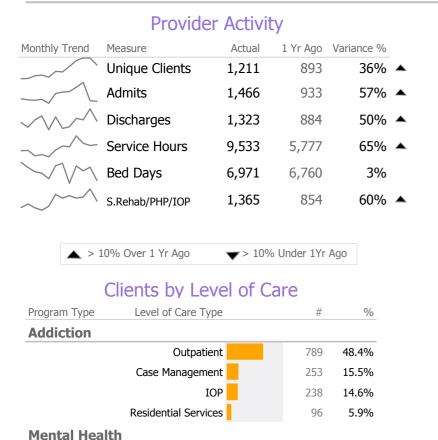
Perception Programs Inc

Willimantic, CT

Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)



Case Management

255

15.6%

Consumer Satisfaction Survey (Based on 177 FY15 Surveys)



Client Demographics

Age		#	%	State Avg	Gender	#	%	State Avg
18-25	I	217	18%	15%	Male Male	766	63%	60%
26-34		393	33%	24%	Female	444	37%	40%
35-44	Ĺ	254	21%	19%	Transgender			0%
45-54		233	20%	22%				
55-64 📕		90	8%	15%				
65+		6	1%	4%	Race	#	%	State Avg
					White/Caucasian	999	82%	▲ 65%
Ethnicity		#	%	State Avg	Black/African American	83	7%	16%
Non-Hispanic		812	67%	75%	Other <mark> </mark>	56	5%	13%
Hisp-Puerto Rican		264	22%	12%	Unknown	56	5%	3%
Unknown		103	9%	6%	Multiple Races	11	1%	1%
Hispanic-Other		19	2%	7%	Am. Indian/Native Alaskan	4	0%	1%
					Asian	2	0%	1%
Hispanic-Mexican		11	1%	1%	Hawaiian/Other Pacific Islander			0%
Hispanic-Cuban		2	0%	0%				
	l	Jnique C	lients	State Avg	▲ > 10% Over State Avg ▼	> 10% L	Inder S	tate Avg

CM Latino Outreach 026721

Perception Programs Inc Addiction - Case Management - Outreach & Engagement

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	253	111	128% 🔺	
Admits	196	84	133% 🔺	
Discharges	140	44	218% 🔺	
Service Hours	1,439	728	98% 🔺	

Service Engagement





	> 10% 0	ver 🔻 < 100	% Under
Actual	Goal	🗹 Goal Met	Below Goal

* State Avg based on 6 Active Outreach & Engagement Programs

Program Activity

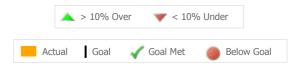
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	255	106	141% 🔺
Admits	218	87	151% 🔺
Discharges	213	51	318% 🔺
Service Hours	567	302	88% 🔺

Service Engagement



Data Submitted to DMHAS by Month





* State Avg based on 38 Active Outreach & Engagement Programs

Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	80	61	31%	
Admits	81	56	45%	
Discharges	75	60	25%	
Service Hours	15	67	-77%	▼
Social Rehab/PHP/IOP Days	452	243	86%	

Data Submission Quality

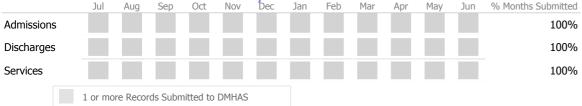
	Data Entry		Actual	State Avg	
\checkmark	Valid NOMS Data		99%	97%	
	Valid TEDS Data		97%	99%	
	On-Time Periodic		Actual	State Avg	
	6 Month Updates		N/A	6%	
	Cooccurring		Actual	State Avg	
\checkmark	MH Screen Complete		100%	95%	
\checkmark	SA Screen Complete		100%	95%	
		•			
	Diagnosis		Actual	State Ava	

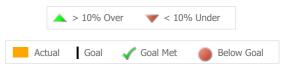
Diagnosis	Actual	State Avg
🞻 Valid Axis I Diagnosis	100%	91%
Valid Axis V GAF Score	100%	89%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
√	Treatment Completed Successfully		48	64%	50%	59%	14%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		40	83%	90%	51%	-7%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Not Arrested		75	90%	75%	94%	15%	
(Improved/Maintained Axis V GAF Score		64	85%	75%	84%	10%	
(Stable Living Situation		79	95%	95%	91%	0%	
	Abstinence/Reduced Drug Use		39	47%	55%	61%	-8%	
	Employed		28	34%	50%	32%	-16%	
	Self Help	<u> </u>	19	23%	60%	44%	-37%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		5	63%	90%	59%	-28%	

Data Submitted to DMHAS by Month





* State Avg based on 51 Active Standard IOP Programs

Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	293	252	16%	
Admits	268	204	31%	
Discharges	233	210	11%	
Service Hours	2,852	1,957	46%	

Data Submission Quality

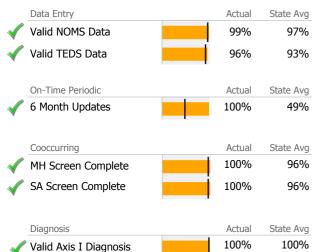
Valid Axis V GAF Score

Admissions Discharges

Services

Jul

Aug



Discharge Outcomes

100%

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		129	55%	50%	53%	5%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🗸 Not Arrested		308	94%	75%	90%	19%	4
Abstinence/Reduced Drug Use		200	61%	55%	59%	6%	
Stable Living Situation		314	95%	95%	90%	0%	
Employed	· · ·	159	48%	50%	44%	-2%	
/ Improved/Maintained Axis V GAF Score		216	84%	75%	68%	9%	
Self Help		56	17%	60%	24%	-43%	4
Clients Receiving Services Service Engagement	Actual % vs Goal %	Actual 93	Actual % 97%	Goal % 90%	83%	Actual vs Goal 7%	
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		186	78%	75%	80%	3%	
*							
Apr May Jun % Months Submitted 100%		▲ >	> 10% Over	V < 100	% Under		
100%		Actual	Goal 🖌	Goal Met	Below	Goal	

1 or more Records Submitted to DMHAS

Data Submitted to DMHAS by Month

Oct

Sep

100%

Nov

Dec

94%

Jan

Feb

* State Avg based on 115 Active Standard Outpatient Programs

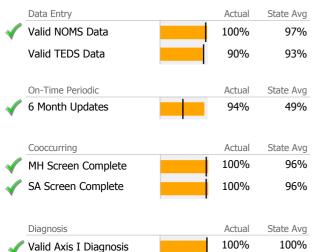
Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	507	375	35%	
Admits	458	312	47%	
Discharges	424	287	48%	
Service Hours	4,582	2,558	79%	

Data Submission Quality

Valid Axis V GAF Score



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		255	60%	50%	53%	10%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Vot Arrested		553	96%	75%	90%	21%	
Abstinence/Reduced Drug Use		379	66%	55%	59%	11%	
Stable Living Situation		544	94%	95%	90%	-1%	
✓ Improved/Maintained Axis V GAF Score		385	81%	75%	68%	6%	
Employed		222	39%	50%	44%	-11%	-
Self Help		196	34%	60%	24%	-26%	-
Service Utilization	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		137	90%	90%	83%	0%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		292	72%	75%	80%	-3%	
r Apr May Jun % Months Submitted			> 10% Over	T < 100	% Under		
100%			10/0 0 401	▼ < 10			

Actual

Goal

Data Submitted to DMHAS by Month

100%



94%



🗹 Goal Met

Below Goal

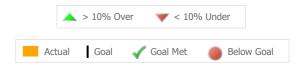
Program Activity

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

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS



* State Avg based on 38 Active Outreach & Engagement Programs

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

Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	43	39	10%	
Admits	33	31	6%	
Discharges	36	29	24%	
Bed Days	3,479	3,331	4%	

Data Submission Quality

Data Entry	Actual	State Avg
🞸 Valid NOMS Data	100%	99%
🞻 Valid TEDS Data	100%	100%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	8%
Cooccurring	Actual	State Avg
<u>_</u>	100%	89%
MH Screen Complete	100%	0970
🞻 SA Screen Complete	100%	89%
Diagnosis	Actual	State Avg

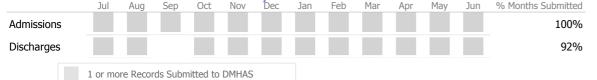
Diagnosis	Actual	State Avg
🞻 Valid Axis I Diagnosis	100%	100%
🞸 Valid Axis V GAF Score	100%	98%

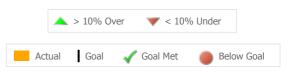
Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
ſ	Treatment Completed Successfully		26	72%	70%	67%	2%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/	No Re-admit within 30 Days of Discharge		34	94%	85%	92%	9%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Follow-up within 30 Days of Discharge		20	77%	90%	60%	-13%
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
-	Abstinence/Reduced Drug Use		34	79%	70%	78%	9%
	Improved/Maintained Axis V GAF Score		36	100%	95%	85%	5%

	13	2 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🗸 Avg Utilization Ra	te		10	118 days	0.1	95%	90%	100%	5%
	< 90%	90-110%		>110%					

Data Submitted to DMHAS by Month





* State Avg based on 40 Active Intermediate/Long Term Res.Tx 3.5 Programs

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

Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	53	50	6%
Admits	44	41	7%
Discharges	44	41	7%
Bed Days	3,492	3,429	2%

Data Submission Quality

Data Entry	Actual	State Avg
🞸 Valid NOMS Data	99%	99%
√ Valid TEDS Data	100%	100%
On Time Deviedie	A shuel	Chake Ave
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	8%
Cooccurring	Actual	State Avg
🞸 MH Screen Complete	100%	89%
🞻 SA Screen Complete	100%	89%
Diagnosis	Actual	State Avg

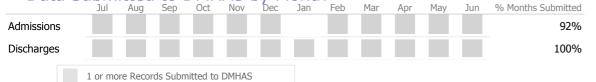
Diagnosis	Actual	State Avg
🞻 Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	100%	98%

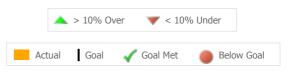
Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		23	52%	70%	67%	-18%	-
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
No Re-admit within 30 Days of Discharge		39	89%	85%	92%	4%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		22	96%	90%	60%	6%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		39	72%	70%	78%	2%	
Improved/Maintained Axis V GAF Score		44	100%	95%	85%	5%	
Bed Utilization							

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Avg Utilization Rate		10	100 days	0.1	95%	90%	100%	5%
		< 90% 90-110%		>110%					

Data Submitted to DMHAS by Month





* State Avg based on 40 Active Intermediate/Long Term Res.Tx 3.5 Programs

Perception Programs Inc Addiction - IOP - Standard IOP

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	161	129	25%	
Admits	168	118	42%	
Discharges	158	131	21%	
Service Hours	79	159	-50%	▼
Social Rehab/PHP/IOP Days	913	611	49%	

Data Submission Quality

	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	100%	97%
\checkmark	Valid TEDS Data	99%	99%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	N/A	6%
	Cooccurring	Actual	State Avg
\checkmark	MH Screen Complete	100%	95%
\checkmark	SA Screen Complete	100%	95%
÷			
	Diagnosis	Actual	State Avg

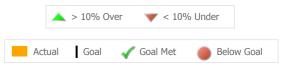
Diagnosis	Actua	I State Avg
🞻 Valid Axis I Diagnosis	100%	91%
Valid Axis V GAF Score	100%	89%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	1
Treatment Completed Successfully		99	63%	50%	59%	13%) ,
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		83	84%	90%	51%	-6%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		166	94%	75%	94%	19%	
Abstinence/Reduced Drug Use	·	108	61%	55%	61%	6%	
Improved/Maintained Axis V GAF Score		137	87%	75%	84%	12%	ı.,
Stable Living Situation		168	95%	95%	91%	0%	1
Self Help	· · ·	92	52%	60%	44%	-8%	1
Employed		44	25%	50%	32%	-25%	, ,
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		19	95%	90%	59%	5%	

Data Submitted to DMHAS by Month





* State Avg based on 51 Active Standard IOP Programs