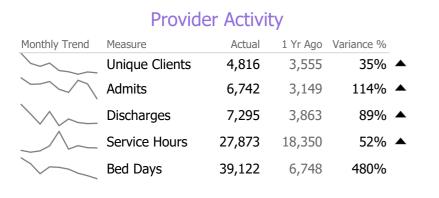
### InterCommunity Inc.

East Hartford, CT

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

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)



▲ > 10% Over 1 Yr Ago

▼ > 10% Under 1Yr Ago

#### Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Heal	lth		
	Intake	1,753	25.2%
	Outpatient	1,509	21.7%
	Community Support	547	7.9%
	Employment Services	140	2.0%
	Social Rehabilitation	82	1.2%
	Crisis Services	68	1.0%
	ACT	51	0.7%
	Case Management	44	0.6%
	Residential Services	18	0.3%
	Consultation	17	0.2%
Addiction			
	Residential Services	1,964	28.2%
	Outpatient	354	5.1%
	Employment Services	258	3.7%
Forensic SA			
	Case Management	144	2.1%
For	ensics Community-based	16	0.2%

	Consumer Satisfaction Survey		(Based on 281 FY19 Surveys)			
	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg	
$\checkmark$	Overall		93%	80%	91%	
$\checkmark$	Participation in Treatment		93%	80%	92%	
$\checkmark$	Respect		91%	80%	91%	
$\checkmark$	General Satisfaction		91%	80%	92%	
$\checkmark$	Quality and Appropriateness		91%	80%	93%	
$\checkmark$	Access		86%	80%	88%	
	Outcome		79%	80%	83%	
	Recovery		72%	80%	79%	
	Satisfied % Goal %	6 0-80% 80-1	00% 🗸 Goal	Met 🛛 🕘 Ur	nder Goal	

### **Client Demographics**

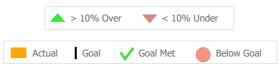
Age	#	%	State Avg	Gender	#	%	State Avg
18-25	450	9%	11%	Male	2,942	61%	60%
26-34	1,110	23%	23%	Female	1,868	39%	40%
35-44	1,155	24%	22%	Transgender			0%
45-54	1,052	22%	20%				
55-64	812	17%	18%				
65+	223	5%	6%	Race	#	%	State Avg
				White/Caucasian	2,272	47%	▼ 62%
Ethnicity	#	%	State Avg	Unknown 📙	1,301	27%	<b>▲</b> 5%
Non-Hispanic	2,780	58%	▼ 70%	Black/African American	995	21%	17%
Hispanic-Other	1,159	24%	▲ 8%	Hawaiian/Other Pacific Islander	168	3%	0%
Unknown	875	18%	10%	Asian	30	1%	1%
Hisp-Puerto Rican	2	0%	▼ 12%	Multiple Races	21	0%	1%
· ·	2	070		Other	17	0%	<b>▼</b> 13%
Hispanic-Cuban			0%	Am. Indian/Native Alaskan	12	0%	1%
Hispanic-Mexican			1%				
			•	<b>A</b>			_
	Jnique C	lients	State Avg	▲ > 10% Over State Avg	> 10% L	Inder St	ate Avg

### Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	17	59	-71% 🔻	
Admits	10	2	400% 🔺	
Discharges	-	59	-100% 🔻	
Service Hours	35	4		

# Data Submitted to Sep Oct Nov Dec Jan Feb





\* State Avg based on 10 Active Consultation Programs

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	38	42	-10%
Admits	8	27	-70% 🔻
Discharges	8	31	-74% 🔻
Service Hours	3,009	1,901	58% 🔺

## Data Submission Quality

Valid Axis V GAF Score

Data Entry		Actual S	tate Avg
Valid NOMS Data		40%	64%
On-Time Periodic		Actual	State Avg
🧹 6 Month Updates		100%	90%
•			
Co-occurring		Actual	State Avg
MH Screen Complete		19%	29%
SA Screen Complete		21%	30%
Sit Server complete	-	2170	5070
Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		100%	99%

### **Discharge Outcomes**

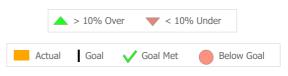
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		7	88%	65%	54%	23%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	No Re-admit within 30 Days of Discharge		7	100%	85%	90%	15%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		3	43%	90%	55%	-47%	▼
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Social Support		38	100%	60%	78%	40%	
$\checkmark$	Improved/Maintained Axis V GAF Score		30	86%	85%	58%	1%	
	Employed		2	5%	15%	14%	-10%	
	Stable Living Situation		10	26%	60%	89%	-34%	▼
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		30	100%	90%	99%	10%	

#### Data Submitted to DMHAS by Month



100%

89%

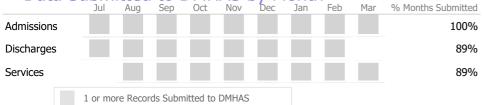


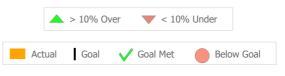
\* State Avg based on 23 Active Assertive Community Treatment Programs

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	144		
Admits	106	-	
Discharges	72	-	
Service Hours	777	-	

### Data Submitted to DMHAS by Month



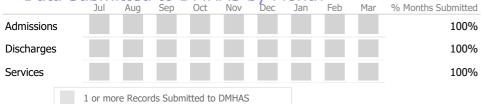


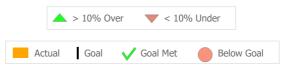
\* State Avg based on 2 Active Outreach & Engagement Programs

### Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,753	250	601%	
Admits	1,781	251	610%	
Discharges	1,792	202	787%	
Service Hours	1,831	262		

#### Data Submitted to DMHAS by Month





\* State Avg based on 17 Active Central Intake Programs

Valid Axis I Diagnosis

Valid Axis V GAF Score

InterCommunity Inc. Mental Health - Outpatient - Standard Outpatient

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

### Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	425	475	-11%	▼
Admits	111	416	-73%	▼
Discharges	69	299	-77%	▼
Service Hours	6,401	1,944		

## Data Submission Quality

	Data Entry	 Actual S	tate Avg
	Valid NOMS Data	38%	85%
	On-Time Periodic	Actual	State Avg
$\checkmark$	6 Month Updates	100%	58%
	Co-occurring	Actual	State Avg
	Co-occurring MH Screen Complete	Actual 23%	State Avg 59%
	5		
	MH Screen Complete	23%	59%

### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		47	68%	50%	40%	18%	
		•						
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		426	99%	60%	64%	39%	
$\checkmark$	Improved/Maintained Axis V GAF Score		352	96%	75%	52%	21%	
	Employed		36	8%	30%	25%	-22%	
	Stable Living Situation	<b>i</b> 1	58	13%	95%	81%	-82%	-
	Service Utilization							
	Service Stinzation	Actual % vs Goal %	A	A stuel 0/	Cool 0/	State Avg	A atrual us Casi	
	Clients Receiving Services	Actual % VS Goal %	Actual 357	Actual % 99%	Goal %	85%	Actual vs Goal 9%	
V	Clients Receiving Services		557	5570	9070	0370	570	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		68	62%	75%	76%	-13%	

#### Data Submitted to DMHAS by Month

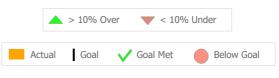
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%
	1 or mo	ore Reco	ds Subn	nitted to	DMHAS					

99%

99%

97%

90%



\* State Avg based on 89 Active Standard Outpatient Programs

## Program Activity

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

### Service Engagement

Actual	1 Yr Ago	Variance %	Homeless Outreach	Actual 0/ No Coal 0/	Actual	Actual 0/	Cool 0/	Ctoto Ave	Actual via Coal	
2			Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2			at least 1 Service within 180 days		0	0%	50%	93%	-50%	
-	-									
2	-									

### Data Submitted to DMHAS by Month

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	;										0%
Discharges											22%
Services											22%
	1 0	or more	Record	ls Submi	tted to I	OMHAS					

	<b>▲</b> >	10% Ove	r		< 10% l	Jnder	r	
Act	tual	Goal	<b>~</b>	Goal I	Met		Below	Goal

\* State Avg based on 46 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 2019 - March 2020 (Data as of Jul 15, 2020)

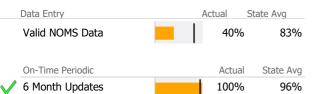
### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	140	101	39%	
Admits	95	36	164%	
Discharges	68	72	-6%	
Service Hours	1,521	1,258	21%	

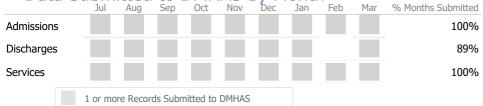
#### Recovery

	·						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Employed		38	26%	35%	43%	-9%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Clients Receiving Services		81	100%	90%	96%	10%

## Data Submission Quality



#### Data Submitted to DMHAS by Month





\* State Avg based on 42 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 2019 - March 2020 (Data as of Jul 15, 2020)

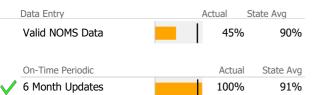
### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	21	-14% 🔻	
Admits	3	6	-50% 🔻	
Discharges	2	21	-90% 🔻	
Service Hours	404	328	23% 🔺	

#### Recovery

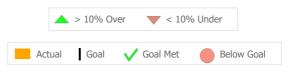
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Stable Living Situation		15	83%	85%	89%	-2%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Clients Receiving Services		16	100%	90%	96%	10%

## Data Submission Quality



#### Data Submitted to DMHAS by Month





\* State Avg based on 98 Active Supportive Housing – Scattered Site Programs

#### CCAR - Hartford

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

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

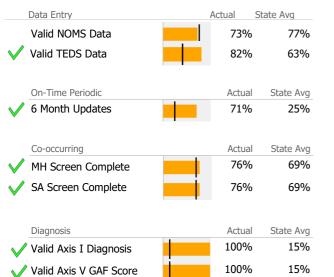
### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	160	16	900% 🔺	•
Admits	81	16	406% 🔺	•
Discharges	143	-		

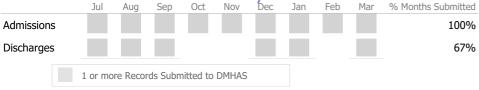
#### Recovery

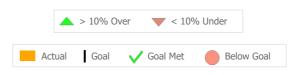
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		52	31%	35%	29%	-4%

### Data Submission Quality



#### Data Submitted to DMHAS by Month





\* State Avg based on 15 Active Employment Services Programs

InterCommunity Inc.

Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	46		
Admits	31	-	
Discharges	34	-	
Service Hours	22	-	
Bed Days	3,921	-	

## Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	73%	75%
Valid TEDS Data	93%	94%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	N/A
Co-occurring	Actual	State Avg
MH Screen Complete	69%	70%
SA Screen Complete	69%	70%
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	100%	100%

### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment (	Completed Successfully		21	62%	85%	68%	-23%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admi	it within 30 Days of Discharge		30	88%	85%	85%	3%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up w	vithin 30 Days of Discharge		6	29%	90%	71%	-61%
Recove	ery						
National Reco	very Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed			34	74%	60%	48%	14%
Improved/M	laintained Axis V GAF Score		34	100%	75%	91%	25%
Abstinence/I	Reduced Drug Use		25	54%	70%	88%	-16%
Sorvico	Utilization						
Service		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	iving Services	Actual % vs Goal %	Actual	Actual % 100%	Goal % 90%	State Avg 66%	Actual vs Goal
Clients Rece			12	100%	90%	66%	10%
Clients Rece	iving Services ilization 12 Months Trend						
Clients Rece Bed Ut	iving Services ilization 12 Months Trend	Beds Avg LOS 15 131 days	12 Turnover	100% Actual %	<b>90%</b> Goal %	66% State Avg	10% Actual vs Goal

\* State Avg based on 9 Active Transitional/Halfway House 3.1 Programs

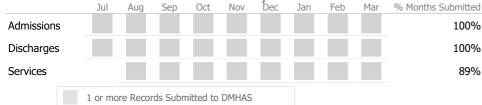
Below Goal

V Goal Met

Actual

Goal

### Data Submitted to DMHAS by Month



#### 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 2019 - March 2020 (Data as of Jul 15, 2020)

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	82	89	-8%
Admits	32	23	39% 🔺
Discharges	3	89	-97% 🔻
Social Rehab/PHP/IOP Days	0	0	

#### Service Utilization



 Data Submitted to DMHAS by Month

 Jul Aug Sep Oct Nov Dec Jan Feb Mar % Months Submitted

 Admissions
 100%

 Discharges
 33%

 Services
 10 Mar Months Submitted to DMHAS

	> 10% O	ver 💙 < 10	% Under	
Actual	Goal	V Goal Met	Belo	w Goal

\* State Avg based on 33 Active Social Rehabilitation Programs

InterCommunity Inc.

Valid Axis V GAF Score

Mental Health - Residential Services - Supervised Apartments

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

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	20	-10%	
Admits	2	3	-33%	•
Discharges	2	19	-89%	•
Bed Days	4,661	4,644	0%	

## Data Submission Quality

	Data Entry	Actual	State Avg
	Valid NOMS Data	33%	51%
	On-Time Periodic	Actual	State Avg
$\checkmark$	6 Month Updates	100%	88%
	Co-occurring	Actual	State Avg
	MH Screen Complete	52%	56%
	SA Screen Complete	52%	56%
	Diagnosis	Actual	State Avg
$\checkmark$	Valid Axis I Diagnosis	100%	99%

### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		1	50%	60%	71%	-10%	
		•						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Follow-up within 30 Days of Discharge		1	100%	90%	82%	10%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		19	100%	60%	85%	40%	
	Improved/Maintained Axis V GAF Score		17	94%	95%	63%	-1%	
	Employed		0	0%	25%	10%	-25%	
	Stable Living Situation		1	5%	95%	92%	-90%	

### **Bed Utilization**

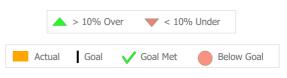
		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Avg Utilization Rate		17	342 days	0.3	100%	90%	96%	10%
	< 9	90% 90-110%		>110%					

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										22%
Discharges										22%
	1 or mo	ore Recor	ds Subr	nitted to	DMHAS					

100%

94%



\* State Avg based on 81 Active Supervised Apartments Programs

InterCommunity 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 2019 - March 2020 (Data as of Jul 15, 2020)

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	26		
Admits	17	-	
Discharges	17	-	
Service Hours	1,542	-	
Bed Days	2,584	-	

### Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	64%	83%
Valid TEDS Data	83%	94%
On-Time Periodic	 Actua	I State Avg
6 Month Updates	100%	o 40%
Co-occurring	Actua	I State Avg
MH Screen Complete	58%	85%
SA Screen Complete	58%	85%
Diagnosis	Actua	l State Avg
Valid Axis I Diagnosis	100%	100%

### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		11	65%	70%	76%	-5%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		16	94%	85%	92%	9%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		10	91%	90%	72%	1%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Improved/Maintained Axis V GAF Score		19	100%	95%	89%	5%
Abstinence/Reduced Drug Use		6	22%	70%	71%	-48%

### **Bed Utilization**

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Avg Utilization Rate		10	185 days	0.2	94%	90%	99%	4%
		< 90% 90-110%		>110%					

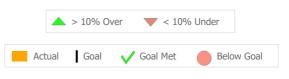
#### Data Submitted to DMHAS by Month

Valid Axis V GAF Score



100%

99%



\* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	68	94	-28%	▼
Admits	72	111	-35%	▼
Discharges	73	111	-34%	▼

#### Crisis



InterCommunity Inc.

Valid Axis I Diagnosis

Valid Axis V GAF Score

Mental Health - Community Support - CSP

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	547	329	66%	
Admits	340	213	60%	
Discharges	345	248	39%	
Service Hours	7,443	7,205	3%	

## Data Submission Quality

Data Entry		Actual S	State Avg
Valid NOMS Data		44%	70%
On-Time Periodic		Actual	State Avg
6 Month Updates		99%	85%
Co-occurring		Actual	State Avg
MH Screen Complete		21%	30%
SA Screen Complete	<b>_</b> İ	21%	30%
Diagnosis		Actual	State Avg

#### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		338	98%	65%	63%	33%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		591	100%	60%	82%	40%	
$\checkmark$	Improved/Maintained Axis V GAF Score		453	88%	65%	66%	23%	
	Employed	<b>_</b>	70	12%	20%	13%	-8%	
	Stable Living Situation	I	208	35%	80%	86%	-45%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		253	100%	90%	99%	10%	

#### Data Submitted to DMHAS by Month

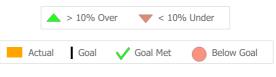
	J	ul Au	ig Sep	o Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%
	1 0	more Re	ecords Su	bmitted	to DMHAS	5				

100%

100%

98%

96%



\* State Avg based on 36 Active CSP Programs

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	465		
Admits	602	-	
Discharges	610	-	
Bed Days	8,312	-	

### Discharge Outcomes



#### Data Submitted to DMHAS by Month



	> 10% 0	ver <b>v</b> < 10 <sup>6</sup>	% Under	
Actual	Goal	V Goal Met	Belo	w Goal

\* State Avg based on 13 Active Recovery House Programs

#### NHDTP

InterCommunity Inc. Mental Health - Case Management - Standard Case Management

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	24	15	60%	
Admits	16	15	7%	
Discharges	10	9	11%	
Service Hours	219	6		

## Data Submission Quality

6 Month Updates	0%	63%
On-Time Periodic	Actual	State Avg
Valid NOMS Data	91%	94%
Data Entry	Actual S	tate Avg

### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		10	100%	50%	57%	50%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Stable Living Situation		23	96%	80%	76%	16%	
	Social Support		12	50%	60%	71%	-10%	
	Employed		1	4%	20%	12%	-16%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		5	36%	90%	83%	-54%	▼

## Data Submitted to DMHAS by Month





\* State Avg based on 24 Active Standard Case Management Programs

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	354	199	78%	
Admits	186	199	-7%	
Discharges	303	15	1920%	
Service Hours	484	418	16%	

## Data Submission Quality

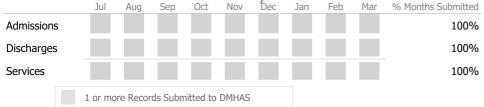
	Data Entry		Actual	State Avg
	Valid NOMS Data		68%	91%
	Valid TEDS Data		60%	90%
		•		
	On-Time Periodic		Actua	I State Avg
$\checkmark$	6 Month Updates		22%	20%
	Co-occurring		Actua	I State Avg
	MH Screen Complete		86%	88%
	SA Screen Complete		86%	98%
	Diagnosis		Actua	I State Avg
			000/	000/

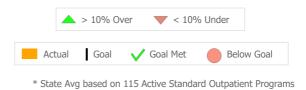
Valid Axis I Diagnosis	99%	99%
Valid Axis V GAF Score	99%	98%

### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		226	75%	50%	52%	25%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Improved/Maintained Axis V GAF Score		232	70%	75%	58%	-5%	
	Employed	I	42	11%	50%	43%	-39%	
	Stable Living Situation		197	53%	95%	82%	-42%	
	Abstinence/Reduced Drug Use		33	9%	55%	51%	-46%	
	Self Help	• ·	33	9%	60%	26%	-51%	
	Not Arrested	<b>—</b>	83	22%	75%	82%	-53%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		58	87%	90%	66%	-3%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		77	43%	75%	70%	-32%	

#### Data Submitted to DMHAS by Month





Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	1,229	2,646	-54% 🔻
Admits	477	1,437	-67% 🔻
Discharges	1,048	2,374	-56% 🔻
Service Hours	2,378	3,521	-32% 🔻

## Data Submission Quality

Data Entry		Actual S	tate Avg
Valid NOMS Data		59%	85%
On-Time Periodic		Actual	State Avg
6 Month Updates		19%	58%
	_		
Co-occurring		Actual	State Avg
MH Screen Complete		43%	59%
SA Screen Complete	i i	42%	59%
<b>.</b>			C1 1 4
Diagnosis		Actual	State Avg

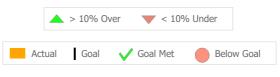


### **Discharge Outcomes**

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Treatment Completed Successfully		762	73%	50%	40%	23%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		1,260	99%	60%	64%	39%	
$\checkmark$	Improved/Maintained Axis V GAF Score		1,043	95%	75%	52%	20%	
	Employed		354	28%	30%	25%	-2%	
	Stable Living Situation		566	44%	95%	81%	-51%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		190	82%	90%	85%	-8%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		264	56%	75%	76%	-19%	

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%
	1 or more Records Submitted to DMHAS									



\* State Avg based on 89 Active Standard Outpatient Programs

InterCommunity Inc.

Addiction - Residential Services - Medically Monitored Detox 3.7D

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

### **Program Activity**

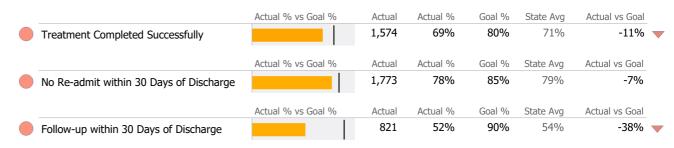
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,754	299	487%	
Admits	2,263	316	616%	
Discharges	2,278	279	716%	
Bed Days	8,898	1,271	600%	

## Data Submission Quality

Data Entry	Actual S	tate Avg
Valid NOMS Data	70%	84%
Valid TEDS Data	96%	98%
	•	
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%
Co-occurring	Actual	State Avg
🖊 MH Screen Complete	98%	98%
SA Screen Complete	97%	98%
	1	

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

#### **Discharge Outcomes**

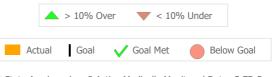


#### Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Avg Utilization Rat	e	35	4 days	0.0	92%	90%	91%	2%
		< 90% 90-110%		>110%					

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted	
Admissions										100%	
Discharges										100%	
	ore Recor										



\* State Avg based on 8 Active Medically Monitored Detox 3.7D Programs

#### **SA Jail Diversion Program**

InterCommunity Inc. Forensic SA - Forensics Community-based - Court Liaison-Jail Diversion Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

## Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16		
Admits	16	-	
Discharges	3	-	
Service Hours	24	-	

#### Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		13	100%	90%	58%	10%

Jail Diversion

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	✓ Follow-up Service within 48 hours		0	0%	0%	100%	0%
Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec Jan Feb	Mar % Months Submitted						
Admissions	56%	▲ > 10% Over	▼ < 1	0% Under			
Discharges	22%	Actual Goal 💊	/ Goal Met	Belov	v Goal		
Services	56%	* State Avg based on 5 Acti	ve Court Liai	ison-1ail Divers	ion Program	c	
1 or more Records Submitted to DMHAS		State Avg based on 5 Aca			ion rogram	5	

#### **SATEP ADRC Res Intensive950601**

InterCommunity Inc.

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

### **Program Activity**

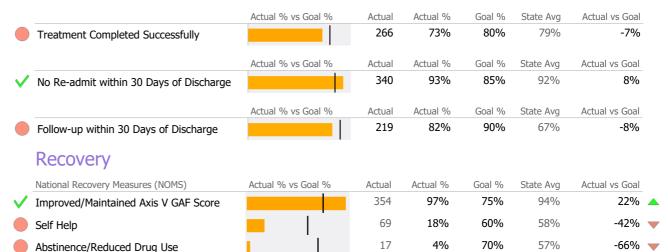
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	376	48	683%	
Admits	364	50	628%	
Discharges	366	18	1933%	
Bed Days	7,941	633	1155%	

## Data Submission Quality

Data Entry	Actual S	tate Avg
Valid NOMS Data	81%	85%
Valid TEDS Data	97%	98%
	-	
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	N/A
Co-occurring	Actual	State Avg
MH Screen Complete	100%	99%
SA Screen Complete	100%	99%
Diagnosis	Actual	State Ava

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	100%	99%

### **Discharge Outcomes**

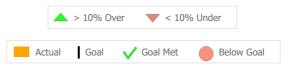


### **Bed Utilization**

			12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Avg Utilization F	Rate		28	23 days	0.1	103%	90%	98%	13%	
		< 90	% 90-110%		>110%						

#### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
	1 or mo	ore Reco	rds Subn	nitted to	DMHAS	5				



\* State Avg based on 9 Active SA Intensive Res. Rehabilitation 3.7 Programs

#### SATEP ADRC Res Intermed.950403

InterCommunity 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 2019 - March 2020 (Data as of Jul 15, 2020)

### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	49	11	345%	
Admits	39	12	225%	
Discharges	38	2	1800%	
Bed Days	2,805	200	1303%	

## Data Submission Quality

Data Entry		Actual S	tate Avg
Valid NOMS Data		81%	83%
Valid TEDS Data		97%	94%
		T	
On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	40%
	-		
Co-occurring		Actual	State Avg
V MH Screen Complete		100%	85%
V SA Screen Complete		100%	85%
Ť			

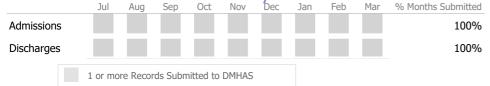
Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	100%	99%

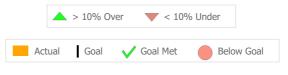
### **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		26	68%	70%	76%	-2%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		37	97%	85%	92%	12%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		20	77%	90%	72%	-13%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Improved/Maintained Axis V GAF Score		37	97%	95%	89%	2%
		1	2%	70%	71%	-68%

			12	Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Avg Utilization R	late			10	80 days	0.1	102%	90%	99%	12%	
		<	90%	90-110%		>110%						

#### Data Submitted to DMHAS by Month





\* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

#### **SOR - Employment**

InterCommunity Inc.

Addiction - Employment Services - Employment Services

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

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

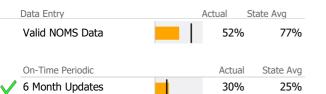
### **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	122	3	3967%	
Admits	85	3	2733%	
Discharges	5	-		
Service Hours	382	5		

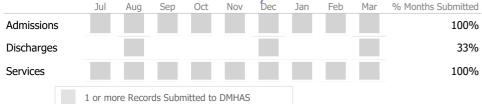
#### Recovery

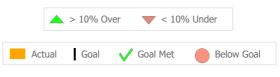
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		38	31%	35%	29%	-4%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		94	80%	90%	65%	-10%

## Data Submission Quality



## Data Submitted to DMHAS by Month





\* State Avg based on 15 Active Employment Services Programs

#### **YAS ACT - 229**

InterCommunity Inc. Mental Health - ACT - Assertive Community Treatment

Reporting Period: July 2019 - March 2020 (Data as of Jul 15, 2020)

### **Program Activity**

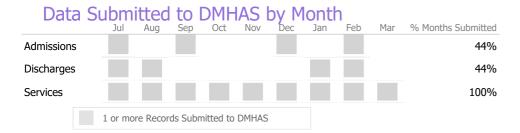
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	18	-28% 🔻	
Admits	5	13	-62% 🔻	
Discharges	4	15	-73% 🔻	
Service Hours	850	860	-1%	

## Data Submission Quality

Data Entry	Actual S	tate Avg
Valid NOMS Data	50%	64%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	90%

### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Treatment Completed Successfully		3	75%	65%	54%	10%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/	No Re-admit within 30 Days of Discharge		4	100%	85%	90%	15%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Follow-up within 30 Days of Discharge		1	33%	90%	55%	-57%
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/	Social Support		14	100%	60%	78%	40%
/	Employed	<b></b>	3	21%	15%	14%	6%
	Stable Living Situation		6	43%	60%	89%	-17%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
1	Clients Receiving Services		10	100%	90%	99%	10%



▲ > 10% Over
▼ < 10% Under</li>
Actual
Goal
✓ Goal Met
Below Goal

\* State Avg based on 23 Active Assertive Community Treatment Programs