**CommuniCare Inc**
North Haven, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2015 - June 2016   (Data as of Sep 12, 2016)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 1,088 | 906 | 20% | ▲ |
| | Admits | 1,107 | 862 | 28% | ▲ |
| | Discharges | 1,156 | 782 | 48% | ▲ |
| | Service Hours | 14,431 | 7,704 | 87% | ▲ |

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

### Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Crisis Services | 578 | 52.7% |
| | Outpatient | 508 | 46.4% |
| | Residential Services | 10 | 0.9% |

## Consumer Satisfaction Survey   (Based on 124 FY15 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|
| ✔ Quality and Appropriateness | | 96% | 80% | 93% |
| ✔ Respect | | 96% | 80% | 91% |
| ✔ General Satisfaction | | 94% | 80% | 92% |
| ✔ Participation in Treatment | | 93% | 80% | 92% |
| ✔ Access | | 93% | 80% | 88% |
| ✔ Overall | | 91% | 80% | 91% |
| ✔ Outcome | | 84% | 80% | 83% |
| ✔ Recovery | | 82% | 80% | 79% |

| | | | | | |
|---|---|---|---|---|---|
| ▬ Satisfied % | │ Goal % | ▨ 0-80% | ▨ 80-100% | ✔ Goal Met | ⬤ Under Goal |

## Client Demographics

| Age | # | % | State Avg |
|---|---|---|---|
| 18-25 | 91 | 9% | 15% |
| 26-34 | 165 | 16% | 24% |
| 35-44 | 202 | 19% | 19% |
| 45-54 | 296 | 28% | 22% |
| 55-64 | 208 | 20% | 15% |
| 65+ | 98 | 9% | 4% |

| Gender | # | % | | State Avg |
|---|---|---|---|---|
| Female | 578 | 53% | ▲ | 40% |
| Male | 509 | 47% | ▼ | 60% |
| Transgender | | | | 0% |

| Ethnicity | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 545 | 50% | ▼ | 75% |
| Hisp-Puerto Rican | 360 | 33% | ▲ | 12% |
| Hispanic-Other | 133 | 12% | | 7% |
| Hispanic-Mexican | 33 | 3% | | 1% |
| Unknown | 15 | 1% | | 6% |
| Hispanic-Cuban | 2 | 0% | | 0% |

| Race | # | % | | State Avg |
|---|---|---|---|---|
| White/Caucasian | 557 | 51% | ▼ | 65% |
| Other | 386 | 35% | ▲ | 13% |
| Black/African American | 100 | 9% | | 16% |
| Am. Indian/Native Alaskan | 15 | 1% | | 1% |
| Unknown | 15 | 1% | | 3% |
| Multiple Races | 7 | 1% | | 1% |
| Asian | 5 | 0% | | 1% |
| Hawaiian/Other Pacific Islander | 3 | 0% | | 0% |

| | | | |
|---|---|---|---|
| ▬ Unique Clients | │ State Avg | ▲ > 10% Over State Avg | ▼ > 10% Under State Avg |

**BH Care Shoreline Crisis Prog 315-200Y**
CommuniCare Inc
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 173 | 121 | 43% | ▲ |
| Admits | 247 | 152 | 63% | ▲ |
| Discharges | 245 | 152 | 61% | ▲ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Evaluation within 1.5 hours of Request | | 241 | 98% | 75% | 64% | 23% | ▲ |
| ✓ | Community Location Evaluation | | 246 | 100% | 80% | 64% | 20% | ▲ |
| ✓ | Follow-up Service within 48 hours | | 92 | 97% | 90% | 53% | 7% | |

## Data Submitted to DMHAS by Month
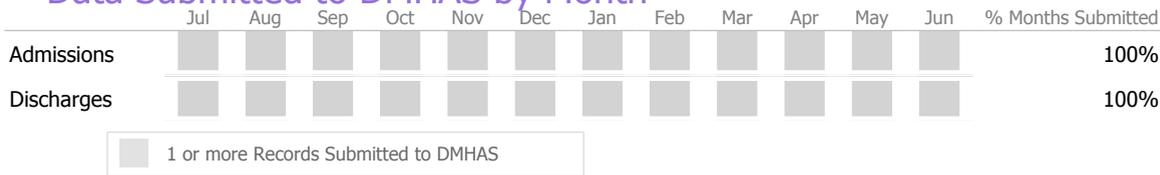
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

☐ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 25 Active Mobile Crisis Team Programs

**BH Care Shoreline Supported Residential Prog 315-2**
CommuniCare Inc
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 3 | 3 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | - | - | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 74% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Employed | | 0 | 0% | 25% | 12% | -25% ▼ |
| 🔴 Social Support | | 0 | 0% | 60% | 87% | -60% ▼ |
| 🔴 Stable Living Situation | | 0 | 0% | 85% | 93% | -85% ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 0% | 87% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 0 | 0% | 90% | 96% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | | | | | | | | | | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

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

* State Avg based on 42 Active Residential Support Programs

**BH Care Valley Crisis 315-200**
CommuniCare Inc
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 124 | 87 | 43% | ▲ |
| Admits | 214 | 150 | 43% | ▲ |
| Discharges | 216 | 150 | 44% | ▲ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Evaluation within 1.5 hours of Request | | 212 | 100% | 75% | 64% | 25% | ▲ |
| ✔ | Community Location Evaluation | | 206 | 97% | 80% | 64% | 17% | ▲ |
| ✔ | Follow-up Service within 48 hours | | 130 | 99% | 90% | 53% | 9% | |

## Data Submitted to DMHAS by Month
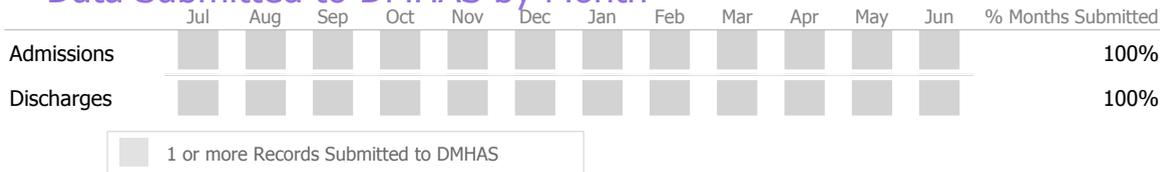
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 25 Active Mobile Crisis Team Programs

**BH Care Valley Supported Residential Program 311-2**
CommuniCare Inc
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 1 | 3 | -67% | ▼ |
| Admits | - | - | | |
| Discharges | - | 2 | -100% | ▼ |
| Service Hours | - | 167 | -100% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 0% | 87% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 74% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |
| ● Social Support | | 0 | 0% | 60% | 87% | -60% | ▼ |
| ● Stable Living Situation | | 0 | 0% | 85% | 93% | -85% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 0 | 0% | 90% | 96% | N/A | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | | | | | | | | | | | | | 0% |

| | 1 or more Records Submitted to DMHAS |
|---|---|

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

| ■ Actual | | Goal | ✔ Goal Met | ● Below Goal |
|---|---|---|---|---|

* State Avg based on 42 Active Residential Support Programs

**Bridges Crisis Prog 315-200Y**
CommuniCare Inc
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 166 | 121 | 37% | ▲ |
| Admits | 235 | 155 | 52% | ▲ |
| Discharges | 241 | 148 | 63% | ▲ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Evaluation within 1.5 hours of Request | | 222 | 97% | 75% | 64% | 22% | ▲ |
| ✔ | Community Location Evaluation | | 218 | 95% | 80% | 64% | 15% | ▲ |
| ✔ | Follow-up Service within 48 hours | | 165 | 100% | 90% | 53% | 10% | |

## Data Submitted to DMHAS by Month
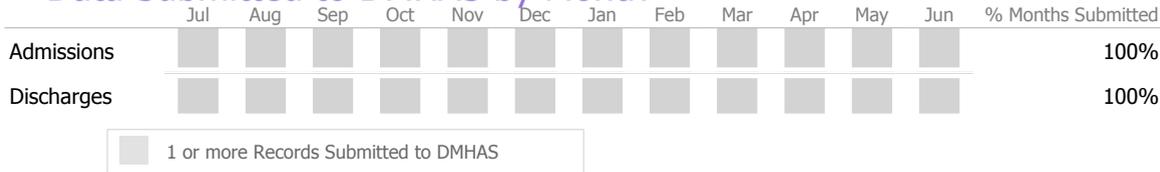
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

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

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

* State Avg based on 25 Active Mobile Crisis Team Programs

**Bridges Supported Residential Prog 309 315-201Y**
CommuniCare Inc
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---------|--------|----------|------------|---|
| Unique Clients | 6 | 7 | -14% | ▼ |
| Admits | 1 | 3 | -67% | ▼ |
| Discharges | - | 2 | -100% | ▼ |
| Service Hours | 243 | 366 | -34% | ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|------------------|---|--------|-----------|
| 6 Month Updates | | 33% | 87% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 74% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|--------|----------|--------|-----------|----------------|---|
| ✔ Social Support | | 6 | 100% | 60% | 87% | 40% | ▲ |
| 🔴 Stable Living Situation | | 5 | 83% | 85% | 93% | -2% | |
| 🔴 Employed | | 0 | 0% | 25% | 12% | -25% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|--------|----------|--------|-----------|----------------|
| 🔴 Clients Receiving Services | | 5 | 83% | 90% | 96% | -7% |

## Data Submitted to DMHAS by Month
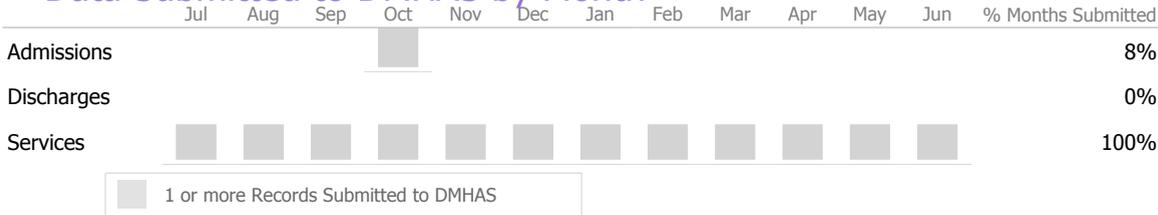
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | ▪ | | | | | | | | | 8% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

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

* State Avg based on 42 Active Residential Support Programs

**Latino Behavioral Health Services - BH Care Shorel**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 17 | 26 | -35% | ▼ |
| Admits | 1 | 12 | -92% | ▼ |
| Discharges | 9 | 10 | -10% | |
| Service Hours | 377 | 304 | 24% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 92% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 63% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 0% | 78% |
| SA Screen Complete | | 0% | 76% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 94% | 86% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 1 | 11% | 50% | 42% | -39% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 16 | 94% | 60% | 69% | 34% | ▲ |
| 🔴 | Stable Living Situation | | 16 | 94% | 95% | 86% | -1% | |
| ✔ | Improved/Maintained Axis V GAF Score | | 12 | 75% | 75% | 53% | 0% | |
| 🔴 | Employed | | 4 | 24% | 30% | 22% | -6% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 8 | 100% | 90% | 86% | 10% | |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | 2 or more Services within 30 days | | 1 | 100% | 75% | 65% | 25% | ▲ |

## Data Submitted to DMHAS by Month
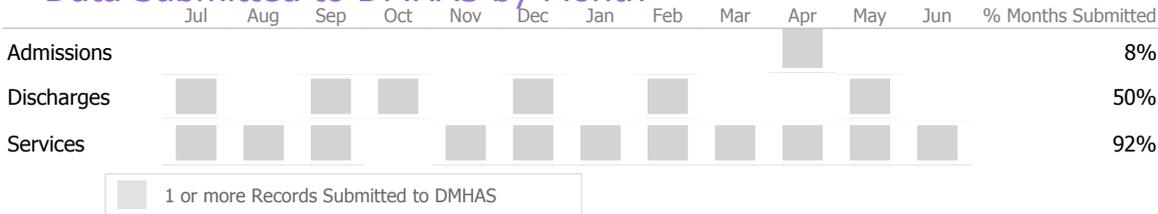
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | ▪ | | | 8% |
| Discharges | ▪ | | ▪ | ▪ | | ▪ | | ▪ | | | ▪ | | 50% |
| Services | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 92% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▪ Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

**Latino Behavioral Health Services - BH Care Valley**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 35 | 36 | -3% | |
| Admits | 16 | 19 | -16% | ▼ |
| Discharges | 12 | 18 | -33% | ▼ |
| Service Hours | 372 | 333 | 12% | ▲ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 92% | 92% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 41% | 63% |

| Cooccurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 87% | 78% |
| ✔ SA Screen Complete | | 87% | 76% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 97% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 86% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 6 | 50% | 50% | 42% | 0% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 35 | 95% | 60% | 69% | 35% | ▲ |
| ● Stable Living Situation | | 32 | 86% | 95% | 86% | -9% | |
| ● Employed | | 8 | 22% | 30% | 22% | -8% | |
| ✔ Improved/Maintained Axis V GAF Score | | 23 | 79% | 75% | 53% | 4% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 25 | 100% | 90% | 86% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | 10 | 63% | 75% | 65% | -13% | ▼ |

## Data Submitted to DMHAS by Month
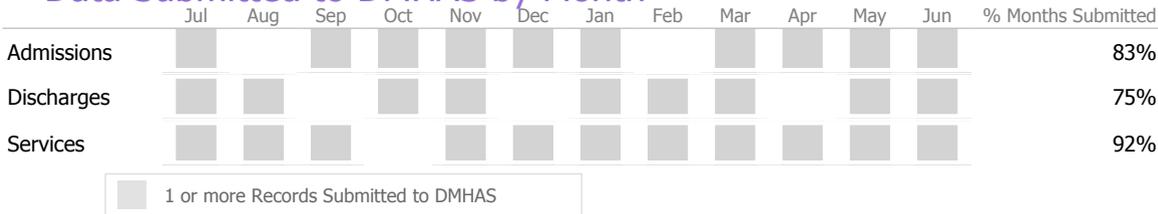
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | | ▢ | 83% |
| Discharges | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | ▢ | ▢ | 75% |
| Services | ▢ | ▢ | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 92% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    ▏Goal    ✔ Goal Met    ● Below Goal

\* State Avg based on 94 Active Standard Outpatient Programs

**Latino Behavioral Health Services - Bridges**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 27 | 20 | 35% | ▲ |
| Admits | 14 | 6 | 133% | ▲ |
| Discharges | 7 | 6 | 17% | ▲ |
| Service Hours | 701 | 462 | 52% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 91% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 63% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 64% | 78% |
| SA Screen Complete | | 64% | 76% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 93% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 86% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 3 | 43% | 50% | 42% | -7% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 27 | 96% | 95% | 86% | 1% | |
| 🔴 Employed | | 7 | 25% | 30% | 22% | -5% | |
| ✓ Improved/Maintained Axis V GAF Score | | 19 | 95% | 75% | 53% | 20% | ▲ |
| 🔴 Social Support | | 12 | 43% | 60% | 69% | -17% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 22 | 96% | 90% | 86% | 6% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 10 | 71% | 75% | 65% | -4% |

## Data Submitted to DMHAS by Month
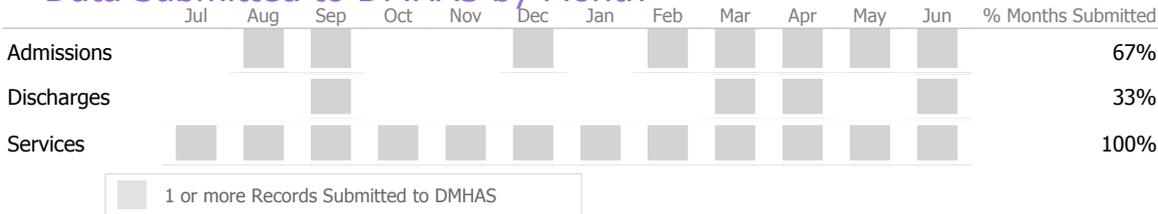
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▪ | ▪ | | | ▪ | | ▪ | ▪ | ▪ | | ▪ | 67% |
| Discharges | | | ▪ | | | | | | ▪ | | ▪ | ▪ | 33% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual ▮    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

**Latino Behavioral Health Services - CASA/MAAS**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 45 | 36 | 25% | ▲ |
| Admits | 23 | 19 | 21% | ▲ |
| Discharges | 19 | 14 | 36% | ▲ |
| Service Hours | 695 | 472 | 47% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 63% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 78% |
| ✔ SA Screen Complete | | 100% | 76% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 86% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 14 | 74% | 50% | 42% | 24% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 35 | 73% | 60% | 69% | 13% | ▲ |
| ✔ | Improved/Maintained Axis V GAF Score | | 38 | 97% | 75% | 53% | 22% | ▲ |
| 🔴 | Stable Living Situation | | 44 | 92% | 95% | 86% | -3% | |
| 🔴 | Employed | | 12 | 25% | 30% | 22% | -5% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 29 | 100% | 90% | 86% | 10% | |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | 2 or more Services within 30 days | | 21 | 95% | 75% | 65% | 20% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 92% |
| Discharges | | | | | | | | | | | | | 83% |
| Services | | | | | | | | | | | | | 100% |

□ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✔ Goal Met     🔴 Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

**Latino Behavioral Health Services - Crossroads**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 64 | 71 | -10% | |
| Admits | 47 | 57 | -18% | ▼ |
| Discharges | 58 | 54 | 7% | |
| Service Hours | 9,933 | 3,336 | 198% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 97% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 63% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 78% |
| ✓ SA Screen Complete | | 100% | 76% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 86% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 48 | 83% | 50% | 42% | 33% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 57 | 89% | 60% | 69% | 29% | ▲ |
| ✓ Improved/Maintained Axis V GAF Score | | 57 | 98% | 75% | 53% | 23% | ▲ |
| ● Stable Living Situation | | 47 | 73% | 95% | 86% | -22% | ▼ |
| ● Employed | | 0 | 0% | 30% | 22% | -30% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 6 | 100% | 90% | 86% | 10% | |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 47 | 100% | 75% | 65% | 25% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 92% |
| Discharges | | | | | | | | | | | | | 100% |
| Services | | | | | | | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

**Latino Behavioral Health Services - CS - Hill Heal**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 50 | 55 | -9% | |
| Admits | 49 | 17 | 188% | ▲ |
| Discharges | 17 | 54 | -69% | ▼ |
| Service Hours | 346 | 907 | -62% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 88% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 41% | 63% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 50% | 78% |
| SA Screen Complete | | 50% | 76% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 99% |
| ✔ Valid Axis V GAF Score | | 100% | 86% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 0 | 0% | 50% | 42% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Stable Living Situation | | 40 | 80% | 95% | 86% | -15% | ▼ |
| 🔴 | Employed | | 6 | 12% | 30% | 22% | -18% | ▼ |
| 🔴 | Social Support | | 1 | 2% | 60% | 69% | -58% | ▼ |
| 🔴 | Improved/Maintained Axis V GAF Score | | 7 | 16% | 75% | 53% | -59% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Clients Receiving Services | | 26 | 79% | 90% | 86% | -11% | ▼ |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | 2 or more Services within 30 days | | 35 | 71% | 75% | 65% | -4% |

## Data Submitted to DMHAS by Month
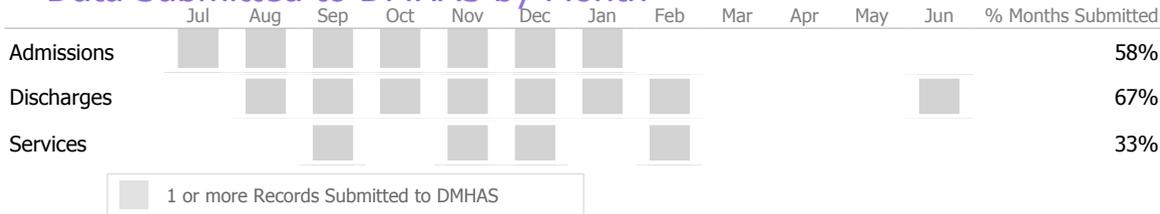
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | | | | | 58% |
| Discharges | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | | | ▢ | 67% |
| Services | | | ▢ | | ▢ | ▢ | | ▢ | | | | | 33% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

🟧 Actual   | Goal   ✔ Goal Met   🔴 Below Goal

\* State Avg based on 94 Active Standard Outpatient Programs

**Latino Behavioral Health Services - Fair Haven**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 162 | 145 | 12% | ▲ |
| Admits | 21 | 83 | -75% | ▼ |
| Discharges | 106 | 4 | 2550% | ▲ |
| Service Hours | 699 | 610 | 15% | ▲ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 97% | 92% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 93% | 63% |

| Cooccurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 30% | 78% |
| SA Screen Complete | | 36% | 76% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 97% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 86% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 1 | 1% | 50% | 42% | -49% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Improved/Maintained Axis V GAF Score | | 157 | 98% | 75% | 53% | 23% | ▲ |
| ✓ Social Support | | 108 | 67% | 60% | 69% | 7% | |
| ✓ Stable Living Situation | | 162 | 100% | 95% | 86% | 5% | |
| ● Employed | | 46 | 28% | 30% | 22% | -2% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 51 | 91% | 90% | 86% | 1% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | 14 | 67% | 75% | 65% | -8% |

## Data Submitted to DMHAS by Month
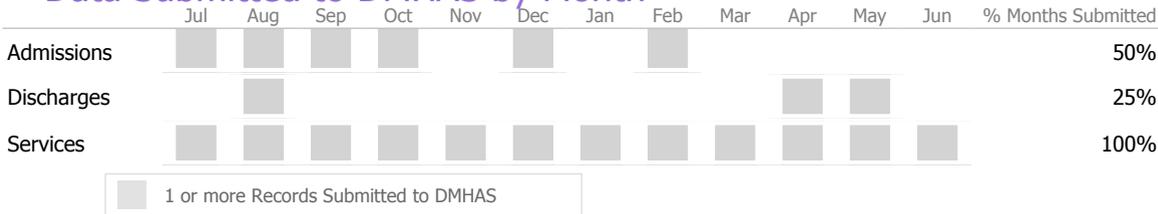
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | ▪ | | ▪ | | ▪ | | | | | 50% |
| Discharges | | ▪ | | | | | | | | ▪ | ▪ | | 25% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

◼ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

**Latino Behavioral Health Services - Hispanos Unido**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 113 | 80 | 41% | ▲ |
| Admits | 57 | 45 | 27% | ▲ |
| Discharges | 44 | 22 | 100% | ▲ |
| Service Hours | 1,066 | 747 | 43% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 54% | 63% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 78% |
| ✓ SA Screen Complete | | 93% | 76% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 99% |
| ✓ Valid Axis V GAF Score | | 100% | 86% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 11 | 25% | 50% | 42% | -25% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 115 | 99% | 60% | 69% | 39% | ▲ |
| ✓ Stable Living Situation | | 112 | 97% | 95% | 86% | 2% | |
| 🔴 Employed | | 25 | 22% | 30% | 22% | -8% | |
| 🔴 Improved/Maintained Axis V GAF Score | | 44 | 48% | 75% | 53% | -27% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 72 | 100% | 90% | 86% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 47 | 82% | 75% | 65% | 7% |

## Data Submitted to DMHAS by Month
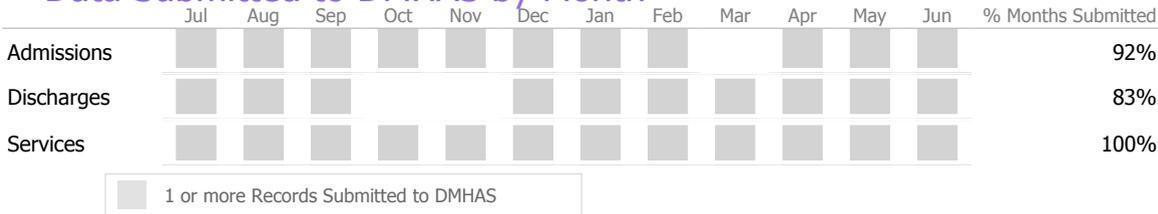
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 92% |
| Discharges | | | | | | | | | | | | | 83% |
| Services | | | | | | | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual   ┃ Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 94 Active Standard Outpatient Programs

**Yale Crisis Prog 315-200Y**
CommuniCare Inc
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - June 2016  (Data as of Sep 12, 2016)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 118 | 102 | 16% | ▲ |
| Admits | 182 | 144 | 26% | ▲ |
| Discharges | 182 | 146 | 25% | ▲ |

## Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Evaluation within 1.5 hours of Request | | 161 | 89% | 75% | 64% | 14% | ▲ |
| ✔ Community Location Evaluation | | 168 | 93% | 80% | 64% | 13% | ▲ |
| ✔ Follow-up Service within 48 hours | | 94 | 100% | 90% | 53% | 10% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

☐ Actual    │ Goal    ✔ Goal Met    ⬤ Below Goal

\* State Avg based on 25 Active Mobile Crisis Team Programs