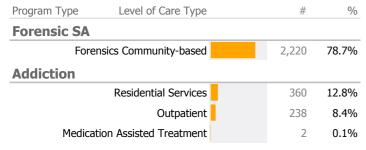
Connecticut Renaissance Inc.

Shelton, CT

Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)



Clients by Level of Care



Consumer Satisfaction Survey (Based on 417 FY17 Surveys)



Client Demographics

Age

18-25

26-34

35-44

45-54 55-64 65+

Ethnicity Non-Hispanic Hispanic-Other Hisp-Puerto Rican

Unknown

Hispanic-Mexican Hispanic-Cuban

	#	%	State Avg	Gender		#	%	State Avg			
	791	28%	▲ 13%	Male		2,243	80%	▲ 60%			
	783	28%	24%	Female		554	20%	▼ 40%			
	548	20%	20%	Transgender				0%			
	382	14%	21%								
	222	8%	16%								
	58	2%	5%	Race		#	%	State Avg			
				White/Caucasian		2,030	72%	64%			
	#	%	State Avg	Black/African American		539	19%	17%			
	1,858	66%	72%	Other		138	5%	13%			
	788	28%	▲ 7%	Unknown		52	2%	4%			
i i	82	3%	12%	Asian		35	1%	1%			
	62	2%	7%	Multiple Races		6	0%	1%			
I				Hawaiian/Other Pacific Islander		2	0%	0%			
	11	0%	1%	Am. Indian/Native Alaskan				1%			
	1	0%	0%	,							
	Unique Clients State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg										

Addiction - Outpatient - Gambling Outpatient

Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	22	21	5%
Admits	5	6	-17% 🔻
Discharges	10	4	150% 🔺
Service Hours	205	231	-12% 🔻

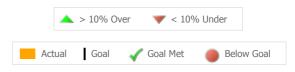
Data Submission Quality

Data Entry	Actual	State Avg
🗸 Valid NOMS Data	100%	92%
🗸 Valid TEDS Data	74%	23%
On-Time Periodic	Actual	State Avg
6 Month Updates	60%	83%
Cooccurring	Actual	State Avg
🖌 MH Screen Complete	100%	93%
🖌 SA Screen Complete	100%	93%
Diagnosis	Actual	State Avg
🖌 Valid Axis I Diagnosis	100%	100%

Diagriobio		7100001	State my
Valid Axis I Diagnos	is 🛛	100%	100%
Valid Axis V GAF Sco	ore	100%	100%

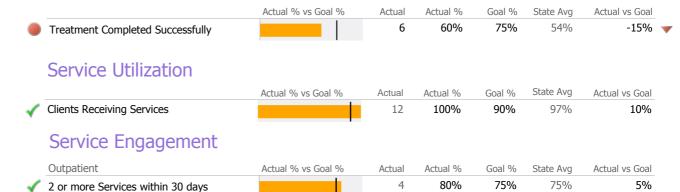
Data Submitted to DMHAS by Month

Dutu	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													42%
Discharges													58%
Services													92%
	1 or mo	ore Record	ds Subr	mitted to I	DMHAS	;							



* State Avg based on 8 Active Gambling Outpatient Programs

Discharge Outcomes



Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

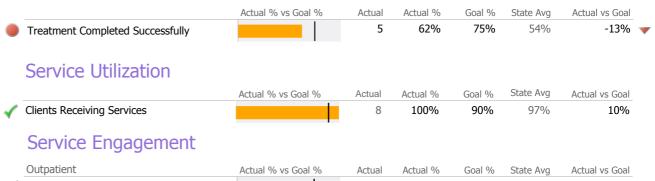
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16	16	0%
Admits	7	10	-30% 🔻
Discharges	8	7	14% 🔺
Service Hours	137	182	-25% 🔻

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS D	Pata	84%	92%
🗸 Valid TEDS D	ata	73%	23%
On-Time Period	ic	Actual	State Avg
6 Month Upda	ites	0%	83%
Cooccurring		Actual	State Avg
MH Screen Co	omplete	100%	93%
🗸 SA Screen Co	mplete	100%	93%
Diagnosis		Actual	State Avo

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

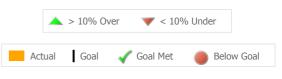
Discharge Outcomes



2 or more Services within 30 days 6 86% 75% 75% 11%

Data Submitted to DMHAS by Month





* State Avg based on 8 Active Gambling Outpatient Programs

Connecticut Renaissance Inc. Addiction - Residential Services - SA Intensive Residential - Enhanced Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

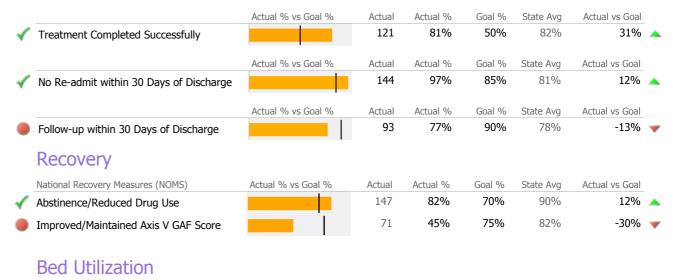
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	172	191	-10%	
Admits	163	191	-15%	▼
Discharges	149	182	-18%	▼
Bed Days	8,928	7,535	18%	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	79%	93%
🖌 Valid TEDS Data	100%	100%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	0%
Cooccurring	Actual	State Avg
MH Screen Complete	100%	100%
🖌 SA Screen Complete	100%	100%
Diagnosis	Actual	State Avg

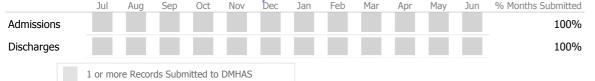
	Jiagriosis	riccuar	State Mig
	/alid Axis I Diagnosis	100%	100%
۷ 🍾	/alid Axis V GAF Score	100%	100%

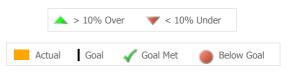
Discharge Outcomes



		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Avg Utilization Rate		20	92 days	0.1	122%	90%	109%	32% 🔺	
	<	90% 90-110%		>110%						

Data Submitted to DMHAS by Month





* State Avg based on 2 Active SA Intensive Residential - Enhanced Programs

Addiction - Outpatient - Standard Outpatient

Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	202	183	10%	
Admits	86	116	-26%	▼
Discharges	55	67	-18%	▼
Service Hours	293	156	88%	

Data Submission Quality

Valid Axis V GAF Score

Admissions Discharges

Services

Jul

Aug

	Data Entry	Actual	State Avg
	Valid NOMS Data	78%	94%
\checkmark	Valid TEDS Data	95%	92%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	0%	24%
	Cooccurring	Actual	State Avg
\checkmark	MH Screen Complete	100%	97%
\checkmark	SA Screen Complete	100%	99%
	Diagnosis	Actual	State Avg
\checkmark	Valid Axis I Diagnosis	100%	99%

Discharge Outcomes

75%

Treatment Completed Successfully	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment completed Successfully		30	55%	50%	54%	5%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested		150	74%	75%	86%	-1%
Employed		90	44%	50%	44%	-6%
Abstinence/Reduced Drug Use	<u> </u>	71	35%	55%	56%	-20%
Stable Living Situation		134	66%	95%	85%	-29%
Self Help	'	9	4%	60%	33%	-56%
Improved/Maintained Axis V GAF Score	· · ·	16	9%	75%	59%	-66%
Clients Receiving Services Service Engagement		Actual 35	Actual %	Goal % 90%	State Avg 72%	Actual vs Goal
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		28	33%	75%	66%	-42%

1 or more Records Submitted to DMHAS

Data Submitted to DMHAS by Month

Oct

Sep

100%

Nov

Dec

96%

Jan

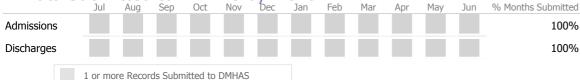
Feb

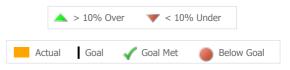
* State Avg based on 113 Active Standard Outpatient Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	2,220	2,299	-3%
Admits	1,292	1,347	-4%
Discharges	1,347	1,373	-2%

Data Submitted to DMHAS by Month





* State Avg based on 16 Active Pre-trial Intervention Programs Programs

Connecticut Renaissance 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 2017 - June 2018 (Data as of Sep 18, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	189	243	-22% 🔻	
Admits	143	230	-38% 🔻	
Discharges	140	208	-33% 🔻	
Bed Days	12,178	11,965	2%	

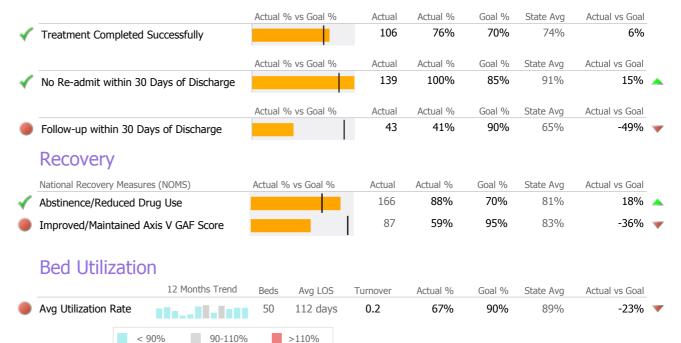
Data Submission Quality

	Data Entry		Actual	State Avg	
	Valid NOMS Data		78%	96%	
\checkmark	Valid TEDS Data		100%	98%	
	On-Time Periodic		Actual	State Avg	
	6 Month Updates		0%	23%	
	Cooccurring		Actual	State Avg	
\checkmark	MH Screen Complete		100%	95%	
\checkmark	SA Screen Complete		100%	95%	
		•			
	Diagnosis		Actual	State Ava	

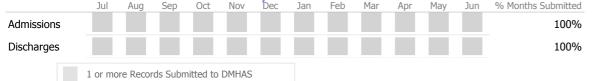
Diagnosis	Actual	State Avy
Valid Axis I Diagnosis	99%	100%
🗸 Valid Axis V GAF Score	99%	93%

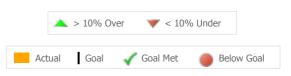
 \langle

Discharge Outcomes



Data Submitted to DMHAS by Month





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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	2		
Admits	2	-	
Discharges	-	-	
Service Hours	4	-	

Data Submission Quality

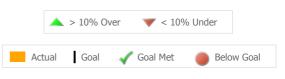
Data Entry	Actu	al State Avg
Valid NOMS Data	804	% 92%
Valid TEDS Data	1009	% 98%
On-Time Periodic	Actu	al State Avg
6 Month Updates	N/	A 72%
Cooccurring	Actu	al State Avg
MH Screen Complete	100	% 88%
SA Screen Complete	1009	% 99%
Diagnosis	Actu	al State Avg
🖉 Valid Axis I Diagnosis	1004	% 99%

/ Valid Avia V CAE Score	Valid Axis I Diagnosis	
	Valid Axis V GAF Score	100% 79%

 $\langle \langle \rangle$

Data Submitted to DMHAS by Month





* State Avg based on 5 Active Buprenorphine Maintenance Programs