72% | 36 | 25 | 69% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: The decline or low utilization can be attributed to several factors. In FY23, the program was in its startup phase, and many families were transitioning from the previous treatment model to FFT FC. Some families chose to leave the program, while others were lost due to a geographical redesign. In FY24, more youth were referred; however, due to limited placement options, some services were delayed, and alternative resources were utilized. Additionally, some youth were not deemed appropriate for this level of care.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: When evaluating whether this trend reflects a decreased need for the service or workforce limitations, it is important to note that this area has historically faced challenges due to increased risk factors related to social determinants of health. There continues

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 27 | 26 |
| Clients receiving evaluation only | 1 | 1 |
| Clients receiving services | 26 | 25 |
| Clients completing treatment plan | 19 | 14 |

**Narrative explanation for the reasons that referrals go unserved**

Referrals may have gone unserved for several reasons, including staffing vacancies and challenges in hiring for specific positions, such as a bilingual therapist or Family Support Specialist (FSS). One team position remained vacant for both fiscal years, and recruiting staff in the geographical area for this program proved difficult. Additionally, requests to adjust positions through DCF were denied. While referrals deemed appropriate were accepted and serviced, some youth experienced delays in placement due to a lack of available resources and the unwillingness of foster homes to accommodate the level of acuity presented by certain youth.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 25 | 9 |
| [Cases] eligible for treatment | 26 | 25 |
| [Cases] achieving treatment goal | 14 | 8 |
| Percent achieving contracted treatment expectation: Actual | 78% | 62% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $797,911 | $1,065,939 |
| Total Program expenditures | $676,232 | $959,809 |
| Total Clients Served | 26 | 25 |
| Expenditures per [case] | $26,009 | $38,392 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $472,485 | $403,146 | $655,728 | $477,334 |
| Benefits | 5200 | $127,699 | $105,055 | $164,078 | $132,360 |
| Overhead | 7000 | $97,965 | $90,579 | $177,270 | $143,840 |
| Training | 5905 | $457 | $214 | $500 | $460 |
| | **Total** | $698,606 | $598,994 | $997,577 | $753,994 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: FCAid - Functional Family Therapy - Foster Care** | | |
| **Geographic Location Covered: Danbury** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **no** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **24** | **30** | **125%** | **24** | **31** | **129%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 24 | 21 |
| Clients receiving evaluation only | 3 | 1 |
| Clients receiving services | 30 | 29 |
| Clients completing treatment plan | 24 | 21 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
*Unserved reasons include 96hr holds that were reunified and clients not placed in Foster Care.*

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 27 | 22 |
| [Cases] eligible for treatment | 30 | 29 |
| [Cases] achieving treatment goal | 24 | 21 |
| Percent achieving contracted treatment expectation: Actual | 80% | 72% |
| Percent achieving contracted treatment expectation: Contract | 100% | 88% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **591731** | **843299** |
| Total Program expenditures | 715759.62 | 901148 |
| Total Clients Served | 30 | 29 |
| Expenditures per [case] | 23,858.65 | 31,074.07 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 393718.92 | 428252.83 | 543502 | 580401 |
| Benefits | 5200 | 89499.75 | 105285.09 | 129480 | 113335 |
| Overhead | 7100 | 44227.99 | 42883.85 | 58025 | 57164 |
| Training | 5905 | 2500 | 10093.94 | 5000 | 34 |
| | **Total** | 529946.66 | 586515.71 | 736007 | 750934 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: FCAid - Functional Family Therapy - Foster Care** | | |
| **Geographic Location Covered: Torrington** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **ni** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **36** | **35** | **97%** | **36** | **41** | **114%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 35 | 41 |
| Clients receiving evaluation only | 4 | 5 |
| Clients receiving services | 31 | 36 |
| Clients completing treatment plan | 19 | 20 |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 31 | 38 |
| [Cases] eligible for treatment | 31 | 36 |
| [Cases] achieving treatment goal | 27 | 15 |
| Percent achieving contracted treatment expectation: Actual | 87% | 42% |
| Percent achieving contracted treatment expectation: Contract | 75% | 42% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **738660** | **844182** |
| Total Program expenditures | 651917 | 783291 |
| Total Clients Served | 31 | 36 |
| Expenditures per [case] | 21,029.58 | 21,758.08 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | | 355013 | | 465410 |
| Benefits | 5200 | | 74850 | | 77971 |
| Overhead | 7100 | | 64604 | | 77623 |
| Training | 5905 | | 372 | | 278 |
| | **Total** | 0 | 494839 | 0 | 621282 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Klingberg - FFT- TFC Meriden | | |
|---|---|---|
| Geographic Location Covered: Meriden | | |
| DCF open case needed for referral or admission? | yes | |
| Is Program 3rd Party Billable? | no | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 12 | 12 | 100% | 12 | 12 | 100% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: FFT Meriden would have been utilized more if there were more foster homes available to place youth.

| Referrals to Program (cases) | SFY2023 | 6 |
|---|---|---|
| Referrals | 14 | 6 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 12 | 11 |
| Clients completing treatment plan | 3 | 5 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) When youth were not able to be matched to a foster home Child specific recruitment started for these youth. Treatment only started for these youth when they were matched or placed in a family. A family was identified for one youth who refused to be placed. Many youth were referred without permanency resources which means youth stay in care in their foster homes longer than was anticipated without achieving permanency.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 12 | 12 |
| [Cases] eligible for treatment | 12 | 12 |
| [Cases] achieving treatment goal | 3 | 5 |
| Percent achieving contracted treatment expectation: Actual | 25% | 42% |
| Percent achieving contracted treatment expectation: Contract | 33% | 56% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **100.00%** | **100.00%** |
| Total Program expenditures | $292,033 | $270,230 |
| Total Clients Served | 12 | 12 |
| Expenditures per [case] | $24,336 | $22,519 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $163,169 | $183,683 | $276,106 | $151,890 |
| Benefits | 5200 | $54,384 | $46,939 | $88,377 | $37,314 |
| Other Expense | 5900 | $38,475 | $21,666 | $14,658 | $28,794 |
| Overhead | 5300+7100 | $50,249 | $39,745 | $44,108 | $52,232 |
| Training | 5905 | | | | |
| | **Total** | $306,277 | $292,033 | $423,249 | $270,230 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Klingberg - FFT-TFC Middletown | | |
|---|---|---|
| Geographic Location Covered: Middletown | | |
| DCF open case needed for referral or admission? | yes | |
| Is Program 3rd Party Billable? | no | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 12 | 12 | 100% | 12 | 15 | 100% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: FFT Middletown would have been utilized more if there were more foster homes available to place youth.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 14 | 11 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 12 | 13 |
| Clients completing treatment plan | 4 | 3 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) When youth were not able to be matched to a foster home Child specific recruitment started for these youth. Treatment only started for these youth when they were matched or placed in a family. A family was identified for one youth who refused to be placed. Many youth were referred without permanency resources which means youth stay in care in their foster homes longer than was anticipated without achieving permanency.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 12 | 15 |
| [Cases] eligible for treatment | 12 | 15 |
| [Cases] achieving treatment goal | 4 | 3 |
| Percent achieving contracted treatment expectation: Actual | 33% | 25% |
| Percent achieving contracted treatment expectation: Contract | 44% | 33% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **100.00%** | **100.00%** |
| Total Program expenditures | $310,308 | $439,653 |
| Total Clients Served | 12 | 15 |
| Expenditures per [case] | $25,859 | $29,310 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $137,838 | $197,482 | $242,018 | $262,081 |
| Benefits | 5200 | $33,102 | $44,409 | $78,086 | $76,122 |
| Other Expense | 5900 | $93,144 | $24,499 | $59,037 | $52,130 |
| Overhead | 5300+7100 | $42,193 | $43,918 | $44,108 | $58,753 |
| Training | 5905 | | | | |
| | **Total** | $306,277 | $310,308 | $423,249 | $449,086 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name: Waterford Country School FFT Foster Care** | | |
| **Geogrpahic location covered: New London County/Region 3 Norwich Office** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **N** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **36** | **54** | **150%** | **36** | **57** | **158%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Youth do not meet permanency and therefore remain in the program, increasing the utilization of the program over contracted slots. There is underutilization in FFT slots but overutilization in the number of total placements. Once youth are transitioned out of FFT, they remain in long-term non-FFT placements in Waterford Country School foster homes. These youth are treated as case-management/1 visit per month, but the youth in the program still generally require a frequency of weekly visits and experience frequent disruptions. The FFT model estimates that 25% of youth will not achieve permanency, but the actual number of youth who do not achieve permanency is significantly greater.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: There is an increased need for placements in homes, however many of the youth being placed do not meet FFT criteria. FFT is intended to be a 6-9 month treatment program. Ongoing placements are still required post-FFT.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 27 | 30 |
| Clients receiving evaluation only | 5 | 6 |
| Clients receiving services | 22 | 24 |
| Clients completing treatment plan | 22 | 24 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria: Alternative placement identified during referral process; youth not ready for discharge from current placement; youth needs increased during referral process.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 27 | 30 |
| [Cases] eligible for treatment | 22 | 24 |
| [Cases] achieving treatment goal | 22 | 24 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | 100% | 100% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **129,669** | **222,095** |
| Total Program expenditures | 595,617 | 1,068,629 |
| Total Clients Served | 22 | 24 |
| Expenditures per [case] | 32,967.55 | 53,780.18 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 399,757 | 320,848 | 606,929 | 561,554 |
| Benefits | 5200 | 114,250 | 79,291 | 173,425 | 132,234 |
| Overhead | 5400-7150 | 209,279 | 351,482 | 283,585 | 595,950 |
| Training | 5905 | 2,000 | 744 | 2,000 | 987 |
| | **Total** | 725,286 | 752,364 | 1,065,939 | 1,290,724 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: The Village - Family Functional Therapy-Foster Care (Hartford & Manchester) | | |
|---|---|---|
| Geographic Location Covered: Region 4 | | |
| DCF open case needed for referral or admission? | (y/n) | Y |
| Is Program 3rd Party Billable? | (y/n) | N |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 96 | 81 | 84% | 96 | 90 | 94% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 85 | 25 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 81 | 90 |
| Clients completing treatment plan | 81 | 90 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Year one of the newly implemented model required hiring numerous staff and getting all trained in the new model. These presented many challenges. Also was the need to integrate new families and youth from other agencies into the Village foster care program. Once rolling the challenges persisted in recruiting and licensing enough families to meet referral demands. This remains an issue to this day. Additionally, each time a youth disrupts from one family to move to another FFT starts all over, delaying successful completion of the service.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | 81 | 90 |
| [Cases] achieving treatment goal | 24 | 4 |
| Percent achieving contracted treatment expectation: Actual | 30% | 4% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **2,072,427** | **2,573,708** |
| Total Program expenditures | 2,191,245 | 2,695,006 |
| Total Clients Served | 81 | 90 |
| Expenditures per [case] | 27,052.40 | 29,944.52 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 1,369,909 | 1,255,769 | 1,515,131 | 1,516,166 |
| Benefits | 5200 | 318,230 | 287,848 | 369,995 | 372,563 |
| Overhead | 7150 | 257,283 | 275,961 | 315,683 | 360,203 |
| Training | 5905 | - | - | - | - |
| | **Total** | 1,945,421 | 1,819,579 | 2,200,809 | 2,248,931 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: The Village - Family Functional Therapy-Foster Care (New Britain) | | |
|---|---|---|
| Geographic Location Covered: region 6 | | |
| DCF open case needed for referral or admission? | (y/n) | Y |
| Is Program 3rd Party Billable? | (y/n) | N |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 72 | 45 | 63% | 72 | 53 | 74% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 35 | 18 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 45 | 53 |
| Clients completing treatment plan | 45 | 53 |

Same as Clients receiving services - All clients served receive a treatment plan identifying a primary goal.

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Year one of the newly implemented model required hiring numerous staff and getting all trained in the new model. These presented many challenges. Also was the need to integrate new families and youth from other agencies into the Village foster care program. Once rolling the challenges persisted in recruiting and licensing enough families to meet referral demands. This remains an issue to this day. Additionally, each time a youth disrupts from one family to move to another FFT starts all over, delaying successful completion of the service.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | 45 | 53 |
| [Cases] achieving treatment goal | 24 | 9 |
| Percent achieving contracted treatment expectation: Actual | 53% | 17% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,467,385** | **1,848,161** |
| Total Program expenditures | 1,501,661 | 1,950,880 |
| Total Clients Served | 45 | 53 |
| Expenditures per [case] | 33,370.25 | 36,809.06 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 707,314 | 604,810 | 855,350 | 828,662 |
| Benefits | 5200 | 164,309 | 133,095 | 208,876 | 202,834 |
| Overhead | 7150 | 113,766 | 136,519 | 171,890 | 190,859 |
| Training | 5905 | - | - | - | - |
| | **Total** | 985,389 | 874,425 | 1,236,116 | 1,222,355 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Boys and Girls Village - Helping Youth and Parents Enter Recovery (HYPE) | | |
|---|---|---|
| Geographic Location Covered: Region 1 | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | n/a | n/a | n/a | 60 | 19 | 32% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

HYPE was not implemented until Oct/Nov of 2023. HYPE's main issue was that we struggled with staffing; we only had 1 certified MDFT clinician available. Any new on board "HYPE" clinician/staff must be MDFT certified (which takes about 6-12 months for certification) BEFORE they can take any "HYPE" clients.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | n/a | 19 |
| Clients receiving evaluation only | n/a | 2 |
| Clients receiving services | n/a | 17 |
| Clients completing treatment plan | n/a | 12 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

HYPE was not implemented until Oct/Nov of 2023. HYPE's main issue was that we struggled with staffing; we only had 1 certified MDFT clinician available. Any new on board "HYPE" clinician/staff must be MDFT certified (which takes about 6-12 months for certification) BEFORE they can take any "HYPE" clients.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | n/a | 19 |
| [Cases] eligible for treatment | n/a | 17 |
| [Cases] achieving treatment goal | n/a | 12 |
| Percent achieving contracted treatment expectation: Actual | n/a | 71% |
| Percent achieving contracted treatment expectation: Contract | n/a | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 414,364.00 | $ 579,447.00 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 406,763 | $ 238,116 | $ 427,381 | $ 270,008 |
| Benefits | 5200 | $ 97,715 | $ 41,100 | $ 119,667 | $ 49,202 |
| Overhead | | $ 36,724 | $ 134,487 | $ 7,965 | $ 259,928 |
| Training | 5905 | $ 450 | $ 661 | $ 450 | $ 309 |
| | **Total** | $ 541,651 | $ 414,364 | $ 555,463 | $ 579,447 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | N |
| Quality assurance expectations | Y | N |

| Program Name: Community Health Resources - Helping Youth and Parents Enter Recovery | | |
|---|---|---|
| Geographic Location Covered: Manchester | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | Not all follow up care is billable. |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 60 | 47 | 78% | 60 | 64 | 107% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: There was an increase in utilization from FY23 to FY24.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: There is not a decreased need for services. There are workforce limitations in this service type. The complex and intensive needs of individuals in this group require a significant amount of time and energy from our staff. Unfortunately, this increased demand has contributed to burnout among staff, who are often required to go above and beyond to effectively engage and support this vulnerable population.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 23 | 29 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 47 | 64 |
| Clients completing treatment plan | 21 | 20 |

**Narrative explanation for the reasons that referrals go unserved**

Referrals do not go unserved in this program given the high risk nature of clients referred. Programs are not allowed to maintain a waitlist for this program type based on model expectations; if there is no capacity due to existing staff being at maximum caseloads, it is difficult to monitor the true need for services as those referrals would not be captured here. Additionally, clients continue to receive follow up services in this program post to assist with relapse prevention, provide case management, and coordinate care. This is in addition to carrying cases that are actively open and receiving MDFT treatment. The additional duties and responsibilities for our HYPE Recovery program make it more difficult to recruit and retain staff as compared to standard MDFT.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 23 | 29 |
| [Cases] eligible for treatment | 23 | 29 |
| [Cases] achieving treatment goal | 13 | 14 |
| Percent achieving contracted treatment expectation: Actual | 62% | 70% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $542,651 | $556,489 |
| Total Program expenditures | $487,238 | $572,733 |
| Total Clients Served | 47 | 64 |
| Expenditures per [case] | $10,367 | $8,949 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $411,248 | $303,348 | $360,591 | $342,257 |
| Benefits | 5200 | $102,385 | $76,206 | $86,323 | $91,535 |
| Overhead | 7000 | $72,381 | $65,125 | $89,933 | $90,989 |
| Training | 5905 | $1,400 | $0 | $1,400 | $222 |
| | Total | $587,414 | $444,679 | $538,248 | $525,003 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: UCFS -** MDFT HYPE | | |
| **Geographic Location Covered:** Norwich Area Office | | |
| **DCF open case needed for referral or admission?** | N | |
| **Is Program 3rd Party Billable?** | Y | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **60** | **47** | **78%** | **60** | **35** | **58%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
Workforce limitations and being able to retain staff in positions. The agency has even implemented staff bonuses for position and hiring sign on bonus.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 75 | 69 |
| Clients receiving evaluation only | 4 | 2 |
| Clients receiving services | 47 | 35 |
| Clients completing treatment plan | 29 | 22 |

**Narrative explanation for the reasons that referrals go unserved**
Families may have declined services when presented to the family, not feeling that they needed the level of services at that time. Having workforce issues also impacts the ability for all clients to be served.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 51 | 37 |
| [Cases] eligible for treatment | 51 | 37 |
| [Cases] achieving treatment goal | 29 | 22 |
| Percent achieving contracted treatment expectation: Actual | 57% | 59% |
| Percent achieving contracted treatment expectation: Contract | 48% | 37% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **542651** | **556489** |
| Total Program expenditures | 742040.5 | 582778.3 |
| Total Clients Served | 47 | 35 |
| Expenditures per [case] | 15,788.10 | 16,650.81 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 454807.567 | 430877.09 | 479985.33 | 352131.29 |
| Benefits | | 113642.77 | 112483.04 | 74195.81 | 86425.25 |
| Overhead | | | 198592.37 | 2057.86 | 144097.33 |
| Training | | 500 | 88 | 250 | 124.43 |
| | **Total** | 568950.337 | 742040.5 | 556489 | 582778.3 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name:Wheeler - MDFT New Haven HYPE** | | |
| **Geographic Location Covered: New Haven/ Milford** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **60** | **38** | **63%** | **60** | **26** | **43%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Retention and staffing difficulties. COVID negatively impacted in-home hiring tremendously

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Workforce Limitations

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | Contractually, referrals can't be accepted unless serviced within 14 days | Contractually, referrals can't be accepted unless serviced within 14 days |
| Clients receiving evaluation only | 1 | 7 |
| Clients receiving services | 21 | 16 |
| Clients completing treatment plan | 17 | 10 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Staff vacancies, families didn't agree with program requirements or time commitment and client did not meet the admission criteria

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 22 | 23 |
| [Cases] eligible for treatment | 21 | 16 |
| [Cases] achieving treatment goal | 17 | 5 |
| Percent achieving contracted treatment expectation: Actual | 94% | 50% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **541,635** | **555,447** |
| Total Program expenditures | 449,992 | 542,609 |
| Total Clients Served | 38.00 | 26.00 |
| Expenditures per [case] | 11,841.89 | 20,869.59 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 352,650 | 263,431 | 432,682 | 321,848 |
| Benefits | 5200 | 77,708 | 70,572 | 97,168 | 73,013 |
| Overhead | All others | 109,777 | 115,237 | 24,096 | 147,021 |
| Training | 5905 | 1,500 | 753 | 1,500 | 728 |
| | **Total** | 541,635 | 449,992 | 555,447 | 542,609 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wheeler - MDFT HYPE New Britain** | | |
| **Geographic Location Covered: New Britain** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **60** | **32** | **53%** | **60** | **14** | **23%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: Staffing and Retention barriers. COVID negatively impacted in-home hiring tremendously
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Workforce Limitations

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | Contractually, referrals can't be accepted unless serviced within 14 days | Contractually, referrals can't be accepted unless serviced within 14 days |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 12 | 12 |
| Clients completing treatment plan | 20 | 2 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Staff vacancies, families didn't agree with program requirements or time commitment and client did not meet the admission criteria

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 12 | 12 |
| [Cases] eligible for treatment | 12 | 12 |
| [Cases] achieving treatment goal | 13 | 2 |
| Percent achieving contracted treatment expectation: Actual | 65% | 100% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **541,636** | **555,448** |
| Total Program expenditures | 600,611 | 647,893 |
| Total Clients Served | 32 | 14 |
| Expenditures per [case] | $18,769 | $46,278 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 439,601 | 326,647 | 473,122 | 367,224 |
| Benefits | 5200 | 95,798 | 84,576 | 114,971 | 77,871 |
| Overhead | All others | 4,237 | 187,684 | (34,646) | 202,390 |
| Training | 5905 | 2,000 | 1,704 | 2,000 | 408 |
| | **Total** | 541,636 | 600,611 | 555,448 | 647,893 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Integrated Family Care and Support (IFCS) | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | y | |
| Is Program 3rd Party Billable? | n | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 1,575 | 1,635 | 103.8% | N/A | N/A | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: IFCS became a service type under the PCME program in SFY2024. Therefore, utilization for this specific program is not available here for SFY2024 but is included in the SFY2024 numbers for the PCME program (program 3 in this workbook).

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 1303 | N/A |
| Clients receiving evaluation only | 180 | N/A |
| Clients receiving services | 965 | N/A |
| Clients completing treatment plan | 791 | N/A |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

There were 158 referrals that were unserved. Referrals go unserved when either DCF determines the family should remain open with the Department and not be referred to IFCS or the family decides they do not want to receive IFCS services.

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 1,130 | N/A | Discharged in SFY and received initial assessment |
| [Cases] eligible for treatment | 742 | N/A | Eligible for treatment and discharged in SFY |
| [Cases] achieving treatment goal | 528 | N/A | |
| Percent achieving contracted treatment expectation: Actual | 71.2% | N/A | Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A | |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **6,161,995** | **N/A** |
| Total Program expenditures | 5,622,246 | **N/A** |
| Total Clients Served | 1,635 | **N/A** |
| Expenditures per [case] | 3,439 | **N/A** |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 3,156,288 | 2,928,999 | N/A | N/A |
| Benefits | 5200 | 848,309 | 831,729 | N/A | N/A |
| Overhead | 7150 | 1,150,613 | 1,150,613 | N/A | N/A |
| Training | | 0 | 0 | N/A | N/A |
| | **Total** | 5,155,210 | 4,911,341 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | N/A |
| Data collection | Y | N/A |
| Quality assurance expectations | N | N/A |

| Program Name: Community Guidance Center of Central CT - IPV- FAIR | | |
|---|---|---|
| Region 6 | | |
| DCF open case needed for referral or admission? | (y/n) | yes |
| Is Program 3rd Party Billable? | (y/n) | yes |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 40 | 25 | | 60 | 39 | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 33 | 41 |
| Clients receiving evaluation only | 4 | 13 |
| Clients receiving services | 25 | 39 |
| Clients completing treatment plan | | |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **468090** | **526720.55** |
| Total Program expenditures | 393103.29 | 526720.55 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 247635 | 214619.71 | 308198.19 | 308198.19 |
| Benefits | 5200 | 43139.59 | 38676.01 | 42945.79 | 42945.79 |
| Overhead | 7000 | 43936.74 | 38263.07 | 69660.64 | 69660.64 |
| Training | 5905 | 750 | 0 | 2682.06 | 2682.06 |
| | **Total** | 335461.33 | 291558.79 | 423486.68 | 423486.68 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | y | y |
| Quality assurance expectations | y | y |

| Program Name: Community Health Resources - Intimate Partner Violence: Family Assessment Intervention Response | | |
|---|---|---|
| Geographic Location Covered: Hartford, Manchester | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | Y | Only office based therapy visits are billable |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 105 | 101 | 96% | 105 | 86 | 82% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: This program depends solely on referrals from DCF. The area offices report staff turnover of DCF social workers is a barrier to utilizing the program to full capacity. Program management meet regularly with DCF supervisors to discuss the program and problem solve around potential barriers to sending more referrals.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: DCF regional staff continue to report that they see an increase in intimate partner violence in our service area, yet referrals are lower than expected. This is due to DCF and not CHR's ability to provide services.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 76 | 39 |
| Clients receiving evaluation only | 2 | 3 |
| Clients receiving services | 101 | 86 |
| Clients completing treatment plan | 41 | 41 |

**Narrative explanation for the reasons that referrals go unserved**

N/A, referrals do not go unserved.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 48 | 36 |
| [Cases] eligible for treatment | 46 | 33 |
| [Cases] achieving treatment goal | 26 | 24 |
| Percent achieving contracted treatment expectation: Actual | 67% | 63% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $644,855 | $661,299 |
| Total Program expenditures | $591,857 | $654,210 |
| Total Clients Served | 101 | 86 |
| Expenditures per [case] | $5,860 | $7,607 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $432,854 | $351,742 | $415,324 | $379,540 |
| Benefits | 5200 | $124,128 | $103,431 | $113,272 | $106,607 |
| Overhead | 7000 | $600 | $275 | $100,133 | $100,619 |
| Training | 5905 | $81,264 | $80,016 | $600 | $3,047 |
| | Total | $638,846 | $535,464 | $629,328 | $589,813 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: CRJ Family ReEntry - IPV Fair | | |
|---|---|---|
| Geographic Location Covered: | | Greater Bridgeport area |
| DCF open case needed for referral or admission? | (y/n) | yes |
| Is Program 3rd Party Billable? | (y/n) | no |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | $ 40.00 | 60.00 | 150% | $ 60.00 | $ 43.00 | 72.0% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: 2024 numbers are not reflective of the clients still open to the program currently who were referred in 2024. Utilization continues to be high .

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 60 | 43 |
| Clients receiving evaluation only | 8 | 1 |
| Clients receiving services | 52 | 42 |
| Clients completing treatment plan | 52 | 42 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Clients who did not successfully complete service were due to factors such as non-engagement or refusal to participate or needing a higher level of care due to factors such as substance abuse/mental health. Some cases in FY 24 are still open therefore not captured in the numbers

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 60 | 43 |
| [Cases] eligible for treatment | 57 | 42 |
| [Cases] achieving treatment goal | 45 | 42 |
| Percent achieving contracted treatment expectation: Actual | 78% | 97% |
| Percent achieving contracted treatment expectation: Contract | 78% | 100% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $ 430,755 | $ 640,943 |
| Total Program expenditures | $ 436,571 | $ 596,478 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 265,610 | $ 281,906 | $ 369,185 | $ 371,849 |
| Benefits | 5200 | $ 79,683 | $ 59,755 | $ 110,755 | $ 88,688 |
| Overhead | 7100 | $ 59,684 | $ 54,985 | $ 89,703 | $ 95,354 |
| Training | | | | | |
| | **Total** | $ 404,978 | $ 396,646 | $ 569,643 | $ 555,892 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| | | |
|---|---|---|
| **Program Name: Family Centered Services - IPV-FAIR** | | |
| **Geographic Location Covered: All of Region 2, including Shelton, Milford, Seymour, Derby and Ansonia** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **NO** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **80** | **73** | **91.25%** | **80** | **80** | **100%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: In FY 222-2023 we experienced staffing shortages that forced us to waitlist referrals for sometime.
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: No referrals continued to be submitted until the present staff had the availability to service the clients. Demand for the service remained unchanged, when we were fully staffed we were able to fulfill our capacity.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 67 | 99 |
| Clients receiving evaluation only | 5 | 7 |
| Clients receiving services | 59 | 81 |
| Clients completing treatment plan | 36 | 56 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
In 2023, of 8 referrals that did not result in an episode of care: 4 clients declined services after the referral was submitted; 2 moved out of catchment; 1 was recommended to a higher LOC by DCF after referral was made; and for 1 client DCF determined after making the referral that they would pursue a TPR, affecting client's eligibility for services.
In 2024, of 18 referrals that did not result in an episode of care: 17 either declined outright or did not make themselves available for an intake following the referral; and 1 moved out of the catchment area.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 59 | 81 |
| [Cases] eligible for treatment | 54 | 74 |
| [Cases] achieving treatment goal | 36 | 56 |
| Percent achieving contracted treatment expectation: Actual | 67% | 76% |
| Percent achieving contracted treatment expectation: Contract | 67% | 76% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **119,193** | **80,858** |
| Total Program expenditures | 644,635 | 681,297 |
| Total Clients Served | 73 | 80 |
| Expenditures per [case] | 8,830.62 | 8,516.22 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 433,827 | 410,911 | 472,169 | 473,719 |
| Benefits | 5200 | 72,608 | 84,851 | 78,328 | 89,494 |
| Overhead | 7000 | 81,873 | 76,814 | 40,126 | 40,126 |
| Training | 5905 | 4,000 | 3,803 | 1,500 | 201 |
| | **Total** | 592,308 | 576,379 | 592,123 | 603,540 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name:Wellmore - IPV-FAIR** | | |
| **Geographic Location Covered: Region 5** | | |
| **DCF open case needed for referral or admission?** | **yes** | |
| **Is Program 3rd Party Billable?** | **no** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 40 | 76 | 190% | 40 | 37 | 93% |

Wellmore's IPV-Fair program was fully staffed and functional for the FY23 period, but struggled with complete staff turnover (including the program manager) in FY24. The program director stepped in to take some cases throughout the year, as did the newly hired team leader. Staffing vacancies were addressed aggressively through recruiting, creative onboarding and sign-on and retention incentives. While the numbers of cases served in FY24 was not quite as high as we wished, we are pleased to have come close AND to have a full team and team leader set up for the new FY25.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 69 | 26 |
| Clients receiving evaluation only | 2 | 0 |
| Clients receiving services | 55 | 21 |
| Clients completing treatment plan | 53 | 16 |

Data associated with these charts is pulling ONLY those clients who were admitted and discharged during each fiscal year. Many clients have cases that cross the fiscal year end date, starting in one first year and closing in another. For clients served by evidence based practices like IPV_Fair, this is quite common as the length of stay for IPV-Fair is between 4-6 months. The two primary reasons why a family did not transition from referral to care in FY23 were that the agency discontinued administratively (FY23=16%) which means that the agency closed efforts to engage for reasons that were associated with agency staffing. Only 4% of families in FY23 withdrew their interest to transition into care and 9% were not responsive to agency outreach. Our staffing in FY24 was considerably impacted by turnover

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 55 | 21 |
| [Cases] eligible for treatment | 33 | 14 |
| [Cases] achieving treatment goal | 33 | 14 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$431,523** | **$505,527** |
| Total Program expenditures | $492,006 | $332,483 |
| Total Clients Served | 76 | 37 |
| Expenditures per [case] | $6,473.76 | $8,986.02 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $279,090 | $278,667 | $287,895 | $173,569 |
| Benefits | 5200 | $66,619 | $71,709 | $68,242 | $43,727 |
| Overhead | 5400 to 5909; 5990 to 7150 | $80,762 | $139,834 | $146,990 | $109,167 |
| Training | 5910 | $5,052 | $1,795 | $2,400 | $6,020 |
| | **Total** | $431,523 | $492,005 | $505,527 | $332,483 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Family and Children's Agency - IFP (FCA) | | |
|---|---|---|
| Geographic Location Covered: Region 1 | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| Note- This is total numer for Region 1 | 152 | 154 | 101 | 152 | 186 | 122 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 47 | 55 |
| Clients receiving evaluation only | 3 | 2 |
| Clients receiving services | 44 | 51 |
| | 39 | 41 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Referrals where clients did not receive services was due to the referral being withdrawn by DCF or due to client being unresponsive or declining services.
There were two staff vacancies at FCA in the second half of FY2024.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 42 | 51 |
| [Cases] eligible for treatment | 42 | 51 |
| [Cases] achieving treatment goal | 37 | 38 |
| Percent achieving contracted treatment expectation: Actual | 88 | 75 |
| Percent achieving contracted treatment expectation: Contract | 80 | 80 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **430,322.04** | **451,094.05** |
| Total Program expenditures | 431,186.50 | 452,677.63 |
| Total Clients Served | 149/47 | 180/53 |
| Expenditures per [case] | $9,174.18 | $8,541.09 |

Note- the first number is for the entire contract/the 2nd is specific to FCA

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 269,850.75 | 270,392.84 | 284,944.01 | 285,944.32 |
| Benefits | 5200 | 70,520.87 | 70,662.54 | 68,588.06 | 68,828.84 |
| Transportation | 5500 | 3,698.50 | 3,705.93 | 3,038.58 | 3,049.25 |
| Materials and Supplies | 5600 | - | - | 170.84 | 171.44 |
| Facilities | 5700 | 3,405.97 | 3,412.81 | 3,734.96 | 3,748.07 |
| Other (excluding training) | 5900 | 4,480.47 | 4,490.06 | 2,647.27 | 2,656.56 |
| Overhead | 7100 | 78,070.48 | 78,227.32 | 87,970.33 | 88,279.15 |
| Training | 5900 | 295.00 | 295.00 | | |
| | **Total** | 430,322.04 | 431,186.50 | 451,094.05 | 452,677.63 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 | |
|---|---|---|---|
| Staff training | Y | Y | FCA Does This for Region 1 |
| Data collection | Y | Y | FCA Does This for Region 1 |
| Quality assurance expectations | Y | Y | FCA Does This for Region 1 |

| Program Name: Family and Children's Agency - IFP (Boys and Girls Village Subcontractor) | | |
|---|---|---|
| Geographic Location Covered: Region 1 | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| See FCA Tab for total number on contract | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| Note- This is total numer for Region 1 | 152 | 154 | 101 | 152 | 186 | 122 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 40 | 58 |
| Clients receiving evaluation only | 3 | 8 |
| Clients receiving services | 34 | 52 |
| Clients completing treatment plan | 27 | 41 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Referrals where clients did not receive services were due to the referral being withdrawn by DCF or due to client being unresponsive or declining services.
There was a higher number of evaluation only cases in FY2024.
Other reasons were that families required more clinical needs than what IFP could provide.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 35 | 51 |
| [Cases] eligible for treatment | 35 | 51 |
| [Cases] achieving treatment goal | 27 | 37 |
| Percent achieving contracted treatment expectation: Actual | 77 | 73 |
| Percent achieving contracted treatment expectation: Contract | 80 | 80 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $314,587.84 | **322,609.83** |
| Total Program expenditures | $328,502.00 | 334,964.00 |
| Total Clients Served | 149/37 | 180/60 |
| Expenditures per [case] | $8,878.43 | $5,582.73 |

Note- the first number is for the entire contract/the 2nd is specific to BGV

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5400 | 184,824.26 | 192,999.00 | 179,768.85 | 186,653.00 |
| Benefits | 5400 | 41,351.05 | 43,180.00 | 57,402.79 | 59,601.00 |
| Travel | 5400 | 2,565.53 | 2,679.00 | 1,327.18 | 1,378.00 |
| Program Supplies | 5400 | 280.59 | 293.00 | 2,230.58 | 2,316.00 |
| Repairs & Maintenance | 5400 | 3,483.91 | 3,638.00 | 3,669.48 | 3,810.00 |
| Utilities | 5400 | 1,048.62 | 1,095.00 | 1,289.61 | 1,339.00 |
| Telephone | 5400 | 3,307.70 | 3,454.00 | 2,085.15 | 2,165.00 |
| Other | 5400 | 18,004.66 | 18,801.00 | 24,211.82 | 25,139.00 |
| Overhead | 5400 | 59,721.52 | 62,363.00 | 50,624.37 | 52,563.00 |
| Training | | | | | |
| | **Total** | 314587.84 | 328,502.00 | 322,609.83 | 334,964.00 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name: Family and Children's Agency - IFP (Child and Family Guidance Subcontractor) | | |
|---|---|---|
| Geographic Location Covered: Region 1 | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| See FCA Tab for total number on contract | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| Note- This is total numer for Region 1 | 152 | 154 | 101 | 152 | 186 | 122 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 37 | 42 |
| Clients receiving evaluation only | 0 | 1 |
| Clients receiving services | 37 | 37 |
| Clients completing treatment plan | 34 | 31 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Referrals where clients did not receive services were due to the referral being withdrawn by DCF or due to client being unresponsive or declining services.

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 37 | 46 |
| [Cases] eligible for treatment | 37 | 46 |
| [Cases] achieving treatment goal | 33 | 37 |
| Percent achieving contracted treatment expectation: Actual | 89 | 80 |
| Percent achieving contracted treatment expectation: Contract | 80 | 80 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 | |
|---|---|---|---|
| Total Program allocations | **275,847.00** | **275,847.00** | |
| Total Program expenditures | 275,847.00 | 275,847.00 | |
| Total Clients Served | 149/37 | 180/38 | Note- the first number is for the entire contract/the 2nd is specific to CFG |
| Expenditures per [case] | $7,455.32 | $7,259.13 | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5400 | 178,217.52 | 178,217.52 | 202,977.03 | 202,977.03 |
| Benefits | 5400 | 48,899.11 | 48,899.11 | 35,911.43 | 35,911.43 |
| Travel | 5400 | 20.72 | 20.72 | 8,113.85 | 8,113.85 |
| Office Supplies | 5400 | 912.96 | 912.96 | 913.00 | 913.00 |
| Program Supplies | 5400 | 2,767.15 | 2,767.15 | 697.35 | 697.35 |
| Repairs & Maintenance | 5400 | 393.00 | 393.00 | 393.00 | 393.00 |
| Telephone | 5400 | 495.00 | 495.00 | 495.00 | 495.00 |
| Other | 5400 | 590.04 | 590.04 | 590.00 | 590.00 |
| Overhead | 5400 | 43,551.50 | 43,551.50 | 25,756.34 | 25,756.34 |
| Training | | | | | |
| | **Total** | 275,847.00 | 275,847.00 | 275,847.00 | 275,847.00 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name: Family and Children's Agency - IFP (Family Centers Subcontractor) | | |
|---|---|---|
| Geographic Location Covered: Region 1 | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| See FCA Tab for total number on contract | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| Note- This is total numer for Region 1 | 152 | 154 | 101 | 152 | 186 | 122 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 30 | 31 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 28 | 29 |
| Clients completing treatment plan | 25 | 24 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Referrals where clients did not receive services were due to the referral being withdrawn by DCF or due to client being unresponsive or declining services.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 25 | 28 |
| [Cases] eligible for treatment | 25 | 28 |
| [Cases] achieving treatment goal | 21 | 25 |
| Percent achieving contracted treatment expectation: Actual | 84 | 89 |
| Percent achieving contracted treatment expectation: Contract | 80 | 80 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **108,416.12** | **108,416.12** |
| Total Program expenditures | 108,416.12 | 108,416.12 |
| Total Clients Served | 149/28 | 180/29 |
| Expenditures per [case] | $3,872.00 | $3,738.49 |

Note- the first number is for the entire contract/the 2nd is specific to FCI

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5400 | 89,600.12 | 89,600.12 | 89,600.12 | 89,600.12 |
| Benefits | 5400 | 18,816.00 | 18,816.00 | 18,816.00 | 18,816.00 |
| Overhead | 5400 | | | | |
| Training | | | | | |
| | **Total** | 108,416.12 | 108,416.12 | 108,416.12 | 108,416.12 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name: Klingberg - Intensive Family Preservation | | |
|---|---|---|
| Geographic Location Covered: Region 6 (New Britain and Meriden) | | |
| DCF open case needed for referral or admission? | yes **Also IFCS | |
| Is Program 3rd Party Billable? | no | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 116 | 116 | 100% | 116 | 108 | 93% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for not meeting the contracted numbers for SFY 2024 was due to staffing vacancies. Staff were at capacity, and referrals and program utilization was consistent; resulting in a waitlist. Case on the waitlist had an average of 2-3 weeks pending assignment, and were not on the waitlist for extended periods of time. In collaboration with the Enhanced Service Coordinator (ESC), high risk cases with an immediate need were triaged, and we made sure to have availability for same day emergency referrals if needed.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 90 | 95 |
| Clients receiving evaluation only | 3 | 10 |
| Clients receiving services | 116 | 108 |
| Clients completing treatment plan | 113 | 98 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Any referrals submitted were assigned for services and did not go unserved. Some cases did not result in an episode of care, which were due to reasons such as, DCF withdrawing the referral, the family already being engaged in services addressed by a different provider, family declining services at intake, or DCF/IIFP being unable to locate family for intake.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 116 | 108 |
| [Cases] eligible for treatment | 116 | 108 |
| [Cases] achieving treatment goal | 94 | 60 |
| Percent achieving contracted treatment expectation: Actual | 81% | 80% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

**** SFY 24 - 75 cases discharged/other cases remained open and will be reflected in SFY25**

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **100.00%** | **100.00%** |
| Total Program expenditures | $919,465 | $917,445 |
| Total Clients Served | 116 | 108 |
| Expenditures per [case] | $7,926 | $8,495 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $557,334 | $530,469 | $617,436 | $521,822 |
| Benefits | 5200 | $236,867 | $191,173 | $216,905 | $185,814 |
| Other Expenses | 5900 | $52,071 | $31,245 | $114,504 | $59,326 |
| Overhead | 5300+7100 | $161,477 | $166,192 | $158,842 | $150,066 |
| Training | 5905 | $0 | $386 | $0 | $417 |
| | **Total** | $1,007,749 | $919,465 | $1,107,687 | $917,445 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | y | y |
| Quality assurance expectations | y | y |

| | | |
|---|---|---|
| **Program Name: Wheeler - Intensive Family Preservation** | | |
| **Geographic Location Covered: Region 4** | | |
| **DCF open case needed for referral or admission?** | **Yes** | |
| **Is Program 3rd Party Billable?** | **No** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **146** | **130** | **89%** | **146** | **155** | **106%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

-There were 2 staffing vacancies during FY2023 and 2 during some of FY2024, but we do not believe this impacted the total amount of clients served. IFP has also had interns in the past that carried a small caseload. At times there may have been a waitlist to open services until a IFP staff had an opening. Also, IFP workers have

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 114 | 149 |
| Clients receiving evaluation only | 9 | 15 |
| Clients receiving services | 121 | 140 |
| Clients completing treatment plan | 121 | 140 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

-Out of 114 referrals sent during FY2023, 14 were deemed referral only. FY2024- 149 referrals were sent and 34 were deemed referral only. This could be due to many reasons such as a circumstance changing with family where they are no longer willing/able to engage in IFP services or the case is labeled referral only due to the family completing the intake with IFP, but disengaged and did not complete any more visits. Families can also decline services at intake and be labeled referral only. IFP surpassed program capacity during FY2024.

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 94 | 111 |
| [Cases] eligible for treatment | 94 | 111 |
| [Cases] achieving treatment goal | 51* | 81* |
| Percent achieving contracted treatment expectation: Actual | 75%* | 74%* |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

* There were 68 discharges in SFY 23 and 110 discharges in SFY2024

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,250,753** | **1,282,647** |
| Total Program expenditures | 1,208,030 | 1,281,612 |
| Total Clients Served | 130.00 | 155.00 |
| Expenditures per [case] | 9,292.54 | 8,268.46 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 756,706.06 | 689,328.70 | 800,300.84 | 761,363.80 |
| Benefits | 5200 | 206,663.17 | 196,218.34 | 216,504.27 | 202,485.38 |
| Overhead | All others | 286,483.78 | 319,182.96 | 263,991.89 | 316,119.82 |
| Training | 5905 | 900.00 | 3,300.00 | 1,850.00 | 1,643.00 |
| | **Total** | 1,250,753.00 | 1,208,030.00 | 1,282,647.00 | 1,281,612.00 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name:Community Health Resources - Intensive Transition Care Management Coordination | | |
|---|---|---|
| Geographic Location Covered: Norwich, Willimantic, Manchester | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 160 | 55 | 34% | 160 | 16 | 10% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: The hospitals never properly utilized the service, despite extensive effort to market the program and Carelon's oversight of the referral process.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The program was only funded for 2 years through ARPA funds; we were notified that program funding would not be continued and staff in the program sought alternative employment opportunities.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 36 | 13 |
| Clients receiving evaluation only | 0 | 1 |
| Clients receiving services | 55 | 16 |
| Clients completing treatment plan | 36 | 15 |

**Narrative explanation for the reasons that referrals go unserved**

N/A, referrals did not go unserved.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 36 | 13 |
| [Cases] eligible for treatment | 36 | 12 |
| [Cases] achieving treatment goal | 27 | 9 |
| Percent achieving contracted treatment expectation: Actual | 75% | 64% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $333,333 | $286,403 |
| Total Program expenditures | $316,501 | $142,154 |
| Total Clients Served | 55 | 16 |
| Expenditures per [case] | $5,755 | $8,885 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $223,463 | $197,909 | $200,711 | $85,947 |
| Benefits | 5200 | $66,862 | $61,112 | $56,199 | $24,527 |
| Overhead | 7000 | $47,826 | $43,097 | $11,108 | $22,169 |
| Training | 5905 | $200 | $0 | $0 | $0 |
| | **Total** | $338,351 | $302,118 | $268,018 | $132,643 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name:BH Care - Intensive Transition Care Management Coordination (ITCM) | | |
|---|---|---|
| Geographic Location Covered: | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utilization | SFY 2023 | SFY2024 |
|---|---|---|

| Program Name:Catalyst - Juvenile Review Board | | | | | | |
|---|---|---|---|---|---|---|
| Geographic Location Covered: Bridgeport | | | | | | |
| DCF open case needed for referral or admission? | (y/n) No | | | | | |
| Is Program 3rd Party Billable? | (y/n)No | | | | | |
| | | | | | | |
| Program Utilization | SFY 2023 | | | SFY2024 | | |
| What #'s is this asking us to compare?200 is the contracted number, actual is how many served and % difference | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 200 | 100 | 50% | 200 | 70 | 35% |

Narrative explanation for declines in utilization and/or utilization significantly below contract. Response: Program utilization reflects current referral trends, realistic management and quality assurance of program deliverables. Contracted Annual Capacity reflects original contract deliverables which do not take into consideration ongoing efforts for statewide diversionary changes and programming standards. Scope of Services and Caseload standards are anticipated to adjust to reflect anticipated changes. Please note: Current contract allows retention of 1 program manager and 2 case managers. Current school of thought regarding caseload dictates a 1:20 ratio to ensure program viability. With the expansion of the Diversionary Program (June 2023), Bridgeport Juvenile Review Board receives client referrals with a higher level of need. Case Managers are required to provide a more robust and intensive case management approach, resulting a longer client engagement. Although, the actual numbers are lower than the contracted targets, once a client has engaged in the program, the data outcomes result in high-level program completion and overall success rate.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 143 | 110 |
| Clients receiving evaluation only | n/a | n/a |
| Clients receiving services | 100 | 70 |
| Clients completing treatment plan | 82 | 68 |

Narrative explanation for the reasons that referrals go unserved
Unserved referrals did not proceede to intake for the following reasons:

- Family Declined Services
- Client was ineligible for services- More than 2 referrals to JRB
- Issue beyond the program capacity/services
- Re-Arrest
- Court Involved

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | 109 | 78 |
| [Cases] achieving treatment goal | 61 | 53 |
| Percent achieving contracted treatment expectation: Actual | 61.0% | 75.7% |
| Percent achieving contracted treatment expectation: Contract | 30.5% | 26.5% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 262,307.09 | 225,856.00 |
| Total Program expenditures | 268,948.60 | 225,856.00 |
| Total Clients Served | 100 | 70 |
| Expenditures per [case] | $ 2,689.49 | $ 3,226.51 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5301 | 160,197 | 199,444 | 169,583 | 171,446 |
| Benefits | 5302 | 38,447 | 47,266 | 40,700 | 38,837 |
| Overhead | 7000 | 14,420 | 14,420 | 4,626 | 4,626 |
| Training | Various | 49,243 | 7,819 | 10,947 | 10,947 |
| | **Total** | 262,307 | 268,949 | 225,856 | 225,856 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Urban Community Alliance - Juvenile Review Board | | |
|---|---|---|
| Geographic Location Covered: New Haven | | |
| DCF open case needed for referral or admission? | (y/n) | N |
| Is Program 3rd Party Billable? | (y/n) | N/A |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 200 | 218 | 112% | 200 | 181 | 91% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

## Operational Strategies [2024]

1. Focus on improving work culture and offering professional development opportunities.
2. Develop streamlined onboarding programs to quickly acclimate new hires to their roles.
3. Cross-Training Staff: Train employees to handle multiple roles, ensuring operational continuity during transitions.
4. Implemented Workforce Development: Regularly solicit feedback and involve staff in decision-making to boost morale and reduce turnover.
5. Document Processes & Apricot Database training: Maintain detailed records of workflows, procedures, and critical information to preserve institutional knowledge.

Training new staff [by JRB model/CYSA standard] and adjusting workflow were met with delays [scheduling training/availability]. Outgoing staff carried valuable historical and procedural knowledge and client relationships were disrupted.

Impact on Program Goals:

Long term initiatives in need of Operational leadership and JRB Programming needed leadership expertise.

February 2024: Senior Operations hired

April 2024: JRB program manager hired

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 218 | 181 |
| Clients receiving evaluation only | 209 | 165 |
| Clients receiving services | 110 | 55 |
| Clients completing treatment plan | UCA JRB is not billable for service | UCA JRB is not billable service |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Urban Community

(FY 23)
Contracted to serve: 200
Actually served: 218
Total Youth Served 209
Actively receiving services FY year end is 110 (included in the 209 served)
Pending referrals at the end of FY 23: 0

Successful Discharge: 90
Unsuccessful: 9

(FY 24)
Contracted to serve: 200
Actually served: 181
Total Youth Served 165
Actively receiving services FY year end is 55 (included in the 165 served)
Pending referrals at the end of FY 24: 15
End of FY24 Non-Responses : 1

Successful Discharge: 78
Unsuccessful: 32

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **361,471** | **$403,746** |
| Total Program expenditures | 211,813 | $255,066 |
| Total Clients Served | 218 | 181 |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 130,550 | 112,914 | 133,850 | 133,850 |
| Benefits | | 35,248 | 30,487 | 36,139 | 36,139 |
| Overhead | | 35,258 | 35,258 | 38,476 | 38,476 |
| Training | | 500 | 0 | 15,000 | 6,500 |
| | **Total** | 201,556 | 178,659 | 223,465 | 214,965 |

| Are factors below included in | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| CLICC Inc. - CLICC Literacy Based Mentoring | | |
|---|---|---|
| statewide coverage | | |
| DCF open case needed for referral or admission? | n | |
| Is Program 3rd Party Billable? | n | |

| Program Utlization | | SFY 2023 | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | | 0 | 0 | 24 | 30 | 125 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
Late start to grant-program due to covid pandemic and credentialling delays to access CT DOC prisons.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | | 30 |
| Clients receiving evaluation only | | n/a |
| Clients receiving services | | 30 |
| Clients completing treatment plan | | 18 |

**Narrative explanation for the reasons that referrals go unserved**
1 client dropped out; 11 are active carryovers to the next fiscal year.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | n/a |
| [Cases] eligible for treatment | | 30 |
| [Cases] achieving treatment goal | | 18 |
| Percent achieving contracted treatment expectation: Actual | | 18 of 30 |
| Percent achieving contracted treatment expectation: Contract | | 18 of 24 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **11,802** | 118,201 |
| Total Program expenditures | 7,125 | **65,363** |
| Total Clients Served | 0 | 30 |
| Expenditures per [case] | | 2,416.27 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100, 5300 | 7264.98 | 5973.48 | 70904.79 | 19635 |
| Benefits | 5200 | 1590.5 | 1282 | 11,658.45 | 39894.86 |
| Overhead | 5501 | 699.32 | 481.93 | 10217.04 | 10699 |
| Training | | 0 | 0 | 0 | 0 |
| | **Total** | 9554.8 | 7737.41 | 92780.28 | 70228.86 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | y | y |
| Quality assurance expectations | n | n |

| Program Name: Community Health Resources - Mobile Crisis Intervention Services | | |
|---|---|---|
| Geographic Location Covered: Manchester, Middletown | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | Not all interventions are billable. |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | NA | 2222 | NA | NA | 1926 | NA |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Mobile crisis utilization is still rebounding from the pandemic when schools and families utilized the service far less due to isolation and home schooling. Schools also used ARPA funding to add therapeutic resources in the schools that led to a decreased use of child mobile crisis. Since much of that funding has ended, mobile crisis has begun to see increased utilization again in FY25.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: There is not a decreased need for services.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 2222 | 1926 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 2222 | 1926 |
| Clients completing treatment plan | 1496 | 1338 |

**Narrative explanation for the reasons that referrals go unserved**

Referrals do not go unserved in mobile crisis. The number of referrals and clients receiving services includes both phone only and face to face mobile or deferred intervention. Clients receiving initial assessment below are clients who received face to face mobile or deferred intervention.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 1669 | 1539 |
| [Cases] eligible for treatment | 1669 | 1539 |
| [Cases] achieving treatment goal | 1449 | 1298 |
| Percent achieving contracted treatment expectation: Actual | 87% | 84% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $3,302,256 | $3,341,859 |
| Total Program expenditures | $2,716,665 | $3,265,139 |
| Total Clients Served | 2,222 | 1,926 |
| Expenditures per [case] | $1,223 | $1,695 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $1,558,452 | $1,267,067 | $1,730,135 | $1,391,072 |
| Benefits | 5200 | $380,505 | $310,171 | $386,873 | $334,560 |
| Overhead | 7000 | $383,733 | $361,953 | $609,353 | $503,019 |
| Training | 5905 | $5,500 | $1,937 | $5,841 | $3,357 |
| | **Total** | $2,328,190 | $1,941,128 | $2,732,202 | $2,232,008 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Clifford Beers - Mobile Crisis | | |
|---|---|---|
| Geographic Location Covered: New Haven | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | Yes |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | Any call received | 1697 | N/A | Any call received | 1656 | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:
No specific number is set for services.

| Referrals to Program (cases) | SFY2023 | SFY2024 | |
|---|---|---|---|
| Referrals | 1697 | 1656 | Any episode |
| Clients receiving evaluation only | 0 | 0 | |
| Clients receiving services | 1697 | 1656 | Crisis Response Plus Stabilization |
| Clients completing treatment plan | 56 | 87 | Completing treatment/ Discharge report PIE - reason completed treatment |

Definition of contracted treatment expectation:
Percent of [cases] achieving treatment goal of those eligible for treatment.

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
All calls have been responded to.

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 1670 | 1680 | |
| [Cases] eligible for treatment | 63 | 105 | |
| [Cases] achieving treatment goal | 59 | 98 | met treatment goal; PIE report from discharged clients |
| Percent achieving contracted treatment expectation: Actual | 93.65% | 93.33% | Pulled from PIE; of discharged clients only |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A | |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $2,540,172 | $3,645,971 |
| Total Program expenditures | $2,354,737 | $4,247,838 |
| Total Clients Served | 1697 | 1656 |
| Expenditures per [case] | $1,387.59 | $2,565.12 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 2,540,172 | 1,361,975 | 3,645,971 | 2,461,627 |
| Benefits | | | 294,309 | | 512,126 |
| Overhead | | | 697,558 | | 1,271,461 |
| Training | | | 895 | | 2,623 |
| | Total | 2,540,172 | 2,354,737 | 3,645,971 | 4,247,838 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name: UCFS -** Mobile Crisis Intervention Services | | |
| **Geographic Location Covered:** Willimantic & Norwich Area Offices | | |
| **DCF open case needed for referral or admission?** | No | |
| **Is Program 3rd Party Billable?** | Yes | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | N/A | 1528 | N/A | N/A | 1378 | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract:** From FY 2023 to FY 2024, UCFS MCIS had a 9.8% decrease in call volume. Statewide, MCIS had a 8.7% decrease in calls during the same period. This could partially be due to an increase in the number of school-based health centers available post-COVID, as schools make up nearly 50% of all calls to MCIS during the school year. Additionally, an Urgent Crisis Center was opened in our region, whose primary referral source is schools. To address the decrease in calls, the program has been conducting an increased number of outreaches.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 1538 | 1378 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 1277 | 1106 |

**Narrative explanation for the reasons that referrals go unserved:** Mobile Crisis does not have "Evaluation Only." The "Receiving Services" includes as face-to-face and plus-stabilization episodes of care. "Clients completing treatment plan" is all the F2F/+stabilization cases that had "met treatment goal" listed in PIE. When "met treatment goal" is not indicated at the end of treatment, it is typically due to not being able to connect with the parent/guardian after the initial assessment (ex. schools call and guardians are not present/the clinician is not able to connect with the parent/guardian after making three phone attempts and mailing a letter).

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 1277 | 1106 |
| [Cases] eligible for treatment | 1277 | 1106 |
| [Cases] achieving treatment goal | 1222 | 1052 |
| Percent achieving contracted treatment expectation: Actual | 96% | 95% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **3392448** | **3436560** |
| Total Program expenditures | 2384842.28 | 2883093.12 |
| Total Clients Served | 1277 | 1106 |
| Expenditures per [case] | $1,867.54 | $2,606.77 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 2241178.284 | 1561928.53 | 2349902.09 | 1927429.87 |
| Benefits | | 537500.654 | 354459.93 | 507928.28 | 434523.88 |
| Overhead | | 598769.062 | 465026.93 | 568729.63 | 518777.56 |
| Training | | 15000 | 3426.89 | 10000 | 2361.81 |
| | **Total** | 3392448 | 2384842.28 | 3436560 | 2883093.12 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Wellmore - Mobile Crisis Intervention Services (MCIS) | | |
|---|---|---|
| Geographic Location Covered: Region 5 | | |
| DCF open case needed for referral or admission? | no | |
| Is Program 3rd Party Billable? | yes | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | n/a | 2261 | n/a | n/a | 2214 | n/a |

Mobile Crisis Intervention Services struggled like all home-based services with staffing and vacancies, however, the program was able to successfully transition to 24/7 availability in January 2023 and support more youth in our communities than prior years.

| Referrals to Program (cases) | SFY2023 | SFY2024 | |
|---|---|---|---|
| Referrals | 2237 | 2184 | |
| Clients receiving evaluation only | 184 | 188 | phone only consultation |
| Clients receiving services | 2053 | 1996 | |
| Clients completing treatment plan | 2053 | 1995 | |

Those cases who are categorized as 'evaluation only' are those defined by the MCIS PIC team as those for whom a phone-only consultation was provided. These families did not have a mobile response by their choice, identifying that the phone support from the MCIS team had helped them to manage their needs.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 2237 | 2184 |
| [Cases] eligible for treatment | 2149 | 2053 |
| [Cases] achieving treatment goal | 1974 | 1855 |
| Percent achieving contracted treatment expectation: Actual | 92% | 90% |
| Percent achieving contracted treatment expectation: Contract | 90% | 90% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $4,104,133 | $4,933,919 |
| Total Program expenditures | $3,412,277 | $4,217,492 |
| Total Clients Served | $2,261 | $2,214 |
| Expenditures per [case] | $1,509.19 | $1,904.92 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $2,678,422 | $1,911,733 | $3,127,827 | $2,387,547 |
| Benefits | 5200 | $603,372 | $577,723 | $706,685 | $603,206 |
| Overhead | 5400 to 5909; 5990 to 7150 | $817,310 | $921,058 | $1,093,873 | $1,226,234 |
| Training | 5910 | $5,029 | $1,763 | $5,534 | $505 |
| | **Total** | $4,104,133 | $3,412,277 | $4,933,919 | $4,217,492 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| **Program Name: Wheeler** Mobile Crisis Intervention Services | | |
|---|---|---|
| **Geographic Location Covered: Greater Hartford Area (Covering Hartford, New Britain, and Meriden Locations)** | | |
| **DCF open case needed for referral or admission?** | **n** | |
| **Is Program 3rd Party Billable?** | **y** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **n/a** | **3010** | **n/a** | **n/a** | **2716** | **n/a** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: In SFY 2023 MCIS, majority of the fiscal year, the Meriden program did not have any staff. MCIS was able to sustain services through the support of MCIS-Wheeler's Hartford and New Britain program. MCIS-Meriden referrals decreased dramatically in SFY2024. Although it is not clear, per qualitative data it has been reported and witness by MCIS' leadership that staff were late to calls due to limited staffing in SFY 2023. It is suggested that inconsistency in service delivery could've impacted the community's confidence in MCIS meeting the needs of the community which could've contributed to the dramatic decrease in call volume in SFY 2024. SFY 2025 volume has improved and MCIS-Meriden is 100% staffed.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 3010 | 2716 |
| Clients receiving evaluation only | 1046 | 787 |
| Clients receiving services | 2254 | 2084 |
| Clients completing treatment plan | 1950 | 1742 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Primary contributing factor due to clients not meeting treatment goals is due to discontinued services per the family's request. This data is consistent with historical data. The New Britain team had multiple vacancies and was assisting the Meriden team on a crisis basis which could've contributed to decrease in clients completing treatment plan.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 74% | 76% |
| [Cases] eligible for treatment | 100% | 100% |
| [Cases] achieving treatment goal | 75% | 77% |
| Percent achieving contracted treatment expectation: Actual | n/a | n/a |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **5,759,099** | **5,835,777** |
| Total Program expenditures | 3,683,711 | 4,910,900 |
| Total Clients Served | #REF! | #REF! |
| Expenditures per [case] | #REF! | #REF! |

*Includes MCIS Hartford, New Britain and Meridan

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | | |
|---|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** | |
| Salaries | 5101 | 3,746,071 | 2,112,971 | 3,909,795 | 3,384,998 | *Includes |
| Benefits | 5200 | 912,829 | 343,650 | 822,062 | 587,291 | MCIS |
| Overhead | All others | 1,090,200 | 1,222,378 | 1,072,175 | 931,173 | Hartford, New |
| Training | 5905 | 10,000 | 4,712 | 31,745 | 7,438 | Britain and |
| | **Total** | 5,759,099 | 3,683,711 | 5,835,777 | 4,910,900 | |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | y | y |
| Data collection | y | y |
| Quality assurance expectations | y | y |

| Program Name: Boys and Girls Village - Multidimensional Family Therapy (MDFT) | | |
|---|---|---|
| Geographic Location Covered: Region 1 | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 60 | 37 | 61.67% | 60 | 24 | 40.00% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 60 | 55 |
| Clients receiving evaluation only | 6 | 2 |
| Clients receiving services | 22 | 16 |
| Clients completing treatment plan | 19 | 11 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

There was a shortage of certified staff in FY2023 & FY2024. The average amount of certified staff for both years was 2.5. Some families declined services or did not respond once they called.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 28 | 18 |
| [Cases] eligible for treatment | 22 | 16 |
| [Cases] achieving treatment goal | 19 | 11 |
| Percent achieving contracted treatment expectation: Actual | 86% | 69% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 639,543.00 | $ 669,077.00 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 417,248 | $ 330,382 | $ 410,424 | $ 375,122 |
| Benefits | 5200 | $ 100,358 | $ 86,661 | $ 114,919 | $ 80,372 |
| Overhead | | $ 24,595 | $ 222,500 | $ 25,146 | $ 208,549 |
| Training | 5905 | $ 450 | $ - | $ 6,000 | $ 5,034 |
| | **Total** | $ 542,651 | $ 639,543 | $ 556,489 | $ 669,077 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Community Health Resources - Multidimensional Family Therapy | | |
|---|---|---|
| Geographic Location Covered: Hartford, Manchester, East Hartford | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 120 | 205 | 171% | 120 | 305 | 254% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: There was an increase in program utilization between FY23 and FY24.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Retention and recruitment of staff in FY23 was challenging, but improved in FY24.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 73 | 103 |
| Clients receiving evaluation only | 5 | 5 |
| Clients receiving services | 205 | 305 |
| Clients completing treatment plan | 63 | 97 |

**Narrative explanation for the reasons that referrals go unserved**

Referrals do not go unserved in this program, however this program type does not allow the program to maintain a waitlist longer than a month. This makes it difficult to know the true need for services as if the waitlist is closed, referrals will not be accepted or recorded. Additionally, the program is broken out into 3 separate projects in PIE based on geography. This division complicates the ability to accurately assess overall capacity.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 70 | 105 |
| [Cases] eligible for treatment | 65 | 100 |
| [Cases] achieving treatment goal | 45 | 64 |
| Percent achieving contracted treatment expectation: Actual | 78% | 70% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $1,627,952 | $1,669,465 |
| Total Program expenditures | $1,517,459 | $2,075,541 |
| Total Clients Served | 205 | 305 |
| Expenditures per [case] | $7,402 | $6,805 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $1,128,825 | $871,746 | $1,131,156 | $1,120,422 |
| Benefits | 5200 | $316,642 | $233,546 | $287,837 | $291,037 |
| Overhead | 7000 | $208,573 | $191,106 | $309,591 | $310,511 |
| Training | 5905 | $4,223 | $1,623 | $4,223 | $6,053 |
| | Total | $1,658,263 | $1,298,021 | $1,732,807 | $1,728,023 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: CJR - Multidimensional Family Therapy Region 5** | | |
| **Geographic Location Covered:Waterbury Danbury Torrington** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **Yes** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 72 | 31 | 43.06% | 72 | 49 | 68.06% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: **We have had clinician vacancies since 2022, this significantly impacted the number of clients served. Through initiatives of recruiting and working with our clinical internship program, we as of 1/6/2025 will be fully staffed with 4 clinicians and 2 TA's.**

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 35 | 66 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 31 | 49 |
| Clients completing treatment plan | 31 | 49 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
**Referrals go unserved for several reasons including staff vacancies, higher level of care required and family refusal of services. We do work with the family to find alternative services should MDFT not be the correct fit or model to meet their needs**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 31 | 49 |
| [Cases] eligible for treatment | 31 | 49 |
| [Cases] achieving treatment goal | 19 | 20 |
| Percent achieving contracted treatment expectation: Actual | 61.29% | 40.82% |
| Percent achieving contracted treatment expectation: Contract | 70% | 70% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | 544,288 | 654,923 |
| Total Clients Served | 31 | 49 |
| Expenditures per [case] | 17,558 | 13,366 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 279,091 | 279,091 | 350,617 | 350,617 |
| Benefits | 5200 | 69,706 | 69,706 | 88,461 | 88,461 |
| Overhead | 5300, 5500, 5600, 5700, 5900, 6100, 7000 series | 190,865 | 190,865 | 112,781 | 211,215 |
| Training | 5904 | 2,989 | 4,626 | 4,630 | 4,630 |
| | **Total** | 542,651 | 544,288 | 556,489 | 654,923 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |

| | | |
|---|---|---|
| Quality assurance expectations | Yes | Yes |

| | | |
|---|---|---|
| **Program Name: UCFS-** MDFT- CFA | | |
| **Geographic Location Covered:** Willimantic Area office | | |
| **DCF open case needed for referral or admission?** | N | |
| **Is Program 3rd Party Billable?** | Y | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **60** | **27** | **45%** | **60** | **35** | **58%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: We had vacancies in clinicians during both these years which limited the amount of families we could actually serve.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 63 | 71 |
| Clients receiving evaluation only | 0 | 1 |
| Clients receiving services | 27 | 35 |
| Clients completing treatment plan | 23 | 27 |

**Narrative explanation for the reasons that referrals go unserved**
Workforce issues were the reasons in which referrals would go unserved for the large majority of these cases. Also there were times in this program that the needs of the families that were being served stayed in services slightly longer then the average length of stay because of their clinical needs.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 27 | 36 |
| [Cases] eligible for treatment | 27 | 36 |
| [Cases] achieving treatment goal | 23 | 27 |
| Percent achieving contracted treatment expectation: Actual | 85% | 75% |
| Percent achieving contracted treatment expectation: Contract | 38% | 45% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **516810** | **530247** |
| Total Program expenditures | 536040.39 | 657817.59 |
| Total Clients Served | 27 | 35 |
| Expenditures per [case] | 19,853.35 | 18,794.79 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 349337.32 | 369960.15 | 430469.6 | 421116.3 |
| Benefits | | 86363.61 | 81586.73 | 105578.64 | 114139.71 |
| Overhead | | 80609.07 | 84462.63 | | 122561.58 |
| Training | | 500 | 30.88 | 250 | 0 |
| | **Total** | 516810 | 536040.39 | 536298.24 | 657817.59 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name: Wheeler - Waterbury MDFT (2 programs)** | | |
| **Geographic Location Covered: WTBY/DANBURY/TORRINGTON** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **1) WTBY TEAM 1 & 2- 120** | **51** | **42%** | **120** | **45** | **37%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Difficulty staffing and retaining. COVID negatively impacted in-home hiring tremendously

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Work force Limitations

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | Contractually not allowed to accept referrals unless team can open case within 14 days | Contractually not allowed to accept referrals unless team can open case within 14 days |
| Clients receiving evaluation only | 5 | 3 |
| Clients receiving services | 21 | 28 |
| Clients completing treatment plan | 30 | 14 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Staff vacancies, families didn't agree with program requirements or time commitment and client did not meet the admission criteria

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 26 | 3 |
| [Cases] eligible for treatment | 21 | 28 |
| [Cases] achieving treatment goal | 24 | 11 |
| Percent achieving contracted treatment expectation: Actual | 80% | 78% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,085,301** | **1,112,976** |
| Total Program expenditures | 864,287 | 1,245,350 |
| Total Clients Served | 51 | 45 |
| Expenditures per [case] | $16,947 | $27,674 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 813,727 | 433,100 | 889,892 | 465,211 |
| Benefits | 5200 | 221,058 | 111,076 | 168,578 | 96,936 |
| Overhead | All others | 46,516 | 317,339 | 50,506 | 682,476 |
| Training | 5905 | 4,000 | 2,772 | 4,000 | 727 |
| | **Total** | 1,085,301 | 864,287 | 1,112,976 | 1,245,350 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wheeler - MDFT New Haven (2 Programs)** | | |
| **Geographic Location Covered: New Haven/ Milford** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **120** | **48** | **40%** | **120** | **44** | **36%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: Hiring and Retaining difficulties. COVID negatively impacted in-home hiring tremendously
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: workforce Limitations

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | Contractually, referrals can't be accepted unless serviced within 14 days | Contractually not allowed to accept referrals unless team can open case within 14 days |
| Clients receiving evaluation only | 1 | 4 |
| Clients receiving services | 26 | 28 |
| Clients completing treatment plan | 22 | 12 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Staff vacancies, families didn't agree with program requirements or time commitment and client did not meet the admission criteria

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 27 | 28 |
| [Cases] eligible for treatment | 26 | 28 |
| [Cases] achieving treatment goal | 15 | 6 |
| Percent achieving contracted treatment expectation: Actual | 68% | 50% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,085,301** | **1,112,976** |
| Total Program expenditures | 745,674 | 1,198,475 |
| Total Clients Served | 48 | 44 |
| Expenditures per [case] | $15,535 | $27,238 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 815,346 | 406,114 | 856,271 | 528,540 |
| Benefits | 5200 | 168,740 | 84,473 | 167,305 | 128,804 |
| Overhead | All others | 96,716 | 251,811 | 85,900 | 540,337 |
| Training | 5905 | 4,500 | 3,276 | 3,500 | 793 |
| | **Total** | 1,085,301 | 745,674 | 1,112,976 | 1,198,475 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: UFCS -** MDFTR | | |
| **Geographic Location Covered:** Norwich Area office | | |
| **DCF open case needed for referral or admission?** | N | |
| **Is Program 3rd Party Billable?** | N | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **NA** | **NA** | **NA** | **NA** | **5** | **NA** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: This program started to receive services in January of 2024, there was slow start up with staffing and then training time for MDFTR staff made limitations of how many clients could be in the program. The number of clients that must be served is 228 families in the study over 5years.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | NA | 5 |
| Clients receiving evaluation only | NA | 0 |
| Clients receiving services | NA | 5 |
| Clients completing treatment plan | NA | 0 |

**Narrative explanation for the reasons that referrals go unserved**

Program started accepting referrals in January 2024. There was timing issues due to hiring of staff and training of the MDFTR on how many cases could be taken

| **Are treatment goals being attained?** | **SFY2023** | **SFY2024** |
|---|---|---|
| [Cases] receiving initial assessment | NA | 5 |

| | | |
|---|---|---|
| [Cases] eligible for treatment | NA | 5 |
| [Cases] achieving treatment goal | NA | 0 |
| Percent achieving contracted treatment expectation: Actual | NA | NA |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | **423750** |
| Total Program expenditures | | 309523.64 |
| Total Clients Served | | 5 |
| Expenditures per [case] | | 61,904.73 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | 243285.16 | 223258.25 |
| Benefits | | | | 23710.61 | 26975.24 |
| Overhead | | | | 141754.23 | 59290.15 |
| Training | | | | 15000 | 0 |
| | **Total** | 0 | 0 | 423750 | 309523.64 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | Y |
| Data collection | | N |
| Quality assurance expectations | | N |

| Program Name: Generations Family Health Center Multidisciplinary Examination Clinic (MDE) | | | | | | |
|---|---|---|---|---|---|---|
| Geographic Location Covered: Region 3; Willimantic/Putnam | | | | | | |
| DCF open case needed for referral or admission? | Y | | | | | |
| Is Program 3rd Party Billable? | Y | | | | | |
| | | | | | | |
| Program Utlization | SFY 2023 | | | SFY2024 | | |
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| GFHC Willimantic/Putnam sites | 145 | 43 | 30% | 145 | 30 | 21% |

Services are provided at GFHC's Willimantic and Putnam sites, however contract utilization is not segregated by site.
For "Contracted" columns, we have inserted the "# of slots" as detailed in our agency's contract for scope of services.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 54 | 35 |
| Clients receiving evaluation only | | |
| Clients receiving services | 43 | 30 |
| Clients completing treatment plan | | |

**Narrative explanation for the reasons that referrals go unserved**

SFY2023

August – 1 client r/s
October – 1 n/s
Jan – 1 cxl due to weather
April – 1 DCF canceled
May – 1 canceled due to no consent. 1 – other
June – 2 canceled due to no consent. 1 canceled due to child late. 2 client reschedule. 1 DCF canceled due to change of placement.

SFY2024

October 2024 – Two kids were no show 11/5/24. We didn't receive any reason for the no show.
December 2024 – Two kids were reschedule due to being out of state 12/12/24. We were able to re-book the kids at a later date. 12/13/24
December 2024 – One kid no show appointment on 12/13/24. Social Worker missed the email with the appointment date and time.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 54 | 35 |
| [Cases] eligible for treatment | 54 | 35 |
| [Cases] achieving treatment goal | 43 | 30 |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |
| | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $ 136,020.00 | $ 139,489.00 |
| Total Program expenditures | $ 136,020.00 | $ 139,489.00 |
| Total Clients Served | 43 | 30 |
| Expenditures per [case] | $ 3,163.26 | $ 4,649.63 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $ 105,732 | $ 105,608 | $ 108,193 | $ 108,845 |
| Benefits | 5200 | $ 30,025 | $ 30,412 | $ 30,530 | $ 30,644 |
| Occupancy/Rent | 5701 | $ 264 | $ - | $ - | $ - |
| Outreach/Program Supplies | 5607 | $ - | $ - | $ 766 | $ - |
| | **Total** | $ 136,020 | $ 136,020 | $ 139,489 | $ 139,489 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name: Optimums Health Care - Multi-Disciplinary Evaluation** | | |
| **Geographic Location Covered: Region 1** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **Yes** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **215** | **157** | **73.02%** | **215** | **153** | **71.16%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

Referrals are based on DCF need – our program responds to the requests from our DCF programs for region 1 for all referrals as well as any other regions as needed. We have found some barriers to utilization include lack of release of information from the guardians of the patient. We have also found that the change in how children are being placed due to Covid that has impacted our workflow as well.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | n/a | n/a |
| Clients receiving evaluation only | 157 | 153 |
| Clients receiving services | n/a | n/a |
| Clients completing treatment plan | n/a | n/a |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Not applicable to these funded services

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | n/a | n/a |
| [Cases] eligible for treatment | n/a | n/a |
| [Cases] achieving treatment goal | n/a | n/a |
| Percent achieving contracted treatment expectation: Actual | n/a | n/a |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$ 196,507** | **$ 201,518** |
| Total Program expenditures | **$ 196,507** | **$ 211,877** |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 148,842 | $ 148,842 | $ 143,738 | $ 143,124 |
| Benefits | 5200 | $ 37,404 | $ 37,404 | $ 40,247 | $ 40,475 |
| Overhead | 7000 | $ 10,260 | $ 10,260 | $ 17,534 | $ 28,278 |
| Materials & Supplies | 5600 | $ 1 | $ 1 | $ - | $ - |
| | **Total** | $ 196,507 | $ 196,507 | $ 201,518 | $ 211,877 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name: Yale New Haven - MDE Foster Care Clinic** | | |
| **Geographic Location Covered:** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **N** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **Y** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **225** | **167** | **74%** | **225** | **151** | **67%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: Based on referrals
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 167 | 151 |
| Clients receiving evaluation only | 167 | 151 |
| Clients receiving services | N/A | N/A |
| Clients completing treatment plan | N/A | N/A |

MDE program is evaluation only by contract

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) : the clinic is an evaluation clinic

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 167 | 151 |
| [Cases] eligible for treatment | 100% | 100% |
| [Cases] achieving treatment goal | 100% | 100% |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | 100% | 100% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$ 196,972** | **$ 201,995** |
| Total Program expenditures | $ 127,497 | $ 137,263 |
| Total Clients Served | 167 | 151 |
| Expenditures per [case] | $ 763.46 | $ 909.02 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 153,884.37 | 99,607.06 | 157,808.59 | 107,236.39 |
| Benefits | 5200 | 43,087.62 | 27,889.96 | 44,186.40 | 30,026.22 |
| Overhead | | | | 0.01 | |
| Training | | | | | |
| | **Total** | 196,972.00 | 127,497.02 | 201,995.00 | 137,262.61 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name: Wheeler Clinic MDE Region 5** | | |
| **Geographic Location Covered: Waterbury, Danbury, Torrington** | | |
| **DCF open case needed for referral or admission?** | **Yes** | |
| **Is Program 3rd Party Billable?** | **Yes** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **325** | **207** | **64%** | **325** | **162** | **50%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: **Referrals to MDE are impacted by total number of children entering foster care. Beyond number of completed evals reported, there were additional youth initially referred for an MDE but then withdrawn by DCF due to factors such as children being returned home, lack of parental consent, AWOL, or hospitalization. Those numbers are not tracked by MDE program.**

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 207 | 162 |
| Clients receiving evaluation only | 207 | 162 |
| Clients receiving services | N/A | N/A |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
We get many more referrals than actually come to fruition as evaluations, but we do not track that data.
**"Referrals" denotes children referred with required consents and available for evaluation.**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **261,126** | **267,785** |
| Total Program expenditures | 268,437 | 276,827 |
| Total Clients Served | 207 | 162 |
| Expenditures per [case] | 1,296.80 | 1,708.81 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 118,535.73 | 127,858.15 | 157,131.48 | 134,220.66 |
| Benefits | 5200 | 35,560.72 | 26,504.36 | 45,854.04 | 25,692.59 |
| Overhead | All others | 104,849.55 | 114,057.49 | 62,539.48 | 116,683.26 |
| Training | 5905 | 2,180.00 | 17.00 | 2,260.00 | 230.00 |
| | **Total** | 261,126.00 | 268,437.00 | 267,785.00 | 276,826.51 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | yes | yes |
| Data collection | yes | yes |
| Quality assurance expectations | yes | yes |

| | | |
|---|---|---|
| **Program Name: Wheeler Clinic MDE Region 6** | | |
| **Geographic Location Covered: New Britain and Meriden** | | |
| **DCF open case needed for referral or admission?** | **yes** | |
| **Is Program 3rd Party Billable?** | **yes** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **200** | **138** | **69%** | **200** | **160** | **80%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:
**Referrals to MDE are impacted by total number of children entering foster care. Beyond number of completed evals reported, there were additional youth initially referred for an MDE but then withdrawn by DCF due to factors such as children being returned home, lack of parental consent, AWOL, or hospitalization.**

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 138 | 160 |
| Clients receiving evaluation only | 138 | 160 |
| Clients receiving services | N/A | N/A |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved**
We get many more referrals than actually come to fruition as evaluations, but we do not track that data.
**"Referrals" denotes children referred with required consents and available for evaluation.**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **196,075** | **206,683** |
| Total Program expenditures | 198,402 | 253,726 |
| Total Clients Served | 138 | 160 |
| Expenditures per [case] | 1,437.70 | 1,585.79 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 104,654.66 | 115,143.98 | 138,541.27 | 116,343.29 |
| Benefits | 5200 | 34,536.04 | 34,933.30 | 40,362.97 | 28,056.77 |
| Overhead | All others | 54,704.31 | 46,201.72 | 25,518.77 | 107,066.17 |
| Training | 5905 | 2,180.00 | 2,123.00 | 2,260.00 | 2,260.00 |
| | **Total** | 196,075.00 | 198,402.00 | 206,683.00 | 253,726.23 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | yes | yes |
| Data collection | yes | yes |
| Quality assurance expectations | yes | yes |

| | | |
|---|---|---|
| **Program Name: The Village - Multi-Disciplinary Evaluation Clinic** | | |
| **Geographic Location Covered: Hartford** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **No** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **215** | **132** | **61%** | **215** | **219** | **102%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 132 | 219 |
| Clients receiving evaluation only | 132 | 219 |
| Clients receiving services | 132 | 219 |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved: N/A**

| **Are treatment goals being attained?** | **SFY2023** | **SFY2024** |
|---|---|---|
| [Cases] receiving initial assessment | 132 | 219 |
| [Cases] eligible for treatment | 132 | 219 |
| [Cases] achieving treatment goal | 132 | 219 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **191,770** | **196,660** |
| Total Program expenditures | 221,290 | 249,309 |
| Total Clients Served | 132 | 219 |
| Expenditures per [case] | 1,676.44 | 1,138.40 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 107,517.38 | 105,813.23 | 124,517.76 | 125,551.94 |
| Benefits | 5200 | 24,976.29 | 28,722.73 | 30,407.24 | 30,570.81 |
| Overhead | 7150 | 24,706.39 | 29,647.67 | 32,279.34 | 33,419.37 |
| Training | 5905 | 244.00 | 163.00 | 244.00 | - |
| | **Total** | 157,444.06 | 164,346.63 | 187,448.34 | 189,542.12 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Health Resources - Multidisciplinary Team | | |
|---|---|---|
| Geographic Location Covered: Hartford, Manchester (North Central) | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | NA | 110 | NA | NA | 113 | NA |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: This program was contracted for 20 hours of coordination per week. There is not a contracted capacity. Cases will continue to be reviewed and coordinated until they are closed by the team.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: N/A

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 68 | 66 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 110 | 113 |

**Narrative explanation for the reasons that referrals go unserved**

This is a closed referral program where all referrals come from DCF and the local police departments. There were no staffing vacancies. Cases will be carried over year to year until they are closed by the team.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 68 | 66 |
| [Cases] eligible for treatment | 68 | 66 |
| [Cases] achieving treatment goal | 32 | 35 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $53,072 | $54,425 |
| Total Program expenditures | $53,502 | $56,037 |
| Total Clients Served | 110 | 113 |
| Expenditures per [case] | $486 | $496 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $31,183 | $30,892 | $31,830 | $32,368 |
| Benefits | 5200 | $9,385 | $9,743 | $7,973 | $9,501 |
| Overhead | 7000 | $8,164 | $7,252 | $8,117 | $8,662 |
| Training | 5905 | $100 | $0 | $100 | $0 |
| | Total | $48,832 | $47,887 | $48,020 | $50,531 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Clifford Beers - Multidisciplinary Team | | |
|---|---|---|
| Geographic Location Covered: New Haven, Milford,Meriden | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | N/A | N/A | N/A | 133 Forensics<br>315 Families | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

This program position does not serve individual clients. Rather the position is responsible for coordinating the team members (Police Departments, DCF Offices, Forensic Interviews and Medical Interviews, Family Advocates, and other types of providers) of the MDT for meetings to review cases that have been brought to the attention of the Team in order to minimize disruption for individuals that have been abused and to help ensure they are receiving the community care and support needed/wanted by the family. It also helps facilitate community events with other members of the team to educate the public about various abuse types and how to manage abuse situations, disclosures and subsequent sequelae.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | N/A | N/A |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | N/A | N/A |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

The MDT discusses children who have had forensic interviews or who may be in need of forensic interviews. Thus, the numbers of referrals fluctuations and the MDT would have no control over this.

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $60,595.03 | $79,262.61 |
| Total Program expenditures | $60,208.48 | $87,435.51 |
| Total Clients Served | N/A | N/A |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | | 60,595.03 | 35,384.10 | 79,262.61 | 51,812.50 |
| Benefits | | | 7,546.73 | | 10,773.32 |
| Overhead | | | 17,277.65 | | 24,849.69 |
| Training | | | | | |
| | **Total** | 60,595.03 | 60,208.48 | 79,262.61 | 87,435.51 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name: FCAid - Multidisciplinary Team** | | |
| **Geographic Location Covered: Danbury** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **n** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **OVS** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **0** | **114** | | **0** | **105** | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 114 | 105 |
| Clients receiving evaluation only | | |
| Clients receiving services | 114 | 105 |
| Clients completing treatment plan | 114 | 105 |

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | 114 | 105 |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | 100% | 100% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **73377** | **75248** |
| Total Program expenditures | 130452 | 140116 |
| Total Clients Served | 114 | 105 |
| Expenditures per [case] | 1,144.32 | 1,334.44 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 61218.35 | 66643.71 | 62094 | 61508 |
| Benefits | 5200 | 12387.088 | 15478.77 | 17005 | 28647 |
| Overhead | 7100 | 7640 | 7842.5 | 8145 | 6689 |
| Training | 5905 | 0 | 42 | 0 | 0 |
| | **Total** | 81245.438 | 90006.98 | 87244 | 96844 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Human Services Council - Multidisciplinary Team of Norwalk** | | |
| **Geographic Location Covered: Lower Fairfield County** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **no** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **no** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | | | | | | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 186 | 212 |
| Clients receiving evaluation only | 22 | 25 |
| Clients receiving services | 186 | 212 |
| | | |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 208 | 237 |
| [Cases] eligible for treatment | 208 | 237 |
| [Cases] achieving treatment goal | 100% | 100% |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | 100% | 100% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **68305** | **70047** |
| Total Program expenditures | 68305 | 70047 |
| Total Clients Served | 186 | 212 |
| Expenditures per [case] | $367.23 | $330.41 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5301 | 55978 | 56021.524 | 58890.48 | 206783.32 |
| Benefits | 5302 | 9356.2 | 9405.966 | 9453.294 | 44508.196 |
| Overhead | 5813 | 2220.8 | 2127.51 | 500 | 716 |
| Training | 5910 | 750 | 750 | 1203.226 | 6052.226 |
| | **Total** | 68305 | 68305 | 70047 | 258059.742 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | yes | yes |
| Data collection | yes | yes |
| Quality assurance expectations | yes | yes |

| Program Name: Klingberg Family Centers Children's Advocacy Center Multidisciplinary Teams | | |
|---|---|---|
| Geographic Location Covered: Central MDT | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | 188 | N/A | N/A | 152 | N/A |

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 188 | 152 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | N/A | N/A |
| Clients completing treatment plan | N/A | N/A |

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 188 | 152 |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 100.00% | 100.00% |
| Total Program expenditures | $52,317 | $46,345 |
| Total Clients Served | 188 | 152 |
| Expenditures per [case] | 278 | 305 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $28,240 | $38,696 | $35,329 | $31,908 |
| Benefits | 5200 | $7,235 | $6,082 | $9,051 | $5,960 |
| Other Expenses | 5900 | $4,305 | | $5,386 | $905 |
| Overhead | 5300 | $6,022 | $7,539 | $7,534 | $7,572 |
| Training | 6103 | $2,939 | | $3,676 | |
| | **Total** | $48,741 | $52,317 | $60,976 | $46,345 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | yes | yes |
| Data collection | yes | yes |
| Quality assurance expectations | yes | yes |

| Program Name: Klingberg Family Centers Children's Advocacy Center Multidisciplinary Teams | | |
|---|---|---|
| Geographic Location Covered: MDT-14 | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | 68 | N/A | N/A | 43 | N/A |

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 68 | 43 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | N/A | N/A |
| Clients completing treatment plan | N/A | N/A |

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 68 | 43 |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 100.00% | 100.00% |
| Total Program expenditures | $17,379 | $15,449 |
| Total Clients Served | 68 | 43 |
| Expenditures per [case] | 256 | 359 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $11,776 | $12,899 | $11,776 | $10,636 |
| Benefits | 5200 | $3,017 | $2,027 | $3,017 | $1,987 |
| Other Expenses | 5900 | $2,558 | $0 | $2,558 | $302 |
| Overhead | 5300+7100 | $2,649 | $2,453 | $2,649 | $2,524 |
| Training | 5905 | | | | |
| | **Total** | $20,000 | $17,379 | $20,000 | $15,449 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | y | y |
| Quality assurance expectations | y | y |

| Program Name: Klingberg Family Centers Children's Advocacy Center Multidisciplinary Teams | | |
|---|---|---|
| Geographic Location Covered: Hartford MDT | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | 175 | N/A | N/A | 136 | N/A |

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 175 | 136 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | N/A | N/A |
| Clients completing treatment plan | N/A | N/A |

| Are treatment goals being attainec | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 175 | 136 |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 100% | 100% |
| Total Program expenditures | $75,309 | $66,943 |
| Total Clients Served | 175 | 136 |
| Expenditures per [case] | $430.34 | $492.23 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $56,991 | $55,895 | $51,827 | $46,089 |
| Benefits | 5200 | $14,377 | $8,785 | $13,074 | $8,609 |
| Other Expenses | 5900 | $11,340 | | $10,313 | $1,308 |
| Overhead | 5300+7100 | $11,966 | $10,629 | $10,882 | $10,937 |
| Training | 5905 | $0 | | $0 | |
| | **Total** | $94,674 | $75,309 | $86,096 | $66,943 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name: Community Health Resources - Multisystemic Family Therapy | | |
|---|---|---|
| Geographic Location Covered: Manchester, Willimantic | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | NA | NA | NA | 60 | 10 | 17% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: MST was a new program for CHR that started in FY24.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The program was newly funded in FY24, and we encountered workforce limitations that affected our ability to meet the contract capacity. Specifically, challenges in recruiting qualified staff for key positions contributed to delays in fully staffing the program. As a result, we were unable to achieve the intended capacity outlined in the contract during this initial phase of implementation. Due to staffing challenges, program funding and therefore staffing and capacity were reduced in FY25. This reduction in staffing led to a decrease in available resources for service delivery.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | NA | 14 |
| Clients receiving evaluation only | NA | 0 |
| Clients receiving services | NA | 10 |
| Clients completing treatment | | |

**Narrative explanation for the reasons that referrals go unserved**

While referrals were not left unserved, as the program was newly funded in FY24, there was a necessary ramp-up period to establish processes and infrastructure for accepting referrals. This initial phase took some time, which affected the speed at which referrals could be processed and served. Due to the program's ramp-up phase, only one client was discharged in FY24, which affected the treatment completion rate. With such a limited number of clients, the completion rate does not fully reflect the overall effectiveness of the program.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | NA | 10 |
| [Cases] eligible for treatment | NA | 10 |
| [Cases] achieving treatment goal | NA | 0 |
| Percent achieving contracted treatment expectation: Actual | NA | 0.0% |
| Percent achieving contracted treatment expectation: Contract | NA | 85% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | NA | $643,181 |
| Total Program expenditures | NA | $263,728 |
| Total Clients Served | NA | 10 |
| Expenditures per [case] | NA | $26,373 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | NA | NA | $384,032 | $101,171 |
| Benefits | 5200 | NA | NA | $97,375 | $21,815 |
| Overhead | 7000 | NA | NA | $91,601 | $32,132 |
| Training | 5905 | NA | NA | $1,000 | $2,450 |
| | **Total** | NA | NA | $574,009 | $157,568 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | NA | Y |
| Data collection | NA | Y |
| Quality assurance expectations | NA | Y |

| Program Name: CJR - Multi-Systemic Therapy - Region 5 | | |
|---|---|---|
| Geographic Location Covered: Waterbury Danbury Torrington | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | YES |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | N/A | N/A | 60 | 50 | 83.30% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract** **(Contract began in FY 24)**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Areas that impacted full utilization included program start up factors; hiring and training staff, new hiring requirements around pre-licensure and required staffing for bilingual clinicians. Limited applicant pool due to required credentialing.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | N/A | 95 |
| Clients receiving evaluation only | N/A | 18 |
| Clients receiving services | N/A | 50 |
| Clients completing treatment plan | N/A | 50 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Program capacity full

Mental health needs primary

Clients moved out of the service area

Caregiver change or non-viable caregiver

Client placed prior to starting treatment

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | 50 |
| [Cases] eligible for treatment | | 50 |
| [Cases] achieving treatment goal | | 16 |
| Percent achieving contracted treatment expectation: Actual | | 84.21% |
| Percent achieving contracted treatment expectation: Contract | | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment **and had the opportunity to complete. treatment.**

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | N/A | 1,342,532 |
| Total Clients Served | N/A | 50 |
| Expenditures per [case] | N/A | 26,851 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | N/A | N/A | 522,016 | 522,016 |
| Benefits | 5200 | N/A | N/A | 131,799 | 131,799 |
| Overhead | 5400, 5500,5600,5700,5800,5900, 7000 series | N/A | N/A | 590,920 | 647,089 |
| Training | 5904 | N/A | N/A | 41,628 | 41,628 |
| | **Total** | 0 | 0 | 1,286,363 | 1,342,532 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| | | |
|---|---|---|
| **Program Name: Wheeler - MST DCF New Haven Milford Meriden Team** | | |
| **Geographic Location Covered: DCF region** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | **YES - Third party billable** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **N/A** | **N/A** | **N/A** | **60** | **19** | **32%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Program start up for this team began in FY 2024. Staffing, turnover and program ramp up impacted service capacity but has since increased significantly for FY 2025.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | N/A | 25 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | N/A | 19 |
| Clients completing treatment plan | N/A | 15 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

MST New Haven Milford Meriden team started up FY 2024 (there was a previous New Haven team under CSSD prior the rebid) - therefore there is no associated FY 2023 data

MST does not have evaluation only as a program. Referrals are screened for appropriateness and if appropriate are intaked and open for services.

There was significant turnover in February of 2024 resulting in needing to re-staff for several clinician positions. In Addition there was one staff out on FMLA which

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | 19 |
| [Cases] eligible for treatment | N/A | 19 |
| [Cases] achieving treatment goal | N/A | 15 |
| Percent achieving contracted treatment expectation: Actual | N/A | 78% |
| Percent achieving contracted treatment expectation: Contract | N/A | 85% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | **643,181.00** |
| Total Program expenditures | | 454,813.81 |
| Total Clients Served | | 19 |
| Expenditures per [case] | | 23,937.57 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | | | 344,189 | 264,375 |
| Benefits | 5200 | | | 111,543 | 64,796 |
| Overhead | All others | | | 173,949 | 124,030 |
| Training | 5905 | | | 13,500 | 1,614 |
| | **Total** | 0 | 0 | 643,181 | 454,814 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | Y |
| Data collection | | Y |
| Quality assurance expectations | | Y |
| Quality assurance expectations | | Y |

| | | |
|---|---|---|
| **Program Name: Wheeler - MST New Britain Hartford** | | |
| **Geographic Location Covered: DCF Regions 4 & 6** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | **YES - 3rd party billable** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **N/A** | **N/A** | **N/A** | **60** | **39** | **0.65%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Team was not in existence in SFY 2023. Start up and hiring occurred for SFY 2024 and then one staff vacancy on the team for SFY 2024

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: No decreased need for the service type or workforce. This team was within first year of new contract which impacted service capacity. Currently staff present are meeting the need of all referrals and have full caseloads.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | N/A | 61 |
| Clients receiving evaluation only | N/A | 0 |
| Clients receiving services | N/A | 39 |
| Clients completing treatment plan | N/A | 25 Discharged total/17 completing treatment |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

MST New Britain Hartford team started up FY 2024 - therefore there is no associated FY 2023 data

MST does not have evaluation only as a program. Referrals are screened for appropriateness and if appropriate are intaked and open for services.

2024 - Staff full at time of referral impacted 7 referrals, no response or decline from family impacted 6 referrals, referral pulled from provider impacted 3 and referral inappropriate for services impacted 6 referrals.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | 39 |
| [Cases] eligible for treatment | | 39 |
| [Cases] achieving treatment goal | | 17 |
| Percent achieving contracted treatment expectation: Actual | | 70.80% |
| Percent achieving contracted treatment expectation: Contract | | 85% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | **643,181.00** |
| Total Program expenditures | | 521,992.37 |
| Total Clients Served | | 39.00 |
| Expenditures per [case] | | 13,384.42 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | | | 364,589 | 311,427 |
| Benefits | 5200 | | | 111,870 | 69,939 |
| Overhead | All others | | | 164,223 | 138,360 |
| Training | 5905 | | | 2,500 | 2,267 |
| | **Total** | 0 | 0 | 643,181 | 521,992 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | Y |
| Data collection | | Y |
| Quality assurance expectations | | Y |

| Program Name: Boys and Girls Village - Multisystemic Therapy: Building Stronger Families( MST-BSF) | | |
|---|---|---|
| Geographic Location Covered: Region 1 ( Bridgeport and Norwalk DCF area office regions) | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 21 | 10 | 48% | 21 | 17 | 81% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 8 | 11 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 6 | 11 |
| Clients completing treatment plan | 4 | 2 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

DCF closed and took back referral or client declined. (We do not maintain waitlist, DCF may not send referrals if we are at max caseloads for existing clinicians or staff vacancies)
For SFY2024, out of 11 cases eligible for treatment, 4 cases are still active so the percent achieving treatment expectations could rise to 56%.

| Are treatment goals being attainec | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 6 | 11 |
| [Cases] eligible for treatment | 6 | 11 |
| [Cases] achieving treatment goal | 4 | 2 |
| Percent achieving contracted treatment expectation: Actual | 67% | 18% |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 489,112.00 | $ 564,137.00 |
| Total Clients Served | 10 | 17 |
| Expenditures per [case] | $ 48,911.20 | $ 33,184.53 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 285,750 | $ 226,126 | $ 255,348 | $ 293,623 |
| Benefits | 5200 | $ 70,928 | $ 68,346 | $ 71,497 | $ 74,903 |
| Overhead | | $ 116,597 | $ 189,764 | $ 157,590 | $ 187,403 |
| Training | 5905 | $ 3,600 | $ 4,876 | $ 4,600 | $ 8,208 |
| | **Total** | $ 476,875 | $ 489,112 | $ 489,035 | $ 564,137 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Community Health Resources - Multisystemic Family Therapy - Building Stronger Families | | |
|---|---|---|
| Geographic Location Covered: Norwich | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 21 | 12 | 57% | 21 | 17 | 81% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: There was an increase in utilization from FY23 when compared to FY24.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The program is currently closed to DCF referrals only and we did not reach full capacity due to a lower-than-expected number of referrals from DCF. Despite having the necessary staff and available capacity to serve more families, the referral volume did not meet the program's ability to serve more families.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 8 | 8 |
| Clients receiving evaluation only | 1 | 2 |
| Clients receiving services | 12 | 17 |

**Narrative explanation for the reasons that referrals go unserved**

Referrals do not go unserved, as we are required to accept all referrals made by DCF. If a referral is made, we ensure that it is processed and served, regardless of other factors.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 6 | 7 |
| [Cases] eligible for treatment | 5 | 5 |
| [Cases] achieving treatment goal | 3 | 4 |
| Percent achieving contracted treatment expectation: Actual | 75% | 80% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $480,973 | $493,238 |
| Total Program expenditures | $408,780 | $550,490 |
| Total Clients Served | 12 | 17 |
| Expenditures per [case] | $34,065 | $32,382 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $279,410 | $214,249 | $310,259 | $298,782 |
| Benefits | 5200 | $76,268 | $60,683 | $79,632 | $81,081 |
| Overhead | 7000 | $58,221 | $55,368 | $90,773 | $84,947 |
| Training | 5905 | $2,000 | $1,643 | $12,000 | $833 |
| | Total | $415,899 | $331,943 | $492,663 | $465,643 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name:Family Centered Services - MST-BSF** | | |
| **Geographic Location Covered: Region 2 Millford and New Haven** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **N** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **21** | **16** | **76%** | **21** | **19** | **90.40%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: Clinician turnover was high in 2023 and clinician vacancies did not allow acceptance of all referrals.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: No it does not reflect a decreased need for services. This service provides treatment for a very hard to treat population.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 16 | 19 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 16 | 19 |
| Clients completing treatment plan | 12 | 13 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Staff turnover in 2023 and 2024 caused barriers to client services. There were administrative removals due to a lack of clinician, resulting in lower percentages of clients that completed treatment.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 16 | 19 |
| [Cases] eligible for treatment | 16 | 19 |
| [Cases] achieving treatment goal | 10 | 11 |
| Percent achieving contracted treatment expectation: Actual | 63% | 58% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **88,660.75** | **88,952.12** |
| Total Program expenditures | 495,203.05 | 499,905.23 |
| Total Clients Served | 16 | 19 |
| Expenditures per [case] | 30950.21 | 26310.8 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5100 | 303,607.48 | 435,390.20 | 300,007.55 | 277,691.24 |
| Benefits | 5200 | 59,605.68 | 70,996.68 | 73,677.66 | 72,120.89 |
| Overhead | 7000 | 59,812.85 | 59,812.85 | 58,243.79 | 65,548.54 |
| Training | 5905 | 11,000.00 | 18,853.73 | 15,000.00 | 16,019.35 |
| | **Total** | 434,026.01 | 585,053.46 | 446,929.00 | 431,380.02 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: Wellmore - MST-BSF** | | |
| **Geographic Location Covered: Greater Waterbuiry** | | |
| **DCF open case needed for referral or admission?** | **yes** | |
| **Is Program 3rd Party Billable?** | **no** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **21** | **14** | **67%** | **21** | **13** | **66%** |

A program with such a specialized treatment focus as MST-BSF, doing home-based work with substance use disordered parents with children in/out of the home has challenges to staffing as the available workforce is small and highly competitive. Despite turnover of our bilingual clinician midway through FY23, we were able to serve two-thirds of the expected families during these time periods. Staffing vacancies were addressed aggressively through recruiting, creative onboarding and sign-

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 11 | 12 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 10 | 9 |
| Clients completing treatment plan | 10 | 9 |

Data associated with these charts is pulling ONLY those clients who were admitted and discharged during each fiscal year. Many clients have cases that cross the fiscal year end date, starting in one first year and closing in another. For clients served by evidence based practices like MST-BSFT, this is quite common as the length of stay for MST-BSF is between 6-9 months.

The majority of those referred to the program were served by our MST-BSF team. Nine percent of families referred to MST_BSF in FY23 did not respond to outreach to initiate care. In FY24, one family withdrew, one family was not able to be contacted and one family did not meet program requirements.

| **Are treatment goals being attainec** | **SFY2023** | **SFY2024** |
|---|---|---|
| [Cases] receiving initial assessment | 10 | 9 |
| [Cases] eligible for treatment | 4 | 3 |

| | | |
|---|---|---|
| [Cases] achieving treatment goal | 0 | 3 |
| Percent achieving contracted treatment expectation: Actual | 0 | 100% |
| Percent achieving contracted treatment expectation: Contract | 70% | 70% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| **Total Program Expenditures** | **SFY 2023** | **SFY2024** |
|---|---|---|
| Total Program allocations | **$504,978** | **$522,027** |
| Total Program expenditures | $476,707 | $494,022 |
| Total Clients Served | $14 | $13 |
| Expenditures per [case] | $34,050.47 | $38,001.70 |

| **DCF Funding and Expenditures by Account** | | **SFY 2023** | | **SFY2024** | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | $307,540 | $268,649 | $323,766 | $274,442 |
| Benefits | 5200 | $73,410 | $75,647 | $76,793 | $70,748 |
| Overhead | 5400 to 5909; 5990 to 7150 | $114,768 | $131,833 | $119,084 | $145,831 |
| Training | 5910 | $9,260 | $578 | $2,384 | $3,001 |
| | **Total** | $504,978 | $476,707 | $522,027 | $494,022 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wheeler - MST BSF Manchester Hartford** | | |
| **Geographic Location Covered: DCF Regions 4 & 6** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | **NO** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **42** | **23** | **55%** | **21** | **23** | **106.00%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

-There were 2 staffing vacancies during FY2023 and 2 during some of FY2024, but we do not believe this impacted the total amount of clients served. IFP has also had interns in the past that carried a small caseload. At times there may have been a waitlist to open services until a IFP staff had an opening. Also, IFP workers have had cases that surpassed their usual caseload capacity when necessary.

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

Data for FY 23 reflects two teams, one for Manchester and one for Hartford. Census was low in Hartford for year both due to vacancies and low referrals. In FY24 funding was cut to a single team, to serve both area offices.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 16 | 23 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 23 | 23 |
| Clients completing treatment plan | 22 | 23 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

MST-BSF had clinician staffing challenges in FY 2023 which impacted annual service capacity. "Completing treatment plan" reflects number for all clients served during year that were actively engaged in treatment and had treatment plan.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 23 | 23 |
| [Cases] eligible for treatment | 23 | 23 |
| [Cases] achieving treatment goal | 15 | 8 |
| Percent achieving contracted treatment expectation: Actual | 93.75% | 67.00% |
| Percent achieving contracted treatment expectation: Contract | 85% | 85% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. Row 27 reflects # successful discharges, row 28 is percentage of discharges that were successful (i.e.15 of 16, and 8 of 12 discharges)

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **966,037.00** | **607,404.00** |
| Total Program expenditures | 853,968.00 | 551,525.00 |
| Total Clients Served | 23 | 23 |
| Expenditures per [case] | 37,129.04 | 23,979.35 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 649,909.28 | 483,242.28 | 300,979.34 | 274,871.44 |
| Benefits | 5200 | 143,068.53 | 131,183.89 | 77,971.18 | 85,756.55 |
| Overhead | All others | 166,509.19 | 228,958.83 | 222,903.49 | 187,172.66 |
| Training | 5905 | 6,550.00 | 10,583.00 | 5,550.00 | 3,724.35 |
| | **Total** | 966,037.00 | 853,968.00 | 607,404.00 | 551,525.00 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Wheeler - MST IPV/BSF Blended Team | | |
|---|---|---|
| Geographic Location Covered: DCF Region 6 | | |
| DCF open case needed for | (y/n) | YES |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | n/a | | | 15 | 11 | 73.00% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

Data is reported for "Blended Team" that was initiated in FY24 as a result of consolidation of two separately contracted teams in Region 6 (one standard BSF and one IPV team with different service capacity expectations) . Utilization of standard BSF team in FY23 was low due to staffing challenges. After transition, majority of cases at start of FY24 were IPV, with longer length of treatment impacting numbers served, along with staffing transitions impacting capacity. Team fully staffed at present and at full capacity (12)

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: No decreased need for the service type or workforce. The team is now fully staffed and has 12 active clients.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | | 12* |
| Clients receiving evaluation only | | 1 |
| Clients receiving services | | 11 |
| Clients completing treatment plan | | 11 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | 12 |
| [Cases] eligible for treatment | | 11 |
| [Cases] achieving treatment goal | | 9 |
| Percent achieving contracted treatment expectation: Actual | | 100.00% |
| Percent achieving contracted treatment expectation: Contract | | 85% |
| | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. 9 cases discharged during year, all successful -

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **480,978.00** | **489,035.00** |
| Total Program expenditures | 285,760.00 | 498,573.78 |
| Total Clients Served | - | 11.00 |
| Expenditures per [case] | #DIV/0! | 45,324.89 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 311,595.09 | 142,199.33 | 316,535.06 | 284,583.84 |
| Benefits | 5200 | 49,758.86 | 33,924.53 | 40,490.20 | 48,588.24 |
| Overhead | All others | 116,624.06 | 108,610.14 | 125,009.74 | 159,439.51 |
| Training | 5905 | 3,000.00 | 1,026.00 | 7,000.00 | 5,962.19 |
| | **Total** | 480,978.00 | 285,760.00 | 489,035.00 | 498,573.78 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: MST-Emerging Adults Hamden DCF Team 1 | | |
|---|---|---|
| Geographic Location Covered: Hamden/Milford/Bridgeport/Waterbury | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 16 | 1 | 6.25 | | | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

There is a need for MST-EA in these regions, however workforce limitations prohibited program ability to serve more than 1 client, taken on by supervisor.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 1 | |
| Clients receiving evaluation only | n/a | |
| Clients receiving services | 1 | |
| | | |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Staffing vacancies and program closure decision by DCF as of 6/30/23.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 1 | |
| [Cases] eligible for treatment | 1 | |
| [Cases] achieving treatment goal | 1 | |
| Percent achieving contracted treatment expectation: Actual | 100 | |
| Percent achieving contracted treatment expectation: Contract | 100 | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **750750** | **0** |
| Total Program expenditures | 232285 | 0 |
| Total Clients Served | 1 | 0 |
| Expenditures per [case] | 232285 | 0 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 363132 | 78924 | 0 | 0 |
| Benefits | | 98045 | 20719 | 0 | 0 |
| Overhead | | 278841 | 130104 | 0 | 0 |
| Training | | 10732 | 2538 | 0 | 0 |
| | **Total** | 750750 | 232285 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Boys and Girls Villabe - Multisystemic Therapy: Problem Sexual Behavior (MST-PSB) | | |
|---|---|---|
| Geographic Location Covered: DCF Region 1, DCF Region 2 | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 24 | 26 | 108% | 24 | 19 | 79% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 36 | 21 |
| Clients receiving evaluation only | 2 | 0 |
| Clients receiving services | 18 | 7 |
| Clients completing treatment plan | 12 | 4 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

For SFY2024, out of 7 cases eligible for treatment, 2 cases are still active so the percent achieving treatment expectations could rise to 86%.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 20 | 7 |
| [Cases] eligible for treatment | 18 | 7 |
| [Cases] achieving treatment goal | 12 | 4 |
| Percent achieving contracted treatment expectation: Actual | 67% | 57% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 449,880.00 | $ 513,403.00 |
| Total Clients Served | 26 | 19 |
| Expenditures per [case] | $ 17,303.08 | $ 27,021.21 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 314,840.00 | $ 264,091.00 | $ 332,499.00 | $ 251,278.00 |
| Benefits | 5200 | $ 88,100.00 | $ 51,541.00 | $ 93,100.00 | $ 50,919.00 |
| Overhead | | $ 149,141.00 | $ 132,778.00 | $ 139,098.00 | $ 205,843.00 |
| Training | 5905 | $ 1,500.00 | $ 1,470.00 | $ 3,000.00 | $ 5,363.00 |
| | **Total** | $ 553,581.00 | $ 449,880.00 | $ 567,697.00 | $ 513,403.00 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: NAFI, Inc., MST PSB** | | |
| **Geographic Location Covered: Site 2 -Willimantic, Norwich Middletown, Manchester** | | |
| **DCF open case needed for referral or admission?** | **N** | |
| **Is Program 3rd Party Billable?** | **Y** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| **Defined as annual capacity** | **24** | **18** | **75%** | **24** | **15** | **63%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Workforce impacted hiring of 3rd clinician.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The lower utilization numbers reflect a period of time where NAFI community based programs (not solely PSB) encountered Workforce challenges. The need for this service continues to be in high demand.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 35 | 19 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 18 | 15 |
| Clients completing treatment plan | 10 | 14 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

**SFY2023:**

Staffing: Workforce challenges

Not all referrals met admission criteria

**SFY2024:**

Staffing: Bilingual Clinician Vacancy

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 18 | 15 |
| [Cases] eligible for treatment | 18 | 15 |
| [Cases] achieving treatment goal | 10 | 14 |
| Percent achieving contracted treatment expectation: Actual | 100% | 86% |
| Percent achieving contracted treatment expectation: Contract | 85% | 85% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **757116** | **688905** |
| Total Program expenditures | 564775 | 525255 |
| Total Clients Served | 18 | 15 |
| Expenditures per [case] | 31376 | 35017 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 362799 | 269377 | 379560 | 279416 |
| Benefits | | 97931 | 71084 | 100583 | 72743 |
| Overhead | | 291298 | 220690 | 204347 | 168340 |
| Training | | 5088 | 3624 | 4415 | 4756 |
| | **Total** | 757116 | 564775 | 688905 | 525255 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: NAFI, Inc., MST EA** | | |
| **Geographic Location Covered: Hartford Regions 4 and 6** | | |
| **DCF open case needed for referral or admission?** | **Y** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| **Defined here as annual capacity** | **33** | **14** | **42%** | **33** | **19** | **57%** |

**Narrative explanation for declines in utilization and/or utilization significantly b14elow contract**
The reasons for the decline or low utilization: Workforce challenges
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: There is a high demand for this service. At this point in time, workforce challenges have been resolved, with the program fully staffed and utilization running between 81%-!00%

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 16 | 19 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 14 | 19 |
| Clients completing treatment plan | 12 | 10 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
**SFY2023:**
Staffing: Workforce challenges throughout this fiscal year, Entered year with 3 of 4 staff. 2 of the 3 were and ramping up clients following training. and resigned within 6 months,
Not all referrals met admission criteria. There were significant barriers workforce challenges encountered during FY 2023
**SFY2024:**
Staffing: Entered FY 24 with 1 of 4 Therapists, Hired 2 therapists 8/23 and Bilingual Therapist 4/24; Effective 4/24 Fully staffed
Initial challenge with referrals. At this time, program is fully utilized
Not all referrals met admission criteria

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 14 | 19 |
| [Cases] eligible for treatment | 14 | 19 |
| [Cases] achieving treatment goal | 12 | 10 |
| Percent achieving contracted treatment expectation: Actual | 88% | 56% |
| Percent achieving contracted treatment expectation: Contract | 70% | 70% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **786424** | **909313** |
| Total Program expenditures | 452001 | 609188 |
| Total Clients Served | 14 | 19 |
| Expenditures per [case] | 32285.78571 | 32062.52632 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 366643 | 202790 | 550060 | 328617 |
| Benefits | | 98994 | 53432 | 145766 | 86071 |
| Overhead | | 312662 | 192600 | 206912 | 190923 |
| Training | | 8125 | 3179 | 6576 | 3577 |
| | **Total** | 786424 | 452001 | 909314 | 609188 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Child Guidance Clinic - Outpatient Psychiatric Clinic for Children | | |
|---|---|---|
| Geographic Location Covered: Greater Hartford and Tolland Counties, Region 4 | | |
| DCF open case needed for referral or admission? | No | |
| Is Program 3rd Party Billable? | Yes | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 560 | 811 | 145% | 560 | 748 | 134% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 811 | 748 |
| Clients receiving evaluation only | 11 | 20 |
| Clients receiving services | 800 | 728 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 326 | 338 |
| [Cases] eligible for treatment | 315 | 318 |
| [Cases] achieving treatment goal | 244 | 252 |
| Percent achieving contracted treatment expectation: Actual | 75% | 79% |
| Percent achieving contracted treatment expectation: Contract | 75% | 79% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | 1627227.34 | 1692415.02 |
| Total Clients Served | 811 | 728 |
| Expenditures per [case] | 2006.45 | 2324.75 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101+7110 | 530436 | 1299848 | 543962 | 1353343.26 |
| Benefits | 5200+7120 | | 243796 | | 239055.04 |
| Overhead | 5703+5704+5903+5908 | | 81563.84 | | 95636.72 |
| Training | 5904+5905 | | 2019.5 | | 4380 |
| | **Total** | 530436 | 1627227.34 | 543962 | 1692415.02 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | no | no |
| Data collection | no | no |
| Quality assurance expectations | no | no |

| | | |
|---|---|---|
| **Program Name: Community Guidance Center of Central CT - OPCC** | | |
| **Geographic Location Covered: Central CT** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **NO** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **YES** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **N/A** | | | **N/A** | | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | N/A | N/A |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 796 | 842 |
| Clients completing treatment plan | 796 | |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 382 | 323 |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **543044** | **556892** |
| Total Program expenditures | 543044 | 556892 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 214090.66 | 214090.66 | 206985.38 | 206985.38 |
| Benefits | 5200 | 205460.5 | 205460.5 | 199420.01 | 199420.01 |
| Overhead | 7000 | 123492.84 | 123492.84 | 149736.61 | 179683.93 |
| Training | 5905 | 774 | 0 | 750 | 0 |
| | **Total** | 543818 | 543044 | 556892 | 586089.32 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Child Guidance Clinic - Outpatient Psychiatric Clinic for Children | | |
|---|---|---|
| Geographic Location Covered: Greater Hartford and Tolland Counties, Region 4 | | |
| DCF open case needed for referral or admission? | No | |
| Is Program 3rd Party Billable? | Yes | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 560 | 811 | 145% | 560 | 748 | 134% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 811 | 748 |
| Clients receiving evaluation only | 11 | 20 |
| Clients receiving services | 800 | 728 |
| | | |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 326 | 338 |
| [Cases] eligible for treatment | 315 | 318 |
| [Cases] achieving treatment goal | 244 | 252 |
| Percent achieving contracted treatment expectation: Actual | 75% | 79% |
| Percent achieving contracted treatment expectation: Contract | 75% | 79% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | 1627227.34 | 1692415.02 |
| Total Clients Served | 811 | 728 |
| Expenditures per [case] | 2006.45 | 2324.75 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101+7110 | 530436 | 1299848 | 543962 | 1353343.26 |
| Benefits | 5200+7120 | | 243796 | | 239055.04 |
| Overhead | 5703+5704+5903+5908 | | 81563.84 | | 95636.72 |
| Training | 5904+5905 | | 2019.5 | | 4380 |
| | **Total** | 530436 | 1627227.34 | 543962 | 1692415.02 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | no | no |
| Data collection | no | no |
| Quality assurance expectations | no | no |

| | | |
|---|---|---|
| **Program Name: Community Health Resources - Outpatient Psychiatric Clinic for Children** | | |
| **Geographic Location Covered: Hartford, Manchester** | | |
| **DCF open case needed for referral or admission?** | **N** | |
| **Is Program 3rd Party Billable?** | **Y** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **NA** | **3779** | **NA** | **NA** | **3250** | **NA** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: OPCC does not have contracted rates of utilization. CHR continues to be a leader across the state regarding the volume of children and families served across our outpatient settings.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Workforce limitations including staff vacancy and staff use of FMLA. Since the legislative change was made to allow Associate Licensed professionals to work in private practice settings, we find that many staff are leaving to work in private practice where there is more flexibility in schedules, lower acuity cases, and decreased demands for documentation as private practice settings do

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 1580 | 1394 |
| Clients receiving evaluation only | 421 | 295 |
| Clients receiving services | 3779 | 3250 |
| Clients completing treatment plan | 1993 | 1541 |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 1461 | 1287 |
| [Cases] eligible for treatment | 1040 | 992 |
| [Cases] achieving treatment goal | 1112 | 874 |
| Percent achieving contracted treatment expectation: Actual | 71% | 69% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $404,237 | $414,545 |
| Total Program expenditures | $2,127,315 | $3,206,504 |
| Total Clients Served | 3,779 | 3,250 |
| Expenditures per [case] | $563 | $987 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $1,050,072 | $1,236,503 | $991,227 | $1,677,174 |
| Benefits | 5200 | $285,534 | $343,247 | $240,305 | $453,419 |
| Overhead | 7000 | $250,223 | $276,500 | $248,605 | $496,260 |
| Training | 5905 | $2,400 | $589 | $2,400 | $771 |
| | Total | $1,588,229 | $1,856,839 | $1,482,537 | $2,627,624 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Clifford Beers - OPCC | | |
|---|---|---|
| Geographic Location Covered: Connecticut | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | Yes |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 910 | 807 | 88.68% | 910 | 742 | 81.54% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

One of the reasons for a lower utilization rate is the number of clients who needed referral to higher levels of care. Another reason possibly includes that families are not able to accept available appointments due to their personal schedules and they eventually have services closed as they do not accept multiple offerings of available appointments.

| Referrals to Program (cases) | SFY2023 | SFY2024 | |
|---|---|---|---|
| Referrals | N/A | N/A | walk ins /Open access |
| Clients receiving evaluation only | 152 | 135 | |
| Clients receiving services | 807 | 742 | |
| Clients completing treatment plan | 117 | 127 | completing treatment - reason for discharge (exclude all but the ones that have completed treatment) |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

There are several usual reasons that referrals may go unserved such as the legal guardian not requesting treatment or agreeing to treatment, clients being outside of our catchment area or not being covered by the insurance we are currently accepting, or clients that clearly need a higher level of care (ex. post hospitalization client has been referred to an IOP level of care which we do not offer). Evaluation only services are typically mostly related to clients not completing the intake process or needing referral to a higher level of care.

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 807 | 742 | |
| [Cases] eligible for treatment | 655 | 607 | |
| [Cases] achieving treatment goal | 188 | 189 | |
| Percent achieving contracted treatment expectation: Actual | 67.90% | 68.50% | Pulled from PIE; of discharged clients only |
| Percent achieving contracted treatment expectation: Contract | 60% | 60% | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $1,474,538.88 | $1,880,521.81 |
| Total Program expenditures | $1,460,538.66 | $2,269,475.94 |
| Total Clients Served | 807 | 742 |
| Expenditures per [case] | $1,809.84 | $3,058.59 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 1,474,538.88 | 803,386.50 | 1,880,521.81 | 1,280,648.92 |
| Benefits | | | 172,545.72 | | 266,035.02 |
| Overhead | | | 484,180.69 | | 721,893.58 |
| Training | | | 425.75 | | 898.42 |
| | Total | 1,474,538.88 | 1,460,538.66 | 1,880,521.81 | 2,269,475.94 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Clifford Beers - MFCG- Outpatient Psychiatric Clinic for Children - OPCC | | |
|---|---|---|
| Geographic Location Covered: Norwalk, Weston, Wilton, Darien, New Canaan | | |
| DCF open case needed for referral or admission? | (y/n) | N |
| Is Program 3rd Party Billable? | (y/n) | Y |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 369 | 712 | 82% | 369 | 293 | 79.40% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 766 | 612 |
| Clients receiving evaluation only | 55 | 38 |
| Clients receiving services | 711 | 574 |
| Clients completing treatment plan | 137 | 62 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
For OPCC we aren't currently tracking referrals that don't turn into services (i.e.: telephone service only).

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 765 | 612 |
| [Cases] eligible for treatment | 710 | 574 |
| [Cases] achieving treatment goal | 238 | 117 |
| Percent achieving contracted treatment expectation: Actual | 85.82% | 83.76% |
| Percent achieving contracted treatment expectation: Contract | 60% | 60% |

used met tx plan goals

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | 711 | 574 |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: FCAid - Outpatient Psychiatric Clinic for Children** | | |
| **Geographic Location Covered: Greater Danbury** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **0** | **1743** | | **0** | **1573** | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 869 | 555 |
| Clients receiving evaluation only | 64 | 68 |
| Clients receiving services | 1743 | 1573 |
| Clients completing treatment plan | 100% | 100% |

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 869 | 555 |
| [Cases] eligible for treatment | 916 | 856 |
| [Cases] achieving treatment goal | 754 | 616 |
| Percent achieving contracted treatment expectation: Actual | n/a | n/a |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **341770** | **350485** |
| Total Program expenditures | 2078603 | 6122015 |
| Total Clients Served | 1743 | 1573 |
| Expenditures per [case] | 1,192.54 | 3,891.94 |

****funding is for all sites**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 3379534 | 3793838 | 3491499 | 4149713 |
| Benefits | 5200 | 725233 | 840189 | 748589 | 849069 |
| Overhead | 7100 | 329422 | 362601 | 314422 | 372434 |
| Training | 5905 | 4525 | 3892 | 2525 | 7649 |
| | **Total** | 4438714 | 5000520 | 4557035 | 5378865 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: FCAid - Outpatient Psychiatric Clinic for Children** | | |
| **Geographic Location Covered: New Milford** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **n** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **y** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **0** | **323** | | **0** | **273** | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 161 | 123 |
| Clients receiving evaluation only | 6 | 7 |
| Clients receiving services | 323 | 273 |
| Clients completing treatment plan | 100% | 100% |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Families may decline services due to unavailability or no longer needing services. Do not fall within catchment area. When cases are not appropriate for level of care or admission criteria will be referred out.

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 161 | 123 |
| [Cases] eligible for treatment | 134 | 91 |
| [Cases] achieving treatment goal | 58 | 62 |
| Percent achieving contracted treatment expectation: Actual | n/a | n/a |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **0** | **0** |
| Total Program expenditures | | |
| Total Clients Served | 323 | 273 |
| Expenditures per [case] | 0 | 0 |

**funding listed in Danbury**

all financial info listed in danbury

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | | | | |
| Benefits | 5200 | | | | |
| Overhead | 7100 | | | | |
| Training | 5905 | | | | |
| | **Total** | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: FCAid Outpatient Psychiatric Clinic for Children** | | |
| **Geographic Location Covered: Waterbury** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **n** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **y** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **0** | **558** | | **0** | **588** | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 272 | 362 |
| Clients receiving evaluation only | 18 | 10 |
| Clients receiving services | 558 | 588 |
| Clients completing treatment plan | 100% | 100% |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) Families may decline services due to unavailability or no longer needing services. Do not fall within catchment area. When cases are not appropriate for level of care or admission criteria will be referred out

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 272 | 362 |
| [Cases] eligible for treatment | 202 | 318 |
| [Cases] achieving treatment goal | 113 | 83 |
| Percent achieving contracted treatment expectation: Actual | n/a | n/a |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **0** | **0** |
| Total Program expenditures | | |
| Total Clients Served | 558 | 588 |
| Expenditures per [case] | 0 | 0 |

**funding listed in Danbury**

see financial information in Dnby

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | | | | |
| Benefits | 5200 | | | | |
| Overhead | 7100 | | | | |
| Training | 5905 | | | | |
| | **Total** | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: UFCS-** OPCC | | |
| **Geographic Location Covered:** DCF Region 3 | | |
| **DCF open case needed for referral or admission?** | N | |
| **Is Program 3rd Party Billable?** | Y | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **NA** | **1456** | **NA** | **NA** | **1492** | **NA** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract:** Our OPCC does not have a contracted utilization amount. However, there has been a slight increase in clients served.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 1456 | 1492 |
| Clients receiving evaluation only | 80 | 95 |
| Clients receiving services | 1456 | 1492 |
| Clients completing treatment plan | 297 | 300 |

**Narrative explanation for the reasons that referrals go unserved:** The only time a child would go unserved would be those needing a HLOC. These clients are welcomed back as soon HLOC is completed. There are a high number of clients that are continuing treatment therefore they have not completed their treatment plan.

| Are treatment goals being attainec | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 1456 | 1492 |
| [Cases] eligible for treatment | 1456 | 1492 |
| [Cases] achieving treatment goal | 297 | 300 |
| Percent achieving contracted treatment expectation: Actual | 20% | 20% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **526724** | **540155** |
| Total Program expenditures | 1713941.94 | 1359691.1 |
| Total Clients Served | 1456 | 1492 |
| Expenditures per [case] | 1,177.16 | 911.32 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 879813.265 | 1181775.2 | 892719.9 | 860389.93 |
| Benefits | | 190896.706 | 277115.67 | 223236.62 | 200920.62 |
| Overhead | | | 254268.07 | | 298045.84 |
| Training | | 750 | 783 | 10250 | 334.71 |
| | **Total** | 1071459.971 | 1713941.94 | 1126206.52 | 1359691.1 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Wellmore - OPCC (Child Outpatient) | | |
|---|---|---|
| Geographic Location Covered: Greater Waterbury (but not restricted - service to anyone who wishes to engage) | | |
| DCF open case needed for referral or admission? | no | |
| Is Program 3rd Party Billable? | yes | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | n/a | 914 | n/a | n/a | 1092 | n/a |

Wellmore's Child Outpatient Service has faced significant challenges with staffing throughout the two fiscal years. As the Child OP is an ECC, we do not have the ability to turn families away from service even though we have staffing challenges. We met ECC regulatory requirements both years.

| | |
|---|---|
| | |

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 499 | 620 |
| Clients receiving evaluation only | 90 | 63 |
| Clients receiving services | 499 | 620 |
| Clients completing treatment plan | 475 | 597 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Families that were identified as evaluation only were deemed to need a higher level of therapeutic care; staff continued to support and manage the families until that care was available. All families receiving an intake were quickly transitioned into care with a coconstructed treatment plan within the first month of care. The Child OP team serves families for as long as they meet clinical necessity and are attending sessions. Those families who completed an intake AND were discharged within the same year are often families who are struggling in a variety of ways; this is evident in the low completion percentages below (i.e.: : with LOS 3 mo or less, met tx goals 11%, with average LOS 2.6 months; with LOS 4-6 mo met tx goals 30%, with average LOS 5.4 months) . However, when examining those families who received care over a longer period, we see a great difference: those with LOS 7-9mo, met tx goals 47%, with average LOS 8.5 months; with LOS 10-18 mo met tx goals 55%, with average LOS 14mo; with LOS 19-24 mo met goals 68%, with average LOS 21.4months; with LOS over 24mo, met tx goals 86%, with average LOS 43 months. Cases that stay engaged for longer achieve greater 'met treatment' percentages.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 499 | 620 |
| [Cases] eligible for treatment | 157 | 154 |
| [Cases] achieving treatment goal | 33 | 30 |
| Percent achieving contracted treatment expectation: Actual | 20% | 19% |
| Percent achieving contracted treatment expectation: Contract | 40% | 40% |
| | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$663,909** | **$680,839** |
| Total Program expenditures | $1,394,187 | $1,531,236 |
| Total Clients Served | $914 | $1,092 |
| Expenditures per [case] | $1,525.37 | $1,402.23 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | $414,506 | $704,301 | $415,400 | $792,935 |
| Benefits | 5200 | $83,436 | $218,983 | $85,416 | $226,463 |
| Overhead | 5400 to 5909; 5990 to 7150 | $165,451 | $469,704 | $179,458 | $511,204 |
| Training | 5910 | $516 | $1,199 | $565 | $634 |
| | **Total** | $663,909 | $1,394,187 | $680,839 | $1,531,236 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: The Village - Outpatient Psychiatric Clinic for Children | | | | | | |
|---|---|---|---|---|---|---|
| Geographic Location Covered: State wide | | | | | | |
| DCF open case needed for referral or admission? | (y/n) | no | | | | |
| Is Program 3rd Party Billable? | (y/n) | yes | | | | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | 2302 | N/A | N/A | 2484 | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 1180 | 998 |
| Clients receiving evaluation only | 138 | 137 |
| Clients receiving services | 989 | 899 |
| Clients completing treatment plan | 978 | 856 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

The vast majority of referrals are served. Exceptions include clients who do not meet admission criteria such as children with an autism spectrum diagnosis who are

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 989 | 899 |
| [Cases] eligible for treatment | 2164 | 2347 |
| [Cases] achieving treatment goal | 487 | 563 |
| Percent achieving contracted treatment expectation: Actual | 70.58% | 76.18% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **928,609.00** | **952,289.00** |
| Total Program expenditures | 3,913,744.92 | 3,962,105.19 |
| Total Clients Served | 2302 | 2484 |
| Expenditures per [case] | 1,700.15 | 1,595.05 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 2,202,077 | 2,406,531 | 2,181,246 | 2,371,242 |
| Benefits | 5200 | 511,543 | 558,243 | 532,660 | 583,194 |
| Overhead | 7150 | 461,181 | 490,395 | 490,354 | 530,137 |
| Training | 5905 | 11,385 | 8,605 | 11,385 | 1,721 |
| | **Total** | 3,186,186 | 3,463,774 | 3,215,645 | 3,486,294 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Boys & Girls Village - Parenting Support Services | | |
|---|---|---|
| Geographic Location Covered: Region 1 | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 210 | 172 | 82% | 210 | 273 | 130% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 240 | 351 |
| Clients receiving evaluation only | 10 | 34 |
| Clients receiving services | 124 | 218 |
| Clients completing treatment plan | 102 | 182 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity:

of the referrals made that did not receive services a handful did not meet eligibility criteria and the remaining were either unresponsive to program staff attempting contact or they declined services.

For SFY2024, out of 11 cases eligible for treatment, 4 cases are still active so the percent achieving treatment expectations could rise to 56%.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 134 | 252 |
| [Cases] eligible for treatment | 124 | 218 |
| [Cases] achieving treatment goal | 102 | 182 |
| Percent achieving contracted treatment expectation: Actual | 82% | 83% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 486,463.00 | $ 671,810.00 |
| Total Clients Served | 172 | 273 |
| Expenditures per [case] | $ 2,828.27 | $ 2,460.84 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 356,900 | $ 290,103 | $ 374,320 | $ 326,762 |
| Benefits | 5200 | $ 95,471 | $ 38,167 | $ 104,810 | $ 89,970 |
| Overhead | | $ 135,483 | $ 158,193 | $ 119,522 | $ 252,007 |
| Training | 5905 | $ 300 | $ - | $ 4,500 | $ 3,071 |
| | **Total** | $ 588,154 | $ 486,463 | $ 603,152 | $ 671,810 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | N |
| Quality assurance expectations | Y | N |

| Program Name: Community Health Resources - Parenting Support Services | | |
|---|---|---|
| Geographic Location Covered: Norwich | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 120 | 142 | 118% | 120 | 155 | 129% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: N/A, program exceeded contract capacity and demonstrates need for more access.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: N/A, the trend is stable across both years.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 141 | 141 |
| Clients receiving evaluation only | 13 | 15 |
| Clients receiving services | 142 | 155 |
| Clients completing treatment plan | 115 | 95 |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 87 | 112 |
| [Cases] eligible for treatment | 74 | 97 |
| [Cases] achieving treatment goal | 94 | 77 |
| Percent achieving contracted treatment expectation: Actual | 92% | 96% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $328,413 | $336,788 |
| Total Program expenditures | $304,314 | $280,883 |
| Total Clients Served | 142 | 155 |
| Expenditures per [case] | $2,143 | $1,812 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $199,138 | $178,969 | $194,739 | $166,418 |
| Benefits | 5200 | $58,172 | $57,720 | $60,140 | $41,369 |
| Overhead | 7000 | $38,392 | $41,645 | $48,947 | $43,353 |
| Training | 5905 | $500 | $0 | $0 | $47 |
| | Total | $296,201 | $278,334 | $303,826 | $251,187 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Health Resources - Parenting Support Services | | |
|---|---|---|
| Geographic Location Covered: Manchester | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 195 | 279 | 143% | 195 | 332 | 170% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: N/A - the program exceeded utilization.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The trend reflects an increased need for services. There has been an increase in referrals, many of which are waiting for other intensive community based programs. The team has reported increased levels of acuity within the family units serviced.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 155 | 194 |
| Clients receiving evaluation only | 9 | 11 |
| Clients receiving services | 279 | 332 |
| Clients completing treatment plan | 135 | 206 |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 146 | 176 |
| [Cases] eligible for treatment | 137 | 165 |
| [Cases] achieving treatment goal | 74 | 119 |
| Percent achieving contracted treatment expectation: Actual | 59% | 61% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $553,724 | $567,844 |
| Total Program expenditures | $546,241 | $578,016 |
| Total Clients Served | 279 | 332 |
| Expenditures per [case] | $1,958 | $1,741 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $307,540 | $305,363 | $303,796 | $308,979 |
| Benefits | 5200 | $100,778 | $94,865 | $103,189 | $101,312 |
| Overhead | 7000 | $75,768 | $73,719 | $87,999 | $88,984 |
| Training | 5905 | $800 | $1,221 | $800 | $0 |
| | Total | $484,886 | $475,168 | $495,783 | $499,275 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Family Centered Services - Parenting Support Services | | |
|---|---|---|
| Region 2 New Haven, Milford, surrounding towns, the Valley towns | | |
| DCF open case needed for referral or admission? | No | |
| Is Program 3rd Party Billable? | No | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 165 | 118 | 72% | 165 | 121 | 73% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: A low number of referrals was received from DCF during this time period. Also the program had a staff person out on FMLA. There is a reall need for this type of parent education.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 123 | 125 |
| Clients receiving evaluation only | 5 | 3 |
| Clients receiving services | 118 | 121 |
| Clients completing treatment plan | 109 | 121 |



**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Based on staff have a full caseloads, there is a wait for services. Sometimes clients refuse services after the initial evaluation.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 123 | 125 |
| [Cases] eligible for treatment | 118 | 121 |
| [Cases] achieving treatment goal | 109 | 121 |
| Percent achieving contracted treatment expectation: Actual | 92% | 100% |
| Percent achieving contracted treatment expectation: Contract | 66% | 100% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **59,785.01** | **67,785.12** |
| Total Program expenditures | 494,258.00 | 497,178.00 |
| Total Clients Served | 118 | 121 |
| Expenditures per [case] | 4188.63 | 4108.91 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 349,116 | 352,731 | 330,684 | 336,520 |
| Benefits | 5200 | 61,827 | 66,996 | 66,137 | 69,647 |
| Overhead | 7000 | 30,033 | 24,551 | 44,517 | 34,001 |
| Training | 5905 | 1,200 | 534 | 13,000 | 5,537 |
| | **Total** | 442,176 | 444,813 | 454,337 | 445,703 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: Middlesex Health - Parenting Support Services** | | |
| **Geographic Location Covered: Middlesex County, Guilford, Madison, Old Lyme** | | |
| **DCF open case needed for referral or admission?** | **No** | |
| **Is Program 3rd Party Billable?** | **No** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **120** | **187 referrals?** | | **120** | **122?** | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 189 | 173 |
| Clients receiving evaluation only | 13 | 9 |
| Clients receiving services | 92 | 58 |
| Clients completing treatment plan | 82 | 55 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | 361537 | 301575 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 328508 | 234780 | 301575 | 196985 |
| Benefits | | 33029 | 84051 | | 70521 |
| Mileage | | | 7481 | | 8020 |
| Supplies | | | 4591 | | 2537 |
| Training | | | 3126 | | 100 |
| Phone | | | 903 | | 1136 |
| postage | | | 8 | | 32 |
| G&A | | | 26597 | | 22244 |
| | | | | | |
| | | | | | |
| | | | | | |
| | Total | 361537 | 361537 | 301575 | 301575 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name: Saint Francis Hospital Parenting Support Services | | |
|---|---|---|
| Geographic Location Covered: Region 4 Hartford (Windsor, West Hartford, Hartford, Bloomfield) | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 330 | 418 | 127% | 330 | 528 | 160% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: N/A
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:
N/A Consistently exceeding contractual expectations

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 481 | 528 |
| Clients receiving evaluation only | 71 | 62 |
| Clients receiving services | 425 | 449 |
| Clients completing treatment plan | 275 | 312 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

All referrals result in the program being introduced and an initial assessment being offered. As PSS is a voluntary service, clients may decline services, move out of catchment area, become incarcerated or need more intensive services.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 425 | 449 |
| [Cases] eligible for treatment | 425 | 449 |
| [Cases] achieving treatment goal | 275 | 312 |
| Percent achieving contracted treatment expectation: Actual | 83% | 95% |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 984,220 | 993,699 |
| Total Program expenditures | 930,365 | 941,452 |
| Total Clients Served | 425 | 449 |
| Expenditures per [case] | 2189 | 2097 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 8101 | 725,332 | 679,664 | 696,358 | 652,211 |
| Benefits | 5200 | 174,442 | 163,459 | 178,059 | 166,770 |
| Overhead | 5300 | 3,643 | 3,643 | 5,846 | 5,846 |
| Training | 5905 | 2,200 | 1,671 | 2,201 | 2,156 |
| | **Total** | 905,618 | 848,438 | 882,462 | 826,982 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: The children's Center of Hamden - Quality Parenting Center | | |
|---|---|---|
| Geographic Location Covered: DCF Region 2 | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| Visits: | 4,380 | 1,948 | 44.5% | 4,380 | 2,688 | 61.4% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

ANSWER: The Quality Parenting Centers are a new service type for CT. Providers and DCF have agreed, in hindsight, that when the contracts were developed that 4380 visits was ambitious and not a realistic expectation.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

ANSWER: This data does not reflect a decreased need for the service type

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 80 | 92 |
| Clients receiving evaluation only | 11 | 10 |
| Clients receiving services | 82 | 102 |
| Clients completing treatment plan | 53 | 61 |

* this number reflects multiple parents on the same referral that receive separate visits

**Narrative explanation for the reasons that referrals go unserved**

(This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

ANSWER: Families were not always informed by their DCF social workers, that the worker was referring them to QPC. Therefore, when the QPC reached out to the family to schedule an intake, the family refused services. There are also struggles contacting parents despite multiple attempts

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 76 | 86 |
| [Cases] eligible for treatment | 62 | 70 |
| [Cases] achieving treatment goal | 24 | 29 |
| Percent achieving contracted treatment expectation: Actual | Not defined by DCF | Not defined by DCF |
| Percent achieving contracted treatment expectation: Contract | Not defined by DCF | Not defined by DCF |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,297,910** | **1,104,100** |
| Total Program expenditures | 1,105,894 | 1,007,505 |
| Total Clients Served | 82 | 102 |
| Expenditures per [case] | 13,487 | 9,878 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 577,759 | 554,829 | 577,759 | 800,557 |
| Benefits | 5302 | 161,599 | 158,438 | 161,599 | 157,818 |
| Overhead | 7000 | 178,183 | 199,117 | 192,792 | 220,817 |
| Training | 5905 | 3,000 | 2,615 | 3,000 | 2,297 |
| | **Total** | 920,541 | 914,999 | 935,150 | 1,181,489 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Prevention Care Management Entity (PCME) | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | n | |
| Is Program 3rd Party Billable? | n | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | N/A | N/A | 2,500 | 1,860 | 74.4% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: SFY2024 was a start-up year for PCME. IFCS and VCM programs were rolled up as service types under the PCME program, and a new Community Pathways service types was added. Referrals for Community Pathways have had a slow start. We expect lower utilization due to this being the first year of a new implementation.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The IFCS service type had temporary workforce limitations for three months during SFY2024 which resulted in lower utilization, but do not appear to reflect an ongoing trend at this time.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | N/A | 1392 |
| Clients receiving evaluation only | N/A | 156 |
| Clients receiving services | N/A | 1003 |
| Clients completing treatment plan | N/A | 842 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | N/A | 1,271 | Discharged in SFY and received initial assessment |
| [Cases] eligible for treatment | N/A | 924 | Eligible for treatment and discharged in SFY |
| [Cases] achieving treatment goal | N/A | 662 | Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. |
| Percent achieving contracted treatment expectation: Actual | N/A | 71.6% | |
| Percent achieving contracted treatment expectation: Contract | N/A | 80.0% | |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | **9,769,741** |
| Total Program expenditures | | 8,472,672 |
| Total Clients Served | | 1,865 |
| Expenditures per [case] | | 4542.987737 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | | | 4,927,410 | 4,687,242 |
| Benefits | 5200 | | | 1,411,396 | 1,315,560 |
| Overhead | 7150 | | | 1,675,143 | 1,675,143 |
| Training | 5905 | | | 40,000 | 5,734 |
| | **Total** | 0 | 0 | 8,053,949 | 7,683,680 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | Y |
| Data collection | | Y |
| Quality assurance expectations | | N |

| Program Name: Family and Children's Agency - PPSP (Permanency Placement Service Program) | | | | | | |
|---|---|---|---|---|---|---|
| Geographic Location Covered: Fairfield County, New Haven County, Waterbury region | | | | | | |
| DCF open case needed for referral or admission? | (y/n) | N | | | | |
| Is Program 3rd Party Billable? | (y/n) | N - DCF funded | | | | |
| | | | | | | |
| Program Utlization | SFY 2023 | | | SFY2024 | | |
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| PPSP | 2 cases, 118.50 contract hours available (full hours not always utilized in FY per needs of family) | 2 cases, 87.25 hours billed to DCF ($6,162.54) | 73.60% | 2 cases, 136.50 contract hours available (full hours not always utilized in FY per needs of family) | 2 cases, 44 hours billed to DCF ($3,107.77) | 32.20% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: **FCA has a higher capacity for providing the much needed PPSP services for adoptive families in Connecticut. Low utilization is due to low referral rate and an overall lack of knowledge (from families and providers) of the PPSP support hours available for any family who adopts from DCF.**

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: **We believe there is, and will always be, a high need for adoptive families to continue to receive the essential permanency support PPSP provides.**

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 2 | 2 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 2 | 2 |
| Clients completing treatment plan | 2 | 1 (one still has contract hours remaining) |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
**Family & Children's Agency serves all PPSP referrals received. Given the PPSP program has clear requirements and approval is needed by DCF prior to engaging in PPSP, there are few times that families referred do not already meet the criteria.**

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 2 | 2 |
| [Cases] eligible for treatment | 2 | 2 |
| [Cases] achieving treatment goal | 2 | 2 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | 100% | 100% |
| | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 | |
|---|---|---|---|
| Total Program allocations | **6,162.54** | **3,107.77** | |
| Total Program expenditures | 22,240.44 | 21,575.00 | |
| Total Clients Served | 2 | 2 | |
| Expenditures per [case] | 11,120.22 | 10,787.50 | *high cost due to low program utilization |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | | 6,162.54 | 15,675.00 | 3107.77 | 15,675.00 |
| Benefits | | 0 | 4,389.00 | 0 | 4,389.00 |
| Office Supplies | | - | 22.90 | - | 12.78 |
| Telephone | | - | 10.34 | - | 11.50 |
| Postage/Shipping | | - | 31.94 | - | 21.62 |
| Occupancy | | - | 373.52 | - | 210.82 |
| Equipment | | - | 25.24 | - | 8.46 |
| Travel And Vehicle Exp | | - | 122.12 | - | 190.00 |
| Conferces | | - | 14.12 | - | 16.28 |
| Subscriptions | | - | 6.74 | - | 1.84 |
| Program Expenses | | - | 353.52 | - | 269.60 |
| Other Expenses | | - | 242.40 | - | 2.54 |
| Overhead | | - | 973.60 | - | 765.56 |
| | | 0 | | | |
| | **Total** | 6162.54 | 22240.44 | 3107.77 | 21575 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: FCAid - Permanency Placement Services Program | | |
|---|---|---|
| Geographic Location Covered: statewide | | |
| DCF open case needed for referral or admission? | (y/n) | yes |
| Is Program 3rd Party Billable? | (y/n) | no |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 0 | 0 | | 0 | 0 | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 0 | 1 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 0 | 0 |
| Clients completing treatment plan | 0 | 0 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) *staffing vacancy and conflict of interest due to RTFT program*

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 0 | 0 |
| [Cases] eligible for treatment | 0 | 0 |
| [Cases] achieving treatment goal | 0 | 0 |
| Percent achieving contracted treatment expectation: Actual | 0 | 0 |
| Percent achieving contracted treatment expectation: Contract | 0 | 0 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **0** | **0** |
| Total Program expenditures | 0 | 0 |
| Total Clients Served | 0 | 0 |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 0 | 0 | 0 | 0 |
| Benefits | 5200 | 0 | 0 | 0 | 0 |
| Overhead | 7100 | 0 | 0 | 0 | 0 |
| Training | 5905 | 0 | 0 | 0 | 0 |
| | **Total** | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Boys and Girls Village - Quality Parenting Center | | |
|---|---|---|
| Geographic Location Covered: Milford DCF Office | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 2000 | 1986 | 99% | 2000 | 2099 | 105% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 55 | 48 |
| Clients receiving evaluation only | 0 | 1 |
| Clients receiving services | 37 | 37 |
| Clients completing treatment plan | 26 | 27 |

**Narrative explanation for the reasons that referrals go unserved**
any referred clients not receiving services was due to DCF withdrawing the referral.

For SFY2024, out of 37 cases eligible for treatment, 1 case is still active so the percent achieving treatment expectations could rise to 76%.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 37 | 38 |
| [Cases] eligible for treatment | 37 | 37 |
| [Cases] achieving treatment goal | 26 | 27 |
| Percent achieving contracted treatment expectation: Actual | 70% | 73% |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 471,709.00 | $ 400,054.00 |
| Total Clients Served | 49 | 38 |
| Expenditures per [case] | $ 9,626.71 | $ 10,527.74 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 226,583 | $ 256,680 | $ 303,574 | $ 244,061 |
| Benefits | 5200 | $ 48,840 | $ 56,176 | $ 85,001 | $ 32,285 |
| Overhead | | $ 132,968 | $ 158,853 | $ 30,845 | $ 123,708 |
| Training | 5905 | $ 600 | $ - | $ - | $ - |
| | **Total** | $ 408,991 | $ 471,709 | $ 419,420 | $ 400,054 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | N |
| Data collection | N | Y |
| Quality assurance expectations | N | Y |

| Program Name: Boys and Girls Village - Quality Parenting Center | | |
|---|---|---|
| Geographic Location Covered: Bridgeport DCF Office | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 6150 | 1067 | 17% | 6150 | 2904 | 47% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
New service implemented in FY23. First admission was in November 2022.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 43 | 73 |
| Clients receiving evaluation only | 4 | 0 |
| Clients receiving services | 35 | 55 |
| Clients completing treatment plan | 27 | 40 |

**Narrative explanation for the reasons that referrals go unserved**
any referred client that did not receive services was due to DCF withdrawing the referral.

For SFY2024, out of 55 cases eligible for treatment, 3 cases are still active so the percent achieving treatment expectations could rise to 78%.

| Are treatment goals being attainec | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 39 | 55 |
| [Cases] eligible for treatment | 35 | 55 |
| [Cases] achieving treatment goal | 27 | 40 |
| Percent achieving contracted treatment expectation: Actual | 77% | 73% |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 1,131,310.00 | $ 975,864.00 |
| Total Clients Served | 38 | 52 |
| Expenditures per [case] | $ 29,771.32 | $ 18,766.62 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 497,633 | $ 453,598 | $ 691,422 | $ 534,725 |
| Benefits | 5200 | $ 119,432 | $ 85,410 | $ 193,598 | $ 113,989 |
| Overhead | | $ 512,978 | $ 592,302 | $ 379,190 | $ 327,150 |
| Training | 5905 | $ - | $ - | $ - | $ - |
| | **Total** | $ 1,130,043 | $ 1,131,310 | $ 1,264,210 | $ 975,864 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | Y |
| Quality assurance expectations | N | Y |

| | | |
|---|---|---|
| **Program Name:Bridge Family Center - Mosaic Parenting Center - QPC** | | |
| **Geographic Location Covered: Region 4 Hartford** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | | | | | | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 84 | 105 |
| Clients receiving evaluation only | 2 | 23 |
| Clients receiving services | 119 | 286 |
| Clients completing treatment plan | 105 | 277 |

**Narrative explanation for the reasons that referrals go unserved**
Referrals that did not result in service were due to parents (clients) lack of engagement in completing initial intake services so they resulted in referral or evaluation only. Clients that did not complete treatment plan were not successful at completing the services because they missed more than 3 consecutive visits and stopped engaging in visits with their children and therefore discharged.

| Are treatment goals being attainec | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 84 | 105 |
| [Cases] eligible for treatment | 63 | 74 |
| [Cases] achieving treatment goal | 42 | 46 |
| Percent achieving contracted treatment expectation: Actual | 66.7 | 62.2 |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1180010** | **1100257** |
| Total Program expenditures | 993647 | 855717 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 602070 | 472613 | 650560 | 455902 |
| Benefits | 5200 | 102927 | 108198 | 121690 | 91876 |
| Overhead | 7000 | 107955 | 108382 | 115162 | 119625 |
| Training | 5905 | 5000 | 1592 | 5000 | 3211 |
| | **Total** | 817952 | 690785 | 892412 | 670614 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | No | No |
| Quality assurance expectations | No | No |

| | | |
|---|---|---|
| **Program Name: FCAid - Quality Parenting Center (Norwalk)** | | |
| **Geographic Location Covered: Norwalk** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **n** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **910** | **520** | **57%** | **910** | **416** | **46%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: Referrals from DCF area office were limited.
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 10 | 11 |
| Clients receiving evaluation only | 2 | 4 |
| Clients receiving services | 8 | 7 |
| Clients completing treatment plan | 8 | 7 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
All received referrals have been serviced. Any delays in service were primarily due to occasional staffing vacancies

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 10 | 11 |
| [Cases] eligible for treatment | 8 | 7 |
| [Cases] achieving treatment goal | 8 | 5 |
| Percent achieving contracted treatment expectation: Actual | 100% | 71% |
| Percent achieving contracted treatment expectation: Contract | 1% | 1% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **367494** | **411125** |
| Total Program expenditures | 225824 | 307184 |
| Total Clients Served | 8 | 7 |
| Expenditures per [case] | 28,228.00 | 43,883.43 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 174619 | 112520 | 241944 | 171168 |
| Benefits | 5200 | 34111 | 12359 | 59302 | 25051 |
| Overhead | 7100 | 26652 | 16402 | 27420 | 18929 |
| Training | 5905 | 500 | 124 | 1500 | 269 |
| | **Total** | 235882 | 141405 | 330166 | 215417 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: FCAid Quality Parenting Center (Region 5)** | | |
| **Geographic Location Covered: Danbury** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **n** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **910** | **676** | **74%** | **910** | **728** | **80%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 15 | 14 |
| Clients receiving evaluation only | 2 | 1 |
| Clients receiving services | 13 | 13 |
| Clients completing treatment plan | 10 | 13 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Referrals that did not get served were due to families declining services, families not meeting admission criteria, and lack of engagement on parents behalf.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 15 | 14 |
| [Cases] eligible for treatment | 13 | 13 |
| [Cases] achieving treatment goal | 10 | 13 |
| Percent achieving contracted treatment expectation: Actual | 77% | 100% |
| Percent achieving contracted treatment expectation: Contract | 1% | 1% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1325890** | **1325890** |
| Total Program expenditures | 839474 | 1009002 |
| Total Clients Served | 13 | 13 |
| Expenditures per [case] | 64,574.92 | 77,615.54 |

**grant money applies for all sites contracted**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 711832 | 328212 | 665644 | 474822 |
| Benefits | 5200 | 127846 | 60994 | 152414 | 77122 |
| Overhead | 7100 | 90386 | 48726 | 96856 | 57732 |
| Training | 5905 | 2500 | 15664 | 3000 | 1142 |
| | **Total** | 932564 | 453596 | 917914 | 610818 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: FCAid Quality Parenting Center (Region 5)** | | |
| **Geographic Location Covered: Torrington** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **n** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **920** | **832** | **90%** | **910** | **780** | **86%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 17 | 16 |
| Clients receiving evaluation only | 3 | 3 |
| Clients receiving services | 14 | 13 |
| Clients completing treatment plan | 10 | 10 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) **:** Referrals that did not get served were due to families declining services, families not meeting admission criteria, and lack of engagement on parents behalf.

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 17 | 16 |
| [Cases] eligible for treatment | 14 | 13 |
| [Cases] achieving treatment goal | 10 | 10 |
| Percent achieving contracted treatment expectation: Actual | 71% | 77% |
| Percent achieving contracted treatment expectation: Contract | 1% | 1% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **0** | **0** |
| Total Program expenditures | | |
| Total Clients Served | 14 | 13 |
| Expenditures per [case] | 0 | 0 |

**grant money listed in Danbury for all sites**

all financial data for region 5 is under Danbury

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | | | | |
| Benefits | 5200 | | | | |
| Overhead | 7100 | | | | |
| Training | 5905 | | | | |
| | **Total** | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: FCAid Quality Parenting Center (Region 5) | | |
|---|---|---|
| Geographic Location Covered: Waterbury | | |
| DCF open case needed for referral or admission? | (y/n) | 4 |
| Is Program 3rd Party Billable? | (y/n) | 2 |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 1274 | 1352 | 106% | 1638 | 1508 | 92% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 27 | 30 |
| Clients receiving evaluation only | 1 | 1 |
| Clients receiving services | 26 | 29 |
| Clients completing treatment plan | 24 | 23 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 27 | 30 |
| [Cases] eligible for treatment | 26 | 29 |
| [Cases] achieving treatment goal | 24 | 23 |
| Percent achieving contracted treatment expectation: Actual | 92% | 79% |
| Percent achieving contracted treatment expectation: Contract | 2% | 1% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **0** | **0** |
| Total Program expenditures | | |
| Total Clients Served | 26 | 29 |
| Expenditures per [case] | 0 | 0 |

**grant money listed in Danbury for all sites**

all financial data for region 5 is under Danbury

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | | | | |
| Benefits | 5200 | | | | |
| Overhead | 7100 | | | | |
| Training | 5905 | | | | |
| | **Total** | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Klingberg Quality Parenting Center | | |
|---|---|---|
| Geographic Location Covered: New Britain DCF catchment area | | |
| DCF open case needed for referral or admission? | y | |
| Is Program 3rd Party Billable? | n | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 3,650 unit hours | 2218 | 61% | 3,650 unit hours | 1698 | 46.52% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract:**

The QPC experienced several staff vacancies, including leadership positions.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 44 | 48 |
| Clients receiving evaluation only | 7 | 18 |
| Clients receiving services | 73 | 67 |
| Clients completing treatment plan | 86 | 46 |

This may include reasons such as(staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) The referral only clients were a combination of cross-regional referrals that were better served in a different QPC. Other referral only clients were merged with the other parent's case. Some referral only did not meet criteria for service, many were no shows for three scheduled Intake slots.

| Are treatment goals being attain | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | 31 | 36 |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **100.00%** | **100.00%** |
| Total Program expenditures | $808,315 | $871,597 |
| Total Clients Served | 2218 | 1698 |
| Expenditures per [case] | $364 | $513 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $484,645 | $485,269 | $663,784 | $509,431 |
| Benefits | 5200 | $119,804 | $102,507 | $119,491 | $104,995 |
| Other Expenses | 5900 | $259,636 | $83,413 | $34,874 | $69,780 |
| Overhead | 5300+7100 | $134,120 | $137,060 | $205,510 | $186,851 |
| Training | 5905 | $0 | $66 | $0 | $540 |
| | **Total** | $998,205 | $808,315 | $1,023,659 | $871,597 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | y | y |
| Quality assurance expectations | y | y |

| | | |
|---|---|---|
| **Program Name: Waterford Country School - Quality Parenting Center** | | |
| **Geographic Location Covered: Region 3/Norwich Office** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **N** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **6,600** | **1,606** | **24%** | **6,600** | **1,682** | **25%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Quality Parenting Center Coaches are required to transport children and parents to and from visits causing a decline in utilization. Transports can range in distance and time dependent on destination and number of children involved separated within various foster homes across Region 3. For instance, a one hour visit could take multiple hours and require multiple staff. For example, a parent needs transportation which is forty-five minutes each way totaling an hour and a half. The parent has two children which are placed in different foster homes in different parts of the state. One child's transport is thirty minutes each way totaling one hour and the other child is forty-five minutes each way totaling an hour and a half. This one visit has four hours of transportation plus one hour for a pre- and post-visit, and one hour for their visit equaling six hours of total time. In addition, three staff members are required to make this one visit possible.

There have been many times where we have experienced low referral activity despite having open availability which leads to lower utilization. Nearly all referrals that are sent are being accepted.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Program design assumed 1 hour per visit, not taking into account the time it takes to transport and to conduct 30 minute pre and post-visit sessions with parents. During the procurement process, it was assumed that 30% of parents and children would require transportation. In practice, nearly all parents and children require transportation.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 91 | 99 |
| Clients receiving evaluation only | 0 | 8 |
| Clients receiving services | 107 | 112 |
| Clients completing treatment plan | 84 | 84 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria:

Due to QPC receiving one referral with one family link number, providers are unable to report on any secondary parent that requires separate visitation simultaneously with a primary parent receiving QPC services, which impacts the quality of referral/admission data.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 91 | 99 |
| [Cases] eligible for treatment | 87 | 92 |
| [Cases] achieving treatment goal | 84 | 84 |
| Percent achieving contracted treatment expectation: Actual | 97% | 91% |
| Percent achieving contracted treatment expectation: Contract | 97% | 91% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **196,750.40** | **259,452.37** |
| Total Program expenditures | 1,151,980.03 | 1,022,508.08 |
| Total Clients Served | 87 | 92 |
| Expenditures per [case] | 15,502.65 | 13,934.35 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 663,925.13 | 578,877.03 | 643,562.19 | 640,687.22 |
| Benefits | 5200 | 189,417.84 | 148,899.53 | 183,608.29 | 155,748.63 |
| Overhead | 5400-7150 | 519,634.04 | 620,825.75 | 582,375.02 | 485,452.06 |
| Training | 5905 | 2,250.00 | 128.13 | 750.00 | 72.54 |
| | **Total** | 1,375,227.00 | 1,348,730.43 | 1,410,295.50 | 1,281,960.45 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Waterford Country School - Quality Parenting Center** | | |
| **Geographic Location Covered: Region 3/Willimantic Office** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **N** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **8,800** | **1,903** | **22%** | **8,800** | **2,390** | **27%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Quality Parenting Center Coaches are required to transport children and parents to and from visits causing a decline in utilization. Transports can range in distance and time depending on the destination and number of children involved separated within various foster homes across Region 3. For instance, a one hour visit could take multiple hours and require multiple staff. For example, a parent needs transportation of forty-five minutes each way totaling an hour and a half. The parent has two children which are placed in different foster homes in different parts of the state. One child's transport is thirty minutes each way totaling one hour and the other child is forty-five minutes each way totaling an hour and a half. This one visit has four hours of transportation plus one hour for a pre- and post-visit, and one hour for their visit equaling six hours of total time. In addition, three staff members are required to make this one visit possible.

There have been times where we have experienced low referral activity from the department despite having open availability, which leads to lower utilization. Nearly all referrals that are sent are being accepted.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Program design assumed 1 hour per visit, not taking into account the time it takes to transport and to conduct 30 minute pre and post-visit sessions with parents. During the procurement process, it was assumed that 30% of parents and children would require transportation. In practice, nearly all parents and children require transportation.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 33 | 36 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 40 | 41 |
| Clients completing treatment plan | 31 | 31 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria:

Due to QPC receiving one referral with one family link number, providers are unable to report on any secondary parent that requires separate visitation simultaneously with a primary parent receiving QPC services, which impacts the quality of referral/admission data.

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 33 | 36 |
| [Cases] eligible for treatment | 32 | 34 |
| [Cases] achieving treatment goal | 31 | 31 |
| Percent achieving contracted treatment expectation: Actual | 97% | 91% |
| Percent achieving contracted treatment expectation: Contract | 97% | 91% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **65,583.47** | **86,484.12** |
| Total Program expenditures | 383,993.34 | 340,836.03 |
| Total Clients Served | 32 | 34 |
| Expenditures per [case] | 14,049.28 | 12,568.24 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 221,308.38 | 192,959.01 | 214,520.73 | 213,562.41 |
| Benefits | 5200 | 63,139.28 | 49,633.18 | 61,202.76 | 51,916.21 |
| Overhead | 5400-7150 | 173,211.35 | 206,941.92 | 194,125.01 | 161,817.35 |
| Training | 5905 | 750.00 | 42.71 | 250.00 | 24.18 |
| | **Total** | 458,409.00 | 449,576.81 | 470,098.50 | 427,320.15 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | | | | | |
|---|---|---|---|---|---|---|
| **Program Name: The Village - Quality Parenting Center** | | | | | | |
| **Geographic Location Covered: Manchester DCF Office** | | | | | | |
| **DCF open case needed for referral or admission?** | **Y** | | | | | |
| **Is Program 3rd Party Billable?** | **N** | | | | | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| **Number of Visits** | **5200** | **864** | **16.6%** | **5200** | **1138** | **21.9%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:
We have been able to serve 83% of all the clients that were referred to us by DCF. Along with high percentages of referrals accepted, we also had great engagement with all the families we served.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 51 | 108 |
| Clients receiving evaluation only | 3 | 1 |
| Clients receiving services | 48 | 90 |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved**
Referrals that go unserved are typically due to a withdrawal of the referral by DCF, the client not agreeing to the program after the referral being made, or some other circumstance. There have not been staffing issues that resulted in referrals being unserved.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 75 | 78 |
| [Cases] eligible for treatment | 72 | 90 |
| [Cases] achieving treatment goal | 36 | 28 |
| Percent achieving contracted treatment expectation: Actual | 77% | 61% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,049,364** | **1,076,123** |
| Total Program expenditures | 1,144,246 | 950,817 |
| Total Clients Served | 75 | 91 |
| Expenditures per [case] | 15,256.61 | 10,448.54 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 626,850.55 | 653,047.86 | 637,600.06 | 545,108.59 |
| Benefits | 5200 | 145,617.38 | 153,202.40 | 155,701.94 | 136,619.98 |
| Overhead | 7150 | 131,269.09 | 143,077.02 | 140,943.99 | 134,435.57 |
| Training | 5905 | - | - | - | - |
| | **Total** | 903,737.02 | 949,327.28 | 934,245.99 | 816,164.14 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Boys & Girls Village - Reunification & Therapeutic Family Time | | |
|---|---|---|
| Geographic Location Covered: Milford DCF Office | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 88 | 51 | 58% | 70 | 58 | 83% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: workforce limitations due to requested salaries by candidates.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 44 | 53 |
| Clients receiving evaluation only | 0 | 2 |
| Clients receiving services | 44 | 46 |
| Clients completing treatment plan | 37 | 32 |

**Narrative explanation for the reasons that referrals go unserved**

DCF Referrals withdrawn.

For SFY2024, out of 46 cases eligible for treatment, 1 case is still active so the percent achieving treatment expectations could rise to 72%.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 44 | 48 |
| [Cases] eligible for treatment | 44 | 46 |
| [Cases] achieving treatment goal | 37 | 32 |
| Percent achieving contracted treatment expectation: Actual | 84% | 70% |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 526,057.00 | $ 453,669.00 |
| Total Clients Served | 51 | 58 |
| Expenditures per [case] | $ 10,314.84 | $ 7,821.88 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 377,588 | $ 250,102 | $ 264,186 | $ 248,130 |
| Benefits | 5200 | $ 92,509 | $ 37,568 | $ 73,972 | $ 41,988 |
| Overhead | | $ 160,296 | $ 237,857 | $ 172,140 | $ 163,551 |
| Training | 5905 | $ 480 | $ 530 | $ - | $ - |
| | **Total** | $ 630,873 | $ 526,057 | $ 510,298 | $ 453,669 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name:FCAid - Reunification and Therapeutic Family Time** | | |
| **Geographic Location Covered: Torrington and Danbury Catchment Areas** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **n** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **59** | **51** | **86%** | **59** | **58** | **98%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 51 | 43 |
| Clients receiving evaluation only | 1 | 0 |
| Clients receiving services | 51 | 43 |
| Clients completing treatment plan | 39 | 43 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 51 | 43 |
| [Cases] eligible for treatment | 51 | 43 |
| [Cases] achieving treatment goal | 39 | 43 |
| Percent achieving contracted treatment expectation: Actual | 76% | 100% |
| Percent achieving contracted treatment expectation: Contract | 66% | 73% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **602842** | **487081** |
| Total Program expenditures | 626144 | 466902 |
| Total Clients Served | 51 | 43 |
| Expenditures per [case] | 12,277.33 | 10,858.19 |

**grant money applies for all sites contracted**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 360990 | 360163 | 279578 | 291097 |
| Benefits | 5200 | 95594 | 99364 | 70002 | 62966 |
| Overhead | 7100 | 43877 | 40781 | 33921 | 29148 |
| Training | 5905 | 500 | 5314 | 500 | 16 |
| | **Total** | 500961 | 505622 | 384001 | 383227 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Wheeler - Reunification & Therapeutic Family Time (RTFT) | | | | | | |
|---|---|---|---|---|---|---|
| Geographic Location Covered: New Britain/Meriden | | | | | | |
| DCF open case needed for referral or admission? | Y | | | | | |
| Is Program 3rd Party Billable? | N | | | | | |
| | | | | | | |
| Program Utlization | SFY 2023 | | | SFY2024 | | |
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 72-80 | 81 | * | 55-63 | 68 | * |

**Narrative explanation for decline**
**es in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:
* exceeded contract by 1 FY 23
* exceeded contract by 5 FY 24

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 37 | 56 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 61 | 68 |
| Clients completing treatment plan | 61 | 68 |

**Narrative explanation for the reasons that referrals go unserved**

The 61 represents all clients that were still active as of July 1, 2022 and the clients that started services in FY 2023. The 68 represents all clients that were still active as of July 1, 2023 and the clients that started services in FY 2024. All completed a service plan identifying goals for services

**Narrative explanation for the reasons that referrals go unserved**

The 29 represents the clients who successfully discharged in Fiscal Year 2023. The 53 represents clients who successfully discharged in Fiscal Year 2024.

* No contract treatment % listed in scope of service

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 29 | 53 |
| [Cases] eligible for treatment | 29 | 53 |
| [Cases] achieving treatment goal | 29 | 53 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | * | * |
| | | |
| | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **703,887.00** | **567,824.00** |
| Total Program expenditures | 518,345.00 | 523,181.00 |
| Total Clients Served | 81 | 68 |
| Expenditures per [case] | 6,399.32 | 7,693.84 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 213,597 | 153,424 | 212,430 | 135,744 |
| Benefits | 5200 | 57,557 | 53,592 | 73,921 | 45,240 |
| Overhead | All others | 429,982 | 309,781 | 280,667 | 341,898 |
| Training | 5905 | 2,750 | 1,548 | 805 | 300 |
| | **Total** | 703,887 | 518,345 | 567,824 | 523,181 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: the Village - Reunification and Therapeutic Family Time** | | |
| **Geographic Location Covered: all of Region 4-Hartford and Manchester offices** | | |
| **DCF open case needed for referral or admission?** | **Y** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| **Number Served (cases)** | **128-142** | **110** | **85.94%** | **128-142** | **120** | **93.75%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Lack of referrals were being received

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Vacant positions were also a factor

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 122 | 140 |
| Clients receiving evaluation only | 1 | 6 |
| Clients receiving services | 109 | 114 |
| Clients completing treatment plan | 57 | 41 |

**Narrative explanation for the reasons that referrals go unserved**

Referrals that went unserved were due to services no longer needed per DCF (i.e., referral withdrawn).

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 110 | 120 |
| [Cases] eligible for treatment | 109 | 114 |
| [Cases] achieving treatment goal | 77 | 72 |
| Percent achieving contracted treatment expectation: Actual | 84% | 77% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,548,862** | **1,250,415** |
| Total Program expenditures | 1,451,803 | 1,227,912 |
| Total Clients Served | 110 | 120 |
| Expenditures per [case] | 13,198.21 | 10,232.60 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 951,712 | 788,440 | 751,207 | 740,313 |
| Benefits | 5200 | 221,083 | 192,844 | 183,445 | 180,014 |
| Overhead | 7150 | 202,241 | 188,832 | 169,104 | 163,619 |
| Training | 5905 | 12,208 | 3,227 | 7,500 | 625 |
| | **Total** | 1,387,244 | 1,173,344 | 1,111,256 | 1,084,571 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Boys and Girls Village - Residential Treatment Center (RTC) - Safe Haven | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 12 | 19 | 158% | 12 | 16 | 133% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:N/A
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Need has only increased.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 9 | 7 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 9 | 7 |
| Clients completing treatment plan | 5 | 0 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

All referrals have been served; however, percentage of treatment completers appears low because 4 of the 9 clients admitted in SFY2023 and all 7 admitted in SFY2024 are still receiving treatment. Potentially, the percentages could increase to 100% for both SFYs.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 9 | 7 |
| [Cases] eligible for treatment | 9 | 7 |
| [Cases] achieving treatment goal | 5 | 0 |
| Percent achieving contracted treatment expectation: Actual | 56% | 0% |
| Percent achieving contracted treatment expectation: Contract | 90% | 90% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 3,081,010 | $ 3,060,189 |
| Total Clients Served | 19 | 16 |
| Expenditures per [case] | $ 162,158.42 | $ 191,261.81 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 1,607,930 | $ 1,607,930 | $ 1,655,541 | $ 1,655,541 |
| Benefits | 5200 | $ 333,168 | $ 333,168 | $ 321,218 | $ 321,218 |
| Overhead | | $ 1,125,189 | $ 1,125,189 | $ 1,073,139 | $ 1,073,139 |
| Training | 5905 | $ 14,723 | $ 14,723 | $ 10,291 | $ 10,291 |
| | **Total** | $ 3,081,010 | $ 3,081,010 | $ 3,060,189 | $ 3,060,189 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name:Adelbrook - Residential | | |
|---|---|---|
| Geographic Location Covered: Cromwell | | |
| DCF open case needed for referral or admission? | (y/n) | |
| Is Program 3rd Party Billable? | (y/n) | |

| Program Utlization | THG - Isaiah | SFY2024 |
|---|---|---|

| Program Name: Community Health Resources - SAFE Family Recovery | | |
|---|---|---|
| Geographic Location Covered: Middletown, Norwich, Willimantic | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 1095 (780 SBIRTS, 135 MDFR, 180 RMCS) | 251 | 23% | 1095 (780 SBIRTS, 135 MDFR, 180 RMCS) | 273 | 25% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Determining contract capacity is challenging due to the way program utilization is divided into three categories: SBIRT, MDFR, and RMCS, each with its own rate of referral and utilization. This division complicates the ability to accurately assess overall capacity.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: As a DCF referral-only program, our staff previously worked directly within DCF offices, which facilitated referrals. However, with the shift to more remote work for DCF staff since the pandemic, the process for receiving referrals has become more difficult, further impacting our ability to manage and assess program capacity effectively.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 248 | 249 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 251 | 273 |
| Clients completing treatment plan | 100 | 68 |

**Narrative explanation for the reasons that referrals go unserved**

While most clients referred to the program do receive some level of service, there are instances where we face challenges in connecting with clients, or where clients may refuse to engage. These difficulties were further exacerbated after the pandemic, as fewer visits are taking place on-site at DCF area offices. Additionally, we've experienced challenges with staff retention and recruitment. When new staff are hired, they must undergo model-specific EBP training, which delays their ability to start serving clients immediately. These factors can contribute to unserved referrals or lower utilization rates.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 211 | 185 |
| [Cases] eligible for treatment | 211 | 185 |
| [Cases] achieving treatment goal | 51 | 56 |
| Percent achieving contracted treatment expectation: Actual | 51% | 82% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $535,048 | $548,444 |
| Total Program expenditures | $515,046 | $542,332 |
| Total Clients Served | 251 | 273 |
| Expenditures per [case] | $2,052 | $1,987 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $319,633 | $262,983 | $301,174 | $294,671 |
| Benefits | 5200 | $88,491 | $88,364 | $96,165 | $91,940 |
| Overhead | 7000 | $64,070 | $67,670 | $78,880 | $82,355 |
| Training | 5905 | $700 | $42 | $700 | $0 |
| | Total | $472,894 | $419,059 | $476,919 | $468,966 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: CommuniCare - SAFE Family Recovery Program | | |
|---|---|---|
| Geographic Location Covered: Region 2 | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| SBIRT / RES | 780 | 288 | 37% | 780 | 322 | 41% |
| MDFR | 135 | 0 | 0% | 135 | 18 | 13% |
| RMS | 180 | 14 | 8% | 180 | 11 | 6% |
| HAIR TESTING | N/A | 11 | N/A | N/A | 8 | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract:** The majority of slots for this program is in the SBIRT line. We were contracted to have the ability to perform one screen every 30 minutes. We have staffed the program with the ability to do so, but have never seen the referral rate come close to the capacity. In addition, in FY24, the service was changed to RES (Recovery Engagement Services) which is not reflected in current contract. Program capacity has been changed to reflect the changes in service across RES, MDFR and RMS. Hair Testing does not carry a capacity or expected volume. In FY23, agency had issues with staffing in the MDFR program and worked to fully staff the program. That coupled with a long training period by the model developer impacted service numbers. Lastly, we have not seen the volume of referrals from DCF expected when contracted under this program. Notably, referrals from New Haven have been far fewer than referrals from the Milford office. Adjusting the expected service volume in the scope of service since the change to RES will help, as will the ability to "self-refer" into the MDFR and RMS services from the RES service. Historically, all referrals had to come directly from the DCF office.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 313 | 359 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 231 | 304 |
| Clients completing treatment plan | 216 | 304 |

**Narrative explanation for the reasons that referrals go unserved**

The program supervisor works closely with the DCF gatekeepers to ensure proper referrals into the program. We don't see many "evaluation only" cases in this program due to that relationship and the nature of the service. The team is providing support not only for parents/caregivers to work toward substance use recovery, but also with navigating their DCF case, increasing likelihood of engagement.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 231 | 304 |
| [Cases] eligible for treatment | 231 | 304 |
| [Cases] achieving treatment goal | 227 | 293 |
| Percent achieving contracted treatment expectation: Actual | 98% | 96% |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **694,761** | **978,911** |
| Total Program expenditures | 264,135 | 555,655 |
| Total Clients Served | 231 | 304 |
| Expenditures per [case] | 1143.44 | 1827.81 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 359,882 | 144,030 | 360,985 | 345,335 |
| Benefits | 5200 | 93,569 | 32,121 | 104,684 | 101,791 |
| Overhead | VARIOUS | 240,506 | 87,138 | 512,113 | 107,640 |
| Training | 5905 | 804 | 846 | 1,129 | 889 |
| | **Total** | 694761 | 264135 | 978911 | 555655 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wheeler - SAFE FR RMS Region 4** | | |
| **Geographic Location Covered: Hartford & Manchester** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **120** | **19** | **16%** | **72** | **16** | **22%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Low utilization impacted by low staffing and low referrals **Contracted capacity was revised in FY 24 in order to match service requirements with additional service of new model (RES) delivered in the community-** lower numbers achieved was due to staffing shortages and low referrals.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 21 | 17 |
| Clients receiving evaluation only | 2 | 1 |
| Clients receiving services | 19 | 16 |
| Clients completing treatment plan | 19 | 16 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 19 | 16 |
| [Cases] eligible for treatment | 19 | 16 |
| [Cases] achieving treatment goal | 12 | 11 |
| Percent achieving contracted treatment expectation: Actual | 66% | 73% |
| Percent achieving contracted treatment expectation: Contract | 85% of parent/ caregivers complete RMS | 85% of parent/ caregivers complete RMS |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. NOTE: This calculation (rows 27 and 28 are based on cases discharged during the year -Row 27 is number successfully discharged during year. So row 28 percent is the number successfully discharged divided by total cases discharged (different number than in row 26 which is the intaked clients, not all may have been discharged in the year

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,024,788** | **1,096,571** |
| Total Program expenditures | 1,116,547 | 1,275,855 |
| Total Clients Served | 19 | 16 |
| Expenditures per [case] | 58,766 | 79,741 |

**Includes total for SAFE R4&R6 - Covered under one funding grant**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 651,690 | 546,750 | 661,398 | 486,805 |
| Benefits | 5200 | 112,417 | 182,041 | 191,710 | 128,485 |
| Overhead | All others | 260,352 | 386,965 | 242,833 | 659,795 |
| Training | 5905 | 330 | 791 | 630 | 770 |
| | **Total** | 1,024,788 | 1,116,547 | 1,096,571 | 1,275,855 |

**Includes total for SAFE R4&R6 - Covered**

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wheeler - SAFE FRSBIRT- RES Region 4** | | |
| **Geographic Location Covered: Hartford & Manchester** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **780** | **39** | **5%** | **468** | **66** | **14%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

Contracted capacity decreased in line with development of new model (RES) expectations implemented 9/1/2023. Contracted capacity and actuals for SFY2024 begin 9/1/2023. Decline in utilization due to low referrals and staffing.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 39 | 69 |
| Clients receiving evaluation only | 1 | 3 |
| Clients receiving services | 38 | 66 |
| Clients completing treatment plan | 38 | 66 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 38 | 66 |
| [Cases] eligible for treatment | 38 | 66 |
| [Cases] achieving treatment goal | 38 | 59 |
| Percent achieving contracted treatment expectation: Actual | 87% | 98% |
| Percent achieving contracted treatment expectation: Contract | | 95% of parents/caregivers will have at least one in-person or virtual recovery-oriented conversation |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

**See SAFE FR R4 RMS tab for all financial data relating to SAFE R4&R6 grant**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | | |
|---|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures | |
| Salaries | | | | | | See SAFE FR R4 RMS tab for all financial |
| Benefits | | | | | | |
| Overhead | | | | | | |
| Training | | | | | | |
| | Total | 0 | 0 | 0 | 0 | |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: Wheeler - SAFE FR MDFR - Region 4** | | |
| **Geographic Location Covered: Hartford & Manchester** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 135 | 33 | 24.00 | 72 | 39 | 55% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations**:**
**Contracted capacity was decreased in FY 24 in order to promote model fidelity - previous target did not allow for full model implementation -**lower numbers achieved was due to staffing shortages and low referrals.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 36 | 46 |
| Clients receiving evaluation only | 3 | 7 |
| Clients receiving services | 33 | 39 |
| Clients completing treatment plan | 33 | 39 |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 33 | 39 |
| [Cases] eligible for treatment | 33 | 39 |
| [Cases] achieving treatment goal | 12 | 9 |
| Percent achieving contracted treatment expectation: Actual | 43% | 31% |
| Percent achieving contracted treatment expectation: Contract | 85% of parent/caregivers complete MDFR | 85% of parent/caregivers complete MDFR |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. **Line 27 reflects number of successful discharges in year. Line 28 is percentage based on total discharges.**

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

**See SAFE FR R4 RMS tab for all financial data relating to SAFE R4&R6 grant**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | 0 | 0 | 0 | 0 |

**See SAFE FR R4 RMS tab for all financial**

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: Wheeler - SAFE FR (RMS)- Region 6** | | |
| **Geographic Location Covered: New Britian Meriden Area Offices** | | |
| **DCF open case needed for referral or admission?** | **Yes** | **Y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **N** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **120** | **15** | **12%** | **72** | **8** | **11%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Contract capacity revised to allow for additional new model implementation (RES)

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 15 | 8 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 15 | 8 |
| Clients completing treatment plan | 15 | 8 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 15 | 8 |
| [Cases] eligible for treatment | 15 | 8 |
| [Cases] achieving treatment goal | 9 | 3 |
| Percent achieving contracted treatment expectation: Actual | 60% | 50% |
| Percent achieving contracted treatment expectation: Contract | 85% | 85% |

Definition of contracted treatment expectation: . NOTE: This calculation (rows 270 and 271 are based on cases discharged during the year -Row 270 is number successfully discharged during year. Row 271 percent is the number successfully discharged divided by total cases discharged (different number than in row 229 which is the intaked clients, not all may have been discharged in the year

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

**See SAFE FR R4 RMS tab for all financial data relating to SAFE R4&R6 grant**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | 0 | 0 | 0 | 0 |

**See SAFE FR R4 RMS tab for all financial**

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: Wheeler - SAFE FR (RES/SBIRT)-Region 6** | | |
| **Geographic Location Covered: New Britian and Meriden Area office** | | |
| **DCF open case needed for referral or admission?** | **Yes** | |
| **Is Program 3rd Party Billable?** | **No** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **780** | **14** | **2%** | **468** | **12** | **3%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Low utilization due to staffing issues and low referral volume

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 14 | 12 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 14 | 12 |
| Clients completing treatment plan | 14 | 12 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 14 | 12 |
| [Cases] eligible for treatment | 14 | 12 |
| [Cases] achieving treatment goal | 12 | 12 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | | 95% of parents/caregivers will have at least one in-person or virtual recovery-oriented conversation |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

**See SAFE FR R4 RMS tab for all financial data relating to SAFE R4&R6 grant**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | 0 | 0 | 0 | 0 |

**See SAFE FR R4 RMS tab for all financial**

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name: Wheeler - SAFE FR - MDFR (Region 6) | | |
|---|---|---|
| Geographic Location Covered: Meriden/ New Britain | | |
| DCF open case needed for referral or admission? | Yes | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 135 | 2 | 1% | 72 | 7 | 10% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: staffing shortages in FY '23

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Contract capacity was lowered in FY '24 to allow for full model fidelity. Low utilization due to staffing shortage and low referral

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 2 | 7 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 2 | 7 |
| Clients completing treatment plan | 2 | 7 |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 2 | 7 |
| [Cases] eligible for treatment | 2 | 7 |
| [Cases] achieving treatment goal | 1 | 6 |
| Percent achieving contracted treatment expectation: Actual | 50% | 33% |
| Percent achieving contracted treatment expectation: Contract | 85% | 85% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

**See SAFE FR R4 RMS tab for all financial data relating to SAFE R4&R6 grant**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | 0 | 0 | 0 | 0 |

**See SAFE FR R4 RMS tab for all financial**

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name:Wheeler - Safe FR - RES** | | |
| **Geographic Location Covered: Bridgeport, Norwalk and Stamford Area office** | | |
| **DCF open case needed for referral or admission?** | **(y)** | |
| **Is Program 3rd Party Billable?** | **(n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **N/A** | | | **468** | **72** | **15%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: New contract obtained in FY '24. Ramp up with training, developing work flows, hiring staff and low referrals impacted low utilization

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | N/A | 76 |
| Clients receiving evaluation only | | 69 |
| Clients receiving services | | 72 |
| Clients completing treatment plan | | 69 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | 69 |
| [Cases] eligible for treatment | | 69 |
| [Cases] achieving treatment goal | | 68 |
| Percent achieving contracted treatment expectation: Actual | | 98% |
| Percent achieving contracted treatment expectation: Contract | | 95% of parents shall engage in conversation of recovery |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | **548,286** |
| Total Program expenditures | | 330,257 |
| Total Clients Served | | 72 |
| Expenditures per [case] | | 4586.902778 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | | | 299,451 | 163,288 |
| Benefits | 5200 | | | 70,203 | 18,968 |
| Overhead | All others | | | 177,229 | 145,974 |
| Training | 5905 | | | 1,404 | 2,027 |
| | **Total** | - | - | 548,286 | 330,257 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | Y |
| Data collection | | Y |
| Quality assurance expectations | | Y |

| | | |
|---|---|---|
| **Program Name: Wheeler - SAFE FR R 1 MDFR** | | |
| **Geographic Location Covered: Norwalk, Bridgeport, and Stamford** | | |
| **DCF open case needed for referral or admission?** | **(y)** | |
| **Is Program 3rd Party Billable?** | **(n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **N/A** | | | **72** | ***First referrals in FY25** | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: **New Contract in FY24** - staff hired and trained for MDFR in April '24. First referrals received in FY25.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | N/A | * |
| Clients receiving evaluation only | | |
| Clients receiving services | | |
| Clients completing treatment plan | | |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
*** New Contract in FY24** - staff hired and trained for MDFR in April '24. First referrals received in FY25.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | N/A | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

**See SAFE FR Reg 1 RES tab for all financial data relating to SAFE R1 grant**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | | | | |

**See SAFE FR Reg 1 RES tab for all financial data relating to SAFE R1 grant**

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| | | |
|---|---|---|
| **Program Name: Wheeler - Safe FR - RMS** | | |
| **Geographic Location Covered: Norwalk, Bridgeport, and Stamford** | | |
| **DCF open case needed for referral or admission?** | **(n)** | |
| **Is Program 3rd Party Billable?** | **(n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | | | | 72 | 3 | 4% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: **New Contract in FY24** - staff hired and trained in Oct '23 and Feb '24; low volume of referrals.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | | 4 |
| Clients receiving evaluation only | | 1 |
| Clients receiving services | | 3 |
| Clients completing treatment plan | | 3 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) . During ramp-up of new program, initial focus on RES per area office identified primary need. Under utilization due to staff shortage and low referrals. First referral Nov '23.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | 3 |
| [Cases] eligible for treatment | | 3 |
| [Cases] achieving treatment goal | | 0 |
| Percent achieving contracted treatment expectation: Actual | | 0 d/c in FY24 |
| Percent achieving contracted treatment expectation: Contract | 85 | 85 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

**See SAFE FR Reg 1 RES tab for all financial data relating to SAFE R1 grant**

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | N/A | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | | | | |

**See SAFE FR Reg 1 RES tab for all financial data relating to SAFE R1**

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name:The Connection - The Start Program | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 75 | 124 | 165% | 75 | 118 | 157% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Utilization has been above contracted level in both fiscal years. Utilization in the Start Program tends to fluctuate <10% from year to year due in large part to youth's varied lengths of stay and when they are admitted (i.e. most youth stay in the program over multiple fiscal years).

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: No trend noted in utilization across several fiscal years. The number of youth seeking housing services is increasing in FY25 per the United Way 211 data dashboard.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 50 | 58 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 124 | 118 |

**Narrative explanation for the reasons that referrals go unserved**

No referrals went unserved in either Fiscal Year.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 124 | 118 |
| [Cases] eligible for treatment | 124 | 118 |
| [Cases] achieving treatment goal | 124 | 118 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | 85% | 85% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **3,922,871** | **3,422,864** |
| Total Program expenditures | 3,302,879 | 2,815,506 |
| Total Clients Served | 124 | 118 |
| Expenditures per [case] | 26,636 | 23,860 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 771,502 | 771,502 | 873,015 | 873,015 |
| Benefits | | 216,021 | 216,021 | 244,444 | 244,444 |
| Overhead | | 511,679 | 511,679 | 446,460 | 446,460 |
| Training | | 1,084 | 1,084 | 4,769 | 5,350 |
| | **Total** | 1,500,286 | 1,500,286 | 1,568,688 | 1,569,269 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Boys and Girls Village - STTAR Home | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 6 | 23 | 383% | 6 | 20 | 333% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 23 | 15 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 23 | 12 |
| Clients completing treatment plan | 23 | 12 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Some referred youth did not show up due to refusal, AWOL, or remanded to detention.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 23 | 12 |
| [Cases] eligible for treatment | 23 | 12 |
| [Cases] achieving treatment goal | 23 | 12 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 1,316,077.00 | $ 1,345,914.00 |
| Total Clients Served | 23 | 20 |
| Expenditures per [case] | $ 57,220.74 | $ 67,295.70 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 664,615 | $ 756,545 | $ 735,948 | $ 823,207 |
| Benefits | 5200 | $ 159,508 | $ 124,061 | $ 206,066 | $ 104,982 |
| Overhead | | $ 217,628 | $ 433,601 | $ 153,763 | $ 413,807 |
| Training | 5905 | $ 1,600 | $ 1,870 | $ 5,100 | $ 3,918 |
| | **Total** | $ 1,043,351 | $ 1,316,077 | $ 1,100,877 | $ 1,345,914 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Bridge Family Center - Harwinton House STTAR | | |
|---|---|---|
| Geographic Location Covered: All regions | | |
| DCF open case needed for referral or admission? | (y/n) | Yes |
| Is Program 3rd Party Billable? | (y/n) | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 6 | 4.4 | 73.25 | 6 | 0 | 0 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Program closed in October 2023, intakes closed in August 2023.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | | |
| Clients receiving evaluation only | | |
| Clients receiving services | 33 | 2 |
| | | |

**Narrative explanation for the reasons that referrals go unserved**

We do not have any referrals that go unserved due to our no eject/no reject policy.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1043351** | **1201186** |
| Total Program expenditures | 1008969 | 477652 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 589930 | 595665 | 618000 | 224649 |
| Benefits | 5200 | 103727 | 81945 | 116720 | 38053 |
| Overhead | 7000 | 108055 | 99349 | 115162 | 76602 |
| Training | 5905 | 5000 | 2911 | 3000 | 1822 |
| | **Total** | 806712 | 779870 | 852882 | 341126 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | |
| Data collection | No | |
| Quality assurance expectations | No | |

| | | |
|---|---|---|
| **Program Name: Bridge Family Center - Winifred House STTAR** | | |
| **Geographic Location Covered: All regions** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 6 | 4.97 | 82.9 | 6 | 5.87 | 97.8 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract:** Need is increasing

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | | |
| Clients receiving evaluation only | | |
| Clients receiving services | 21 | 14 |
| | | |

**Narrative explanation for the reasons that referrals go unserved**

We do not have any referrals that go unserved due to our no eject/no reject policy.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1043351** | **1232107** |
| Total Program expenditures | 950726 | 1179977 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 582350 | 569827 | 608500 | 631087 |
| Benefits | 5200 | 100875 | 84874 | 114620 | 88909 |
| Overhead | 7000 | 108055 | 99349 | 115162 | 109657 |
| Training | 5905 | 5000 | 3716 | 4000 | 3589 |
| | **Total** | 796280 | 757766 | 842282 | 833242 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | No | No |
| Quality assurance expectations | No | No |

| | | |
|---|---|---|
| **Program Name: Bridge Family Center - Hastings House STTAR** | | |
| **Geographic Location Covered: All regions** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 6 | 5.98 | 99.75 | 6 | 6.24 | 104 |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Need for services is increasing

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | | |
| Clients receiving evaluation only | | |
| Clients receiving services | 19 | 10 |
| | | |

**Narrative explanation for the reasons that referrals go unserved**
We do not have any referrals that go unserved due to our no eject/no reject policy.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1043351** | **1197877** |
| Total Program expenditures | 972876 | 1186835 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 582350 | 546226 | 586000 | 626316 |
| Benefits | 5200 | 100875 | 81583 | 111180 | 77595 |
| Overhead | 7000 | 108155 | 99685 | 115163 | 110302 |
| Training | 5905 | 5000 | 2763 | 4000 | 3145 |
| | **Total** | 796380 | 730257 | 816343 | 817358 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | No | No |
| Quality assurance expectations | No | No |

| | | |
|---|---|---|
| **Program Name: Bridge Family Center - Freymann House STTAR** | | |
| **Geographic Location Covered: All regions** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **6** | **5.69** | **94.9** | **6** | **5.97** | **99.6** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Need is increasing

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | | |
| Clients receiving evaluation only | | |
| Clients receiving services | 31 | 24 |
| | | |

**Narrative explanation for the reasons that referrals go unserved**
We do not have any referrals that go unserved due to our no eject/no reject policy.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | |
| [Cases] eligible for treatment | | |
| [Cases] achieving treatment goal | | |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1053389** | **1260252** |
| Total Program expenditures | 893399 | 1274014 |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 621650 | 550139 | 646000 | 679877 |
| Benefits | 5200 | 107325 | 68322 | 118960 | 92141 |
| Overhead | 7000 | 108055 | 99685 | 115162 | 110302 |
| Training | 5905 | 5000 | 3392 | 5000 | 3638 |
| | **Total** | 842030 | 721538 | 885122 | 885958 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | No | No |
| Quality assurance expectations | No | No |

| | | |
|---|---|---|
| **Program Name:Waterford Country School - STTAR** | | |
| **Geographic Location Covered: Statewide** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Y** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **N** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **6.00** | **4.54** | **76%** | **5.00** | **4.92** | **98%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Utilization is nearly 100%. Referrals come from area offices and often they are a last resort in the state when all other services have been exhausted.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Not applicable. Utilization is nearly 100%.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 19 | 15 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 19 | 15 |
| | | |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria:

STTAR is a no eject/no reject program, which means that all youth referred are accepted if there is an open bed. Youth, when placed, receive all services offered.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 19 | 15 |
| [Cases] eligible for treatment | 19 | 15 |
| [Cases] achieving treatment goal | 12 | 11 |
| Percent achieving contracted treatment expectation: Actual | 63% | 73% |
| Percent achieving contracted treatment expectation: Contract | 63% | 73% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **232,221.35** | **257,043.00** |
| Total Program expenditures | 992,971.47 | 1,198,515.04 |
| Total Clients Served | 19 | 15 |
| Expenditures per [case] | 64,483.83 | 97,037.20 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 604,008.40 | 673,631.05 | 827,762.60 | 817,180.62 |
| Benefits | 5200 | 172,323.60 | 172,989.47 | 236,160.67 | 180,649.84 |
| Overhead | 5400-7150 | 264,119.00 | 378,268.32 | 35,453.73 | 456,319.18 |
| Training | 5905 | 2,900.00 | 303.98 | 1,500.00 | 1,408.40 |
| | **Total** | 1,043,351.00 | 1,225,192.82 | 1,100,877.00 | 1,455,558.04 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Health Resources Sub-Acute Stabilization Center | | |
|---|---|---|
| Geographic Location Covered: Norwich, Willimantic | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | NA | NA | NA | NA | NA | NA |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Funding for this program began in FY24 to support infrastructure and capital expenses related to purchasing and renovating a building to house the program. No referrals were made in FY24.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: NA

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | NA | NA |
| Clients receiving evaluation only | NA | NA |
| Clients receiving services | NA | NA |
| Clients completing treatment plan | NA | NA |

**Narrative explanation for the reasons that referrals go unserved**

NA - program site still under construction.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | NA | NA |
| [Cases] eligible for treatment | NA | NA |
| [Cases] achieving treatment goal | NA | NA |
| Percent achieving contracted treatment expectation: Actual | NA | NA |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | NA | $2,742,388 |
| Total Program expenditures | NA | $644,653 |
| Total Clients Served | NA | NA |
| Expenditures per [case] | NA | NA |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | NA | NA | $178,521 | $3,738 |
| Benefits | 5200 | NA | NA | $48,201 | $614 |
| Overhead | 7000 | NA | NA | $44,812 | $679 |
| Training | 5905 | NA | NA | $475 | $0 |
| | **Total** | NA | NA | $272,009 | $5,031 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | NA | Y |
| Data collection | NA | Y |
| Quality assurance expectations | NA | Y |

| Program Name: The Village - Sub-Acute Crisis Center | | |
|---|---|---|
| Geographic Location Covered: Greater Hartford Area | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | N/A | N/A | N/A | 33 | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | N/A | 84 |
| Clients receiving evaluation only | N/A | 19 |
| Clients receiving services | N/A | 33 |
| Clients completing treatment plan | N/A | 33 |

Rationale: 33 youth were admitted out of the 84 referrals received. Some reasons for youth not being admitted include: inappropriate LOC referral (to high risk for violence or suicide), youth refusing to come, family refusing to participate in treatment or to take the youth home after treatment.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | 33 |
| [Cases] eligible for treatment | N/A | 33 |
| [Cases] achieving treatment goal | N/A | 14 |
| Percent achieving contracted treatment expectation: Actual | N/A | 60.87% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 1,899,031 | 2,912,983 |
| Total Program expenditures | 389,011 | 3,694,828 |
| Total Clients Served | 0 | 33 |
| Expenditures per [case] | #DIV/0! | 111,964.48 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 403,959 | 17,851 | 1,775,892 | 1,310,162 |
| Benefits | 5200 | 94,042 | 3,645 | 433,673 | 320,058 |
| Overhead | 7150 | 24,381 | 24,132 | 582,933 | 493,322 |
| Training | 5905 | 14,650 | - | 13,520 | 2,023 |
| | **Total** | 537,032 | 45,628 | 2,806,018 | 2,125,565 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: The Connection - Supportive Housing for Families | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | (y/n) | Y |
| Is Program 3rd Party Billable? | (y/n) | N |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 500 | 648 | 130% | 500 | 639 | 128% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
Utilization is above contracted amount for both fiscal years.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 605 | 620 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 648 | 639 |

**Narrative explanation for the reasons that referrals go unserved**
N/A

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 648 | 639 |
| [Cases] eligible for treatment | 648 | 639 |
| [Cases] achieving treatment goal | 598 | 576 |
| Percent achieving contracted treatment expectation: Actual | 92% | 90% |
| Percent achieving contracted treatment expectation: Contract | 80% | 73% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | 15005044 | 15176210 |
| Total Program expenditures | -232,723 | 71,001 |
| Total Clients Served | 648 | 639 |
| Expenditures per [case] | 21474 | 23287 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 4462898 | 4357587 | 4533815 | 4551593 |
| Benefits | 5200 | 1249611 | 1217961 | 1269468 | 1274446 |
| Overhead | 7150 | 1989269 | 1989269 | 1989757 | 1989757 |
| Training | 5905 | 61826 | 68566 | 87082 | 100427 |
| | Total | 7763604 | 7633383 | 7880122 | 7916223 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Love 146- Survivor Care | | | | | | |
|---|---|---|---|---|---|---|
| Geographic Location Covered: Entire State | | | | | | |
| DCF open case needed for referral or admission? | No | | | | | |
| Is Program 3rd Party | No | | | | | |
| | | | | | | |
| Program Utlization | SFY 2023 | | | SFY2024 | | |
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 20-30 Rapid Responses 15-25 Case Management spots | Love146 conducted 115 Rapid Responses. Of these, DCF referred 73, and DCF funded 24. Love146 served 102 youth through Case Management/Long-Term Services. Of these, DCF referred 72, and DCF funded 25. | NA | 20-30 Rapid Responses 15-25 Case Management spots | Love146 conducted 110 Rapid Responses. Of these, DCF referred 64, and DCF funded 22. Love146 served 98 youth through Long-Term Services. Of these, DCF referred 63, and DCF funded 21 youth. | NA |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
Utilization was significantly above contract. Referrals from DCF far exceed contracted amount.

| | | |
|---|---|---|
| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
| Referrals | 183 | 164 |
| Clients receiving evaluation only | 4 | 3 |
| Clients receiving services | 164 | 193 |
| Clients completing treatment | 115 Rapid | 110 Rapid Responses/56 |

**Narrative explanation for the reasons that referrals go unserved**

This year, Love146 did not have any waitlist for Rapid Responses; however, the waitlist for Case Management/Long-Term Services ran between 40-50 youth. This was the result of a capacity issue. We did not have any staffing issues and with additional funding to hire staff we could have served these youth.
Please note that the discrepancies between referrals and services is due to the fact that some referrals that came in at the end of the fiscal year were served the following fiscal year, and some youth receive Case Management/Long-Term Services across fiscal years.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 183 | 164 |
| [Cases] eligible for treatment | 179 | 161 |
| [Cases] achieving treatment goal | 115 Rapid Responses/ 19 Case Management Services | 110 Rapid Responses/ 29 Case Management Services |
| Percent achieving contracted treatment expectation: Actual | 100% Rapid Responses/53 % Case Management Services | 100% Rapid Responses/ 52% Case Management Services |
| Percent achieving contracted treatment expectation: Contract | NA | NA |
| | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$410,052** | **$390,105** |
| Total Program expenditures | $421,511 | 402,424 |
| Total Clients Served | 164 | 193 |
| Expenditures per [case] | N/A - Funding for some of these client services was from sources outside of DCF | N/A - Funding for some of these client services was from sources outside of DCF |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | $251,044 | $262,835 | $296,508 | $297,692 |
| Benefits | | $50,281 | $49,151 | $56,841 | $64,786 |
| Overhead | | $79,080 | $78,764 | $36,756 | $39,947 |
| Training | | $29,647 | $30,761 | $0 | $0 |
| | **Total** | $410,052 | $421,511 | $390,105 | $402,425 |

| Are factors below included | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Community Health Resources - Substance Screening, Treatment and Recovery for Youth | | |
|---|---|---|
| Geographic Location Covered: Hartford, Enfield, Manchester, New Britian, Willimantic | | |
| DCF open case needed for referral or admission? | N | |
| Is Program 3rd Party Billable? | Y | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 100 SBIRTS, 90 CRA/AC | 101 | 53% | 100 SBIRTS, 90 CRA/AC | 85 | 45% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Determining contract capacity is challenging due to the way program utilization is divided into two categories: SBIRT and CRA/AC, each with its own rate of referral and utilization. Additionally, the program is broken out into 4 separate projects in PIE based on geography. This division complicates the ability to accurately assess overall capacity.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The SSTRY program experienced lower utilization than usual during the past fiscal year due to staffing shortages and a low volume of referrals. We have been actively collaborating with DCF and the community we

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 60 | 36 |
| Clients receiving evaluation only | 6 | 2 |
| Clients receiving services | 101 | 85 |
| Clients completing treatment plan | 42 | 38 |

**Narrative explanation for the reasons that referrals go unserved**

Referrals do not go unserved; however, when we are short-staffed, the referral process is delayed, which slows down the intake and service delivery.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 60 | 36 |
| [Cases] eligible for treatment | 52 | 34 |
| [Cases] achieving treatment goal | 32 | 27 |
| Percent achieving contracted treatment expectation: Actual | 89% | 75% |
| Percent achieving contracted treatment expectation: Contract | 70% | 70% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $332,042 | $340,509 |
| Total Program expenditures | $456,828 | $396,000 |
| Total Clients Served | 101 | 85 |
| Expenditures per [case] | $4,523 | $4,659 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $262,365 | $249,119 | $244,982 | $200,738 |
| Benefits | 5200 | $78,947 | $84,476 | $70,796 | $64,368 |
| Overhead | 7000 | $63,367 | $60,900 | $71,498 | $60,969 |
| Training | 5905 | $0 | $446 | $15,000 | $0 |
| | **Total** | $404,678 | $394,941 | $402,276 | $326,075 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name:the Children's Center of Hamden - SSTRY | | |
|---|---|---|
| Geographic Location Covered: Hamden / Meriden / Middletown / Norwich | | |
| DCF open case needed for referral or admission? | NO | |
| Is Program 3rd Party Billable? | YES | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| SSTRY | 90 | 54 | 60.0% | 90 | 45 | 50.0% |
| SBIRT | 100 | 15 | 15.0% | 100 | 6 | 6.0% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Low utlization is attributable to population's ongoing reluctance to identify as needing substance use services. This provider has begun to outreach to youth who are in an earlier onset of their use and who are more amenable to treatment. Periodic staff vacancies also contibuted to utlization. SBIRT utilization is low and we are working actively to partner with other CCOH programs and the community. New supervisor started at CCOH November and a new SSTRY manager started as well. New Supervisor took over administrative duties for previous administrative asst (referrals, scheduling intakes, etc) looking to improve approaches to engagement.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

This trend does not refect a decrease need for the service. The Regional Advisory Council is planning a region-wide meeting that will orient new employees to service types and how to refer.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 72 | 86 |
| Clients receiving evaluation only | 5 | 2 |
| Clients receiving services | 43 | 45 |
| Clients completing treatment plan | 20 | 7 |

**Narrative explanation for the reasons that referrals go unserved**

(This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Program has had a low staffing retention rate. Since beginning the program we have had low amount of applicants for substance use clinicians. The program has had at least 4 different RSS's since begininning as turnover rate is high in that position. Individuals who had an intake also have presented with a higher level of need such as a substance IOP. Individuals have also had low attendance rate particularly after initial intake. Referral sources will refer and then close out case when followed up with. Roughly 50% of referrals did not get an intake scheduled which was due to not being able to get in touch with families and referral sources to schedule.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 43 | 47 |
| [Cases] eligible for treatment | 38 | 45 |
| [Cases] achieving treatment goal | 20 | 11 |
| Percent achieving contracted treatment expectation: Actual | 52% | 24% |
| Percent achieving contracted treatment expectation: Contract | 70% completing procedures in ACRA and ACC | 70% completing procedures in ACRA and ACC |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 | |
|---|---|---|---|
| Total Program allocations | **473,830** | **433,037** | |
| Total Program expenditures | 394,373 | 377,569 | |
| Total Clients Served | 47 | 48 | this number is higher then initial assessments due to the total number of clients in program during this time. (i.e clients who were already in the program prior to start of FY) |
| Expenditures per [case] | 8,391 | 7,866 | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 256,034 | 186,625 | 244,697 | 214,066 |
| Benefits | 5302 | 71,612 | 48,727 | 68,442 | 46,665 |
| Overhead | 7000 | 79,099 | 86,338 | 79,017 | 90,364 |
| Training | 5905 | 16,700 | 4,099 | 16,700 | 8,536 |
| | **Total** | 423,445 | 325,790 | 408,856 | 359,631 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Community Health Resources - Therapeutic Foster Care | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 0 | 27 | NA | 0 | 6 | NA |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: This program type transitioned from TFC to FFT-FC. Youth may be transitioned to TFC if additional support is needed after FFT-FC.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: N/A - program type transitioned from TFC to FFT-FC.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 27 | 6 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 27 | 6 |
| Clients completing treatment plan | 27 | 6 |

**Narrative explanation for the reasons that referrals go unserved**

This program does not accept referrals in the traditional sense. Any FFT-FC youth that is in need of TFC supports after completion of FFT-FC is provided those supports. There are no clinical goals for youth when they transition to TFC.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | NA | NA |
| [Cases] eligible for treatment | 27 | 6 |
| [Cases] achieving treatment goal | NA | NA |
| Percent achieving contracted treatment expectation: Actual | NA | NA |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $131,852 | NA |
| Total Program expenditures | $110,605 | NA |
| Total Clients Served | 43 | 9 |
| Expenditures per [case] | $2,572 | NA |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $36,902 | $31,649 | NA | NA |
| Benefits | 5200 | $10,092 | $9,902 | NA | NA |
| Overhead | 7000 | $21,156 | $15,905 | NA | NA |
| Training | 5905 | $267 | $0 | NA | NA |
| | **Total** | $68,417 | $57,456 | NA | NA |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | NA |
| Data collection | Y | NA |
| Quality assurance expectations | Y | NA |

| | | | | | | |
|---|---|---|---|---|---|---|
| **Program Name: Wheeler Health: Functional Family Therapy - Foster Care** | | | | | | |
| **Geographic Location Covered:** | | | | | | |
| **DCF open case needed for referral or admission?** | **Yes** | | | | | |
| **Is Program 3rd Party Billable?** | **No** | | | | | |
| | | | | | | |
| **Program Utilization** | **SFY 2023** | | | **SFY2024** | | |
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **84** | **18 to 56*** | **At highest 67%** | **84** | **51 to 60**** | **At highest 71%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:

* Number indicates the lowest and highest utilization in a given month of that fiscal year. FFT became the primary therapeutic foster care program in August 2022. Full utilization did not occur until December 2022. The number of children in the program built up throughout the year, 18 is September 2022 and 56 is June 2023.

** Number indicates the lowest and highest utilization in a given month of that fiscal year.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

Low initial utilization is due to new program implementation. In September of 2022 clients were added to staff's case loads two at a time per week. Program was not fully staffed with full case loads until December of 2022.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 88 | 43 |
| Clients receiving evaluation only | 68* | 36* |
| Clients receiving services | 68 | 36 new clients, 54 carried over from previous year. Totaling 90 |
| Clients completing treatment plan | 68 | 90 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

*Main exclusionary reasons for youth who are referred are: needing a higher level of care or youth being referred without OTC and not coming into care.

FFT is intended to be a 6 to 9 month treatment in foster home and then restart for another 4 to 6 months in the permanency home. Youth who have to change foster homes while in the middle of their FFT treatment restart the 6 to 9 months in a new homes, which leads to youth often staying in the program longer than the intended length.

- In SFY 2023, All 68 Clients had an active treatment Plan

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 68 | 36 |
| [Cases] eligible for treatment | 68 | 36 |
| [Cases] achieving treatment goal | 3 | 23 |
| Percent achieving contracted treatment expectation: Actual | 23%* | 50%* |
| Percent achieving contracted treatment expectation: Contract | ** | ** |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,788,690** | **2,228,112** |
| Total Program expenditures | 1,529,415 | 2,286,146 |
| Total Clients Served | 68.00 | 90.00 |
| Expenditures per [case] | 22,491.40 | 25,401.62 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 796,880 | 622,345 | 1,040,737 | 998,920 |
| Benefits | 5200 | 214,578 | 157,954 | 248,492 | 232,813 |
| Overhead | All others | 772,213 | 747,396 | 931,082 | 1,048,940 |
| Training | 5905 | 5,019 | 1,720 | 7,800 | 5,474 |
| | **Total** | 1,788,690 | 1,529,415 | 2,228,112 | 2,286,146 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Community Health Resources - Therapeutic Group Home - Brook House | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 5 | 6 | 120% | 5 | 6 | 120% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: N/A

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The program is capped at 5 youth at a time; the majority of FY23 and FY24 had 4 or 5 youth in the program at any given time. Matches are reviewed and accepted based on appropriateness to the level of care. We have seen a trend in a higher volume of matches sent for female beds compared to our male TGH programs.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 4 | 1 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 6 | 6 |
| Clients completing treatment plan | 1 | 4 |

**Narrative explanation for the reasons that referrals go unserved**

All matches were reviewed and accepted based on appropriateness for TGH level of care.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 4 | 4 |
| [Cases] eligible for treatment | 6 | 6 |
| [Cases] achieving treatment goal | 1 | 4 |

| | | |
|---|---|---|
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| **Total Program Expenditures** | **SFY 2023** | **SFY2024** |
|---|---|---|
| Total Program allocations | $1,183,575 | $1,228,938 |
| Total Program expenditures | $1,193,493 | $1,323,158 |
| Total Clients Served | 6 | 6 |
| Expenditures per [case] | $198,916 | $220,526 |

| **DCF Funding and Expenditures by Account** | | **SFY 2023** | | **SFY2024** | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | $675,851 | $641,928 | $709,428 | $653,193 |
| Benefits | 5200 | $181,710 | $185,120 | $185,062 | $206,302 |
| Overhead | 7000 | $163,167 | $161,653 | $212,513 | $200,149 |
| Training | 5905 | $4,250 | $21 | $4,250 | $1,705 |
| | **Total** | $1,024,978 | $988,722 | $1,111,254 | $1,061,349 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| **Program Name: Community Health Resources - Therapeutic Group Home - Grant House** | |
|---|---|
| **Geographic Location Covered: Statewide** | |
| **DCF open case needed for referral or admission?** | **Y** |
| **Is Program 3rd Party Billable?** | **N** |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 5 | 4 | 80% | 5 | 5 | 100% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: In FY23 4/5 beds full; no matches met the level of care to utilize the last slot. In FY24, due to low utilization at the start of the year, we offered to transition Grant House from a male to female TGH, which DCF declined. At the request of the Department, Grant House transitioned into Emergency Placement setting for 6 months. During this time we took in 3 youth under Emergency placements. After referrals slowed down, the program transitioned back to standard TGH.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: We see a trend in youth being matched to the program at a higher

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 1 | 3 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 4 | 5 |
| Clients completing treatment plan | 2 | 4 |

**Narrative explanation for the reasons that referrals go unserved**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 1 | 3 |
| [Cases] eligible for treatment | 4 | 5 |
| [Cases] achieving treatment goal | 2 | 4 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $1,127,254 | $1,171,180 |
| Total Program expenditures | $1,143,243 | $1,137,206 |
| Total Clients Served | 4 | 5 |
| Expenditures per [case] | $285,811 | $227,441 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $678,020 | $614,018 | $635,221 | $541,444 |

| | | | | | |
|---|---|---|---|---|---|
| Benefits | 5200 | $170,929 | $168,889 | $161,248 | $141,853 |
| Overhead | 7000 | $162,469 | $155,708 | $171,210 | $170,046 |
| Training | 5905 | $4,250 | $21 | $4,250 | $3,786 |
| | **Total** | $1,015,668 | $938,636 | $971,929 | $857,129 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| **Program Name: Community Health Resources - Therapeutic Group Home - Mills House** | | |
|---|---|---|
| **Geographic Location Covered: Statewide** | | |
| **DCF open case needed for referral or admission?** | **Y** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **4** | **5** | **125%** | **4** | **6** | **150%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Census was met on an annual basis (note that the census is capped at 4 as there is an expectation to provide follow up services to youth after discharge from the program).

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: No noticeable trend. There has been a consistent need for the youth and the need has been met based on appropriateness for this level of care.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 1 | 2 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 5 | 6 |
| Clients completing treatment plan | 2 | 2 |

**Narrative explanation for the reasons that referrals go unserved**

| **Are treatment goals being attained?** | **SFY2023** | **SFY2024** |
|---|---|---|
| [Cases] receiving initial assessment | 1 | 2 |
| [Cases] eligible for treatment | 5 | 6 |

| | | |
|---|---|---|
| [Cases] achieving treatment goal | 1 | 1 |
| Percent achieving contracted treatment expectation: Actual | 50% | 50% |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| **Total Program Expenditures** | **SFY 2023** | **SFY2024** |
|---|---|---|
| Total Program allocations | $1,101,573 | $1,144,845 |
| Total Program expenditures | $1,088,086 | $1,175,613 |
| Total Clients Served | 5 | 6 |
| Expenditures per [case] | $217,617 | $195,936 |

| **DCF Funding and Expenditures by Account** | | **SFY 2023** | | **SFY2024** | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | $687,785 | $633,718 | $656,265 | $646,188 |
| Benefits | 5200 | $165,027 | $164,802 | $183,105 | $179,081 |
| Overhead | 7000 | $154,600 | $147,832 | $179,651 | $177,440 |
| Training | 5905 | $4,250 | $642 | $4,250 | $484 |
| | **Total** | $1,011,662 | $946,994 | $1,023,271 | $1,003,193 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| **Program Name: CJR - Winchester Therapeutic Group Home** | | |
|---|---|---|
| **Geographic Location Covered: Entire State** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **No** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **4** | **4** | **100%** | **4** | **4** | **100%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 4 | 15 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 4 | 4 |
| Clients completing treatment plan | 4 | 4 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 4 | 4 |
| [Cases] eligible for treatment | 4 | 4 |
| [Cases] achieving treatment goal | 3 | 3 |
| Percent achieving contracted treatment expectation: Actual | 75% | 75% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | 1,043,264 | 1,143,849 |
| Total Clients Served | 4 | 4 |
| Expenditures per [case] | 260,816 | 285,962 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 566,044 | 566,044 | 622,175 | 622,175 |
| Benefits | 5200 | 141,375 | 141,375 | 157,044 | 157,044 |
| Overhead | 5300, 5400, 5500, 5600, 5700, 5900, 6000, 7000 series | 360,232 | 330,287 | 330,261 | 358,353 |
| Training | | 5,558 | 5,558 | 6,277 | 6,277 |
| | **Total** | 1,073,209 | 1,043,264 | 1,115,757 | 1,143,849 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | No | No |
| Data collection | No | No |
| Quality assurance expectations | No | No |

Funding is insufficient

**Program Name: Clifford Beers Youth Continuum - Helen's House QRTP (TGH)**

**Geographic Location Covered: located in North Haven, but temporarily relocated to East Haven; accepts referrals from anywhere in CT**

| | | |
|---|---|---|
| **DCF open case needed for referral or admission?** | **No; Carelon voluntary accepted** | |
| **Is Program 3rd Party Billable?** | **no** | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 5 | 7 | 140% | 5 | 6 | 120% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: N/A
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: N/A

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 10 | 10 |
| Clients receiving evaluation only | 3 | 4 |
| Clients receiving services | 7 | 6 |
| Clients completing treatment plan | 7 | 6 |

**Narrative explanation for the reasons that referrals go unserved:**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
**Clients did not meet admission criteria due to concerns of referrals safety in the level of care and/or concerns for safety of current residents and staff if the referral was accepted into the home.**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 6 | 6 |
| [Cases] eligible for treatment | 6 | 6 |

| | | |
|---|---|---|
| [Cases] achieving treatment goal | 3 | 3 |
| Percent achieving contracted treatment expectation: Actual | 50% | 50% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| **Total Program Expenditures** | **SFY 2023** | **SFY2024** |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | 6 | 6 |
| Expenditures per [case] | | |

| **DCF Funding and Expenditures by Account** | | **SFY 2023** | | **SFY2024** | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | **Total** | 0 | 0 | 0 | 0 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| **Program Name: Clifford Beers Youth Continuum Bradley House TGH** | | |
|---|---|---|
| **Geographic Location Covered: Located in East Haven; accepts referrals from anywhere in CT** | | |
| **DCF open case needed for referral or admission?** | **Yes** | |
| **Is Program 3rd Party Billable?** | **No** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 4 | 3 | 75% | 0 | 0 | 0% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Low staffing; house closed in August 2023
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Workforce limitations

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 6 | 0 |
| Clients receiving evaluation only | 3 | 0 |
| Clients receiving services | 3 | 0 |
| Clients completing treatment plan | 3 | 0 |

**Narrative explanation for the reasons that referrals go unserved:**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
**Clients did not meet admission criteria**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 3 | 0 |
| [Cases] eligible for treatment | 3 | 0 |
| [Cases] achieving treatment goal | 1 | 0 |
| Percent achieving contracted treatment expectation: Actual | 33% | 0% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | 3 | 0 |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | | | | | |
| Training | | | | | |
| | Total | 0 | 0 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | | |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name: FCAid - Therapeutic Group Home - Girls | | |
|---|---|---|
| Geographic Location Covered: Danbury | | |
| DCF open case needed for referral or admission? | (y/n) | n |
| Is Program 3rd Party Billable? | (y/n) | n |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | n/a | 7 | | n/a | 9 | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 7 | 10 |
| Clients receiving evaluation only | n/a | n/a |
| Clients receiving services | 7 | 9 |
| Clients completing treatment plan | 100% | 100% |

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 7 | 10 |
| [Cases] eligible for treatment | 7 | 9 |
| [Cases] achieving treatment goal | 0 | 0 |
| Percent achieving contracted treatment expectation: Actual | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases]

| | | | |
|---|---|---|---|
| Percent achieving contracted treatment expectation: Contract | n/a | n/a | achieving treatment goal of those eligible for treatment. |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1185458** | **1230869** |
| Total Program expenditures | 1365587 | 1424968 |
| Total Clients Served | 7 | 9 |
| Expenditures per [case] | 195,083.86 | 158,329.78 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 727396 | 762488 | 839927 | 929296 |
| Benefits | 5200 | 178820 | 135724 | 183250 | 159976 |
| Overhead | 7100 | 99636 | 105309 | 101539 | 109454 |
| Training | 5905 | 9840 | 17984 | 6600 | 6583 |
| | **Total** | 1015692 | 1021505 | 1131316 | 1205309 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Gilead Comm. Services Anchorage Home Therapuetic Group Home** | | |
| **Geographic Location Covered: Old Saybrook** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **No** |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **4** | **5** | **125%** | **4** | **4** | **100%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract:** In FY 23, despite bed vacancies, Carelon was not sending referrals for these open spots. Gilead Community Services had several phone calls with Carelon to encourage them to refer to the beds, which did eventually result in referrals sent for admission review.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 5 | 11 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 3 | 2 |
| Clients completing treatment plan | 0 | 0 |

**Narrative explanation for the reasons that referrals go unserved:** Referrals denied during 2023 did not meet Gilead's admission related to sexualized behavioral risk, high

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 5 | 4 |
| [Cases] eligible for treatment | 5 | 4 |
| [Cases] achieving treatment goal | 1 | 0 |
| Percent achieving contracted treatment expectation: Actual | 50% | 0% |
| Percent achieving contracted treatment expectation: Contract | | |
| Explanation: In FY 2023, one client did not finish treatment after making a bomb on | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$ 163,046.15** | **$ 156,550.17** |
| Total Program expenditures | $ 907,640.89 | $ 1,022,655.57 |
| Total Clients Served | | |
| Expenditures per [case] | $ - | $ - |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 1,072,443.00 | $ 560,343.47 | $ 1,087,247.00 | $ 680,710.82 |
| Benefits | 5200 | | $ 159,524.58 | | $ 191,652.29 |
| Overhead | Various | | $ 336,724.72 | | $ 300,916.92 |
| Training | 5904 - 5905 | | $ 14,094.27 | | $ 5,925.71 |
| | **Total** | $ 1,072,443.00 | $ 1,070,687.04 | $ 1,087,247.00 | $ 1,179,205.74 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|

| | | |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Klingberg - Phoenix House - Therapuetic Group Home** | | |
| **Geographic Location Covered: Terryville** | | |
| **DCF open case needed for referral or admission?** | **n** | |
| **Is Program 3rd Party Billable?** | **n** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | 4 | 3 | 75% | 4 | 3 | 75% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract We had a bed hold due to a clients severe history of DMST.**
The reasons for the decline or low utilization: We in late September discharged a client and have been collaborating with Carelon on referrals. Although we had staff vacancies at times, it did not impact ration or our ability to accept referrals.
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The two first referrals were evaluated quickly one was too acute for the group home, the other one signed herself out of Solnit and was in a foster home and the placement seem to be working and she was able to maintain at that level of care.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 0 | 3 |
| Clients receiving evaluation only | 0 | 1 |
| Clients receiving services | 3 | 3 |
| Clients completing treatment plan | 0 | 1 |

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria) We did not accept two matches one of the referrals did not meet the criteria for care had a history of aggression and the team was not sure if she was going to stay in her foster home, the DCF team was sent emails with Carelon on it and did not get back to us so we closed the referral to move to the next client . This client we are working to admit from Solnit.

| **Are treatment goals being attained?** | **SFY2023** | **SFY2024** |
|---|---|---|
| [Cases] receiving initial assessment | | 3 |
| [Cases] eligible for treatment | | 1 |
| [Cases] achieving treatment goal | | 3 |

| | | |
|---|---|---|
| Percent achieving contracted treatment expectation: Actual | | 75% |
| Percent achieving contracted treatment expectation: Contract | | 75% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| **Total Program Expenditures** | **SFY 2023** | **SFY2024** |
|---|---|---|
| Total Program allocations | **100.00%** | **100.00%** |
| Total Program expenditures | $1,180,056 | $1,236,641 |
| Total Clients Served | 3 | 3 |
| Expenditures per [case] | $393,352 | $412,214 |

| **DCF Funding and Expenditures by Account** | | **SFY 2023** | | **SFY2024** | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5100 | $543,626 | $661,374 | $589,408 | $641,197 |
| Benefits | 5200 | $223,004 | $179,820 | $227,689 | $177,141 |
| Other Expenses | 5900 | $144,015 | $151,486 | $118,179 | $206,620 |
| Overhead | 5300+7100 | $162,037 | $187,376 | $179,940 | $211,683 |
| Training | 5905 | $0 | | $0 | |
| | **Total** | $1,072,682 | $1,180,056 | $1,115,216 | $1,236,641 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | yes | yes |
| Data collection | yes | yes |
| Quality assurance expectations | yes | yes |

| | | |
|---|---|---|
| **Program Name: NAFI, Inc. Corbin House Group Home** | | |
| **Geographic Location Covered: New Britain, Connecticut** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **No** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **4** | **3** | **75%** | **4** | **3** | **75%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 4 | 6 |
| Clients receiving evaluation only | 2 | 4 |
| Clients receiving services | 2 | 2 |
| Clients completing treatment plan | | |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Staffing vacancies and inappropriate referral matches. Youth did not meet the admission criteria.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 2 | 2 |
| [Cases] eligible for treatment | 4 | 4 |
| [Cases] achieving treatment goal | 2 | 2 |
| Percent achieving contracted treatment expectation: Actual | 50% | 62.50% |
| Percent achieving contracted treatment expectation: Contract | 100% | 100% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,155,778** | **1572527** |
| Total Program expenditures | 1,102,244 | 1299857 |
| Total Clients Served | 5 | 4 |
| Expenditures per [case] | $ 220,448.80 | $ 324,964.25 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 643921 | 600543 | 928451 | 748738 |
| Benefits | | 173858.6 | 158545 | 246039 | 195283 |
| Overhead | | 333646.4 | 339204 | 394697 | 351787 |
| Training | | 4352 | 3952 | 3340 | 4049 |
| | **Total** | 1155778 | 1102244 | 1572527 | 1299857 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: NAFI, Inc. Tress Road Group Home** | | |
| **Geographic Location Covered: Prospect, Connecticut** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **Yes** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **No** |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 4 | 3 | 75% | 4 | 4 | 100% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: Staffing vacancies and inappropriate referral matches.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 2 | 1 |
| Clients receiving evaluation only | 0 | 1 |
| Clients receiving services | 2 | 0 |
| Clients completing treatment plan | | |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 2 | 0 | |
| [Cases] eligible for treatment | 4 | 4 | |
| [Cases] achieving treatment goal | 0 | 0 | |
| Percent achieving contracted treatment expectation: Actual | 75% | 75% | Definition of contracted treatment expectation: Percent of [cases] |

| | | | |
|---|---|---|---|
| Percent achieving contracted treatment expectation: Contract | 100% | 100% | achieving treatment goal of those eligible for treatment. |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1172108** | **1587187** |
| Total Program expenditures | 1119925.57 | 1311764 |
| Total Clients Served | 4 | 4 |
| Expenditures per [case] | 279981.39 | 327941.00 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 673083 | 616770 | 942866 | 764057 |
| Benefits | | 181732 | 162943 | 249860 | 199264 |
| Overhead | | 314266 | 335338 | 390390 | 343122 |
| Training | | 3027 | 4874 | 4071 | 5231 |
| | **Total** | 1172108 | 1119925 | 1587187 | 1311674 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Wellmore - Valiant Group Home (TGH)** | | |
| **Geographic Location Covered: Connecticut** | | |
| **DCF open case needed for referral or admission?** | **no** | |
| **Is Program 3rd Party Billable?** | **no** | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | **4** | **5** | **125%** | **4** | **6** | **150%** |

**Valiant House continued to show strong utilization across both years with increasing census to a full house by the end of FY24. Valiant continues to serve youth with significant trauma, experiences of physical and sexual abuse, disruptions in attachment and developmental spectrum challenges in a way that encourages recovery, adaptation and transition to a lower level of care in the community.**

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 1 | 4 |
| Clients receiving evaluation only | 0 | 2 |
| Clients receiving services | 1 | 2 |
| Clients completing treatment plan | 1 | 2 |

During FY23, we had one youth starting the year with Valiant who came with profound trauma and dissociation. As he stabilized, he slowly engaged in community based activities and schooling successfully. There were no other referrals to Valiant for that year. During the second year we successfully accepted and integrated three new youth into the House.

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 1 | 2 | |
| [Cases] eligible for treatment | 1 | 2 | |
| [Cases] achieving treatment goal | 0 | 0 | only assessed on discharged clients; no clients discharged in this period |
| Percent achieving contracted treatment expectation: Actual | 0 | 0 | Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. |
| Percent achieving contracted treatment expectation: Contract | 80% | 80% | |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$1,073,177** | **$1,151,522** |
| Total Program expenditures | $1,103,563 | $1,176,146 |
| Total Clients Served | $5 | $5 |
| Expenditures per [case] | $220,712.60 | $235,229.10 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $597,264 | $589,774 | $684,907 | $618,093 |
| Benefits | 5200 | $135,245 | $143,274 | $148,643 | $176,480 |
| Overhead | 5400 to 5909; 5990 to 7150 | $334,121 | $359,981 | $313,001 | $381,197 |
| Training | 5910 | $6,548 | $10,533 | $5,000 | $377 |
| | **Total** | $1,073,177 | $1,103,563 | $1,151,552 | $1,176,146 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name:Wheeler - Light House Therapuetic Group Home | | |
|---|---|---|
| Geographic Location Covered: Any | | |
| DCF open case needed for referral or admission? | (y/n) | no |
| Is Program 3rd Party Billable? | (y/n) | no |

| Program Utilization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 4 | 2 | 50% | 4 | 4 | 100% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: N/A
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 2 | 3 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 2 | 3 |
| Clients completing treatment plan | 2 | 0 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 2 | 3 |
| [Cases] eligible for treatment | 2 | 3 |
| [Cases] achieving treatment goal | 2 | 3 |

| | | | |
|---|---|---|---|
| Percent achieving contracted treatment expectation: Actual | 100% | 100% | Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. |
| Percent achieving contracted treatment expectation: Contract | | | |

| **Total Program Expenditures** | **SFY 2023** | **SFY2024** |
|---|---|---|
| Total Program allocations | **1,072,590.00** | **1,115,123.00** |
| Total Program expenditures | 1,037,838.00 | 1,278,726.80 |
| Total Clients Served | 2 | 4 |
| Expenditures per [case] | 518,919 | 319,682 |

| **DCF Funding and Expenditures by Account** | | **SFY 2023** | | **SFY2024** | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 654,339.60 | 824,531.93 | 721,372.09 | 668,318.21 |
| Benefits | 5200 | 146,809.69 | 150,620.42 | 151,462.33 | 153,427.35 |
| Overhead | All others | 267,371.71 | 58,354.65 | 235,237.02 | 449,906.47 |
| Training | 5905 | 4,069.00 | 4,331.00 | 7,051.55 | 7,074.77 |
| | **Total** | 1,072,590.00 | 1,037,838.00 | 1,115,123.00 | 1,278,726.80 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| **Program Name: Wheeler - Farmhill Therapuetic Group Home** | | |
|---|---|---|
| **Geographic Location Covered: Any** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **No** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **4** | **4** | **100** | **4** | **6** | **150** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization: N/A

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 4 | 4 |
| Clients receiving evaluation only | 2 | 0 |
| Clients receiving services | 4 | 6 |
| Clients completing treatment plan | 2 | 4 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 4 | 6 |
| [Cases] eligible for treatment | 4 | 6 |
| [Cases] achieving treatment goal | 2 | 4 |
| Percent achieving contracted treatment expectation: Actual | 50% | 66% |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **1,072,547.00** | **1,115,078.00** |
| Total Program expenditures | 1,097,529.00 | 1,087,221.33 |
| Total Clients Served | 4 | 6 |
| Expenditures per [case] | 274382.25 | 181203.555 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 651,661.79 | 615,828.37 | 685,550.12 | 631,766.39 |
| Benefits | 5200 | 153,113.69 | 151,285.19 | 148,464.31 | 137,591.26 |
| Overhead | All others | 264,122.52 | 327,732.44 | 277,623.57 | 314,017.36 |
| Training | 5905 | 3,649.00 | 2,683.00 | 3,440.00 | 3,846.32 |
| | **Total** | 1,072,547.00 | 1,097,529.00 | 1,115,078.00 | 1,087,221.33 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| Program Name:Adelbrook TGH - Potters | | |
|---|---|---|
| Geographic Location Covered: Cromwell, CT | | |
| DCF open case needed for referral or admission? | (y/n) | |
| Is Program 3rd Party Billable? | (y/n) | |

| Program Utlization | THG - Isaiah | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 5 | 3.08 | 62% | 5 | 3.67 | 73% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 2 | 1 |
| Clients receiving evaluation only | | |
| Clients receiving services | 4 | 4 |
| Clients completing treatment plan | 0 | 1 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 2 | 1 |
| [Cases] eligible for treatment | 4 | 4 |
| [Cases] achieving treatment goal | 3 | 3 |

| | | | |
|---|---|---|---|
| Percent achieving contracted treatment expectation: Actual | | | Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. |
| Percent achieving contracted treatment expectation: Contract | | | |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **159,765** | **157,230** |
| Total Program expenditures | 1,033,338 | 1,055,675 |
| Total Clients Served | 3.08 | 3.67 |
| Expenditures per [case] | 335,137 | 287,911 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 596,685 | 602,400 | 631,774 | 596,949 |
| Benefits | 5200 | 181,988 | 90,037 | 123,196 | 95,819 |
| Overhead | Various | 189,339 | 180,526 | 358,574 | 202,803 |
| Training | 5906 | 200 | 610 | 1,000 | 2,874 |
| | **Total** | 968,212 | 873,573 | 1,114,544 | 898,445 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Adelbrook - TGH - Isaiah** | | |
| **Geographic Location Covered: Middletown, CT** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | |
| **Is Program 3rd Party Billable?** | **(y/n)** | |

| Program Utlization | THG - Isaiah | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 5 | 2.17 | 43% | 5 | 2.33 | 47% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 3 | 3 |
| Clients receiving evaluation only | | |
| Clients receiving services | 4 | 4 |
| Clients completing treatment plan | 2 | 0 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 2 | 3 |
| [Cases] eligible for treatment | 4 | 4 |
| [Cases] achieving treatment goal | 2 | 1 |
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **131,488** | **149,418** |
| Total Program expenditures | 1,047,746 | 1,170,377 |
| Total Clients Served | 2.17 | 2.33 |
| Expenditures per [case] | 483,575 | 501,590 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 596,659 | 622,189 | 631,838 | 664,703 |
| Benefits | 5200 | 181,981 | 90,745 | 123,208 | 96,991 |
| Overhead | Various | 248,470 | 202,681 | 414,634 | 257,071 |
| Training | 5906 | 150 | 644 | 1,000 | 2,195 |
| | **Total** | 1,027,260 | 916,258 | 1,170,681 | 1,020,960 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Adelbrook - TGH - Esther | | |
|---|---|---|
| Geographic Location Covered: North Haven, CT | | |
| DCF open case needed for referral or admission? | (y/n) | |
| Is Program 3rd Party Billable? | (y/n) | |

| Program Utlization | THG - Isaiah | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 5 | 2.92 | 58% | 5 | 3 | 60% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 3 | 3 |
| Clients receiving evaluation only | | |
| Clients receiving services | 4 | 4 |
| Clients completing treatment plan | 2 | 0 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 3 | 3 |
| [Cases] eligible for treatment | 4 | 4 |
| [Cases] achieving treatment goal | 3 | 3 |

| | | |
|---|---|---|
| Percent achieving contracted treatment expectation: Actual | | |
| Percent achieving contracted treatment expectation: Contract | | |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| **Total Program Expenditures** | **SFY 2023** | **SFY2024** |
|---|---|---|
| Total Program allocations | **131,887** | **144,512** |
| Total Program expenditures | 944,373 | 1,171,841 |
| Total Clients Served | 2.92 | 3 |
| Expenditures per [case] | 323,785 | 390,614 |

| **DCF Funding and Expenditures by Account** | | **SFY 2023** | | **SFY2024** | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 596,767 | 476,549 | 631,898 | 610,341 |
| Benefits | 5200 | 182,014 | 124,635 | 123,220 | 131,352 |
| Overhead | Various | 343,875 | 210,557 | 380,624 | 284,166 |
| Training | 5906 | 1,000 | 745 | 1,000 | 1,470 |
| | **Total** | 1,123,656 | 812,486 | 1,136,742 | 1,027,329 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Alliance for Community Empowerment, Inc. TLCC | | |
|---|---|---|
| Geographic Location Covered: Greater Bridgeport Area | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 30 | 29 | 97% | 30 | 21 | 70% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Clients applying for services are not age eligible for the program. These clients are typically infant/toddlers and the program provides services to preschoolers. Alliance like many other providers is experiencing a workforce shortage.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: This trend reflects the need for services that are inclusive of the infant/toddler population who experience trauma and other related crises.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 36 | 37 |
| Clients receiving evaluation only | 7 | 16 |
| Clients receiving services | 29 | 21 |
| | | |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

SFY2023: Referrals were unserved due to staffing shortages/vacancies which resulted in closed classrooms, and also children that did not meet the age requirement for the program. Some of the families referred do not start the program.

SFY2024: Referrals were unserved due to children that did not meet the age requirement for the program. Some of the families referred do not start or move out of the area.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 29 | 21 |
| [Cases] eligible for treatment | 29 | 17 |
| [Cases] achieving treatment goal | 25 | 21 |
| Percent achieving contracted treatment expectation: Actual | 86 | 100 |
| Percent achieving contracted treatment expectation: Contract | 100 | 100 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | | 226,302.00 | 179,961.00 | 226,302 | 177,948 |
| Benefits | | 61,508.00 | 31,590.00 | 61,508 | 38,569 |
| Overhead | | 113,407.00 | 84,881.57 | 171,875 | 159,104.03 |
| Training | | 7,500.00 | 1,405.41 | 3,000 | 1,259.42 |
| | **Total** | 408,717.00 | 297,837.98 | 462,685 | 376,880 |

| **Are factors below included in procurement rate (budgeted costs) (Y/N)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Wheeler - Therapeutic Child Care - Trauma Informed (TCC-TI/LEAP Program) | | |
|---|---|---|
| Geographic Location Covered: New Britain only | | |
| DCF open case needed for referral or admission? | YES | |
| Is Program 3rd Party Billable? | NO | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 12 | 11 | 92% | 12 | 10 | 83% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 16 | 12 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 11 | 10 |
| Clients completing treatment plan | 9 | 7 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
**This program only takes referrals from DCF in New Britain for children who have therapeutic child care needs in the designated town/community. The program did not receive enough referrals to maintain full capacity in FY23 and FY24. Some families referred for the program either moved before they started or the child became eligible for preschool special education with the local school district.**

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 16 | 12 |
| [Cases] eligible for treatment | 14 | 11 |
| [Cases] achieving treatment goal | 9 | 7 |
| Percent achieving contracted treatment expectation: Actual | 100 | 87.50% |
| Percent achieving contracted treatment expectation: Contract | 75% | 58% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **409,705.00** | **420,152.00** |
| Total Program expenditures | 358,035.00 | 442,924.71 |
| Total Clients Served | 11.00 | 10.00 |
| Expenditures per [case] | 32,548.64 | 44,292.47 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 110,946.03 | 76,355.02 | 128,075.06 | 94,135.89 |
| Benefits | 5200 | 24,962.75 | 13,310.92 | 27,648.39 | 28,800.77 |
| Overhead | All others | 273,296.22 | 266,338.06 | 263,228.55 | 319,502.70 |
| Training | 5905 | 500.00 | 2,031.00 | 1,200.00 | 485.35 |
| | **Total** | 409,705.00 | 358,035.00 | 420,152.00 | 442,924.71 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Transitional Peer Supports (TPS) | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | n | |
| Is Program 3rd Party Billable? | n | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | 275 | N/A | N/A | 86 | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 275 | 86 |
| Clients receiving evaluation only | 72 | 17 |
| Clients receiving services | 203 | 69 |
| Clients completing treatment plan | 203 | 69 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

All unserved were due to families declining services or placement with an intensive transitional care management program in the community. All youth receiving service created only a service transition plan (listed as treatment plan above) since this was a very short, transitional program.

| Are treatment goals being attainec | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 275 | 86 |
| [Cases] eligible for treatment | 203 | 69 |
| [Cases] achieving treatment goal | 180 | 57 |
| Percent achieving contracted treatment expectation: Actual | 88.70% | 82.60% |
| Percent achieving contracted treatment expectation: Contract | 85% | 85% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **125,000** | **375,000** |
| Total Program expenditures | 125,000 | 239,384 |
| Total Clients Served | 275 | 86 |
| Expenditures per [case] | 454.55 | 2783.53 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | 76,759 | 77,512 | 129,465 | 127,323 |
| Benefits | 5200 | 22,030 | 23,475 | 38,005 | 37,615 |
| Overhead | 7150 | 24,640 | 23,341 | 73,916 | 73,916 |
| Training | 5905 | - | - | - | - |
| | **Total** | 123,428 | 124,328 | 241,386 | 238,854 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | N | N |

| Program Name: Community Health Resources - Transitional Services for Emerging Adults | | |
|---|---|---|
| Geographic Location Covered: Middletown, Norwich, Willimantic, Hartford, Manchester | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utilization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 43 | 61 | 142% | 43 | 76 | 177% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: There was an increase in utilization, which demonstrates a need for increased capacity and access to this service type. Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: CHR has worked very closely with DCF area offices and TSEA LifeSet consultants to increase referrals. The data for this program is not captured in PIE; additionally, the model does not use the same outcomes or definitions as outlined below, making some areas not applicable. This data does not accurately reflect the positive outcomes this program has.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 23 | 54 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 61 | 76 |
| Clients completing treatment plan | 28 | 22 |

**Narrative explanation for the reasons that referrals go unserved**

Referrals do not go unserved; however, as a voluntary program that only accepts referrals from DCF, there are instances where youth and young adults may be ambivalent or hesitant about participating, which can impact their engagement in the program. Referrals increased in FY24, indicating an increased need for services.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 31 | 34 |
| [Cases] eligible for treatment | 31 | 34 |
| [Cases] achieving treatment goal | NA | NA |
| Percent achieving contracted treatment expectation: Actual | NA | NA |
| Percent achieving contracted treatment expectation: Contract | NA | NA |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $471,123 | $508,688 |
| Total Program expenditures | $479,242 | $483,135 |
| Total Clients Served | 61 | 76 |
| Expenditures per [case] | $7,856 | $6,357 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $238,251 | $236,304 | $257,250 | $214,076 |
| Benefits | 5200 | $73,447 | $73,529 | $77,767 | $71,907 |
| Overhead | 7000 | $67,949 | $65,615 | $75,286 | $74,444 |
| Training | 5905 | $7,000 | $5,944 | $6,000 | $19,092 |
| | **Total** | $386,647 | $381,392 | $416,303 | $379,519 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Wheeler - Transitional Support for Emerging Adults (TSEA) | | |
|---|---|---|
| Geographic Location Covered: Region 6 - New Britain/Meriden | | |
| DCF open case needed for referral or admission? | (y/n) | Yes |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 32-40 average daily census | 28 average daily census | ** | 32-40 average daily census | 24 average daily census | ** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:
** SY23: We served a total for 55 Young Adults ** SY24: We served a total 60 Young Adults
In FY 23 our average daily census was 28 and In FY 24 our average daily census was 24. This number varies based on enrollments at any given time. Minimum census is 32 daily average. In FY 24 we were down by 1 staff for 3 month period which effected our enrollment capability. In the beginning of FY 25 , 28 is the average daily census.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 63 | 61 |
| Clients receiving evaluation only | n/a | n/a |
| Clients receiving services | 55 | 60 |
| Clients completing treatment plan | 55 | 60 |

**Narrative explanation for the reasons that referrals go unserved** This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
All 55 Clients completed treatment plans in SY 23 All 60 Clients completed treatment plans in SY 24

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 28 | 36 |
| [Cases] eligible for treatment | 28 | 36 |
| [Cases] achieving treatment goal | *30 | *33 |
| Percent achieving contracted treatment expectation: Actual | 96% | 94% |
| Percent achieving contracted treatment expectation: contract | ** | ** |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

**FY:23 We had 28 new enrollments, discharged 31 clients , 30 postively discharged . FY24: We had 36 new enrollements, 35 clients discharged, 33 postively discharged. Contract does not state a % threshold.

| | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **431,926** | **508,688** |
| Total Program expenditures | 454,872 | 487,576 |
| Total Clients Served | 55 | 60 |
| Expenditures per [case] | 8270.4 | 8126.266667 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 228,401.06 | 243,180.92 | 263,882.90 | 268,966.84 |
| Benefits | 5200 | 50,248.23 | 74,040.95 | 82,469.11 | 54,753.40 |
| Overhead | All others | 150,876.71 | 137,539.13 | 161,585.99 | 163,343.07 |
| Training | 5905 | 2,400.00 | 111.00 | 750.00 | 512.69 |
| | **Total** | 431,926.00 | 454,872.00 | 508,688.00 | 487,576.00 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: CJR - Urban Trauma | | |
|---|---|---|
| Geographic Location Covered: Waterbury | | |
| DCF open case needed for referral or admission? | (y/n) | No |
| Is Program 3rd Party Billable? | (y/n) | No |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | N/A | N/A Training Year | N/A | N/A | 6 | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: The first yer of the contract was exclusively training. This is a non-traditional contract in that a lot of it involves education rather than actual referrals. There is no set contracted number of referrals.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | N/A | 6 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | N/A | 6 |
| Clients completing treatment plan | N/A | 6 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attai | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessm | N/A | N/A |
| [Cases] eligible for treatment | N/A | 6 |
| [Cases] achieving treatment goal | N/A | 3 |
| Percent achieving contracted treatment expectation: Actual | N/A | 50% |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | 104,167 | 152,209 |
| Total Clients Served | 0 | 6 |
| Expenditures per [case] | 0 | 25,368 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 69,732 | 69,732 | 100,528 | 100,528 |
| Benefits | 5302 | 17,416 | 17,416 | 25,381 | 25,381 |
| Overhead | 5300, 5500, 5600, 5900, 6100, 7000 series | 17,019 | 17,019 | 24,091 | 26,300 |
| Training | | - | - | - | - |
| | **Total** | 104,167 | 104,167 | 150,000 | 152,209 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|

| | | |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | No | No |
| Quality assurance expectations | Yes | Yes |

| | | |
|---|---|---|
| **Program Name: Clifford Beers - Outpatient Urban Trauma Center** | | |
| **Geographic Location Covered: Connecticut** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **Yes** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **N/A** | **1** | | **N/A** | **1** | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

The reason for the low utilization are multiple. One of the largest reasons is that there were no referrals received for this service by DCF workers. When information was provided to an area office, there were several workers who felt this work was being placed on clients rather than on the systems that should be looking to change. When our clinicians would speak with clients about the service, clients did not want to have to change providers to gain access to the intervention or were not interested in the intervention as they did not find it germane to their presenting concerns.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 6 | 3 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 1 | 1 |
| Clients completing treatment plan | 0 | 1 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

When our clinicians would speak with clients about the service, clients did not want to have to change providers to gain access to the intervention or were not interested in the intervention as they did not find it germane to their presenting concerns.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 1 | 1 |
| [Cases] eligible for treatment | 1 | 1 |
| [Cases] achieving treatment goal | 0 | 1 |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | $60,880.20 | $111,849.19 |
| Total Program expenditures | $77,037.04 | $127,892.57 |
| Total Clients Served | 1 | 1 |
| Expenditures per [case] | $77,037.04 | $127,892.57 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | 60,880.20 | 52,482.11 | 111,849.19 | 76,940.91 |
| Benefits | | | 11,505.42 | | 14,543.43 |
| Overhead | | | 13,049.51 | | 36,257.72 |
| Training | | | | | 150.51 |
| | Total | 60,880.20 | 77,037.04 | 111,849.19 | 127,892.57 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Family Centered Services - Urban Trauma Center | | |
|---|---|---|
| Geographic Location Covered: DCF Region 2 | | |
| DCF open case needed for referral or admission? | (y/n) | n |
| Is Program 3rd Party Billable? | (y/n) | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 0 | 0 | | 0 | 32 | |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: Staff turnover caused some issues with meeting contracted numbers. 2023 was a start up time for the UTN and clients were seen starting in early 2024.

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: There is a great need for the program and expectations are that it will continue to grow.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | | 32 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 0 | 32 |
| Clients completing treatment | | |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | | 100% |
| [Cases] eligible for treatment | | 100% |
| [Cases] achieving treatment goal | | 70% |
| Percent achieving contracted treatment expectation: Actual | | 70% |
| Percent achieving contracted treatment expectation: Contract | | 70% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **8,884.06** | **9,231.80** |
| Total Program expenditures | 14,464.96 | 128,975.97 |
| Total Clients Served | Start up | 32 |
| Expenditures per [case] | | 4,030.50 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5100 | 51,313 | 3,462 | 93,929 | 100,295 |
| Benefits | 5200 | 10,263 | 252 | 16,814 | 17,226 |
| Overhead | 7000 | 5,700 | 5,700 | 4,494 | 4,494 |
| Training | 5905 | 1,000 | - | 250 | 27 |
| | **Total** | 68,275 | 9,413 | 115,487 | 122,042 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | y | y |
| Data collection | | |
| Quality assurance expectations | | |

| Program Name: Wellmore - Urgent Crisis Center (UCC) | | |
|---|---|---|
| Geographic Location Covered: | | |
| DCF open case needed for referral or admission? | no | |
| Is Program 3rd Party Billable? | after 4/1/24 | limited codes available (prior to 4/1/25 only 90791/90792 available) |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | n/a | 9 | n/a | n/a | 498 | n/a |

Fiscal Year 23 was the year in which the UCC grant was issued and then the program built. Wellmore's UCC opened on June 12, 2023 for the 2p-10p shift. We quickly added first shift (6a-2p) after 4th of July holiday, weekends in late August and overnights in January 2024. We remain the only site to have full 24/7 functionality.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 9 | 498 |
| Clients receiving evaluation only | 2 | 87 |
| Clients receiving services | 7 | 411 |
| Clients completing treatment plan | 7 | 411 |

All families who present to the UCC get a brief evaluation in triage. This determines appropriateness for the UCC intervention; as this was a new service to everyone, there were many families who were confused about what would occur at the UCC. The top reasons why a client wasn't transitioned from UCC Triage into a full evaluation were: 28% were referred to a higher level of care, 9% were referred to a lower level of care, 10% of families declined upon learning more about the UCC, and 20% were determined as a consult only, gathering information about how the UCC might help them and choosing to return if a crisis developed.

| Are treatment goals being attainec | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 9 | 498 |
| [Cases] eligible for treatment | 9 | 411 |
| [Cases] achieving treatment goal | 7 | 411 |
| Percent achieving contracted treatment expectation: Actual | 77% | 100% |
| Percent achieving contracted treatment expectation: Contract | 90% | 90% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$1,953,333** | **$2,781,806** |
| Total Program expenditures | $1,071,527 | $2,683,879 |
| Total Clients Served | $9 | $498 |
| Expenditures per [case] | $119,058.59 | $5,389.31 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5101 | $1,107,458 | $154,242 | $1,659,647 | $1,342,508 |
| Benefits | 5200 | $264,350 | $62,810 | $365,106 | $421,662 |
| Overhead | 5400 to 5909; 5990 to 7150 | $551,724 | $835,975 | $726,171 | $911,904 |
| Training | 5910 | $29,801 | $18,501 | $30,883 | $7,805 |
| | **Total** | $1,953,333 | $1,071,527 | $2,781,806 | $2,683,879 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| | | |
|---|---|---|
| **Program Name: Yale New Haven Hospital UCC** | | |
| **Geographic Location Covered: Great New Haven Area** | | |
| **DCF open case needed for referral or admission?** | **No** | |
| **Is Program 3rd Party Billable?** | **Yes** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **8700** | **1447** | **17%** | **8700** | **509** | **6%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** | |
|---|---|---|---|
| Referrals | 1447 | 509 | |
| Clients receiving evaluation only | 626 | 212 | Discharges |
| Clients receiving services | 1447 | 509 | |
| Clients completing treatment plan | NA | NA | |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

| Are treatment goals being attainec | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 1447 | 509 |
| [Cases] eligible for treatment | 626 | 212 |
| [Cases] achieving treatment goal | 987 | 294 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | 100% | 100% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$ 2,800,000** | **$ 1,400,000** |
| Total Program expenditures | $ 365 | $ 197,498 |
| Total Clients Served | 1447 | 509 |
| Expenditures per [case] | $ 3.96 | $ 0.003 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | | | | | |
| Benefits | | | | | |
| Overhead | Capital facilties | $ 2,800,000 | $ 365 | $ 1,400,000 | $ 197,498 |
| Training | | | | | |
| | **Total** | $ 2,800,000 | $ 365 | $ 1,400,000 | $ 197,498 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | YES | YES |
| Data collection | NO | NO |
| Quality assurance expectations | NO | NO |

| | | |
|---|---|---|
| **Program Name: The Village - Urgent Crisis Center** | | |
| **Geographic Location Covered: Greater Hartford Area** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **No** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **Yes** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **N/A** | **N/A** | **N/A** | **N/A** | **474** | **N/A** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | N/A | 474 |
| Clients receiving evaluation only | N/A | 0 |
| Clients receiving services | N/A | 474 |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved: N/A**

| Are treatment goals being attained | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | 474 |
| [Cases] eligible for treatment | N/A | 474 |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **2,637,812** | **3,882,188** |
| Total Program expenditures | 1,848,542 | 3,045,521 |
| Total Clients Served | 0 | 474 |
| Expenditures per [case] | #DIV/0! | 6,425.15 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | 836,599 | 217,540 | 2,733,263 | 1,683,038 |
| Benefits | 5200 | 194,760 | 47,909 | 667,463 | 417,999 |
| Overhead | 7150 | 95,357 | 93,360 | 626,611 | 404,084 |
| Training | 5905 | 9,529 | - | - | - |
| | **Total** | 1,136,245 | 358,809 | 4,027,337 | 2,505,121 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |

| Program Name: Voluntary Care Management (VCM) | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | n | |
| Is Program 3rd Party Billable? | n | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 425 | 373 | 87.8% | N/A | N/A | N/A |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: VCM became a service type under the PCME program in SFY2024. Therefore, utilization for this specific program is not available here for SFY2024 but is included in the SFY2024 numbers for the PCME program (program 3 in this workbook).

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 458 | N/A |
| Clients receiving evaluation only | 12 | N/A |
| Clients receiving services | 224 | N/A |
| Clients completing treatment plan | 223 | N/A |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

There were 221 referrals that went unserved due to not meeting criteria or not completing all required paperwork for the program.

| Are treatment goals being attained? | SFY2023 | SFY2024 | |
|---|---|---|---|
| [Cases] receiving initial assessment | 261 | N/A | Discharged in SFY and received initial assessment |
| [Cases] eligible for treatment | 251 | N/A | Eligible for treatment and discharged in SFY |
| [Cases] achieving treatment goal | 243 | N/A | |
| Percent achieving contracted treatment expectation: Actual | 96.8% | N/A | Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment. |
| Percent achieving contracted treatment expectation: Contract | 80.0% | N/A | |

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **425403** | **N/A** |
| Total Program expenditures | 425403 | **N/A** |
| Total Clients Served | 373 | **N/A** |
| Expenditures per [case] | 1140.490617 | **N/A** |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | 243,246 | 263,683 | N/A | N/A |
| Benefits | 5200 | 68,283 | 63,060 | N/A | N/A |
| Overhead | 7150 | 79,434 | 79,434 | N/A | N/A |
| Training | | | | N/A | N/A |
| | **Total** | 390,963 | 406,177 | 0 | 0 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | N/A |
| Data collection | Y | N/A |
| Quality assurance expectations | N | N/A |

| Program Name: Klingberg - Wendy's Wonderful Kids | | |
|---|---|---|
| Geographic Location Covered: Statewide | | |
| DCF open case needed for referral or admission? | yes | |
| Is Program 3rd Party Billable? | yes | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 24 | 24 | 100% | 24 | 24 | 100% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization: There was staffing turnover and open positions in the WWK program, There were 24 youth served but often the positions were not at capacity. The WWK program only accepts youth that are TPRed or near TPR and are over 8 which reduces the number of youth eligible for services.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 13 | 19 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 24 | 24 |
| Clients completing treatment plan | 5 | |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity: Staffing turnover and vacancies had multiple youth be placed inactive until new staff were hired. The WWK program however met their expected permanency outcome both years.

| Are treatment goals being attainec | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 24 | 24 |
| [Cases] eligible for treatment | 24 | 24 |
| [Cases] achieving treatment goal | 5 | 7 |
| Percent achieving contracted treatment expectation: Actual | 21% | 29% |
| Percent achieving contracted treatment expectation: Contract | 21% | 29% |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **100.00%** | **100.00%** |
| Total Program expenditures | $196,987 | $228,508 |
| Total Clients Served | 24 | 24 |
| Expenditures per [case] | $8,208 | $9,521 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| **Expense Account Series Name** | **Account number** | **Funding** | **Expenditures** | **Funding** | **Expenditures** |
| Salaries | 5100 | $107,250 | $105,525 | $102,150 | $133,517 |
| Benefits | 5200 | $44,219 | $30,975 | $42,525 | $31,134 |
| Other Expenses | 5900 | $9,420 | $14,326 | $11,545 | $19,078 |
| Overhead | 5300+7100 | $33,272 | $45,984 | $38,416 | $44,276 |
| Training | 5905 | | $177 | $0 | $503 |
| | **Total** | $194,161 | $196,987 | $194,636 | $228,508 |

| Are factors below included in | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | N |
| Quality assurance expectations | N | N |

| Program Name: Boys and Girls Village - Work to Learn | | |
|---|---|---|
| Geographic Location Covered: Region 1 | | |
| DCF open case needed for referral or admission? | Y | |
| Is Program 3rd Party Billable? | N | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 72 | 58 | 81% | 72 | 56 | 78% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**

The reasons for the decline or low utilization:

Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: received communication during Q3 that the program would be ending as the service type would be reprocured. no new referrals were made following that notification.

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 32 | 23 |
| Clients receiving evaluation only | 5 | 3 |
| Clients receiving services | 20 | 16 |
| Clients completing treatment plan | 20 | 16 |

**Narrative explanation for the reasons that referrals go unserved**

This may include reasons such as: staffing vacancies, Service Type met capacity:

the client did not meet the admission criteria) youth unable to participate due to schedule conflicts, client refused to participate, youth moved out of catchment area

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 25 | 19 |
| [Cases] eligible for treatment | 20 | 16 |
| [Cases] achieving treatment goal | 20 | 16 |
| Percent achieving contracted treatment expectation: Actual | 100% | 100% |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 709,086 | $ 557,475 |
| Total Clients Served | 58 | 56 |
| Expenditures per [case] | $ 12,225.62 | $ 9,954.91 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 361,290 | $ 254,329 | $ 269,866 | $ 233,186 |
| Benefits | 5200 | $ 94,152 | $ 62,407 | $ 75,562 | $ 45,326 |
| Overhead | | $ 249,606 | $ 392,270 | $ 250,681 | $ 278,963 |
| Training | 5905 | $ 360 | $ 80 | $ 1,600 | $ - |
| | **Total** | $ 705,408 | $ 709,086 | $ 597,709 | $ 557,475 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | N | Y |
| Quality assurance expectations | N | Y |

| | | |
|---|---|---|
| **Program Name: Marrakech - Work to Learn New Haven** | | |
| **Geographic Location Covered: West Haven, Hamden, New Haven & Milford** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **no** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **no** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **30** | **36** | **120** | **30** | **25** | **86** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations:
For FY24, the program was set to stop operations on 6/30/24. The agency was informed to no longer take referrals as of 5/3/24 which affected the utilization rate

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 41 | 33 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 30 | 25 |
| Clients completing treatment plan | 30 | 25 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)

Youth not engaging in services. For FY24, the program was set to stop operations on 6/30/24. The agency was informed to no longer take referrals as of 5/3/24

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 36 | 25 |
| [Cases] eligible for treatment | 36 | 25 |
| [Cases] achieving treatment goal | 29 | 19 |
| Percent achieving contracted treatment expectation: Actual | 80 | 76 |
| Percent achieving contracted treatment expectation: Contract | 96 | 63 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$ 332,929** | **$ 261,342** |
| Total Program expenditures | $ 284,176 | $ 252,010 |
| Total Clients Served | 30 | 25 |
| Expenditures per [case] | $ 9,472.55 | $ 10,080.39 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | $ 134,745 | $ 137,046 | $ 85,627 | $ 105,636 |
| Benefits | | $ 33,013 | $ 25,246 | $ 21,355 | $ 18,193 |
| Overhead | | $ 165,171 | $ 121,860 | $ 154,360 | $ 127,547 |
| Training | | $ - | $ 25 | $ - | $ 634 |
| | **Total** | $ 332,929 | $ 284,176 | $ 261,342 | $ 252,010 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| | | |
|---|---|---|
| **Program Name: Marrakech - Work to Learn Waterbury** | | |
| **Geographic Location Covered: Waterbury, Torrington,Prospect, Wilcott & Cheshire** | | |
| **DCF open case needed for referral or admission?** | **(y/n)** | **NO** |
| **Is Program 3rd Party Billable?** | **(y/n)** | **NO** |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **30** | **31** | **103** | **30** | **25** | **86** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:
Evaluation of whether the trend reflects decreased need for the service type or workforce limitations: For FY24, the program was set to stop operations on 6/30/24. The agency was informed to no longer take referrals as of 5/3/24 which affected the utilization rate

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 33 | 35 |
| Clients receiving evaluation only | N/A | N/A |
| Clients receiving services | 30 | 25 |
| Clients completing treatment plan | 20 | 13 |

**Narrative explanation for the reasons that referrals go unserved**
This may include reasons such as: staffing vacancies, Service Type met capacity: the client did not meet the admission criteria)
Youth not engaging in services. Program was set to stop operations on 6/30/24. Agency was informed to longer take referrals as of 5/3/24

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 30 | 25 |
| [Cases] eligible for treatment | 30 | 25 |
| [Cases] achieving treatment goal | 17 | 8 |
| Percent achieving contracted treatment expectation: Actual | 56 | 32 |
| Percent achieving contracted treatment expectation: Contract | 56 | 27 |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | **$ 401,884** | **$ 388,451** |
| Total Program expenditures | $ 276,954 | $ 332,343 |
| Total Clients Served | 30 | 31 |
| Expenditures per [case] | $ 9,231.81 | $ 10,720.76 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | | $ 163,388 | $ 131,948 | $ 117,681 | $ 130,483 |
| Benefits | | $ 40,030 | $ 23,554 | $ 29,350 | $ 21,748 |
| Overhead | | $ 198,465 | $ 121,428 | $ 241,421 | $ 179,444 |
| Training | | $ - | $ 24 | $ - | $ 668 |
| | **Total** | $ 401,884 | $ 276,954 | $ 388,451 | $ 332,343 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Yes | Yes |
| Data collection | Yes | Yes |
| Quality assurance expectations | Yes | Yes |

| | | |
|---|---|---|
| **Program Name: Our Piece of the Pie - Work/Learn Youth Program (W2L-Region 3) - Eastern CT** | | |
| **Geographic Location Covered: Middletown, Norwich, Willimantic** | | |
| **DCF open case needed for referral or admission?** | **Y** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **43** | **65** | **151%** | **43** | **71** | **165%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
Historically, the needs for the "W2L" services in Norwich (Region 3) continued to increase. And due to continued under-enrollment in the Hartford (Region 4) region both DCF and OPP agreed to continue to accept referrals for "W2L" services in this region.

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 8 | 12 |
| Clients receiving evaluation only | 0 | 4 |
| Clients receiving services | 8 | 8 |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved:** In SFY 2023, **8** out of the **8** referrals made by DCF Social Workers to the OPP "W2L" program in Norwich(Region 3) were accepted and began receiving services. In SFY 2024, **8** out of the **12** referrals made by DCF Social Workers to the OPP "W2L" program in Norwich (Region 3) were accepted and began receiving services. Some of the factors for which referrals did not transition into services were (clear description of "W2L" program elements and expectations, lack of interest in "W2L" programming after orientation, lack of follow-up after orientation, readiness for services at the

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

**Our Piece of the Pie staff participated in "ACR - Annual Case Reviews" with DCF Social Workers to provide insight regarding programmatic development and advancement for "W2L" participants. DCF Social Workers were responsible for providing the services that contributed to the treatment plans.**

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $ 178,108 | $ 178,108 | $ 220,739 | $ 220,739 |
| Benefits | 5200 | $ 51,795 | $ 51,795 | $ 54,248 | $ 54,248 |
| Contractual Services | 5400 | $ 7,381 | $ 7,381 | $ 7,377 | $ 7,377 |
| Staff Travel Reimbursement | 5501 | $ 4,500 | $ 4,500 | $ 5,851 | $ 5,851 |
| Vehicle Maintenance | 5503 | $ 7,052 | $ 7,052 | $ 9,441 | $ 9,441 |
| Other Transportation | 5550 | $ 482 | $ 482 | $ 609 | $ 609 |
| Food | 5601 | $ 2,565 | $ 2,565 | $ 4,025 | $ 4,025 |
| Postage | 5606 | $ 101 | $ 101 | $ 50 | $ 50 |
| Materials and Supplies | 5600 | $ 14,781 | $ 14,781 | $ 7,997 | $ 7,997 |
| Rent | 5701 | $ 37,471 | $ 37,471 | $ 38,261 | $ 38,261 |
| Janitorial | 5705 | $ 16,175 | $ 16,175 | $ 12,025 | $ 12,025 |
| Utilities | 5704 | $ 14,626 | $ 14,626 | $ 12,076 | $ 12,076 |
| Insurance | 5902 | $ 7,000 | $ 7,000 | $ 7,583 | $ 7,583 |
| Staff Training | 5905 | $ 2,067 | $ 2,067 | $ 397 | $ 397 |
| Participant Salary & Wages | 5913 | $ 32,345 | $ 32,345 | $ 59,545 | $ 59,545 |
| Participant Fringe benefits | 5914 | $ 1,234 | $ 1,234 | $ 2,903 | $ 2,903 |
| Other Expenses | 5900 | $ 30,679 | $ 30,679 | $ 10,073 | $ 10,073 |
| Indirect Expenses | 7000 | $ 60,852 | $ 60,852 | $ 82,152 | $ 82,152 |
| | **Total** | $ 469,214 | $ 469,214 | $ 535,353 | $ 535,353 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | N | N |

| | | |
|---|---|---|
| **Program Name: Our Piece of the Pie -Work/Learn Youth Program (W2L-Region 4) - Hartford** | | |
| **Geographic Location Covered: Hartford/Manchester** | | |
| **DCF open case needed for referral or admission?** | **Y** | |
| **Is Program 3rd Party Billable?** | **N** | |

| **Program Utlization** | **SFY 2023** | | | **SFY2024** | | |
|---|---|---|---|---|---|---|
| | **Contracted** | **Actual** | **Actual vs. Contracted %** | **Contracted** | **Actual** | **Actual vs. Contracted %** |
| | **120** | **83** | **69%** | **120** | **80** | **67%** |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization were mainly based on the lack of transportation supports for potential "W2L" participants and the lack of ongoing referrals from DCF Social Workers in Region 4. However, DCF and OPP agreed to over-enroll in the Norwich (Region 3) program in lieu of the under-utilization in

| **Referrals to Program (cases)** | **SFY2023** | **SFY2024** |
|---|---|---|
| Referrals | 52 | 36 |
| Clients receiving evaluation only | 18 | 12 |
| Clients receiving services | 34 | 24 |
| Clients completing treatment plan | N/A | N/A |

**Narrative explanation for the reasons that referrals go unserved:** In SFY 2023, **34** out of the **52** referrals made by DCF Social Workers to the OPP "W2L" program in Hartford CT (Region 4) were accepted and began receiving services. In SFY 2024, **24** out of the **36** referrals made by DCF Social Workers to the OPP "W2L" program in Hartford CT (Region 4) were accepted and began receiving services. Some of the factors for which referrals did not transition into services were (clear description of "W2L" program elements and expectations, lack of interest in "W2L" programming after orientation, lack of follow-up after orientation, readiness for services at the

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | N/A | N/A |
| [Cases] eligible for treatment | N/A | N/A |
| [Cases] achieving treatment goal | N/A | N/A |
| Percent achieving contracted treatment expectation: Actual | N/A | N/A |
| Percent achieving contracted treatment expectation: Contract | N/A | N/A |

**Our Piece of the Pie staff participated in "ACR - Annual Case Reviews" with DCF Social Workers to provide insight regarding programmatic development and advancement for "W2L" participants. DCF Social Workers were responsible for providing the services that contributed to the treatment plans.**

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | | |
| Total Clients Served | | |
| Expenditures per [case] | | |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5101 | $ 486,002 | $ 486,002 | $ 604,184 | $ 604,184 |
| Benefits | 5200 | $ 135,721 | $ 135,721 | $ 148,341 | $ 148,341 |
| Contractual Services | 5400 | $ 8,218 | $ 8,218 | $ 8,302 | $ 8,302 |
| Staff Travel Reimbursement | 5501 | $ 1,450 | $ 1,450 | $ 2,518 | $ 2,518 |
| Vehicle Maintenance | 5503 | $ 2,038 | $ 2,038 | $ 501 | $ 501 |
| Other Transportation | 5550 | $ 2,291 | $ 2,291 | $ 550 | $ 550 |
| Food | 5601 | $ 3,295 | $ 3,295 | $ 1,970 | $ 1,970 |
| Lease Office Equipment | 5907 | $ 2,000 | $ 2,000 | $ 1,500 | $ 1,500 |
| Materials and Supplies | 5600 | $ 10,649 | $ 10,649 | $ 9,348 | $ 9,348 |
| Rent | 5701 | $ 30,000 | $ 30,000 | $ 30,000 | $ 30,000 |
| Janitorial | 5705 | $ 3,504 | $ 3,504 | $ - | $ - |
| Utilities | 5704 | $ 11,284 | $ 11,284 | $ 8,408 | $ 8,408 |
| Insurance | 5902 | $ 3,000 | $ 3,000 | $ 3,000 | $ 3,000 |
| Staff Training | 5905 | $ 4,744 | $ 4,744 | $ 3,126 | $ 3,126 |
| Participant Salary & Wages | 5913 | $ 38,149 | $ 38,149 | $ 32,122 | $ 32,122 |
| Participant Fringe benefits | 5914 | $ 1,575 | $ 1,575 | $ 1,280 | $ 1,280 |
| Other Expenses | 5900 | $ 63,977 | $ 63,977 | $ 20,632 | $ 20,632 |
| Indirect Expenses | 7000 | $ 107,171 | $ 107,171 | $ 67,137 | $ 67,137 |
| | **Total** | $ 915,068 | $ 915,068 | $ 942,919 | $ 942,919 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | Y | Y |
| Data collection | Y | Y |
| Quality assurance expectations | N | N |

| Program Name: Boys and Girls Village - Youth Link Mentoring | | |
|---|---|---|
| Geographic Location Covered: DCF Regions 1, 2, and 5 | | |
| DCF open case needed for referral or admission? | NO | |
| Is Program 3rd Party Billable? | NO | |

| Program Utlization | SFY 2023 | | | SFY2024 | | |
|---|---|---|---|---|---|---|
| | Contracted | Actual | Actual vs. Contracted % | Contracted | Actual | Actual vs. Contracted % |
| | 25 | 24 | 96% | 25 | 27 | 108% |

**Narrative explanation for declines in utilization and/or utilization significantly below contract**
The reasons for the decline or low utilization:

| Referrals to Program (cases) | SFY2023 | SFY2024 |
|---|---|---|
| Referrals | 24 | 11 |
| Clients receiving evaluation only | 0 | 0 |
| Clients receiving services | 24 | 10 |
| Clients completing treatment plan | 11 | 10 |

**Narrative explanation for the reasons that referrals go unserved**
youth refused to participate in the program.

for the below. 8 of 10 youth are still active in the program. If they all complete their treatment plan the percentage can rise from 10%- 90%.

| Are treatment goals being attained? | SFY2023 | SFY2024 |
|---|---|---|
| [Cases] receiving initial assessment | 24 | 10 |
| [Cases] eligible for treatment | 24 | 10 |
| [Cases] achieving treatment goal | 11 | 1 |
| Percent achieving contracted treatment expectation: Actual | 46% | 10% |
| Percent achieving contracted treatment expectation: Contract | n/a | n/a |

Definition of contracted treatment expectation: Percent of [cases] achieving treatment goal of those eligible for treatment.

| Total Program Expenditures | SFY 2023 | SFY2024 |
|---|---|---|
| Total Program allocations | | |
| Total Program expenditures | $ 142,222.00 | $ 153,315.00 |
| Total Clients Served | 24 | 27 |
| Expenditures per [case] | $ 5,925.92 | $ 5,678.33 |

| DCF Funding and Expenditures by Account | | SFY 2023 | | SFY2024 | |
|---|---|---|---|---|---|
| Expense Account Series Name | Account number | Funding | Expenditures | Funding | Expenditures |
| Salaries | 5100 | $ 73,155 | $ 66,169 | $ 79,616 | $ 65,016 |
| Benefits | 5200 | $ 20,411 | $ 8,989 | $ 22,292 | $ 28,029 |
| Overhead | | $ 77,915 | $ 67,064 | $ 70,489 | $ 60,270 |
| Training | 5905 | $ - | $ - | $ - | $ - |
| | **Total** | $ 171,481 | $ 142,222 | $ 172,397 | $ 153,315 |

| Are factors below included in procurement rate (budgeted costs) (Y/N) | SFY2023 | SFY2024 |
|---|---|---|
| Staff training | N | N |
| Data collection | Y | Y |
| Quality assurance expectations | Y | Y |