Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

# **Provider Activity**

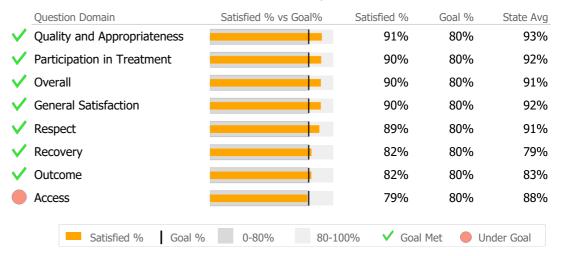




#### Clients by Level of Care

| Program Type | Level of Care Type      | #     | %     |
|--------------|-------------------------|-------|-------|
| Addiction    |                         |       |       |
| Medicat      | tion Assisted Treatment | 1,209 | 71.2% |
|              | Residential Services    | 198   | 11.7% |
|              | IOP                     | 194   | 11.4% |
|              | Outpatient              | 98    | 5.8%  |

#### Consumer Satisfaction Survey (Based on 365 FY19 Surveys)



#### **Client Demographics**

| Age               | #        | %      | State Avg   | Gender                          | #       | %        | State Avg    |
|-------------------|----------|--------|-------------|---------------------------------|---------|----------|--------------|
| 18-25             | 49       | 3%     | 10%         | Male                            | 986     | 68%      | 60%          |
| 26-34             | 267      | 19%    | 23%         | Female                          | 467     | 32%      | 40%          |
| 35-44             | 374      | 26%    | 22%         | Transgender                     |         |          | 0%           |
| 45-54             | 343      | 24%    | 20%         |                                 |         |          |              |
| 55-64             | 323      | 23%    | 19%         |                                 |         |          |              |
| 65+               | 72       | 5%     | 7%          | Race                            | #       | %        | State Avg    |
|                   |          |        |             | White/Caucasian                 | 1,104   | 76%      | <b>▲</b> 63% |
| <b>Ethnicity</b>  | #        | %      | State Avg   | Black/African American          | 286     | 20%      | 17%          |
| Non-Hispanic      | 980      | 67%    | 70%         | Unknown                         | 46      | 3%       | 5%           |
| Hisp-Puerto Rican | 370      | 25%    | <b>12</b> % | Hawaiian/Other Pacific Islander | 8       | 1%       | 0%           |
| Hispanic-Other    | 90       | 6%     | 8%          | Am. Indian/Native Alaskan       | 7       | 0%       | 1%           |
| Hispanic-Mexican  | 9        | 1%     | 1%          | Asian                           | 3       | 0%       | 1%           |
|                   |          |        |             | Other                           | 1       | 0%       | <b>▼</b> 13% |
| Hispanic-Cuban    | 3        | 0%     | 0%          | Multiple Races                  |         |          | 1%           |
| Unknown           | 3        | 0%     | 9%          |                                 |         |          |              |
|                   |          |        | •           | <b>A</b>                        |         |          |              |
| _                 | Unique C | lients | State Avg   | ▲ > 10% Over State Avg          | > 10% ( | Jnder St | tate Avg     |

#### **Bridgeport IOP Clinic 942350**

Liberation Programs

Addiction - IOP - Standard IOP

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

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

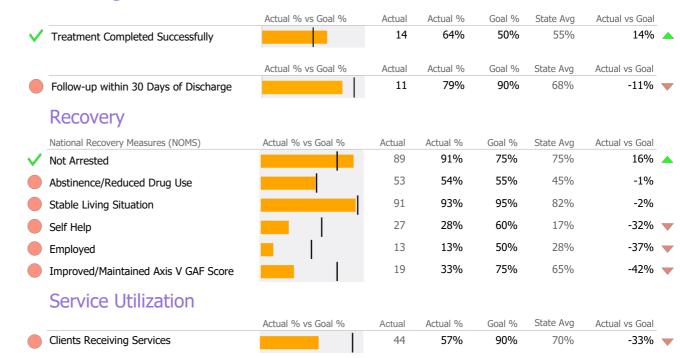
#### **Program Activity**

| Measure                      | Actual | 1 Yr Ago | Variance % |   |
|------------------------------|--------|----------|------------|---|
| Unique Clients               | 96     | 63       | 52%        | • |
| Admits                       | 56     | 55       | 2%         |   |
| Discharges                   | 22     | 44       | -50%       | • |
| Service Hours                | -      | -        |            |   |
| Social Rehab/PHP/IOP<br>Days | 653    | 1,015    | -36%       | • |

#### **Data Submission Quality**

| Data Entry               | F | Actual | State Avg |
|--------------------------|---|--------|-----------|
| ✓ Valid NOMS Data        |   | 99%    | 95%       |
| ✓ Valid TEDS Data        |   | 100%   | 96%       |
| On-Time Periodic         |   | Actual | State Avg |
| 6 Month Updates          |   | 0%     | 1%        |
|                          |   |        |           |
| Co-occurring             |   | Actual | State Avg |
| MH Screen Complete       |   | 100%   | 91%       |
| SA Screen Complete       |   | 100%   | 91%       |
|                          |   |        |           |
| Diagnosis                |   | Actual | State Avg |
| Valid Axis I Diagnosis   |   | 100%   | 100%      |
| ✓ Valid Axis V GAF Score |   | 100%   | 100%      |
|                          |   |        |           |

#### **Discharge Outcomes**







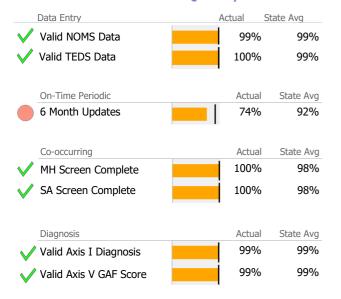
<sup>\*</sup> State Avg based on 50 Active Standard IOP Programs

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

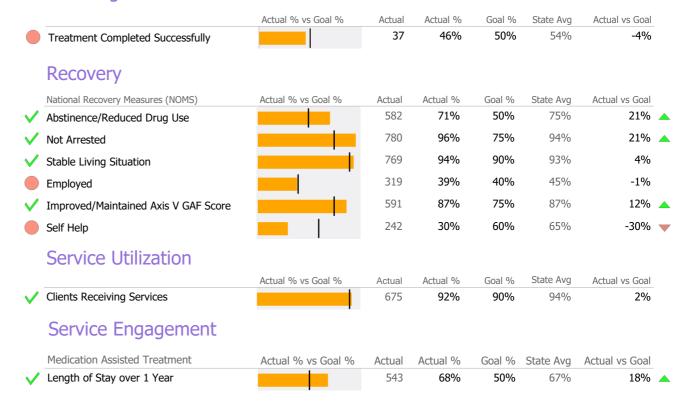
#### **Program Activity**

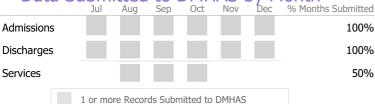
| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 804    | 682      | 18%        | • |
| Admits         | 163    | 109      | 50%        | • |
| Discharges     | 81     | 103      | -21%       | • |
| Service Hours  | 2,858  | 4,343    | -34%       | • |

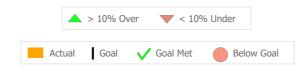
#### **Data Submission Quality**



#### Discharge Outcomes







<sup>\*</sup> State Avg based on 36 Active Methadone Maintenance Programs

#### **Bridgeport Outpat.Clinic942200**

**Liberation Programs** 

Addiction - Outpatient - Standard Outpatient

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

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

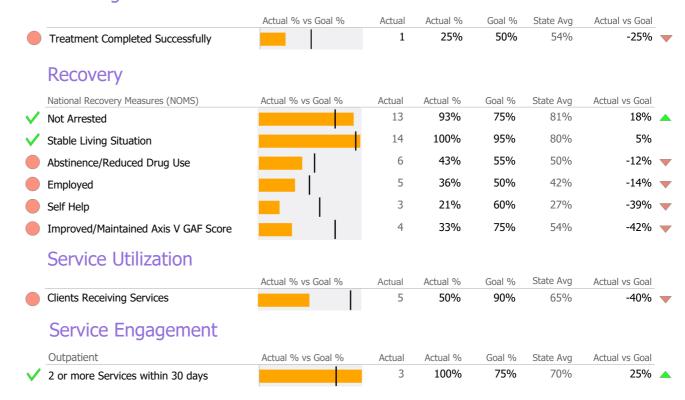
#### **Program Activity**

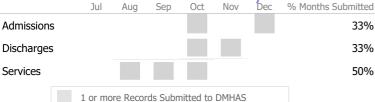
| Measure        | Actual | 1 Yr Ago | Variance % |                |
|----------------|--------|----------|------------|----------------|
| Unique Clients | 14     | 16       | -13%       | $\blacksquare$ |
| Admits         | 3      | 13       | -77%       | •              |
| Discharges     | 4      | 10       | -60%       | •              |
| Service Hours  | 38     | 134      | -71%       | •              |

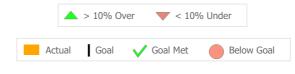
#### **Data Submission Quality**

| Data Entry               | Actual S | State Avg |
|--------------------------|----------|-----------|
| ✓ Valid NOMS Data        | 97%      | 92%       |
| ✓ Valid TEDS Data        | 100%     | 90%       |
| On-Time Periodic         | Actual   | Ctata Ava |
| OII-Time Periodic        | Actual   | State Avg |
| 6 Month Updates          | 0%       | 24%       |
|                          |          |           |
| Co-occurring             | Actual   | State Avg |
| ✓ MH Screen Complete     | 100%     | 86%       |
| ✓ SA Screen Complete     | 100%     | 98%       |
|                          |          |           |
| Diagnosis                | Actual   | State Avg |
| ✓ Valid Axis I Diagnosis | 100%     | 99%       |
| ✓ Valid Axis V GAF Score | 100%     | 97%       |

#### **Discharge Outcomes**







<sup>\*</sup> State Avg based on 113 Active Standard Outpatient Programs

#### Families In Recovery 322400

Liberation Programs

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

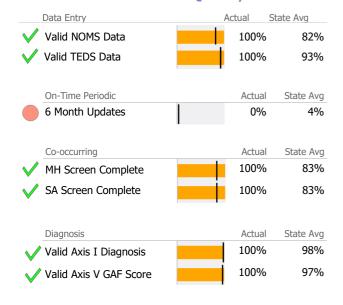
#### Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

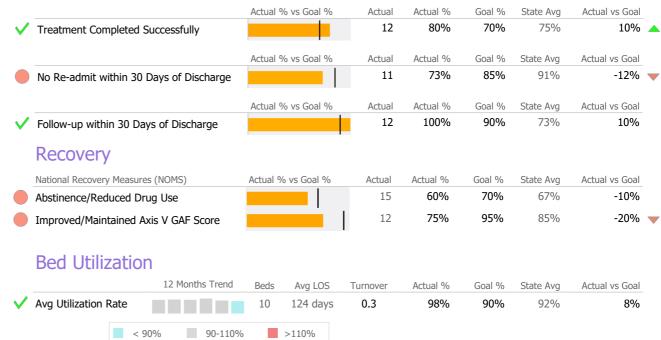
#### **Program Activity**

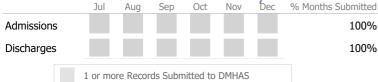
| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 25     | 29       | -14%       | • |
| Admits         | 15     | 19       | -21%       | • |
| Discharges     | 15     | 19       | -21%       | • |
| Bed Days       | 1,806  | 1,806    | 0%         |   |

#### **Data Submission Quality**



# Discharge Outcomes







<sup>\*</sup> State Avg based on 27 Active Intermediate/Long Term Res.Tx 3.5 Programs

#### **Family and Youth Options 300039**

**Liberation Programs** 

Addiction - Outpatient - Standard Outpatient

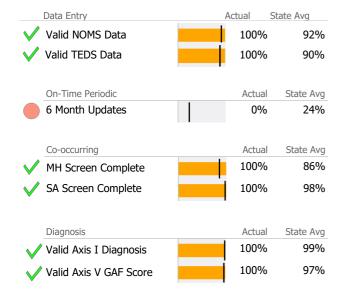
#### Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

#### **Program Activity**

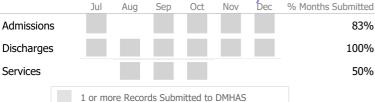
| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 32     | 25       | 28%        | • |
| Admits         | 12     | 10       | 20%        | • |
| Discharges     | 14     | 10       | 40%        | • |
| Service Hours  | 101    | 169      | -40%       | • |

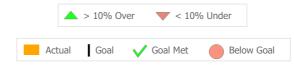
# **Data Submission Quality**



#### **Discharge Outcomes**

|          |                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|----------|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| <b>V</b> | Treatment Completed Successfully     |                    | 13     | 93%      | 50%    | 54%       | 43%            | 4 |
|          | Recovery                             |                    |        |          |        |           |                |   |
|          | National Recovery Measures (NOMS)    | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| <b>V</b> | Not Arrested                         |                    | 27     | 82%      | 75%    | 81%       | 7%             |   |
| <b>V</b> | Stable Living Situation              |                    | 32     | 97%      | 95%    | 80%       | 2%             |   |
|          | Abstinence/Reduced Drug Use          |                    | 16     | 48%      | 55%    | 50%       | -7%            |   |
|          | Self Help                            |                    | 15     | 45%      | 60%    | 27%       | -15%           |   |
|          | Employed                             |                    | 7      | 21%      | 50%    | 42%       | -29%           |   |
|          | Improved/Maintained Axis V GAF Score |                    | 14     | 61%      | 75%    | 54%       | -14%           |   |
|          | Service Utilization                  |                    |        |          |        |           |                |   |
|          |                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|          | Clients Receiving Services           |                    | 13     | 68%      | 90%    | 65%       | -22%           |   |
|          | Service Engagement                   |                    |        |          |        |           |                |   |
|          | Outpatient                           | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| <b>V</b> | 2 or more Services within 30 days    |                    | 9      | 75%      | 75%    | 70%       | 0%             |   |





<sup>\*</sup> State Avg based on 113 Active Standard Outpatient Programs

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

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

# **Program Activity**

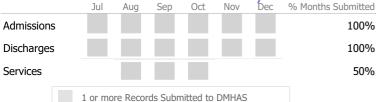
| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 52     | 50       | 4%         |   |
| Admits         | 25     | 30       | -17%       | • |
| Discharges     | 24     | 34       | -29%       | • |
| Service Hours  | 330    | 588      | -44%       | • |

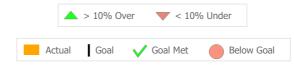
## **Data Submission Quality**

| Data Entry               | Actual | State Avg      |
|--------------------------|--------|----------------|
| ✓ Valid NOMS Data        | 98     | 8% 92%         |
| ✓ Valid TEDS Data        | 100    | 0% 90%         |
|                          |        |                |
| On-Time Periodic         | Ac     | tual State Avg |
| 6 Month Updates          |        | 0% 24%         |
|                          |        |                |
| Co-occurring             | Ac     | tual State Avg |
| ✓ MH Screen Complete     | 100    | 0% 86%         |
| ✓ SA Screen Complete     | 100    | 0% 98%         |
|                          |        |                |
| Diagnosis                | Act    | tual State Avg |
| ✓ Valid Axis I Diagnosis | 100    | 0% 99%         |
| ✓ Valid Axis V GAF Score | 100    | 0% 97%         |

#### **Discharge Outcomes**

|          |                                 | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|----------|---------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
| ✓ Treatr | ment Completed Successfully     |                    | 16     | 67%      | 50%    | 54%       | 17%            | 4 |
| Rec      | covery                          |                    |        |          |        |           |                |   |
| Nationa  | al Recovery Measures (NOMS)     | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Emplo    | yed                             |                    | 38     | 73%      | 50%    | 42%       | 23%            |   |
| ✓ Abstin | ence/Reduced Drug Use           |                    | 32     | 62%      | 55%    | 50%       | 7%             |   |
| ✓ Not Ar | rested                          |                    | 40     | 77%      | 75%    | 81%       | 2%             |   |
| Stable   | Living Situation                |                    | 49     | 94%      | 95%    | 80%       | -1%            |   |
| Impro    | ved/Maintained Axis V GAF Score |                    | 18     | 50%      | 75%    | 54%       | -25%           | _ |
| Self H   | elp                             | <u> </u>           | 8      | 15%      | 60%    | 27%       | -45%           |   |
| Ser      | vice Utilization                |                    |        |          |        |           |                |   |
|          |                                 | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| Clients  | s Receiving Services            |                    | 17     | 61%      | 90%    | 65%       | -29%           |   |
| Ser      | vice Engagement                 |                    |        |          |        |           |                |   |
| Outpa    | tient                           | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| 2 or m   | nore Services within 30 days    |                    | 18     | 72%      | 75%    | 70%       | -3%            |   |





<sup>\*</sup> State Avg based on 113 Active Standard Outpatient Programs

#### **Liberation House-CSSD 10036C**

Liberation Programs

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

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

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 61     | 46       | 33%        | • |
| Admits         | 41     | 29       | 41%        | • |
| Discharges     | 39     | 29       | 34%        | • |
| Bed Days       | 3,719  | 3,336    | 11%        | • |

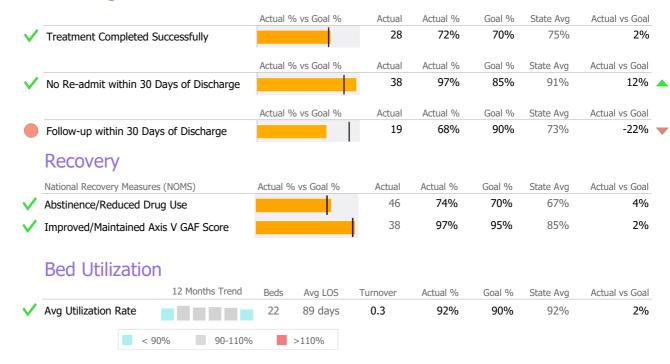
## **Data Submission Quality**

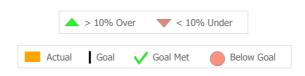
| Data Entry               | Actual | State Avg    |
|--------------------------|--------|--------------|
| ✓ Valid NOMS Data        | 1000   | % 82%        |
| ✓ Valid TEDS Data        | 1000   | % 93%        |
|                          |        |              |
| On-Time Periodic         | Actu   | al State Avg |
| 6 Month Updates          | N/     | /A 4%        |
| Co-occurring             | Actu   | al State Avg |
| ✓ MH Screen Complete     | 1000   | 3            |
| ✓ SA Screen Complete     | 1000   | % 83%        |
|                          |        |              |
| Diagnosis                | Actu   | al State Avg |
| Valid Axis I Diagnosis   | 1000   | % 98%        |
| ✓ Valid Axis V GAF Score | 1000   | % 97%        |

#### Data Submitted to DMHAS by Month

| Data       | Jul     | Aug       | Sep    | Oct       | Nov  | Dec | % Months Submitted |
|------------|---------|-----------|--------|-----------|------|-----|--------------------|
| Admissions |         |           |        |           |      |     | 100%               |
| Discharges |         |           |        |           |      |     | 100%               |
|            | 1 or mo | re Record | ls Sub | mitted to | DMHA | S   |                    |

#### **Discharge Outcomes**





<sup>\*</sup> State Avg based on 27 Active Intermediate/Long Term Res.Tx 3.5 Programs

#### **Liberation House-DMHAS 100363**

Liberation Programs

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

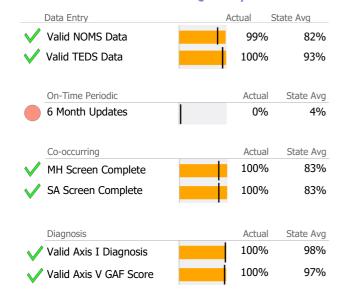
#### Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

#### **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 113    | 94       | 20%        | • |
| Admits         | 77     | 66       | 17%        | • |
| Discharges     | 74     | 59       | 25%        | • |
| Bed Days       | 6,592  | 5,475    | 20%        | • |

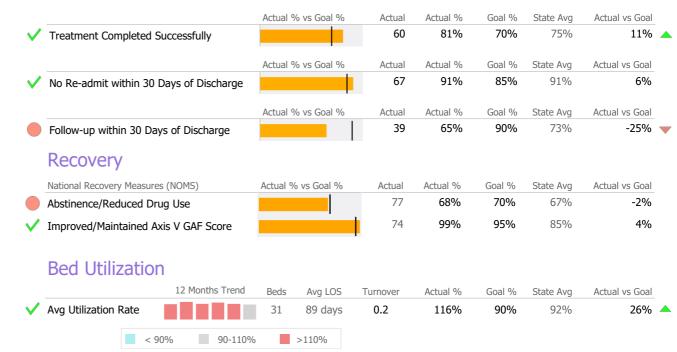
# **Data Submission Quality**

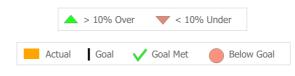


#### Data Submitted to DMHAS by Month

|            | Jul     | Aug        | Sep    | Oct      | Nov    | Dec | % Months Submitted |
|------------|---------|------------|--------|----------|--------|-----|--------------------|
| Admissions |         |            |        |          |        |     | 100%               |
| Discharges |         |            |        |          |        |     | 100%               |
|            | 1 or mo | ore Record | ls Sub | mitted t | o DMHA | S   |                    |

#### **Discharge Outcomes**





<sup>\*</sup> State Avg based on 27 Active Intermediate/Long Term Res.Tx 3.5 Programs

#### **Liberation Intensive OP 322350**

**Liberation Programs** 

Addiction - IOP - Standard IOP

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

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

# **Program Activity**

| Measure                      | Actual | 1 Yr Ago | Variance %    |
|------------------------------|--------|----------|---------------|
| Unique Clients               | 100    | 73       | 37% 🔺         |
| Admits                       | 74     | 61       | 21% 🔺         |
| Discharges                   | 69     | 56       | 23% 🔺         |
| Social Rehab/PHP/IOP<br>Days | 505    | 883      | -43% <b>▼</b> |

# **Data Submission Quality**

| Data Entry               | Actual | State Avg   |
|--------------------------|--------|-------------|
| ✓ Valid NOMS Data        | 98%    | 95%         |
| ✓ Valid TEDS Data        | 100%   | 96%         |
| On-Time Periodic         | Actua  | l State Avg |
| 6 Month Updates          | 0%     | 1%          |
|                          |        |             |
| Co-occurring             | Actua  | l State Avg |
| ✓ MH Screen Complete     | 100%   | 91%         |
| ✓ SA Screen Complete     | 100%   | 91%         |
|                          |        |             |
| Diagnosis                | Actua  | l State Avg |
| ✓ Valid Axis I Diagnosis | 100%   | 100%        |
| ✓ Valid Axis V GAF Score | 100%   | 100%        |

#### Data Submitted to DMHAS by Month

|            |   | Jul   | Aug        | Sep    |     | Oct   |      | Nov | _ | Dec | % Months Submitted |
|------------|---|-------|------------|--------|-----|-------|------|-----|---|-----|--------------------|
| Admissions |   |       |            |        |     |       |      |     |   |     | 100%               |
| Discharges |   |       |            |        |     |       |      |     |   |     | 100%               |
|            | 1 | or mo | ore Record | ls Sub | mit | ted t | o Di | МНА | S |     |                    |

#### **Discharge Outcomes**

|          |                                       | Actual % vs Goal %   | Actual | Actual %  | Goal % | State Avg     | Actual vs Goal   |  |
|----------|---------------------------------------|----------------------|--------|-----------|--------|---------------|------------------|--|
| <b>V</b> | Treatment Completed Successfully      |                      | 38     | 55%       | 50%    | 55%           | 5%               |  |
|          |                                       | Astro-10/ as Casl 0/ | A -t1  | A -t 1 0/ | C1.0/  | Charles Asses | A street on Cool |  |
|          |                                       | Actual % vs Goal %   | Actual | Actual %  | Goal % | State Avg     | Actual vs Goal   |  |
|          | Follow-up within 30 Days of Discharge |                      | 26     | 68%       | 90%    | 68%           | -22%             |  |
|          | Recovery                              |                      |        |           |        |               |                  |  |
|          | National Recovery Measures (NOMS)     | Actual % vs Goal %   | Actual | Actual %  | Goal % | State Avg     | Actual vs Goal   |  |
| <b>V</b> | Not Arrested                          |                      | 83     | 77%       | 75%    | 75%           | 2%               |  |
|          | Abstinence/Reduced Drug Use           |                      | 52     | 48%       | 55%    | 45%           | -7%              |  |
|          | Self Help                             |                      | 55     | 51%       | 60%    | 17%           | -9%              |  |
|          | Employed                              |                      | 27     | 25%       | 50%    | 28%           | -25%             |  |
|          | Stable Living Situation               |                      | 76     | 70%       | 95%    | 82%           | -25%             |  |
|          | Improved/Maintained Axis V GAF Score  |                      | 50     | 58%       | 75%    | 65%           | -17%             |  |



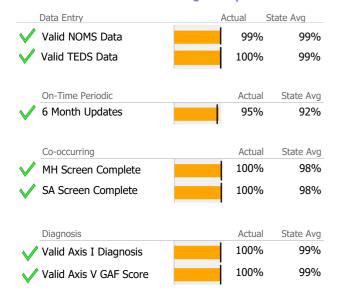
<sup>\*</sup> State Avg based on 50 Active Standard IOP Programs

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

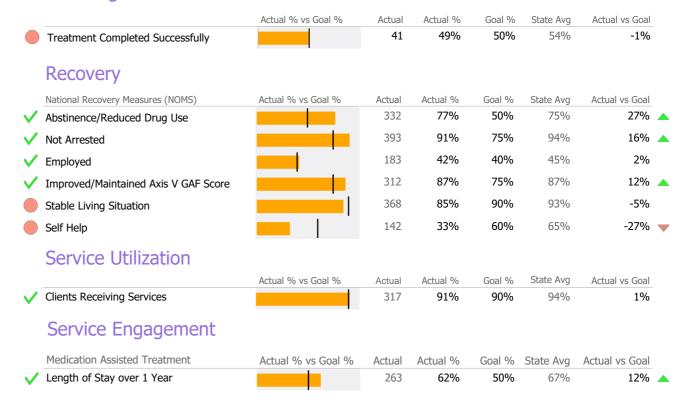
#### **Program Activity**

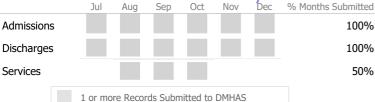
| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 421    | 406      | 4%         |
| Admits         | 106    | 100      | 6%         |
| Discharges     | 83     | 87       | -5%        |
| Service Hours  | 1,610  | 1,998    | -19%       |

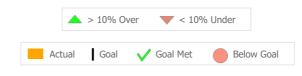
#### **Data Submission Quality**



#### Discharge Outcomes







<sup>\*</sup> State Avg based on 36 Active Methadone Maintenance Programs

#### **SOR Recovery Coach - MM**

**Liberation Programs** 

Addiction - Recovery Support - Peer Based Mentoring

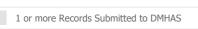
#### Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

# **Program Activity**

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

Data Submitted to DMHAS by Month
Jul Aug Sep Oct Nov Dec % Months Submitted Admissions 0% Discharges 0% 1 or more Records Submitted to DMHAS





<sup>\*</sup> State Avg based on 9 Active Peer Based Mentoring Programs

#### **SOR- Recovery Coach - Outreach**

**Liberation Programs** 

Addiction - Recovery Support - Peer Based Mentoring

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

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

#### **Program Activity**

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

#### **Data Submission Quality**



Data Submitted to DMHAS by Month
Jul Aug Sep Oct Nov Dec % Months Submitted Admissions 0% Discharges 0% 1 or more Records Submitted to DMHAS



<sup>\*</sup> State Avg based on 9 Active Peer Based Mentoring Programs

#### **SOR-MAT OP**

**Liberation Programs** 

Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

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

Reporting Period: July 2019 - December 2019 (Data as of Apr 06, 2020)

#### **Program Activity**

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

### **Data Submission Quality**

| Valid NOMS Data    |   | N/A    | 93%       |
|--------------------|---|--------|-----------|
| Valid TEDS Data    |   | N/A    | 97%       |
| ,                  |   |        |           |
| On-Time Periodic   |   | Actual | State Avg |
| 6 Month Updates    |   | N/A    | 31%       |
|                    |   |        |           |
| Co-occurring       |   | Actual | State Avg |
| MH Screen Complete |   | N/A    | 81%       |
| SA Screen Complete | • | N/A    | 93%       |

#### **Discharge Outcomes**

|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |               |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|---------------|
| Treatment Completed Successfully     |                    | N/A    | N/A      | 50%    | 45%       | N/A            |               |
| Recovery                             |                    |        |          |        |           |                |               |
| National Recovery Measures (NOMS)    | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |               |
| Abstinence/Reduced Drug Use          |                    | N/A    | N/A      | 55%    | 50%       | -55%           | 7             |
| Employed                             | ľ                  | N/A    | N/A      | 50%    | 32%       | -50%           | _             |
| Improved/Maintained Axis V GAF Score |                    | N/A    | N/A      | 75%    | 51%       | -75%           | $\overline{}$ |
| Not Arrested                         |                    | N/A    | N/A      | 75%    | 71%       | -75%           | $\overline{}$ |
| Self Help                            |                    | N/A    | N/A      | 60%    | 26%       | -60%           | 7             |
| Stable Living Situation              | · 1                | N/A    | N/A      | 95%    | 73%       | -95%           | <b>—</b>      |
| Service Utilization                  |                    |        |          |        |           |                |               |
|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |               |
| Clients Receiving Services           |                    | N/A    | N/A      | 90%    | 55%       | N/A            | _             |

Data Submitted to DMHAS by Month
Jul Aug Sep Oct Nov Dec % Months Submitted

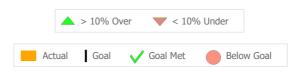
Admissions

Discharges

Oct Nov Dec % Months Submitted

0%

1 or more Records Submitted to DMHAS



<sup>\*</sup> State Avg based on 23 Active Buprenorphine Maintenance Programs