Southeastern Mental Health Authority Norwich, CT

Reporting Period: July 2016 - June 2017 (Data as of Sep 13, 2017)



▲ > 10% Over 1 Yr Ago

▼> 10% Under 1Yr Ago

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Heal	th		
	Outpatient	519	23.8%
	Crisis Services	391	17.9%
	Community Support	274	12.6%
	Intake	234	10.7%
	ACT	191	8.8%
	Residential Services	123	5.6%
	Case Management	51	2.3%
	Employment Services	37	1.7%
	Other	17	0.8%
	Social Rehabilitation	14	0.6%
Forensic MH	I		
For	ensics Community-based	330	15.1%

Consumer Satisfaction Survey (Based on 250 FY16 Surveys)



Client Demographics

Age 18-25 26-34 35-44 45-54 55-64 65+

Ethnicity Non-Hispanic Unknown Hispanic-Other Hisp-Puerto Rican Hispanic-Cuban Hispanic-Mexican

	#	%	State Avg	Gender		#	%	State Avg
	222	15%	14%	Male		867	59%	60%
	292	20%	24%	Female		612	41%	40%
	242	17%	20%	Transgender		2	0%	0%
	340	23%	22%					
Ĺ	256	18%	16%					
Ĺ	97	7%	5%	Race		#	%	State Avg
				White/Caucasian		939	69%	65%
	#	%	State Avg	Black/African American		205	15%	16%
	1,092	74%	74%	Other		99	7%	13%
•	246	17%	▲ 6%	Unknown		43	3%	3%
	69	5%	7%	Multiple Races		39	3%	1%
1	68	5%	13%	Am. Indian/Native Alaskan		12	1%	1%
				Asian		10	1%	1%
	3	0%	0%	Hawaiian/Other Pacific Islander		6	0%	0%
	3	0%	1%	,				
	Unique C	lients	State Avg	▲ > 10% Over State Avg	$\mathbf{\nabla}$	> 10% U	Inder St	ate Avg

ACCESS

Program Quality Dashboard

Reporting Period: July 2016 - June 2017 (Data as of Sep 13, 2017)

Program Activity

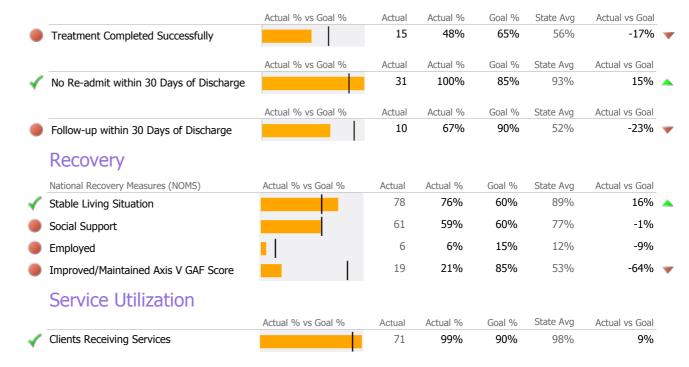
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	103	120	-14%	•
Admits	29	50	-42%	▼
Discharges	31	51	-39%	▼
Service Hours	7,936	8,872	-11%	•

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	95%	97%
On-Time Periodic	Actual	State Avg
/ 6 Month Updates	92%	88%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	91%
/ SA Screen Complete	100%	90%

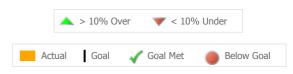
Diagnosis	Actual	State Avg	
Valid Axis I Diagnosis	96%	99%	
Valid Axis V GAF Score	45%	84%	

Discharge Outcomes



Data Submitted to DMHAS by Month





* State Avg based on 14 Active Assertive Community Treatment Programs

Program Activity

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

Data Submission Quality

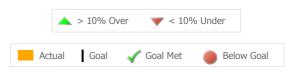
Data Entry		Actual	State Avg
Valid NOMS Data		N/A	93%
	•		
On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	70%
Cooccurring		Actual	State Avg
MH Screen Complete		N/A	82%
SA Screen Complete		N/A	81%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Т	reatment Completed Successfully		N/A	N/A	50%	45%	N/A	
R	Recovery							
Na	ational Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
E	mployed		N/A	N/A	30%	23%	-30%	-
) Ir	nproved/Maintained Axis V GAF Score	· ·	N/A	N/A	75%	59%	-75%	-
S	ocial Support		N/A	N/A	60%	70%	-60%	-
St	table Living Situation	· · · · · · · · · · · · · · · · · · ·	N/A	N/A	95%	86%	-95%	-
S	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
C	lients Receiving Services		N/A	N/A	90%	90%	N/A	•

Data Submitted to DMHAS by Month

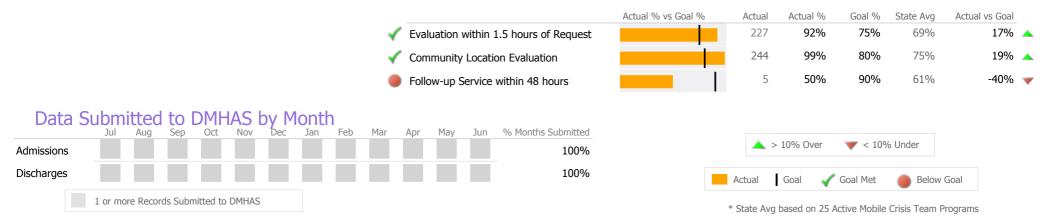
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admission	IS													0%
Discharge	S													0%
	1 0	or more	e Record	s Submi	tted to D	MHAS								



* State Avg based on 92 Active Standard Outpatient Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	155	149	4%
Admits	182	198	-8%
Discharges	183	198	-8%

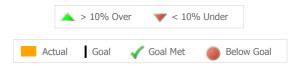
Crisis



Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	3	3	0%
Discharges	3	3	0%
Service Hours	-	-	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													25%
Discharges													25%
Services													0%
	1 or m	ore Reco	rds Subr	nitted to	DMHAS								



* State Avg based on 2 Active Re-entry Programs Programs

Southeastern Mental Health Authority Mental Health - Case Management - Standard Case Management

Reporting Period: July 2016 - June 2017 (Data as of Sep 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	51	99	-48% 🔻
Admits	1	8	-88% 🔻
Discharges	51	50	2%
Service Hours	753	5,332	-86% 🔻

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	94%	96%
On-Time Periodic	 Actual	State Avg
6 Month Updates	N/A	73%

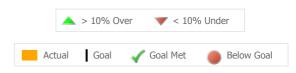
Discharge Outcomes

8%

Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
	51	100%	50%	58%	50%	
Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	36	71%	60%	68%	11%	
	46	90%	80%	85%	10%	
	0	0%	20%	10%	-20%	-
Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	N/A	N/A	90%	74%	N/A	-
	Actual % vs Goal %	Actual % vs Goal % Actual Actual % vs Goal % Actual 46 0 Actual % vs Goal % Actual	Actual % vs Goal % Actual Actual % 36 71% 46 90% 0 0% Actual % vs Goal % Actual Actual %	Actual % vs Goal % Actual Actual % Goal % Actual % vs Goal % 36 71% 60% 46 90% 80% 0 0% 20% Actual % vs Goal % Actual % Goal %	Actual % vs Goal % Actual Actual % Goal % State Avg 46 90% 80% 85% 0 0% 20% 10%	Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 46 90% 80% 85% 10% 0 0% 20% 10% -20% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal

Data Submitted to DMHAS by Month





* State Avg based on 31 Active Standard Case Management Programs

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

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

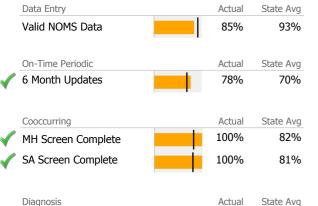
	> 10% 0	ver 🔻 < 10 ⁰	% Under	
Actual	Goal	🗹 Goal Met	Below	Goal

* State Avg based on 2 Active Outreach & Engagement Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	390	391	0%	
Admits	139	401	-65% 🔻	
Discharges	193	138	40% 🔺	
Service Hours	1,890	1,332	42% 🔺	

Data Submission Quality



Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	96%	98%
Valid Axis V GAF Score	82%	89%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		74	38%	50%	45%	-12%	-
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		226	56%	60%	70%	-4%	
Employed		63	16%	30%	23%	-14%	4
Stable Living Situation	· ·	317	79%	95%	86%	-16%	,
Stubic Living Situation							
Improved/Maintained Axis V GAF Score		196	51%	75%	59%	-24%	
2							
Improved/Maintained Axis V GAF Score	Actual % vs Goal %	196 Actual 207	51% Actual % 99%	75% Goal % 90%	59% State Avg 90%	-24% Actual vs Goal 9%	
Improved/Maintained Axis V GAF Score Service Utilization	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Improved/Maintained Axis V GAF Score Service Utilization Clients Receiving Services	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	

Data Submitted to DMHAS by Month

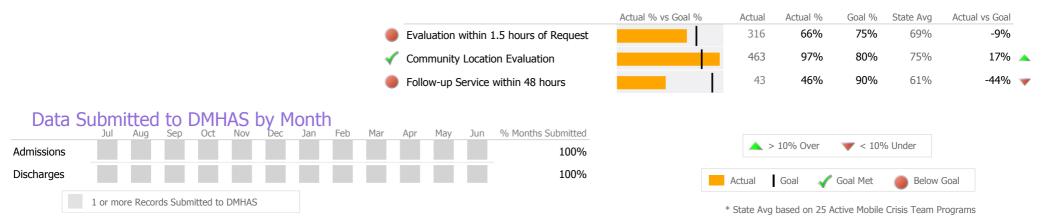
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													83%
Discharges													100%
Services													100%
	1 or mo	ore Recor	ds Subr	nitted to	DMHAS								



* State Avg based on 92 Active Standard Outpatient Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	268	352	-24%	▼
Admits	353	429	-18%	▼
Discharges	354	433	-18%	▼

Crisis



Southeastern Mental Health Authority

Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - June 2017 (Data as of Sep 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	37	116	-68% 🔻
Admits	7	31	-77% 🔻
Discharges	21	90	-77% 🔻
Service Hours	271	751	-64% 🔻

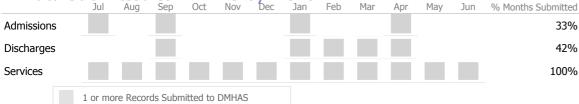
Recovery

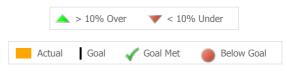
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Employed		9	24%	35%	43%	-11%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		11	69%	90%	97%	-21%	-

Data Submission Quality



Data Submitted to DMHAS by Month



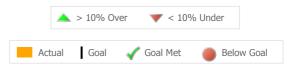


* State Avg based on 40 Active Employment Services Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	30	36	-17%	▼
Admits	7	17	-59%	•
Discharges	9	13	-31%	▼

Data Submitted to Sep OCt Nov Dec Jan





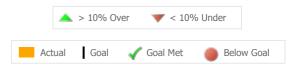
* State Avg based on 1 Active Outreach & Engagement Programs

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

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 0 Active Housing Assistance Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	234	435	-46% 🔻	
Admits	228	368	-38% 🔻	
Discharges	243	441	-45% 🔻	
Service Hours	512	620	-17% 🔻	

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admission	S													100%
Discharges	5													100%
Services														100%
	1	or mo	re Recor	ds Subrr	itted to	DMHAS								

	▲ > 10% O	ver 🛛 🔻 < 10%	% Under	
Actu	al Goal	🖌 Goal Met	Below Goa	al

* State Avg based on 8 Active Central Intake Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - June 2017 (Data as of Sep 13, 2017)

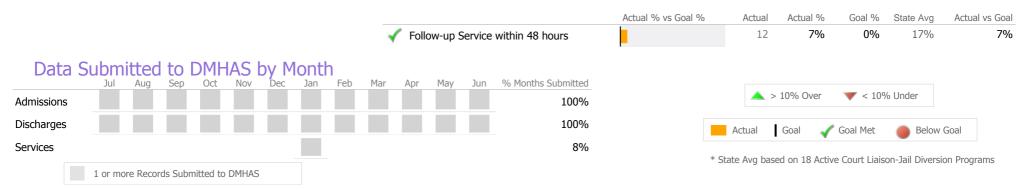
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	232	225	3%
Admits	173	195	-11% 🔻
Discharges	143	166	-14% 🔻
Service Hours	1	5	-89% 🔻

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	46%	N/A	-
	·						

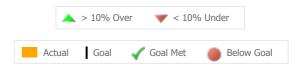
Jail Diversion



Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1	6	-83%	▼
Admits	1	4	-75%	▼
Discharges	-	6	-100%	▼
Service Hours	-		-100%	▼

Data Submitted to DMHAS by Month

	Ju	l Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	5												8%
Discharges	6												0%
Services													0%
	1 or	more Reco	ords Subr	nitted to	DMHAS								



* State Avg based on 14 Active Other Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	123	124	-1%
Admits	145	151	-4%
Discharges	147	147	0%
Bed Days	4,532	4,801	-6%

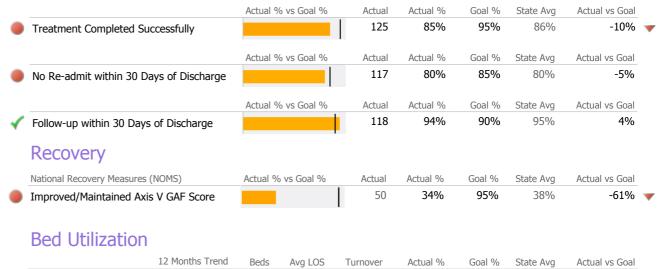
Data Submission Quality

Valid Axis I Diagnosis

Valid Axis V GAF Score

	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	94%	94%
	On-Time Periodic	 Actual	State Avg
	6 Month Updates	N/A	100%
	Cooccurring	Actual	State Avg
\checkmark	MH Screen Complete	100%	100%
\checkmark	SA Screen Complete	100%	100%
	Diagnosis	Actual	State Avg

Discharge Outcomes

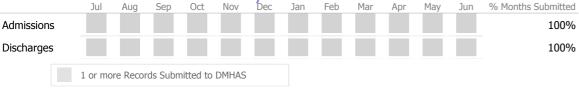


	14	2 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		a di si i sa i	15	45 days	0.1	83%	90%	83%	-7%
	< 90%	90-110%		>110%					

Data Submitted to DMHAS by Month

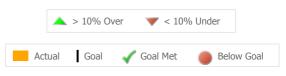
95%

78%



96%

80%



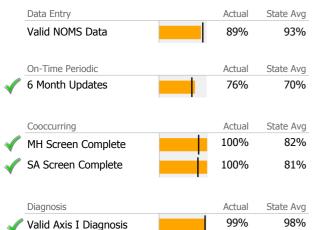
* State Avg based on 2 Active Sub-Acute Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	191	412	-54%	▼
Admits	68	147	-54%	•
Discharges	94	310	-70%	•
Service Hours	2,700	2,717	-1%	

Data Submission Quality

Valid Axis V GAF Score



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		47	50%	50%	45%	0%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		131	66%	60%	70%	6%
Stable Living Situation	· · · · · · · · · · · · · · · · · · ·	177	90%	95%	86%	-5%
Employed	· · ·	32	16%	30%	23%	-14%
Improved/Maintained Axis V GAF Score	I	105	60%	75%	59%	-15%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		103	100%	90%	90%	10%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
		46	69%	75%	65%	-6%

Data Submitted to DMHAS by Month

89%

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%
	1 or m	ore Reco	rds Subn	nitted to	DMHAS								

89%



* State Avg based on 92 Active Standard Outpatient Programs

Veterans Jail Diversion Initiative

Southeastern Mental Health Authority Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - June 2017 (Data as of Sep 13, 2017)

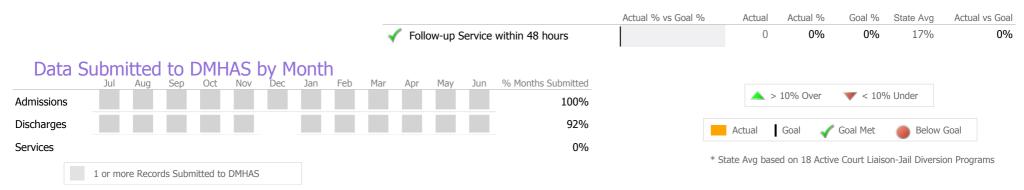
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	67	78	-14% 🔻
Admits	38	65	-42% 🔻
Discharges	35	51	-31% 🔻
Service Hours	-	-	

Service Utilization

ance %		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
-14% 🔻	Clients Receiving Services		0	0%	90%	46%	N/A	•
-42% 🔻								
-31% 🔻								

Jail Diversion



Work Readiness/ Recovery Cafe

Southeastern Mental Health Authority Mental Health - Social Rehabilitation - Social Rehabilitation Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - June 2017 (Data as of Sep 13, 2017)

Program Activity

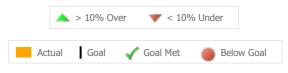
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	14	17	-18%	▼
Admits	-	5	-100%	▼
Discharges	14	3	367%	
Service Hours	2	384	-100%	▼
Social Rehab/PHP/IOP Days	0	0		

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Clients Receiving Services		N/A	N/A	90%	78%	N/A	-

Data Submitted to Sep Oct Nov Dec Jan Feb





* State Avg based on 35 Active Social Rehabilitation Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	266	194	37%	
Admits	142	88	61%	
Discharges	91	73	25%	
Service Hours	6,231	4,917	27%	

Data Submission Quality

Valid Axis I Diagnosis

Valid Axis V GAF Score

Data Entry	Actual	State Avg
Valid NOMS Data	93%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	77%	93%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	88%
SA Screen Complete	98%	87%
SA Server complete	5070	0, /0
Diagnosis	Actual	State Avg

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		50	55%	65%	69%	-10%	-
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		220	82%	80%	92%	2%	
	Social Support		158	59%	60%	81%	-1%	
	Employed	• I	19	7%	20%	13%	-13%	-
	Improved/Maintained Axis V GAF Score	<u> </u>	91	41%	95%	69%	-54%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		176	99%	90%	99%	9%	

Data Submitted to DMHAS by Month

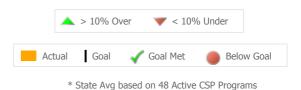
88%

82%

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	5													100%
Discharges	5													100%
Services														100%
		1 or me	ore Reco	ds Subr	nitted to	DMHAS								

98%

93%



Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	40	57	-30% 🔻
Admits	-	-	
Discharges	40	17	135% 🔺
Service Hours	1,558	2,467	-37% 🔻

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	95%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	93%
Cooccurring	Actual	State Avg
MH Screen Complete	N/A	88%
SA Screen Complete	N/A	87%
Diagnasia	A should	Chate Aura

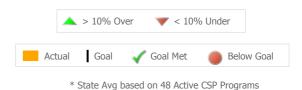
Diagnosis	A	ctual	State Avg
🞻 Valid Axis I Diagnosis	10	00%	98%
🞸 Valid Axis V GAF Score	10	00%	93%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
V	Treatment Completed Successfully		39	98%	65%	69%	33%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		40	100%	80%	92%	20%	
\checkmark	Social Support	·	26	65%	60%	81%	5%	
	Employed		2	5%	20%	13%	-15%	-
	Improved/Maintained Axis V GAF Score	·	21	52%	95%	69%	-43%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		N/A	N/A	90%	99%	N/A	-

Data Submitted to DMHAS by Month

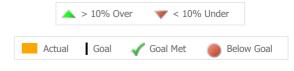
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													33%
Services													100%
	1 or m	ore Reco	rds Subn	nitted to	DMHAS								



Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	16	11	45%	
Admits	14	8	75%	
Discharges	14	9	56%	
Service Hours	1	-		

Data Submitted to DMHAS by Month





* State Avg based on 14 Active Other Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	88	88	0%	
Admits	35	27	30%	
Discharges	32	35	-9%	
Service Hours	5,434	6,163	-12%	•

Data Submission Quality

Valid Axis V GAF Score

	Data Entry	Actual	State Avg	
	Valid NOMS Data	93%	97%	
	On-Time Periodic	Actual	State Avg	
	6 Month Updates	55%	88%	
	Cooccurring	Actual	State Avg	
	MH Screen Complete	100%	91%	
V .	Min Screen Complete	10070	51/0	
	SA Screen Complete	100%	90%	
÷				
	Diagnosis	Actual	State Avg	
		 	<u> </u>	
\checkmark	Valid Axis I Diagnosis	100%	99%	

Discharge Outcomes

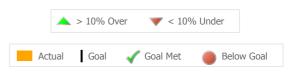
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		9	28%	65%	56%	-37%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		31	97%	85%	93%	12%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		7	78%	90%	52%	-12%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		78	89%	60%	89%	29%
Social Support		58	66%	60%	77%	6%
Employed		12	14%	15%	12%	-1%
Improved/Maintained Axis V GAF Score	·	22	31%	85%	53%	-54%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		56	100%	90%	98%	10%

Data Submitted to DMHAS by Month

61%

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													75%
Services													100%
	1 or mo	ore Reco	rds Subn	nitted to	DMHAS								

84%



* State Avg based on 14 Active Assertive Community Treatment Programs