Inspirica Inc. (formerly St Luke's LifeWorks) Stamford, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

92%

91%

91%

90%

84%

73%

✓ Goal Met

80%

80%

80%

80%

80%

80%

Under Goal

92%

91%

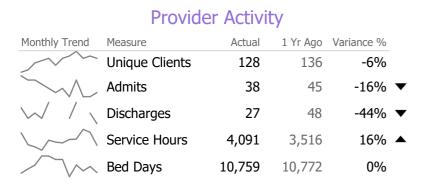
88%

93%

83%

79%

Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)



▲ > 10% Over 1 Yr Ago

> 10% Under 1Yr Ago

 \checkmark

 \checkmark

V Overall

Access

V Outcome

Age

18-25

26-34

35-44

45-54

55-64

65+

Ethnicity

Non-Hispanic

Hispanic-Other

Hisp-Puerto Rican

Hispanic-Mexican

Hispanic-Cuban Unknown

Recovery

Participation in Treatment

Quality and Appropriateness

Clients by Level of Care



Consumer Satisfaction Survey (Based on 86 FY18 Surveys) **Ouestion Domain** Satisfied % vs Goal% Satisfied % Goal % State Avg Respect 95% 80% 91% ✓ General Satisfaction 93% 80% 92%

80-100% Satisfied % Goal % 0-80%

Client Demographics

	#	%	State Avg	Gender		#	%	State Avg
	4	3%	12%	Female		64	50%	40%
İ.	22	17%	24%	Male		64	50%	60%
Í	9	7%	▼ 21%	Transgender				0%
1	45	35%	▲ 20%					
	39	30%	▲ 17%					
	9	7%	6%	Race		#	%	State Avg
				Black/African American		61	48%	▲ 17%
	#	%	State Avg	White/Caucasian		59	46%	▼ 63%
	100	78%	70%	Other		3	2%	▼ 13%
<u>і</u>	19	15%	12%	Multiple Races		2	2%	1%
	8	6%	7%	Am. Indian/Native Alaskan		1	1%	1%
	1	1%	1%	Asian		1	1%	1%
	T	170		Unknown		1	1%	5%
			0%	Hawaiian/Other Pacific Islander	-			0%
			10%	'				
	Unique C	lients	State Avg	> 10% Over State Avg	▼	> 10% U	nder S	tate Avg

Atlantic Park Apts 120-260

Inspirica Inc. (formerly St Luke's LifeWorks) Mental Health - Case Management - Supportive Housing – Development Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	17	17	0%
Admits	2	2	0%
Discharges	1	2	-50% 🔻
Service Hours	1,008	796	27% 🔺

Data Submission Quality

ctual Sta	ate Avg
9%	99%
ctual Sta	ate Avg
0%	80%
	99% ctual Sta

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Stable Living Situation		15	88%	85%	91%	3%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Clients Receiving Services		16	100%	90%	97%	10%

Data Submitted to DMHAS by Month



	> 10% 0	ver 🔻 < 109	% Under	
Actual	Goal	🗸 Goal Met	Belo	w Goal

* State Avg based on 66 Active Supportive Housing – Development Programs

Colony Apartments 120-261

Inspirica Inc. (formerly St Luke's LifeWorks) Mental Health - Case Management - Supportive Housing – Development Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

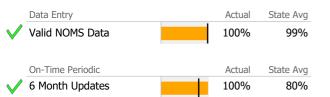
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	17	18	-6%
Admits	1	3	-67% 🔻
Discharges	-	2	-100% 🔻
Service Hours	1,231	1,075	14% 🔺

Recovery

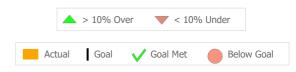
	,							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		17	100%	85%	91%	15% 🔺	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		17	100%	90%	97%	10%	

Data Submission Quality



Data Submitted to DMHAS by Month





* State Avg based on 66 Active Supportive Housing – Development Programs

Inspirica Inc. (formerly St Luke's LifeWorks) Mental Health - Community Support - CSP

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	47	49	-4%
Admits	15	16	-6%
Discharges	7	17	-59% 🔻
Service Hours	1,853	1,645	13% 🔺

Data Submission Quality

Valid Axis V GAF Score

	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	96%	90%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	47%	86%
	Cooccurring	Actual	State Avg
\checkmark	MH Screen Complete	69%	51%
\checkmark	SA Screen Complete	69%	51%
	Diagnosis	Actual	State Avg
\checkmark	Valid Axis I Diagnosis	100%	98%

Discharge Outcomes

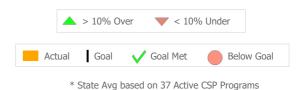
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		1	14%	65%	68%	-51%	-
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		39	83%	60%	83%	23%	
\checkmark	Improved/Maintained Axis V GAF Score		32	74%	65%	65%	9%	
	Stable Living Situation	i	34	72%	80%	91%	-8%	
	Employed	 	5	11%	20%	13%	-9%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		40	100%	90%	99%	10%	

Data Submitted to DMHAS by Month

100%



96%



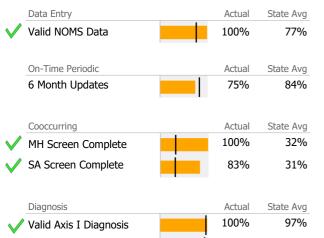
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	17	19	-11% 🔻
Admits	5	6	-17% 🔻
Discharges	4	7	-43% 🔻
Bed Days	4,715	4,636	2%

Data Submission Quality

Valid Axis V GAF Score



Discharge Outcomes

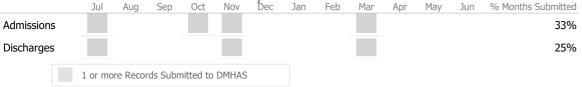
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		2	50%	60%	67%	-10%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		1	50%	90%	69%	-40%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		14	82%	60%	83%	22%	
\checkmark	Stable Living Situation		17	100%	95%	96%	5%	
	Employed		3	18%	25%	13%	-7%	
	Improved/Maintained Axis V GAF Score	—	2	12%	95%	65%	-83%	

Bed Utilization

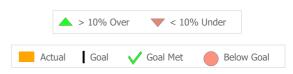
		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Avg Utilization Rate		13	853 days	0.2	99%	90%	93%	9%
		< 90% 90-110%		>110%					

Data Submitted to Sep DMHAS by Month

88%



94%



* State Avg based on 80 Active Supervised Apartments Programs

Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual 9 Unique Clients 11 -18% 🔻 100% 85% 100% 15% 🔺 No Re-admit within 30 Days of Discharge 6 \checkmark Admits 7 9 -22% 🔻 Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 6 -40% 🔻 Discharges 10 2 67% 90% 89% -23% 🔻 Follow-up within 30 Days of Discharge Bed Days 780 834 -6% **Bed Utilization** 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 3 125 days 0.2 71% 90% 87% -19% 🔻 anna-India < 90% 90-110% >110% Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec Jan Mar % Months Submitted Feb Apr May Jun 🔺 > 10% Over < 10% Under Admissions 50% 42% Discharges Goal Goal Met Below Goal Actual 1 or more Records Submitted to DMHAS * State Avg based on 4 Active Respite Bed Programs

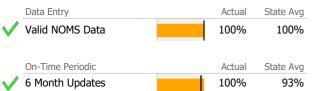
Reporting Period: July 2018 - June 2019 (Data as of Sep 16, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	24	-8%	
Admits	8	9	-11% 🔻	
Discharges	9	10	-10%	
Bed Days	5,264	5,302	-1%	

Data Submission Quality

Admissions Discharges



Discharge Outcomes

Measure	Actual	1 Yr Ago	/ariance %			Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Unique Clients	22	24	-8%		Treatment Completed Successfully		3	33%	85%	60%	
Admits	8	9	-11% 🔻			Actual % vs Goal %	A shuel	A attual 0/	Caal 0/	Chata Aur	Astuslus Casl
Discharges	9	10	-10%		Follow-up within 30 Days of Discharge	Actual % VS Goal %	Actual	Actual % 33%	Goal % 90%	29%	
Bed Days	5,264	5,302	-1%		Recovery						
Data Submission Quality				National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
		Zuality			Self Help		13	59%	60%	% 60% -52% % State Avg Actual vs Goal % 29% -57% % State Avg Actual vs Goal % Below Goal 6%	
Data Entry		Actua	al State Avg								
Valid NOMS Data		100%	% 100%		Bed Utilization						
On-Time Periodic		Actua	al State Avg		12 Months Trend	Beds Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
6 Month Updates		100%		\checkmark	Avg Utilization Rate	15 740 days	0.2	96%	90%	86%	6%
					< 90% 90-110%	% >110%					
Data Submi	Aug Sep	DMHAS Oct Nov		Feb Mar	Apr May Jun % Months Submitted						
dmissions					42%		▲ :	> 10% Over	< 100	% Under	
1 or more Records Submitted to DMHAS					42% Actual Goal 🗸 Goal Met 🔴 Below Goal						Goal
							* Chaba A	va bacad on 2	A ative AIDC	Decidential Dru	

* State Avg based on 3 Active AIDS Residential Programs