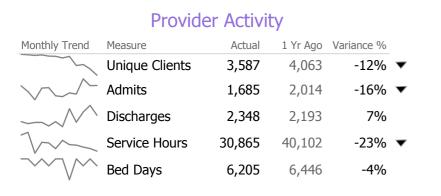
#### InterCommunity Inc.

East Hartford, CT

#### Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

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



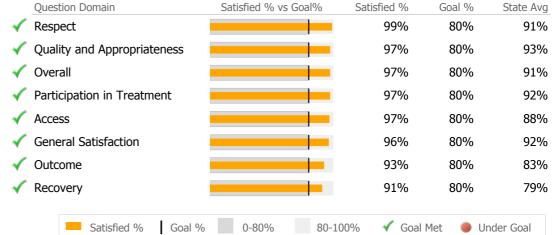
▲ > 10% Over 1 Yr Ago

▼> 10% Under 1Yr Ago

#### Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Healt	h		
	Outpatient	3,394	78.3%
	Community Support	384	8.9%
	Employment Services	131	3.0%
	Crisis Services	124	2.9%
	Consultation	118	2.7%
	Social Rehabilitation	80	1.8%
	ACT	63	1.5%
	Case Management	21	0.5%
	Residential Services	19	0.4%

# Consumer Satisfaction Survey (Based on 187 FY17 Surveys)



#### **Client Demographics**

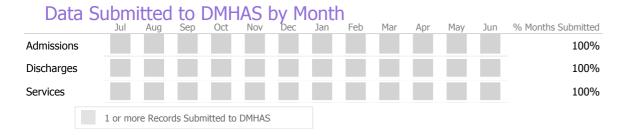
Age 18-25 26-34 35-44 45-54 55-64 65+

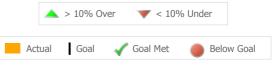
Ethnicity Non-Hispanic Hisp-Puerto Rican

Unknown Hispanic-Other Hispanic-Mexican Hispanic-Cuban

	#	%	State Avg	Gender		#	%	State A	vg
	475	13%	13%	Female	•	1,853	52%	<b>▲</b> 40	%
	697	19%	24%	Male		1,734	48%	▼ 60	%
ĺ	698	19%	20%	Transgender				0	%
	820	23%	21%						
ĺ	654	18%	16%						
Ĺ	240	7%	5%	Race		#	%	State A	vg
•				White/Caucasian		1,945	54%	64	%
	#	%	State Avg	Black/African American	•	690	19%	17	%
	2,156	60%	▼ 72%	Other		599	17%	13	%
<b>.</b> '	660	18%	12%	Unknown		258	7%	4	₩
i i	423	12%	7%	Asian		60	2%	1	.%
	317	9%	7%	Am. Indian/Native Alaskan		18	1%	1	.%
				Hawaiian/Other Pacific Islander		17	0%	0	)%
	16	0%	1%	Multiple Races				1	.%
	15	0%	0%						
	Unique C	lients	State Avg	▲ > 10% Over State Avg	▼ :	> 10% U	nder S	tate Avg	

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	118	83	42%	
Admits	48	85	-44%	▼
Discharges	64	12	433%	
Service Hours	518	176	194%	





\* State Avg based on 9 Active Consultation Programs

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

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	48	46	4%
Admits	20	20	0%
Discharges	19	21	-10%
Service Hours	2,709	2,812	-4%

# Data Submission Quality

Valid Axis V GAF Score

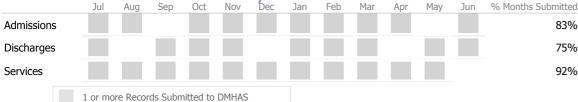
	Data Entry	Actual	State Avg	
	Valid NOMS Data	96%	97%	
	On-Time Periodic	Actual	State Avg	
	6 Month Updates	82%	93%	
	Cooccurring	Actual	State Avg	
	MH Screen Complete	99%	95%	
	SA Screen Complete	99%	95%	
~	SA Server complete	5570	5570	
	Diagnosis	 Actual	State Avg	
$\checkmark$	Valid Axis I Diagnosis	100%	98%	

### **Discharge Outcomes**

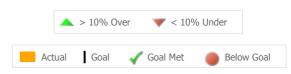
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		15	79%	65%	50%	14%	-
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
No Re-admit within 30 Days of Discharge		17	94%	85%	94%	9%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Follow-up within 30 Days of Discharge		6	40%	90%	55%	-50%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		48	100%	60%	80%	40%	4
Stable Living Situation		47	98%	60%	90%	38%	4
Employed		3	6%	15%	14%	-9%	
Improved/Maintained Axis V GAF Score	I	26	63%	85%	54%	-22%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Clients Receiving Services		28	97%	90%	99%	7%	

#### Data Submitted to DMHAS by Month

100%



88%



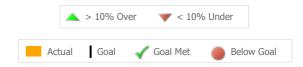
\* State Avg based on 15 Active Assertive Community Treatment Programs

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 8 Active Central Intake Programs

InterCommunity Inc.

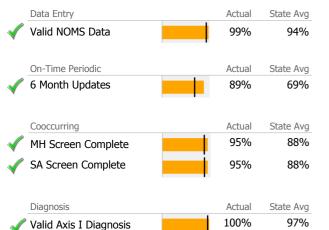
Mental Health - Outpatient - Standard Outpatient

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	126	32	294%	
Admits	107	21	410%	
Discharges	10	14	-29%	•
Service Hours	302	123	145%	

# Data Submission Quality

Valid Axis V GAF Score

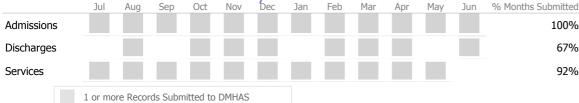


## **Discharge Outcomes**

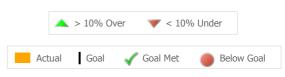
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
<b>«</b>	Treatment Completed Successfully		9	90%	50%	45%	40%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		127	100%	60%	69%	40%	
	Stable Living Situation		120	94%	95%	86%	-1%	
	Employed	<b>_</b>	17	13%	30%	24%	-17%	-
	Improved/Maintained Axis V GAF Score		25	68%	75%	54%	-7%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		86	74%	90%	89%	-16%	•
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		32	30%	75%	67%	-45%	-

#### Data Submitted to DMHAS by Month

100%



89%



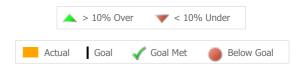
\* State Avg based on 93 Active Standard Outpatient Programs

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 39 Active Outreach & Engagement Programs

#### **Career Opportunities 612-270**

InterCommunity Inc.

Mental Health - Employment Services - Employment Services

#### Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

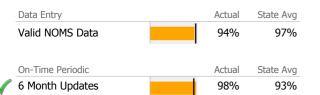
### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	131	119	10%	▲
Admits	70	42	67%	
Discharges	66	55	20%	
Service Hours	2,127	2,003	6%	

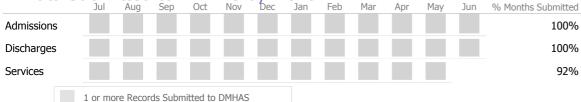
#### Recovery

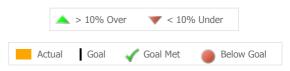
	/						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Employed		48	36%	35%	43%	1%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Clients Receiving Services		67	97%	90%	98%	7%

# Data Submission Quality



#### Data Submitted to DMHAS by Month





\* State Avg based on 41 Active Employment Services Programs

#### **CASA HOPE 18 - 260**

InterCommunity Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

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

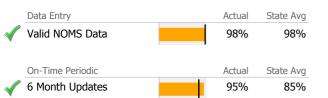
### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	21	23	-9%	
Admits	-	3	-100% 🔻	
Discharges	-	2	-100% 🔻	
Service Hours	494	566	-13% 🔻	

#### Recovery

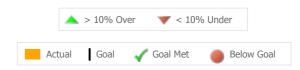
	/							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Stable Living Situation		15	71%	85%	85%	-14%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		20	95%	90%	96%	5%	

### Data Submission Quality



#### Data Submitted to DMHAS by Month





\* State Avg based on 74 Active Supportive Housing – Scattered Site Programs

#### Common Ground 612-281

InterCommunity Inc. Mental Health - Social Rehabilitation - Social Rehabilitation Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

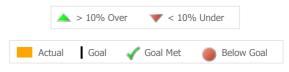
#### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	80	71	13% 🔺
Admits	23	10	130% 🔺
Discharges	11	16	-31% 🔻
Service Hours	809	804	1%
Social Rehab/PHP/IOP Days	0	0	

#### Service Utilization







\* State Avg based on 36 Active Social Rehabilitation Programs

InterCommunity Inc.

Mental Health - Residential Services - Supervised Apartments

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

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	19	23	-17% 🔻	
Admits	2	5	-60% 🔻	
Discharges	2	6	-67% 🔻	
Bed Days	6,205	6,446	-4%	

# Data Submission Quality

	Data Entry	Actua	al State Avg
	Valid NOMS Data	98%	6 99%
	On-Time Periodic	Actua	al State Avg
V	6 Month Updates	100%	% 83%
	Cooccurring	Actua	al State Avg
	MH Screen Complete	67%	% 84%
	SA Screen Complete	76%	% 82%
	Diagnosis	Actua	al State Avg
$\checkmark$	Valid Axis I Diagnosis	100%	% 97%
1	Valid Axis V GAF Score	100%	% 94%

### **Discharge Outcomes**

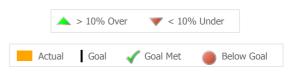
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		2	100%	60%	68%	40%	
			A should	A shu sh O(	Geel M	Charles Asses	Ashesler Carl	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		0	0%	90%	80%	-90%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		19	100%	60%	84%	40%	
$\checkmark$	Stable Living Situation		19	100%	95%	96%	5%	
	Employed		1	5%	25%	11%	-20%	-
	Improved/Maintained Axis V GAF Score		10	56%	95%	68%	-39%	-

#### **Bed Utilization**

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
∢	Avg Utilization Rate		17	2,282 days	0.2	100%	90%	94%	10%
	<	90% 90-110%		>110%					

#### Data Submitted to DMHAS by Month

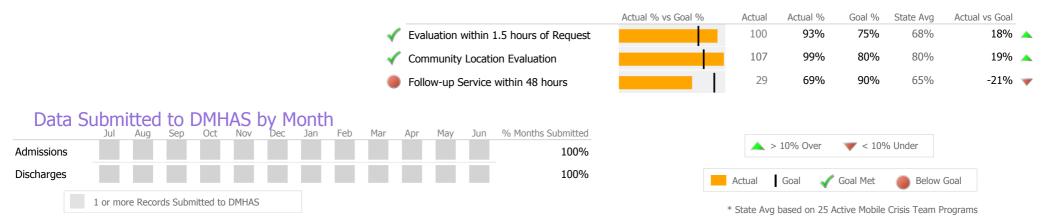
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													17%
Discharges													17%
	1 or mo	re Reco	rds Subn	nitted to	DMHAS								



\* State Avg based on 62 Active Supervised Apartments Programs

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	124	113	10%
Admits	126	123	2%
Discharges	117	120	-3%

#### Crisis



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

### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	384	408	-6%
Admits	191	207	-8%
Discharges	208	215	-3%
Service Hours	9,087	9,604	-5%

# Data Submission Quality

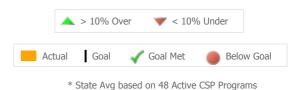
	Data Entry	Actual	State Avg
	Valid NOMS Data	97%	98%
		•	
	On-Time Periodic	Actual	State Avg
<b>«</b>	6 Month Updates	99%	96%
	Cooccurring	Actual	State Avg
$\checkmark$	MH Screen Complete	91%	90%
$\checkmark$	SA Screen Complete	90%	89%
		•	
	Diagnosis	Actual	State Avg
$\checkmark$	Valid Axis I Diagnosis	100%	98%
<i></i>	Valid Axis V GAF Score	100%	96%

### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		203	98%	65%	67%	33%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		394	99%	60%	82%	39%	
$\checkmark$	Stable Living Situation		345	87%	80%	92%	7%	
$\checkmark$	Improved/Maintained Axis V GAF Score		251	73%	65%	66%	8%	
	Employed		49	12%	20%	13%	-8%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		213	98%	90%	99%	8%	

#### Data Submitted to DMHAS by Month

	Ju	l Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%
	1 or	more Reco	rds Subr	nitted to	DMHAS								

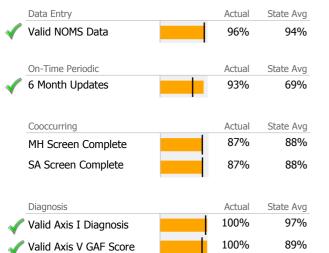


Reporting Period: July 2017 - June 2018 (Data as of Sep 18, 2018)

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3,374	3,914	-14% 🔻
Admits	1,092	1,482	-26% 🔻
Discharges	1,822	1,703	7%
Service Hours	13,215	21,244	-38% 🔻

# Data Submission Quality

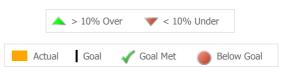


### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		1,580	87%	50%	45%	37%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		3,462	100%	60%	69%	40%
Employed		967	28%	30%	24%	-2%
Stable Living Situation	· ·	3,069	88%	95%	86%	-7%
Improved/Maintained Axis V GAF Score	<b></b>   '	1,877	60%	75%	54%	-15%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		1,280	77%	90%	89%	-13%
Clients Receiving Services Service Engagement		1,280	77%	90%	89%	-13%
Clients Receiving Services Service Engagement Outpatient	Actual % vs Goal %	1,280 Actual	77% Actual %	<b>90%</b> Goal %	89% State Avg	-13% Actual vs Goal

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													92%
	1 or mo	ore Recor	ds Subr	nitted to	DMHAS								



\* State Avg based on 93 Active Standard Outpatient Programs

InterCommunity Inc. Mental Health - ACT - Assertive Community Treatment

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

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	16	13	23% 🔺	
Admits	6	3	100% 🔺	
Discharges	7	3	133% 🔺	
Service Hours	1,552	2,187	-29% 🔻	

# Data Submission Quality



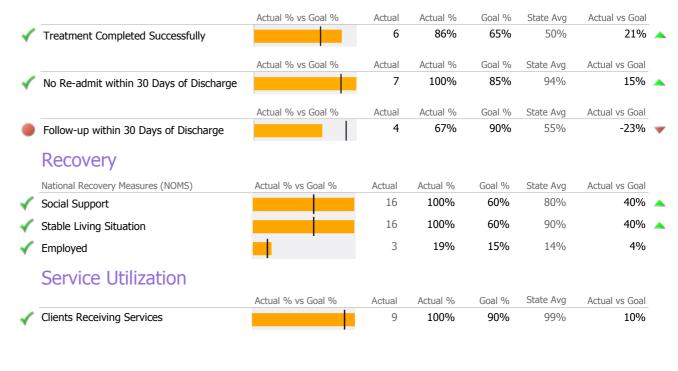
### **Discharge Outcomes**

May

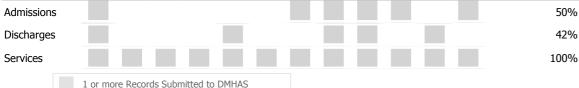
Jun

Apr

% Months Submitted



# Data Submitted to DMHAS by Month



	> 10% O	ver 🛛 🔻 < 10%	% Under	
Actual	Goal	🗹 Goal Met	Belov	v Goal

\* State Avg based on 15 Active Assertive Community Treatment Programs