

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---------------|----------------|--------|----------|------------|
| | Unique Clients | 2,718 | 2,860 | -5% |
| | Admits | 1,853 | 2,180 | -15% ▼ |
| | Discharges | 1,948 | 2,209 | -12% ▼ |
| | Service Hours | 34,613 | 32,515 | 6% |
| | Bed Days | 16,923 | 16,885 | 0% |

▲ > 10% Over 1 Yr Ago ▼ > 10% Under 1Yr Ago

Consumer Satisfaction Survey (Based on 350 FY19 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ Participation in Treatment | | 94% | 80% | 92% |
| ✓ Respect | | 94% | 80% | 91% |
| ✓ Overall | | 93% | 80% | 91% |
| ✓ Quality and Appropriateness | | 92% | 80% | 93% |
| ✓ Access | | 91% | 80% | 88% |
| ✓ General Satisfaction | | 90% | 80% | 92% |
| ✓ Outcome | | 83% | 80% | 83% |
| ✓ Recovery | | 81% | 80% | 79% |

Satisfied % | Goal % 0-80% 80-100% Goal Met Under Goal

Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|----------------------|---------------------------|-------|-------|
| Mental Health | Outpatient | 1,127 | 35.9% |
| | Crisis Services | 979 | 31.2% |
| | Other | 335 | 10.7% |
| | Community Support | 174 | 5.5% |
| | Intake | 149 | 4.7% |
| | Inpatient Services | 102 | 3.3% |
| | ACT | 62 | 2.0% |
| Forensic MH | Forensics Community-based | 209 | 6.7% |

Client Demographics

| Age | # | % | State Avg |
|-------|-----|-----|-----------|
| 18-25 | 296 | 11% | 11% |
| 26-34 | 432 | 16% | 23% |
| 35-44 | 485 | 18% | 22% |
| 45-54 | 540 | 20% | 20% |
| 55-64 | 609 | 22% | 18% |
| 65+ | 351 | 13% | 6% |

| Gender | # | % | State Avg |
|-------------|-------|-----|-----------|
| Male | 1,577 | 58% | 60% |
| Female | 1,140 | 42% | 40% |
| Transgender | 1 | 0% | 0% |

| Ethnicity | # | % | State Avg |
|-------------------|-------|-----|-----------|
| Non-Hispanic | 1,654 | 61% | 70% |
| Unknown | 478 | 18% | 10% |
| Hispanic-Other | 280 | 10% | 8% |
| Hisp-Puerto Rican | 276 | 10% | 12% |
| Hispanic-Mexican | 20 | 1% | 1% |
| Hispanic-Cuban | 10 | 0% | 0% |

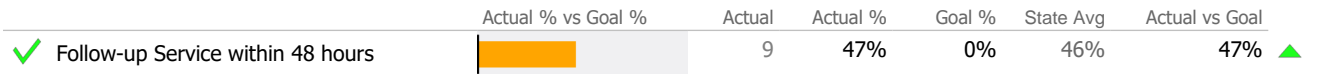
| Race | # | % | State Avg |
|---------------------------------|-----|-----|-----------|
| White/Caucasian | 850 | 37% | 62% ▼ |
| Black/African American | 802 | 35% | 17% ▲ |
| Other | 578 | 25% | 13% ▲ |
| Unknown | 31 | 1% | 5% |
| Asian | 27 | 1% | 1% |
| Multiple Races | 12 | 1% | 1% |
| Hawaiian/Other Pacific Islander | 5 | 0% | 0% |
| Am. Indian/Native Alaskan | 4 | 0% | 1% |

Unique Clients | State Avg > 10% Over State Avg > 10% Under State Avg

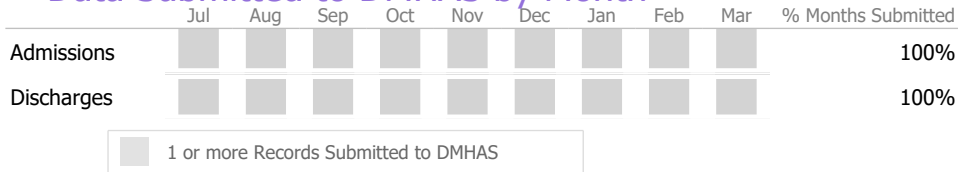
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 150 | 183 | -18% ▼ |
| Admits | 138 | 179 | -23% ▼ |
| Discharges | 142 | 180 | -21% ▼ |

Jail Diversion



Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

97 Middle/Shltr Plus

Southwest Connecticut Mental Health System

Mental Health - Other - Housing Assistance

Connecticut Dept of Mental Health and Addiction Services

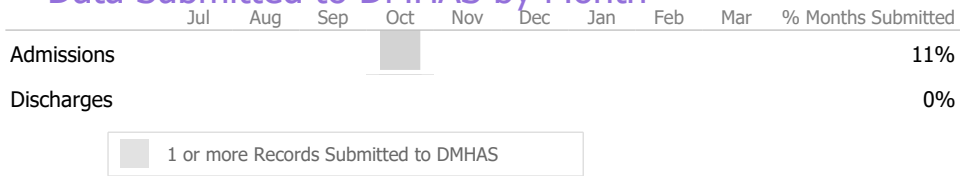
Program Quality Dashboard

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 278 | 268 | 4% |
| Admits | 1 | 28 | -96% ▼ |
| Discharges | - | 4 | -100% ▼ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 1 Active Housing Assistance Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 62 | 65 | -5% |
| Admits | 8 | 14 | -43% ▼ |
| Discharges | 12 | 11 | 9% |
| Service Hours | 2,836 | 2,222 | 28% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 64% |
| On-Time Periodic | | |
| 6 Month Updates | 96% | 90% |
| Co-occurring | | |
| MH Screen Complete | 90% | 29% |
| SA Screen Complete | 100% | 30% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 100% | 99% |
| Valid Axis V GAF Score | 100% | 89% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 9 | 75% | 65% | 54% | 10% ▲ |
| ✓ No Re-admit within 30 Days of Discharge | | 11 | 92% | 85% | 90% | 7% |
| ● Follow-up within 30 Days of Discharge | | 4 | 44% | 90% | 55% | -46% ▼ |

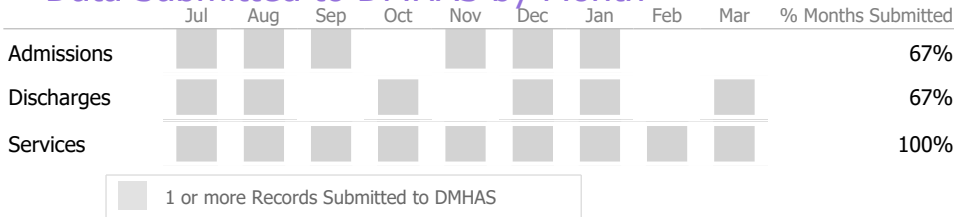
Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Stable Living Situation | | 56 | 90% | 60% | 89% | 30% ▲ |
| ✓ Social Support | | 44 | 71% | 60% | 78% | 11% ▲ |
| ● Employed | | 0 | 0% | 15% | 14% | -15% ▼ |
| ● Improved/Maintained Axis V GAF Score | | 34 | 59% | 85% | 58% | -26% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 50 | 100% | 90% | 99% | 10% |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 23 Active Assertive Community Treatment Programs

Program Activity

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

Data Submission Quality

| Data Entry | Actual | State Avg |
|--------------------|--------|-----------|
| Valid NOMS Data | | N/A 85% |
| On-Time Periodic | | |
| 6 Month Updates | | N/A 58% |
| Co-occurring | | |
| MH Screen Complete | | N/A 59% |
| SA Screen Complete | | N/A 59% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 40% | N/A |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Employed | | N/A | N/A | 30% | 25% | -30% ▼ |
| Improved/Maintained Axis V GAF Score | | N/A | N/A | 75% | 52% | -75% ▼ |
| Social Support | | N/A | N/A | 60% | 64% | -60% ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 81% | -95% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | N/A | N/A | 90% | 85% | N/A ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 89 Active Standard Outpatient Programs

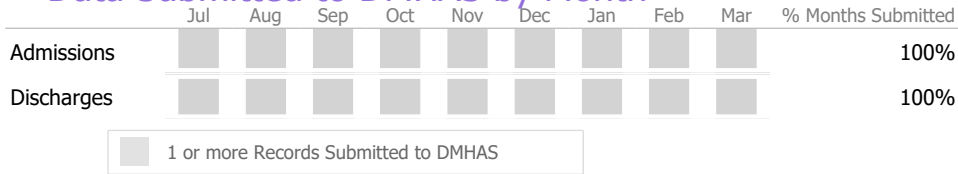
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 635 | 671 | -5% |
| Admits | 872 | 961 | -9% |
| Discharges | 873 | 961 | -9% |

Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ● Evaluation within 1.5 hours of Request | | 0 | 0% | 75% | 75% | -75% ▼ |
| ✓ Community Location Evaluation | | 80 | 100% | 80% | 92% | 20% ▲ |
| ✓ Follow-up Service within 48 hours | | 1 | 100% | 90% | 91% | 10% |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 26 Active Mobile Crisis Team Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|-----------------|--------|----------|------------|
| Unique Clients | 30 | 37 | -19% ▼ |
| Admits | 8 | 17 | -53% ▼ |
| Discharges | 7 | 14 | -50% ▼ |
| Transfers - In | 1 | 1 | 0% |
| Transfers - Out | 2 | 2 | 0% |
| Bed Days | 5,749 | 5,720 | 1% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 94% | 89% |
| On-Time Periodic | | |
| 6 Month Updates | 33% | 12% |
| Co-occurring | | |
| MH Screen Complete | 75% | 88% |
| SA Screen Complete | 100% | 100% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 100% | 99% |
| Valid Axis V GAF Score | 93% | 22% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 6 | 86% | 95% | 82% | -9% |
| No Re-admit within 30 Days of Discharge | | 7 | 100% | 85% | 90% | 15% ▲ |
| Follow-up within 30 Days of Discharge | | 6 | 100% | 90% | 60% | 10% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Improved/Maintained Axis V GAF Score | | 17 | 71% | 95% | 16% | -24% ▼ |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| Avg Utilization Rate | | 21 | 574 days | 0.3 | 100% | 90% | 90% | 10% |

■ < 90%
 ■ 90-110%
 ■ > 110%

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | ■ | ■ | ■ | ■ | | | ■ | 56% |
| Discharges | | ■ | | ■ | ■ | ■ | | | ■ | 56% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over
 ▼ < 10% Under

■ Actual
 | Goal
 ✓ Goal Met
 ● Below Goal

* State Avg based on 11 Active Acute Psychiatric Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|-----------------|--------|----------|------------|
| Unique Clients | 40 | 38 | 5% |
| Admits | 19 | 18 | 6% |
| Discharges | 18 | 17 | 6% |
| Transfers - In | 1 | - | |
| Transfers - Out | 1 | 1 | 0% |
| Bed Days | 5,731 | 5,713 | 0% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 93% | 89% |
| On-Time Periodic | | |
| 6 Month Updates | 100% | 12% |
| Co-occurring | | |
| MH Screen Complete | 88% | 88% |
| SA Screen Complete | 100% | 100% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 100% | 99% |
| Valid Axis V GAF Score | 100% | 22% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 17 | 94% | 95% | 82% | -1% |
| No Re-admit within 30 Days of Discharge | | 15 | 83% | 85% | 90% | -2% |
| Follow-up within 30 Days of Discharge | | 15 | 88% | 90% | 60% | -2% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Improved/Maintained Axis V GAF Score | | 28 | 90% | 95% | 16% | -5% |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| Avg Utilization Rate | | 21 | 513 days | 0.3 | 99% | 90% | 90% | 9% |

■ < 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 more Records Submitted to DMHAS

▲ > 10% Over
 ▼ < 10% Under

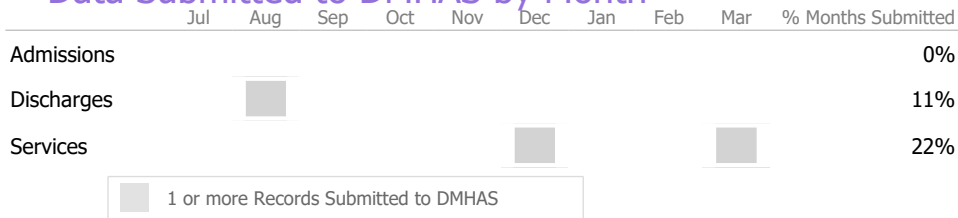
Actual
 |
 Goal
 ✓ Goal Met
 ● Below Goal

* State Avg based on 11 Active Acute Psychiatric Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 6 | 10 | -40% ▼ |
| Admits | - | 2 | -100% ▼ |
| Discharges | 1 | 2 | -50% ▼ |
| Service Hours | 4 | 2 | 67% ▲ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

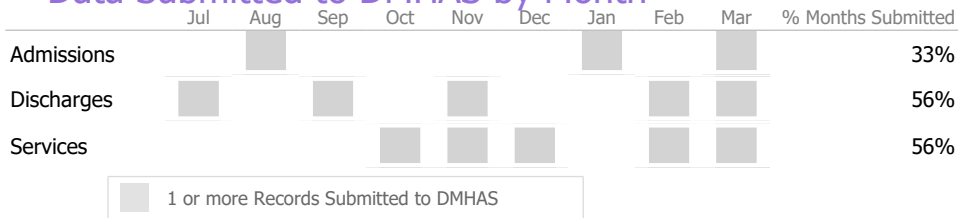
■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 16 Active Other Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 16 | 24 | -33% ▼ |
| Admits | 5 | 12 | -58% ▼ |
| Discharges | 7 | 13 | -46% ▼ |
| Service Hours | 18 | 12 | 59% ▲ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 16 Active Other Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 117 | 132 | -11% ▼ |
| Admits | 8 | 5 | 60% ▲ |
| Discharges | 10 | 19 | -47% ▼ |
| Service Hours | 1,599 | 1,690 | -5% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 97% | 85% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 50% | 58% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 100% | 59% |
| SA Screen Complete | 100% | 59% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 98% | 90% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 1 | 10% | 50% | 40% | -40% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Stable Living Situation | | 113 | 97% | 95% | 81% | 2% |
| Social Support | | 58 | 50% | 60% | 64% | -10% |
| Improved/Maintained Axis V GAF Score | | 71 | 64% | 75% | 52% | -11% ▼ |
| Employed | | 6 | 5% | 30% | 25% | -25% ▼ |

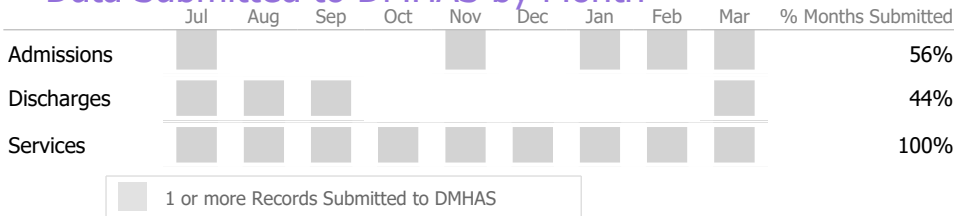
Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 106 | 99% | 90% | 85% | 9% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 7 | 88% | 75% | 76% | 13% ▲ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 89 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 84 | 100 | -16% ▼ |
| Admits | 15 | 20 | -25% ▼ |
| Discharges | 13 | 28 | -54% ▼ |
| Service Hours | 8,676 | 8,569 | 1% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 98% | 85% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 97% | 58% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 97% | 59% |
| SA Screen Complete | 100% | 59% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 100% | 90% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 6 | 46% | 50% | 40% | -4% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 77 | 92% | 60% | 64% | 32% ▲ |
| Improved/Maintained Axis V GAF Score | | 62 | 86% | 75% | 52% | 11% ▲ |
| Stable Living Situation | | 78 | 93% | 95% | 81% | -2% |
| Employed | | 14 | 17% | 30% | 25% | -13% ▼ |

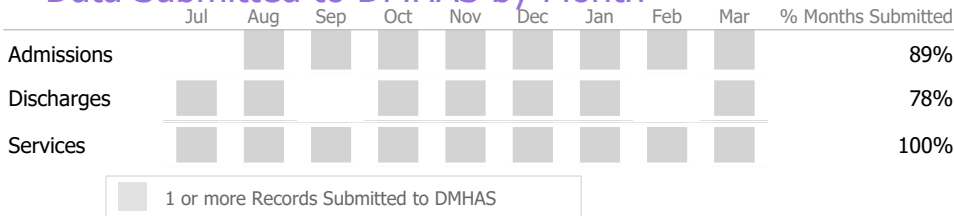
Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 71 | 100% | 90% | 85% | 10% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 15 | 100% | 75% | 76% | 25% ▲ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

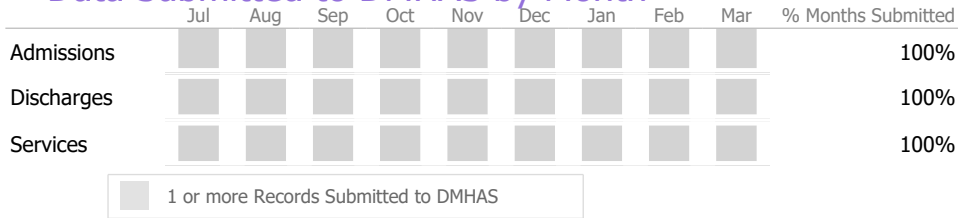
■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 89 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 109 | 126 | -13% ▼ |
| Admits | 90 | 102 | -12% ▼ |
| Discharges | 83 | 103 | -19% ▼ |
| Service Hours | 652 | 751 | -13% ▼ |

Data Submitted to DMHAS by Month

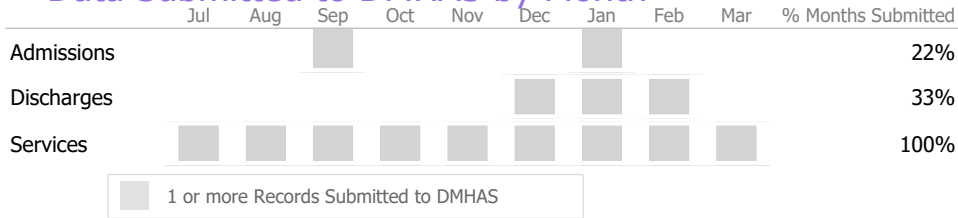


* State Avg based on 17 Active Central Intake Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 8 | 6 | 33% ▲ |
| Admits | 2 | 5 | -60% ▼ |
| Discharges | 3 | 2 | 50% ▲ |
| Service Hours | 47 | 21 | 123% ▲ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 16 Active Other Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 418 | 417 | 0% |
| Admits | 41 | 44 | -7% |
| Discharges | 53 | 43 | 23% ▲ |
| Service Hours | 6,393 | 5,192 | 23% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 98% | 85% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 99% | 58% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 86% | 59% |
| SA Screen Complete | 100% | 59% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 100% | 90% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 24 | 45% | 50% | 40% | -5% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 285 | 68% | 60% | 64% | 8% |
| Stable Living Situation | | 408 | 97% | 95% | 81% | 2% |
| Employed | | 94 | 22% | 30% | 25% | -8% |
| Improved/Maintained Axis V GAF Score | | 245 | 62% | 75% | 52% | -13% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 367 | 100% | 90% | 85% | 10% |

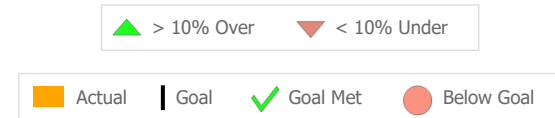
Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 35 | 85% | 75% | 76% | 10% |

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 36 | 36 | 0% |
| Admits | 15 | 15 | 0% |
| Discharges | 16 | 16 | 0% |
| Transfers - In | 1 | 2 | -50% ▼ |
| Bed Days | 5,443 | 5,452 | 0% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 92% | 89% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 38% | 12% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 92% | 88% |
| SA Screen Complete | 100% | 100% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 99% |
| Valid Axis V GAF Score | 100% | 22% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 12 | 75% | 95% | 82% | -20% ▼ |
| No Re-admit within 30 Days of Discharge | | 15 | 94% | 85% | 90% | 9% |
| Follow-up within 30 Days of Discharge | | 10 | 83% | 90% | 60% | -7% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Improved/Maintained Axis V GAF Score | | 22 | 92% | 95% | 16% | -3% |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| Avg Utilization Rate | | 20 | 439 days | 0.3 | 99% | 90% | 90% | 9% |

■ < 90%
 ■ 90-110%
 ■ > 110%

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | 67% |
| Discharges | | | | | | | | | | 78% |

1 or more Records Submitted to DMHAS

▲ > 10% Over
 ▼ < 10% Under

■ Actual
 | Goal
 ✓ Goal Met
 ● Below Goal

* State Avg based on 11 Active Acute Psychiatric Programs

Crisis Outreach

Southwest Connecticut Mental Health System
Mental Health - Crisis Services - Mobile Crisis Team

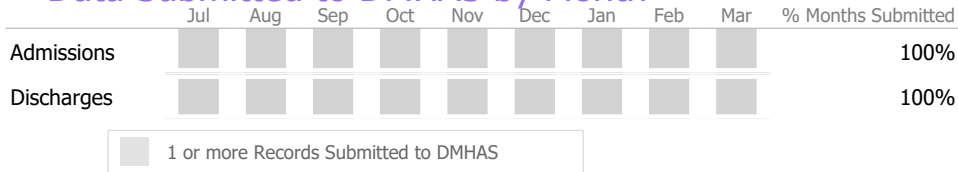
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 368 | 189 | 95% ▲ |
| Admits | 471 | 221 | 113% ▲ |
| Discharges | 463 | 214 | 116% ▲ |

Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ● Evaluation within 1.5 hours of Request | | 305 | 65% | 75% | 75% | -10% |
| ✓ Community Location Evaluation | | 457 | 97% | 80% | 92% | 17% ▲ |
| ✓ Follow-up Service within 48 hours | | 105 | 98% | 90% | 91% | 8% |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 26 Active Mobile Crisis Team Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 57 | 63 | -10% |
| Admits | 3 | 8 | -63% ▼ |
| Discharges | 14 | 7 | 100% ▲ |
| Service Hours | 2,731 | 1,645 | 66% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 98% | 70% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 98% | 85% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 100% | 30% |
| SA Screen Complete | 100% | 30% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 98% |
| Valid Axis V GAF Score | 100% | 96% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 12 | 86% | 65% | 63% | 21% ▲ |

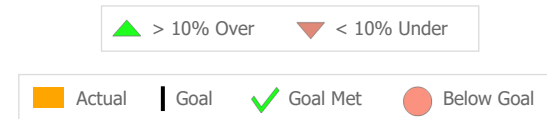
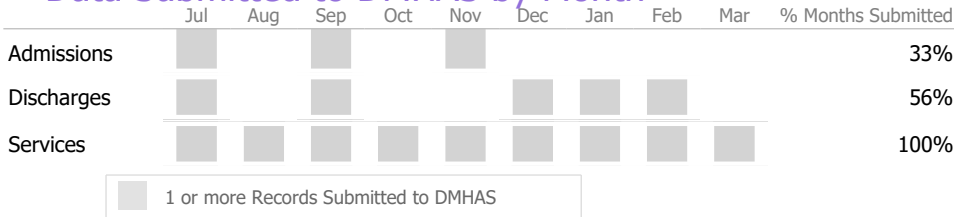
Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Social Support | | 54 | 95% | 60% | 82% | 35% ▲ |
| ✓ Stable Living Situation | | 56 | 98% | 80% | 86% | 18% ▲ |
| ✓ Improved/Maintained Axis V GAF Score | | 42 | 75% | 65% | 66% | 10% |
| ● Employed | | 4 | 7% | 20% | 13% | -13% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 43 | 100% | 90% | 99% | 10% |

Data Submitted to DMHAS by Month



* State Avg based on 36 Active CSP Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 117 | 133 | -12% ▼ |
| Admits | 9 | 15 | -40% ▼ |
| Discharges | 23 | 22 | 5% |
| Service Hours | 2,919 | 3,127 | -7% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 98% | 70% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 100% | 85% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 93% | 30% |
| SA Screen Complete | 100% | 30% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 98% |
| Valid Axis V GAF Score | 100% | 96% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 13 | 57% | 65% | 63% | -8% |

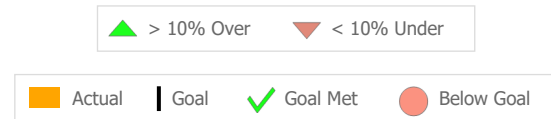
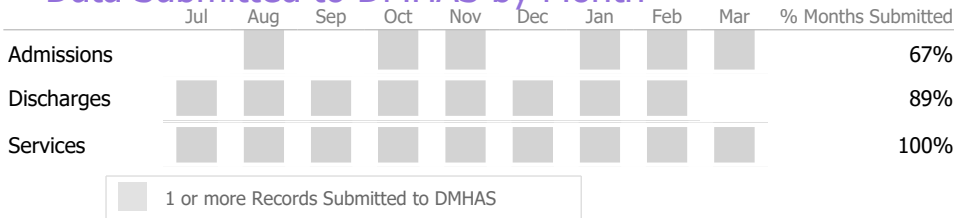
Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 89 | 76% | 60% | 82% | 16% ▲ |
| Stable Living Situation | | 110 | 94% | 80% | 86% | 14% ▲ |
| Improved/Maintained Axis V GAF Score | | 69 | 63% | 65% | 66% | -2% |
| Employed | | 6 | 5% | 20% | 13% | -15% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 94 | 100% | 90% | 99% | 10% |

Data Submitted to DMHAS by Month



* State Avg based on 36 Active CSP Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 260 | 289 | -10% ▼ |
| Admits | 35 | 151 | -77% ▼ |
| Discharges | 45 | 50 | -10% |
| Service Hours | 4,924 | 5,215 | -6% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 97% | 85% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 100% | 58% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 100% | 59% |
| SA Screen Complete | 100% | 59% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 100% | 90% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 37 | 82% | 50% | 40% | 32% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 155 | 60% | 60% | 64% | 0% |
| Stable Living Situation | | 245 | 94% | 95% | 81% | -1% |
| Improved/Maintained Axis V GAF Score | | 192 | 81% | 75% | 52% | 6% |
| Employed | | 49 | 19% | 30% | 25% | -11% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 215 | 100% | 90% | 85% | 10% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 35 | 100% | 75% | 76% | 25% ▲ |

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

▲ > 10% Over ▼ < 10% Under

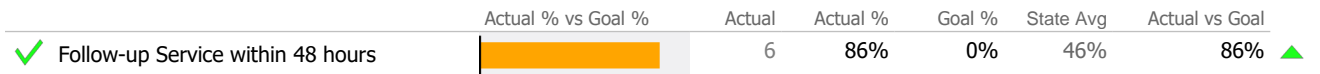
■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 89 Active Standard Outpatient Programs

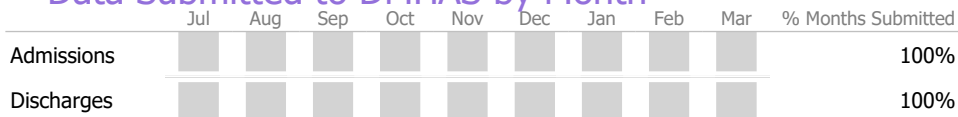
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 61 | 84 | -27% ▼ |
| Admits | 34 | 62 | -45% ▼ |
| Discharges | 57 | 62 | -8% |

Jail Diversion



Data Submitted to DMHAS by Month



■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

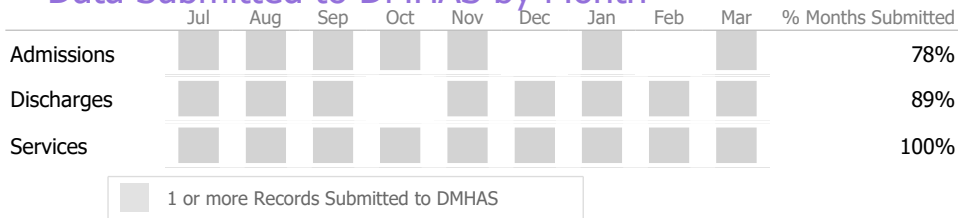
■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 29 | 14 | 107% ▲ |
| Admits | 18 | 9 | 100% ▲ |
| Discharges | 21 | 8 | 163% ▲ |
| Service Hours | 402 | 284 | 41% ▲ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 16 Active Other Programs

FSD Triage Program

Southwest Connecticut Mental Health System

Mental Health - Intake - Central Intake

Connecticut Dept of Mental Health and Addiction Services

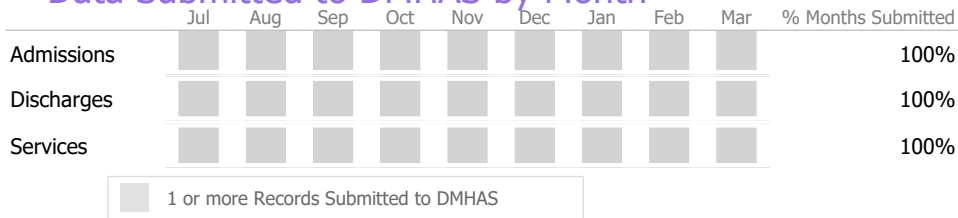
Program Quality Dashboard

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 41 | 42 | -2% |
| Admits | 39 | 41 | -5% |
| Discharges | 42 | 41 | 2% |
| Service Hours | 178 | 163 | 9% |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 17 Active Central Intake Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 38 | 40 | -5% |
| Admits | 7 | 10 | -30% ▼ |
| Discharges | 13 | 9 | 44% ▲ |
| Service Hours | 1,478 | 1,644 | -10% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 94% | 85% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 100% | 58% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 91% | 59% |
| SA Screen Complete | 100% | 59% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 100% | 90% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 6 | 46% | 50% | 40% | -4% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 37 | 97% | 60% | 64% | 37% ▲ |
| Stable Living Situation | | 37 | 97% | 95% | 81% | 2% |
| Employed | | 12 | 32% | 30% | 25% | 2% |
| Improved/Maintained Axis V GAF Score | | 19 | 59% | 75% | 52% | -16% ▼ |

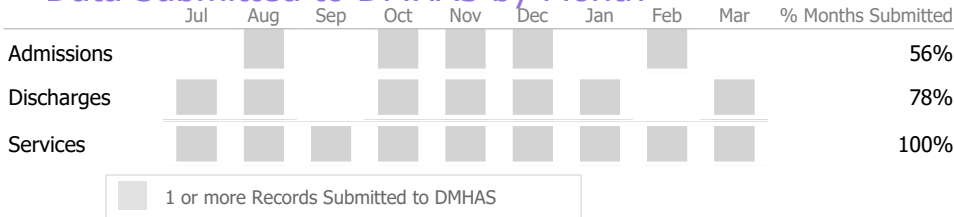
Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 25 | 100% | 90% | 85% | 10% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 7 | 100% | 75% | 76% | 25% ▲ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 89 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 129 | 132 | -2% |
| Admits | 3 | 5 | -40% ▼ |
| Discharges | 16 | 14 | 14% ▲ |
| Service Hours | 1,061 | 901 | 18% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 99% | 85% |
| On-Time Periodic | | |
| 6 Month Updates | 100% | 58% |
| Co-occurring | | |
| MH Screen Complete | 86% | 59% |
| SA Screen Complete | 100% | 59% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 100% | 90% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 11 | 69% | 50% | 40% | 19% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 93 | 72% | 60% | 64% | 12% ▲ |
| Stable Living Situation | | 129 | 100% | 95% | 81% | 5% |
| Improved/Maintained Axis V GAF Score | | 100 | 78% | 75% | 52% | 3% |
| Employed | | 29 | 22% | 30% | 25% | -8% |

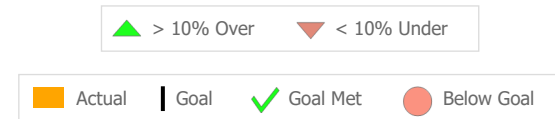
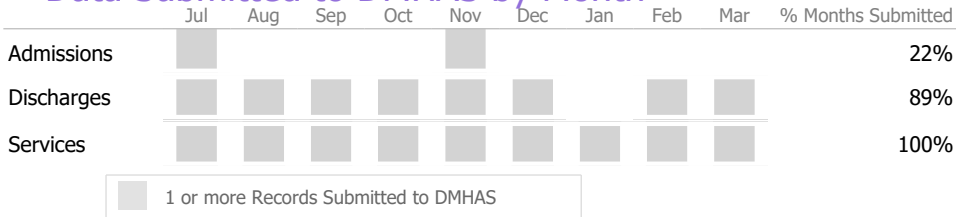
Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 113 | 100% | 90% | 85% | 10% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 3 | 100% | 75% | 76% | 25% ▲ |

Data Submitted to DMHAS by Month



* State Avg based on 89 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 95 | 97 | -2% |
| Admits | 12 | 7 | 71% ▲ |
| Discharges | 16 | 19 | -16% ▼ |
| Service Hours | 696 | 804 | -13% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 98% | 85% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 100% | 58% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 100% | 59% |
| SA Screen Complete | 100% | 59% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 100% | 90% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 10 | 62% | 50% | 40% | 12% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Social Support | | 89 | 94% | 60% | 64% | 34% ▲ |
| ✓ Employed | | 39 | 41% | 30% | 25% | 11% ▲ |
| ✓ Improved/Maintained Axis V GAF Score | | 79 | 91% | 75% | 52% | 16% ▲ |
| ✓ Stable Living Situation | | 93 | 98% | 95% | 81% | 3% |

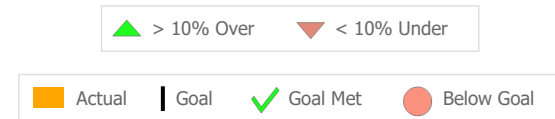
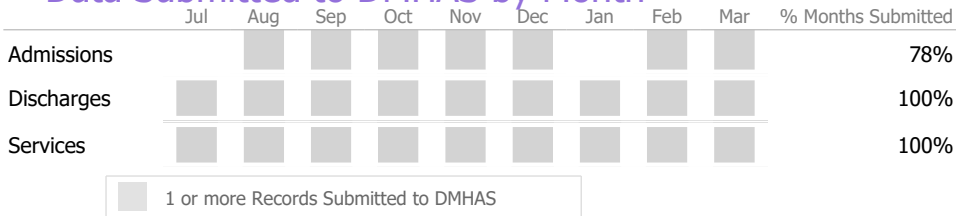
Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 79 | 100% | 90% | 85% | 10% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ● 2 or more Services within 30 days | | 8 | 67% | 75% | 76% | -8% |

Data Submitted to DMHAS by Month



* State Avg based on 89 Active Standard Outpatient Programs