

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---------------|----------------|--------|----------|------------|
| | Unique Clients | 1,234 | 1,182 | 4% |
| | Admits | 1,043 | 986 | 6% |
| | Discharges | 929 | 931 | 0% |
| | Service Hours | 14,523 | 19,782 | -27% ▼ |
| | Bed Days | 2,803 | 4,902 | -43% ▼ |

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

Consumer Satisfaction Survey

(Based on 105 FY20 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ Respect | | 89% | 80% | 91% |
| ✓ Participation in Treatment | | 88% | 80% | 92% |
| ✓ Overall | | 87% | 80% | 91% |
| ✓ Quality and Appropriateness | | 85% | 80% | 93% |
| ✓ General Satisfaction | | 84% | 80% | 92% |
| ✓ Access | | 82% | 80% | 88% |
| ● Outcome | | 74% | 80% | 83% |
| ● Recovery | | 61% | 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 | Crisis Services | 418 | 26.4% |
| | Outpatient | 294 | 18.6% |
| | Community Support | 204 | 12.9% |
| | ACT | 176 | 11.1% |
| | Intake | 131 | 8.3% |
| | Residential Services | 49 | 3.1% |
| | Other | 4 | 0.3% |
| | Forensic MH | Forensics Community-based | 307 |

Client Demographics

| Age | # | % | State Avg |
|-------|-----|-----|-----------|
| 18-25 | 168 | 14% | 10% |
| 26-34 | 250 | 20% | 22% |
| 35-44 | 240 | 20% | 23% |
| 45-54 | 237 | 19% | 19% |
| 55-64 | 209 | 17% | 18% |
| 65+ | 116 | 10% | 7% |

| Gender | # | % | State Avg |
|-------------|-----|-----|-----------|
| Male | 724 | 59% | 59% |
| Female | 502 | 41% | 41% |
| Transgender | 7 | 1% | 0% |

| Ethnicity | # | % | State Avg |
|-------------------|-----|-----|-----------|
| Non-Hispanic | 858 | 70% | 68% |
| Unknown | 246 | 20% | 12% |
| Hispanic-Other | 66 | 5% | 8% |
| Hisp-Puerto Rican | 59 | 5% | 11% |
| Hispanic-Cuban | 3 | 0% | 0% |
| Hispanic-Mexican | 2 | 0% | 0% |

| Race | # | % | State Avg |
|---------------------------------|-----|-----|-----------|
| White/Caucasian | 735 | 68% | 61% |
| Black/African American | 165 | 15% | 17% |
| Other | 74 | 7% | 13% |
| Unknown | 48 | 4% | 6% |
| Multiple Races | 40 | 4% | 1% |
| Am. Indian/Native Alaskan | 12 | 1% | 0% |
| Asian | 11 | 1% | 1% |
| Hawaiian/Other Pacific Islander | 2 | 0% | 0% |

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

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 112 | 97 | 15% ▲ |
| Admits | 43 | 35 | 23% ▲ |
| Discharges | 35 | 26 | 35% ▲ |
| Service Hours | 3,534 | 4,720 | -25% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 97% | 83% |
| On-Time Periodic | | |
| 6 Month Updates | 91% | 87% |
| Co-occurring | | |
| MH Screen Complete | 100% | 93% |
| SA Screen Complete | 100% | 92% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 97% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 20 | 57% | 65% | 46% | -8% |
| No Re-admit within 30 Days of Discharge | | 34 | 100% | 85% | 93% | 15% ▲ |
| Follow-up within 30 Days of Discharge | | 16 | 80% | 90% | 56% | -10% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Stable Living Situation | | 103 | 90% | 60% | 92% | 30% ▲ |
| Employed | | 10 | 9% | 15% | 16% | -6% |
| Social Support | | 59 | 52% | 60% | 79% | -8% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 79 | 100% | 90% | 99% | 10% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |
| Discharges | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 92% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 23 Active Assertive Community Treatment Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

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 86% |
| On-Time Periodic | | |
| 6 Month Updates | | N/A 54% |
| Co-occurring | | |
| MH Screen Complete | | N/A 80% |
| SA Screen Complete | | N/A 81% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 36% | N/A |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Employed | | N/A | N/A | 30% | 24% | -30% ▼ |
| Social Support | | N/A | N/A | 60% | 62% | -60% ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 75% | -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 | Apr | May | Jun | % 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 88 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

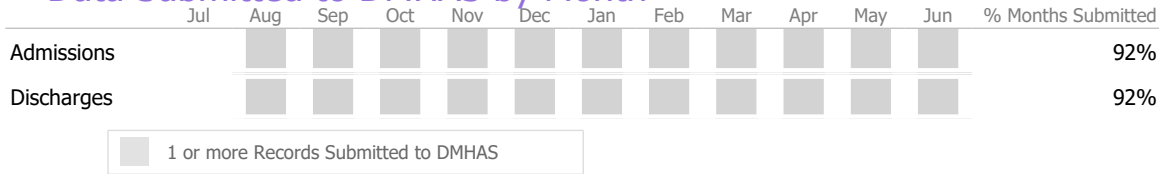
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 94 | 52 | 81% ▲ |
| Admits | 107 | 61 | 75% ▲ |
| Discharges | 74 | 61 | 21% ▲ |

Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ● Evaluation within 1.5 hours of Request | | 25 | 40% | 75% | 78% | -35% ▼ |
| ✓ Community Location Evaluation | | 62 | 100% | 80% | 75% | 20% ▲ |
| ● Follow-up Service within 48 hours | | 1 | 25% | 90% | 70% | -65% ▼ |

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

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 1 | 5 | -80% ▼ |
| Admits | - | 2 | -100% ▼ |
| Discharges | - | 4 | -100% ▼ |
| Service Hours | - | - | |

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 3 Active Re-entry Programs Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 110 | 119 | -8% |
| Admits | 9 | 6 | 50% ▲ |
| Discharges | 11 | 21 | -48% ▼ |
| Service Hours | 538 | 878 | -39% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 96% | 86% |
| On-Time Periodic | | |
| 6 Month Updates | 32% | 54% |
| Co-occurring | | |
| MH Screen Complete | 100% | 80% |
| SA Screen Complete | 100% | 81% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 96% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 7 | 64% | 50% | 36% | 14% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 88 | 80% | 60% | 62% | 20% ▲ |
| Stable Living Situation | | 101 | 92% | 95% | 75% | -3% |
| Employed | | 11 | 10% | 30% | 24% | -20% ▼ |

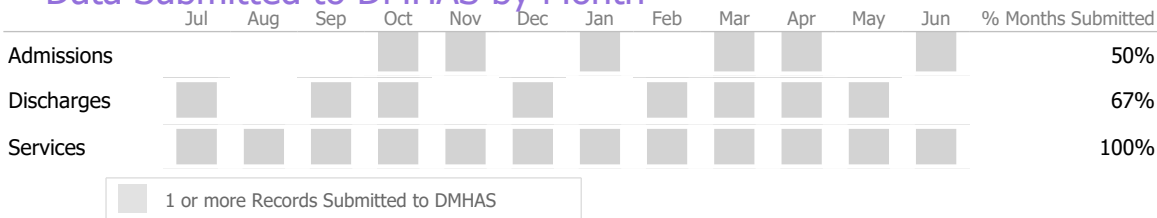
Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 98 | 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 | | 4 | 44% | 75% | 75% | -31% ▼ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

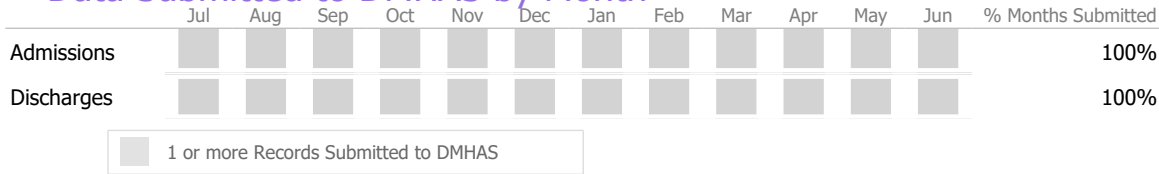
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 351 | 259 | 36% ▲ |
| Admits | 482 | 357 | 35% ▲ |
| Discharges | 455 | 357 | 27% ▲ |

Crisis

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ● Evaluation within 1.5 hours of Request | | 299 | 67% | 75% | 78% | -8% |
| ✓ Community Location Evaluation | | 414 | 93% | 80% | 75% | 13% ▲ |
| ● Follow-up Service within 48 hours | | 10 | 31% | 90% | 70% | -59% ▼ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

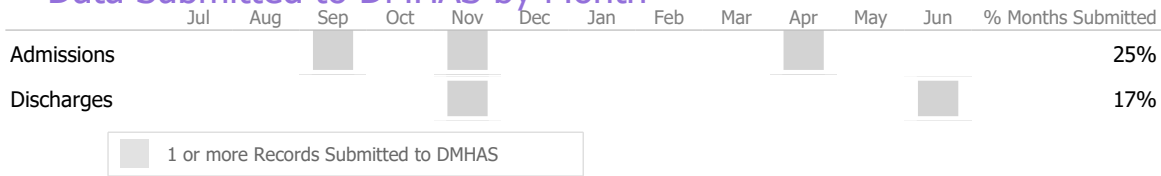
█ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 26 Active Mobile Crisis Team Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 25 | 24 | 4% |
| Admits | 4 | 5 | -20% ▼ |
| Discharges | 2 | 3 | -33% ▼ |

Data Submitted to DMHAS by Month



* State Avg based on 1 Active Outreach & Engagement Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

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 | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | | | | 0% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

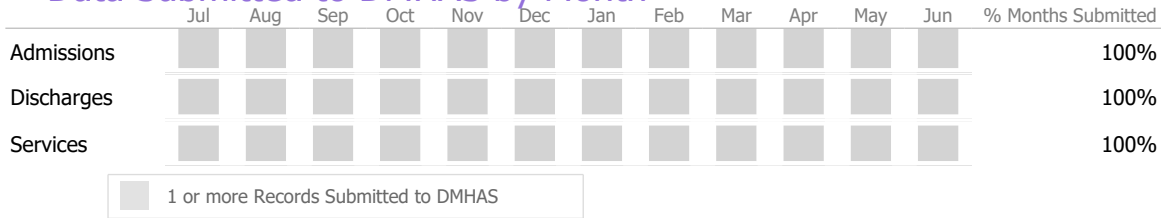
■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 0 Active Housing Assistance Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 131 | 129 | 2% |
| Admits | 127 | 129 | -2% |
| Discharges | 128 | 126 | 2% |
| Service Hours | 281 | 291 | -3% |

Data Submitted to DMHAS by Month



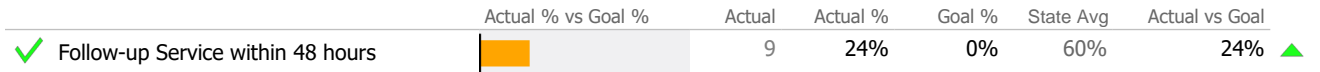
* State Avg based on 17 Active Central Intake Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

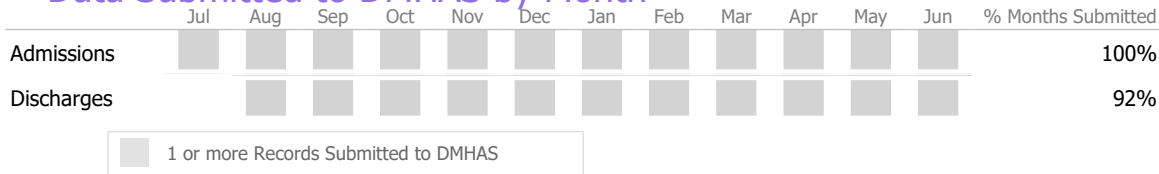
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 251 | 308 | -19% ▼ |
| Admits | 117 | 212 | -45% ▼ |
| Discharges | 97 | 173 | -44% ▼ |

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


Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

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

Data Submitted to DMHAS by Month

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

 1 or more Records Submitted to DMHAS

 > 10% Over  < 10% Under

 Actual  Goal  Goal Met  Below Goal

* State Avg based on 15 Active Other Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 49 | 70 | -30% ▼ |
| Admits | 42 | 63 | -33% ▼ |
| Discharges | 42 | 68 | -38% ▼ |
| Bed Days | 2,803 | 4,902 | -43% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 97% | 97% |
| On-Time Periodic | | |
| 6 Month Updates | 100% | 100% |
| Co-occurring | | |
| MH Screen Complete | 100% | 100% |
| SA Screen Complete | 100% | 100% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 84% | 84% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 34 | 81% | 95% | 81% | -14% ▼ |
| No Re-admit within 30 Days of Discharge | | 37 | 88% | 85% | 88% | 3% |
| Follow-up within 30 Days of Discharge | | 34 | 100% | 90% | 100% | 10% |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| Avg Utilization Rate | | 15 | 141 days | 0.2 | 51% | 90% | 51% | -39% ▼ |

Legend: ■ < 90% ■ 90-110% ■ > 110%

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |
| Discharges | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 1 Active Sub-Acute Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 194 | 166 | 17% ▲ |
| Admits | 56 | 44 | 27% ▲ |
| Discharges | 32 | 28 | 14% ▲ |
| Service Hours | 2,825 | 2,667 | 6% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 97% | 86% |
| On-Time Periodic | | |
| 6 Month Updates | 91% | 54% |
| Co-occurring | | |
| MH Screen Complete | 100% | 80% |
| SA Screen Complete | 100% | 81% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 93% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 23 | 72% | 50% | 36% | 22% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 150 | 77% | 60% | 62% | 17% ▲ |
| Stable Living Situation | | 184 | 94% | 95% | 75% | -1% |
| Employed | | 43 | 22% | 30% | 24% | -8% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 160 | 98% | 90% | 85% | 8% |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 47 | 84% | 75% | 75% | 9% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |
| Discharges | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 88 Active Standard Outpatient Programs

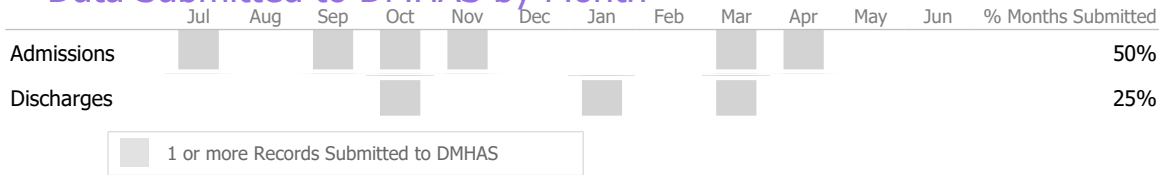
Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 32 | 37 | -14% ▼ |
| Admits | 7 | 9 | -22% ▼ |
| Discharges | 3 | 12 | -75% ▼ |

Jail Diversion

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Follow-up Service within 48 hours | | 0 | 0% | 0% | 60% | 0% |

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

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 204 | 203 | 0% |
| Admits | 28 | 40 | -30% ▼ |
| Discharges | 28 | 29 | -3% |
| Service Hours | 3,870 | 5,151 | -25% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 98% | 81% |
| On-Time Periodic | | |
| 6 Month Updates | 87% | 86% |
| Co-occurring | | |
| MH Screen Complete | 94% | 87% |
| SA Screen Complete | 100% | 77% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 94% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 23 | 82% | 65% | 56% | 17% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Stable Living Situation | | 194 | 95% | 80% | 88% | 15% ▲ |
| ✓ Social Support | | 135 | 66% | 60% | 81% | 6% |
| ● Employed | | 15 | 7% | 20% | 13% | -13% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 175 | 99% | 90% | 98% | 9% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | ■ | ■ | ■ | | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 92% |
| Discharges | ■ | ■ | | ■ | | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 83% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

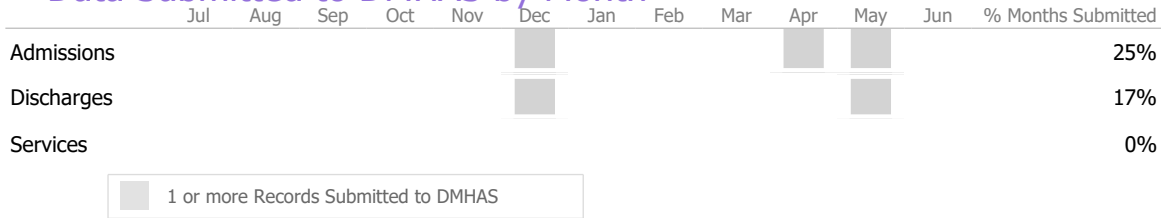
* State Avg based on 36 Active CSP Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 4 | | |
| Admits | 4 | - | |
| Discharges | 3 | - | |
| Service Hours | - | - | |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 15 Active Other Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 65 | 67 | -3% |
| Admits | 17 | 23 | -26% ▼ |
| Discharges | 19 | 23 | -17% ▼ |
| Service Hours | 3,475 | 6,076 | -43% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 92% | 83% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 39% | 87% |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 100% | 93% |
| SA Screen Complete | 100% | 92% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 98% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 8 | 42% | 65% | 46% | -23% ▼ |
| No Re-admit within 30 Days of Discharge | | 17 | 89% | 85% | 93% | 4% |
| Follow-up within 30 Days of Discharge | | 5 | 62% | 90% | 56% | -28% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Stable Living Situation | | 57 | 88% | 60% | 92% | 28% ▲ |
| Employed | | 10 | 15% | 15% | 16% | 0% |
| Social Support | | 39 | 60% | 60% | 79% | 0% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 45 | 98% | 90% | 99% | 8% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | ■ | ■ | ■ | ■ | ■ | ■ | ■ | | ■ | ■ | ■ | ■ | 92% |
| Discharges | ■ | | | ■ | | | ■ | ■ | ■ | | ■ | ■ | 58% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 23 Active Assertive Community Treatment Programs