# **Provider Activity**





# Clients by Level of Care

|                     | Case Management            | 2   | 0.2%  |
|---------------------|----------------------------|-----|-------|
| Forensic MH         |                            |     |       |
|                     | Education Support          | 36  | 3.4%  |
|                     | Recovery Support           | 47  | 4.4%  |
|                     | Housing Services           | 97  | 9.1%  |
|                     | Residential Services       | 100 | 9.4%  |
|                     | <b>Employment Services</b> | 115 | 10.8% |
|                     | Case Management            | 166 | 15.6% |
|                     | Social Rehabilitation      | 250 | 23.5% |
|                     | Community Support          | 251 | 23.6% |
| <b>Mental Healt</b> | th                         |     |       |
| Program Type        | Level of Care Type         | #   | %     |

# Consumer Satisfaction Survey (Based on 100 FY21 Surveys)



#### **Client Demographics**

| Age               | #        | %      | State Avg    | Gender                           | #       | %        | State Avg |
|-------------------|----------|--------|--------------|----------------------------------|---------|----------|-----------|
| 18-25             | 41       | 6%     | 9%           | Male                             | 390     | 56%      | 59%       |
| Γ' .              |          |        |              |                                  |         |          |           |
| 26-34             | 85       | 12%    | 21%          | Female                           | 309     | 44%      | 41%       |
| 35-44             | 125      | 18%    | 23%          | Transgender                      |         |          | 0%        |
| 45-54             | 166      | 24%    | 19%          |                                  |         |          |           |
| 55-64             | 224      | 32%    | <b>▲</b> 19% |                                  |         |          |           |
| 65+               | 60       | 9%     | 9%           | Race                             | #       | %        | State Avg |
|                   |          |        |              | White/Caucasian                  | 508     | 72%      | 62%       |
| <b>Ethnicity</b>  | #        | %      | State Avg    | Black/African American           | 92      | 13%      | 17%       |
| Non-Hispanic      | 572      | 82%    | <b>▲</b> 68% | Other                            | 37      | 5%       | 13%       |
| Unknown           | 68       | 10%    | 11%          | Multiple Races                   | 26      | 4%       | 1%        |
| Hisp-Puerto Rican | 40       | 6%     | 11%          | Unknown                          | 23      | 3%       | 6%        |
|                   | 19       | 3%     | 8%           | Am. Indian/Native Alaskan        | 11      | 2%       | 0%        |
| Hispanic-Other    | 19       | 3%     | 0%           | Asian                            | 2       | 0%       | 1%        |
| Hispanic-Cuban    | 1        | 0%     | 0%           | Hawaiian/Other Pacific Islander  | 2       | 0%       | 0%        |
| Hispanic-Mexican  | 1        | 0%     | 1%           | Havianary Garler Facine Islander | _       | 0 70     | 070       |
|                   |          |        |              |                                  |         |          |           |
| U                 | Jnique C | lients | State Avg    | ▲ > 10% Over State Avg           | > 10% U | Inder St | ate Avg   |

# **BOS - 72**Reliance Health Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

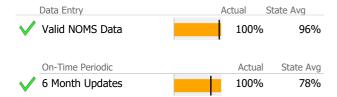
# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance %     |
|----------------|--------|----------|----------------|
| Unique Clients | 10     | 10       | 0%             |
| Admits         | -      | 10       | -100% <b>▼</b> |
| Discharges     | 1      | -        |                |
| Service Hours  | 277    | 43       |                |

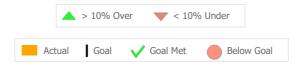
# Recovery

|          | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| <b>V</b> | Stable Living Situation           |                    | 9      | 90%      | 85%    | 88%       | 5%             |
|          | Service Utilization               |                    |        |          |        |           |                |
|          |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| <b>V</b> | Clients Receiving Services        |                    | 9      | 100%     | 90%    | 95%       | 10%            |

## **Data Submission Quality**





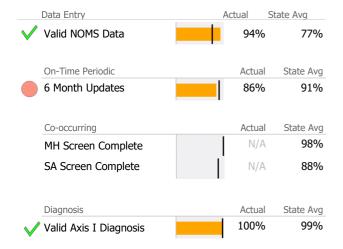


<sup>\*</sup> State Avg based on 108 Active Supportive Housing - Scattered Site Programs

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 7      | 7        | 0%         |
| Admits         | -      | -        |            |
| Discharges     | -      | -        |            |
| Bed Days       | 1,288  | 1,288    | 0%         |

# **Data Submission Quality**

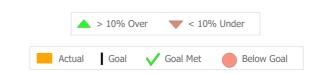


# Data Submitted to DMHAS by Month

|            | Jul Aug          | Sep Oct Nov Dec       | % Months Submitted |
|------------|------------------|-----------------------|--------------------|
| Admissions |                  |                       | 0%                 |
| Discharges |                  |                       | 0%                 |
|            | 1 or more Record | ds Submitted to DMHAS |                    |
|            |                  |                       |                    |

#### **Discharge Outcomes**

|          |                                       | Actual % | % vs Goal % | Actual   | Actual % | Goal % | State Avg | Actual vs Goal |
|----------|---------------------------------------|----------|-------------|----------|----------|--------|-----------|----------------|
|          | Treatment Completed Successfully      |          |             | N/A      | N/A      | 60%    | 73%       | N/A            |
|          |                                       | Actual % | % vs Goal % | Actual   | Actual % | Goal % | State Avg | Actual vs Goal |
|          | Follow-up within 30 Days of Discharge |          |             | N/A      | N/A      | 90%    | 83%       | N/A            |
|          | Recovery                              |          |             |          |          |        |           |                |
|          | National Recovery Measures (NOMS)     | Actual % | vs Goal %   | Actual   | Actual % | Goal % | State Avg | Actual vs Goal |
| <b>V</b> | Social Support                        |          |             | 7        | 100%     | 60%    | 86%       | 40%            |
| <b>/</b> | Stable Living Situation               |          | ·           | 7        | 100%     | 95%    | 96%       | 5%             |
|          | Employed                              |          |             | 0        | 0%       | 25%    | 13%       | -25%           |
|          | Bed Utilization                       |          |             |          |          |        |           |                |
|          | 12 Months Trend                       | Beds     | Avg LOS     | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
| <b>/</b> | Avg Utilization Rate                  | 7        | 850 days    | 0.5      | 100%     | 90%    | 95%       | 10%            |
|          | < 90% 90-110%                         | o I      | >110%       |          |          |        |           |                |



<sup>\*</sup> State Avg based on 80 Active Supervised Apartments Programs

#### **Program Activity Discharge Outcomes** Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 9 9 0% Treatment Completed Successfully 50% 60% 73% -10% Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 100% Discharges 1 0 0% 90% 83% -90% Follow-up within 30 Days of Discharge -5% **Bed Days** 1,487 1,569 Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** 8 29% Social Support 89% 60% 86% Data Entry Actual State Avg 9 95% 96% 5% 100% Stable Living Situation Valid NOMS Data 100% 77% 25% 1 11% 13% -14% **Employed** On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 91% 12 Months Trend Avg LOS Actual vs Goal Beds Turnover Actual % Goal % State Avg Avg Utilization Rate 2,473 days 162% 90% 95% 72% 📤 0.3 Actual State Avg Co-occurring 98% N/A MH Screen Complete 90-110% >110% < 90% SA Screen Complete N/A 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Nov ▲ > 10% Over < 10% Under</p> Admissions 0% Discharges 17% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS \* State Avg based on 80 Active Supervised Apartments Programs

Mental Health - Employment Services - Employment Services

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |          |
|----------------|--------|----------|------------|----------|
| Unique Clients | 115    | 120      | -4%        |          |
| Admits         | 27     | 23       | 17%        | <b>_</b> |
| Discharges     | 25     | 33       | -24%       | •        |
| Service Hours  | 531    | 501      | 6%         |          |

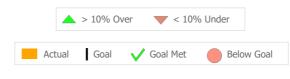
# Recovery

|          | Clients Receiving Services        |                    | 81     | 89%      | 90%    | 94%       | -1%            |  |
|----------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
|          |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
|          | Service Utilization               |                    |        |          |        |           |                |  |
| <b>/</b> | Employed                          |                    | 57     | 49%      | 35%    | 49%       | 14%            |  |
|          | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
|          |                                   |                    |        |          |        |           |                |  |

## **Data Submission Quality**

| Data Entry        | Actual S | State Avg |
|-------------------|----------|-----------|
| ✓ Valid NOMS Data | 99%      | 90%       |
| On-Time Periodic  | Actual   | State Avg |
| 6 Month Updates   | 82%      | 81%       |

| Date       | <i>a</i> 50 | Jul    | Aug        | Sep    |     | Oct   | No    |     | Dec | % Months Submitted |
|------------|-------------|--------|------------|--------|-----|-------|-------|-----|-----|--------------------|
| Admissions | 6           |        |            |        |     |       |       |     |     | 100%               |
| Discharges | ;           |        |            |        |     |       |       |     |     | 83%                |
| Services   |             |        |            |        |     |       |       |     |     | 100%               |
|            |             | 1 or m | ore Record | ds Sub | mit | ted t | o DMł | HAS | 6   |                    |



<sup>\*</sup> State Avg based on 39 Active Employment Services Programs

#### **Community Apt.Program 409-251**

Reliance Health Inc.

Mental Health - Residential Services - Supervised Apartments

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

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 19 19 0% Treatment Completed Successfully 0 0% 60% 73% -60% -2 Admits 1 -50% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 -50% Discharges 1 N/A N/A 90% 83% N/A Follow-up within 30 Days of Discharge **Bed Days** 3.312 3,027 9% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** 29% Social Support 17 89% 60% 86% Data Entry Actual State Avg 19 95% 96% 5% 100% Stable Living Situation Valid NOMS Data 100% 77% 5% 25% 13% -20% **Employed** 1 On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 91% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 1,774 days 90% 90% 95% State Avg 0.5 0% Co-occurring Actual 100% 98% MH Screen Complete 90-110% >110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov ▲ > 10% Over < 10% Under</p> Admissions 17% Discharges 17% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS

\* State Avg based on 80 Active Supervised Apartments Programs

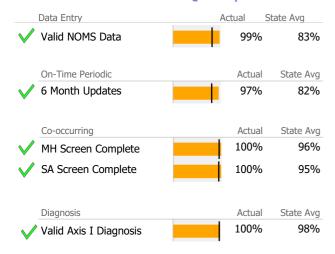
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

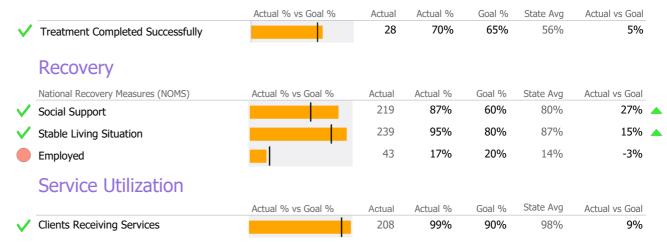
# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance %    |
|----------------|--------|----------|---------------|
| Unique Clients | 251    | 259      | -3%           |
| Admits         | 20     | 17       | 18% 🔺         |
| Discharges     | 40     | 32       | 25% 🔺         |
| Service Hours  | 2,346  | 2,703    | -13% <b>▼</b> |

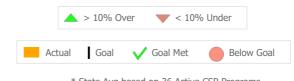
# **Data Submission Quality**



## **Discharge Outcomes**





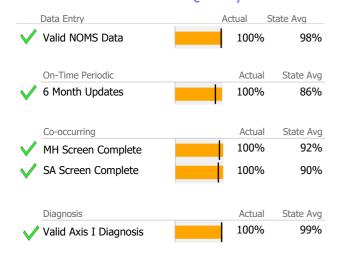


<sup>\*</sup> State Avg based on 36 Active CSP Programs

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 7      | 6        | 17%        | • |
| Admits         | 1      | -        |            |   |
| Discharges     | 1      | 1        | 0%         |   |
| Bed Days       | 1,057  | 1,087    | -3%        |   |

# **Data Submission Quality**



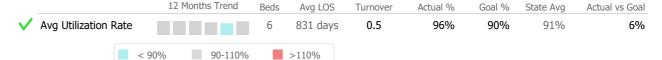
## Data Submitted to DMHAS by Month

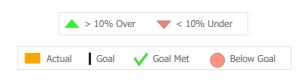


#### Discharge Outcomes



#### **Bed Utilization**





\* State Avg based on 29 Active MH Intensive Res. Rehabilitation Programs

#### **FUSE - Norwich, New London Site**

Reliance Health Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

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

Goal %

State Avg

Actual vs Goal

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

Actual %

Actual

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 10     | 10       | 0%         |
| Admits         | -      | -        |            |
| Discharges     | -      | -        |            |
| Service Hours  | 120    | 117      | 3%         |

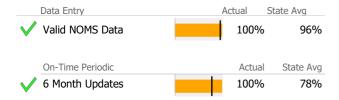
## Recovery

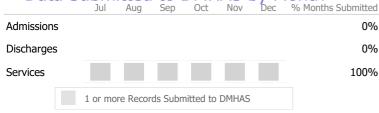
National Recovery Measures (NOMS)

| <b>V</b> | Stable Living Situation    |                    | 10     | 100%     | 85%    | 88%       | 15% 🔺          |
|----------|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
|          | Service Utilization        |                    |        |          |        |           |                |
|          |                            | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| <b>V</b> | Clients Receiving Services |                    | 10     | 100%     | 90%    | 95%       | 10%            |

Actual % vs Goal %

#### **Data Submission Quality**







<sup>\*</sup> State Avg based on 108 Active Supportive Housing - Scattered Site Programs

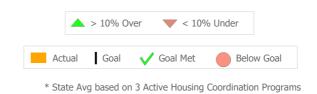
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 97     | 85       | 14%        | • |
| Admits         | 25     | 40       | -38%       | • |
| Discharges     | 47     | 34       | 38%        | • |
| Service Hours  | _      | _        |            |   |

| Data                                 | Jul Ai |  |  | Nov | Dec | % Months Submitted |
|--------------------------------------|--------|--|--|-----|-----|--------------------|
| Admissions                           |        |  |  |     |     | 100%               |
| Discharges                           |        |  |  |     |     | 83%                |
| Services                             |        |  |  |     |     | 0%                 |
| 1 or more Records Submitted to DMHAS |        |  |  |     |     |                    |



## **Individual supports Program (ISP) 409-259**

Reliance Health Inc.

On-Time Periodic

6 Month Updates

Mental Health - Residential Services - Residential Support

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

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

100%

90%

98%

10%

#### **Program Activity Discharge Outcomes** Actual % State Avg Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % Actual vs Goal **Unique Clients** 0% N/A N/A 50% 88% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 60 233 **-74% ▼** 100% 60% 86% 40% 🔺 Social Support 100% 85% 97% 15% 🔺 Stable Living Situation **Data Submission Quality** 0 0% 25% -25% -**Employed** 14% Data Entry Actual State Avg Service Utilization Valid NOMS Data 100% 99% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal

Clients Receiving Services

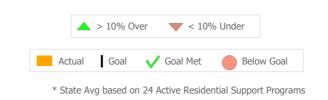


Actual

100%

State Avg

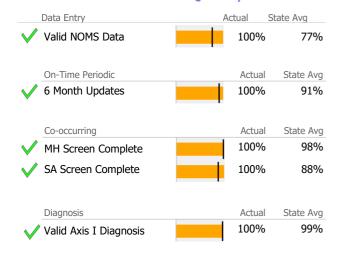
92%



# Program Activity

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 6      | 4        | 50%        | • |
| Admits         | 1      | -        |            |   |
| Discharges     | 1      | -        |            |   |
| Service Hours  | 869    | 751      | 16%        | • |
| Bed Days       | 991    | 736      | 35%        | • |

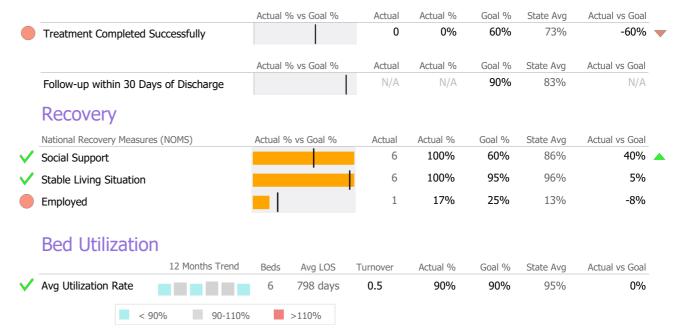
# **Data Submission Quality**

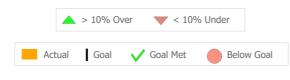


#### Data Submitted to DMHAS by Month



#### Discharge Outcomes





\* State Avg based on 80 Active Supervised Apartments Programs

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

#### Reliance Health Inc.

Mental Health - Residential Services - Supervised Apartments

1 or more Records Submitted to DMHAS

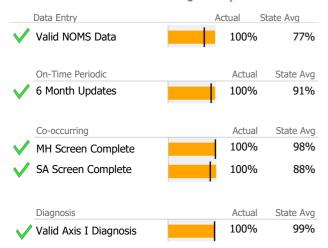
#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** -14% Treatment Completed Successfully 100% 60% 73% 40% 🔺 2 3 -33% 🔻 Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 0% Discharges 1 1 Follow-up within 30 Days of Discharge 100% 90% 83% 10% 773 940 **Bed Days** -18% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** 5 23% Social Support 83% 60% 86% Data Entry Actual State Avg 6 95% 96% 5% 100% Stable Living Situation Valid NOMS Data 100% 77% -25% 0 0% 25% 13% **Employed** On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 91% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 437 days 70% 90% 95% -20% **T** State Avg 0.6 Co-occurring Actual 100% 98% MH Screen Complete >110% 90-110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Nov ▲ > 10% Over < 10% Under</p> Admissions 33% Discharges 17% ✓ Goal Met Actual Goal Below Goal

\* State Avg based on 80 Active Supervised Apartments Programs

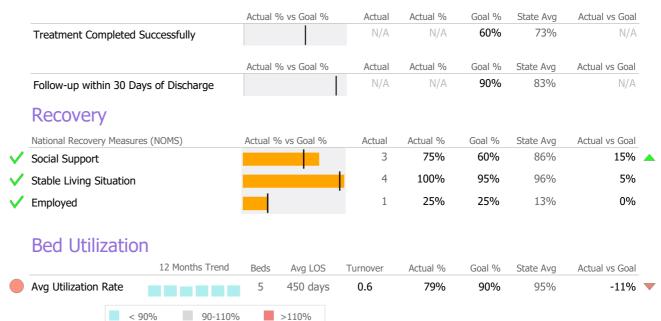
# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 4      | 6        | -33%       | • |
| Admits         | 1      | 2        | -50%       | • |
| Discharges     | -      | 1        | -100%      | • |
| Bed Days       | 724    | 866      | -16%       | • |

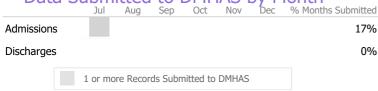
# **Data Submission Quality**

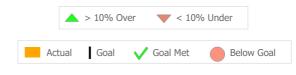


# **Discharge Outcomes**









<sup>\*</sup> State Avg based on 80 Active Supervised Apartments Programs

1 or more Records Submitted to DMHAS

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 6 -17% N/A N/A 60% 73% N/A Treatment Completed Successfully 2 Admits 1 -50% Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Discharges 1 -100% N/A N/A 90% 83% N/A Follow-up within 30 Days of Discharge 788 -8% **Bed Days** 853 Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Data Submission Quality** 5 40% Social Support 100% 60% 86% Data Entry Actual State Avg 5 95% 96% 5% 100% Stable Living Situation Valid NOMS Data 100% 77% 20% 25% 13% -5% **Employed** 1 On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 91% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 86% 90% 95% 1,062 days 0.6 -4% Co-occurring Actual State Avg 100% 98% MH Screen Complete 90-110% >110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 17% Discharges 0%

Actual

Goal

✓ Goal Met

\* State Avg based on 80 Active Supervised Apartments Programs

Below Goal

#### **Next Step Legion & NSP 409550**

Reliance Health Inc.

Mental Health - Case Management - Supportive Housing - Development

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

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

# **Program Activity**

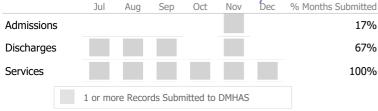
| Measure        | Actual | 1 Yr Ago | Variance %    |  |
|----------------|--------|----------|---------------|--|
| Unique Clients | 21     | 20       | 5%            |  |
| Admits         | 1      | 3        | <b>-67% ▼</b> |  |
| Discharges     | 4      | 1        | 300% 🔺        |  |
| Service Hours  | 294    | 170      | 73% 🔺         |  |

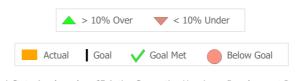
#### Recovery

|          | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| <b>V</b> | Stable Living Situation           |                    | 18     | 86%      | 85%    | 93%       | 1%             |
|          | Service Utilization               |                    |        |          |        |           |                |
|          |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| <b>V</b> | Clients Receiving Services        |                    | 17     | 100%     | 90%    | 93%       | 10%            |

#### **Data Submission Quality**

| Data Entry        | Actual | State Avg |
|-------------------|--------|-----------|
| ✓ Valid NOMS Data | 99%    | 98%       |
| On-Time Periodic  | Actual | State Avg |
| 6 Month Updates   | 100%   | 82%       |





#### **Next Steps Supp Housing 409-551**

Reliance Health Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

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

Goal %

State Avg

Actual vs Goal

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

Actual %

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance %    |  |
|----------------|--------|----------|---------------|--|
| Unique Clients | 33     | 36       | -8%           |  |
| Admits         | 1      | 3        | -67% <b>▼</b> |  |
| Discharges     | -      | 5        | -100% 🔻       |  |
| Service Hours  | 536    | 523      | 2%            |  |

#### Recovery

National Recovery Measures (NOMS)

| <b>V</b> | Stable Living Situation    |                    | 31     | 94%      | 85%    | 88%       | 9%             |
|----------|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
|          | Service Utilization        |                    |        |          |        |           |                |
|          |                            | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| 1        | Clients Receiving Services |                    | 33     | 100%     | 90%    | 95%       | 10%            |

Actual % vs Goal %

## **Data Submission Quality**

| Data Entry        | Actual | State Avg    |
|-------------------|--------|--------------|
| ✓ Valid NOMS Data | 100%   | % 96%        |
| On-Time Periodic  | Actua  | al State Avg |
| 6 Month Updates   | 97%    | 6 78%        |





<sup>\*</sup> State Avg based on 108 Active Supportive Housing - Scattered Site Programs

Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 48     | 45       | 7%         |
| Admits         | 24     | 16       | 50% 🔺      |
| Discharges     | 25     | 18       | 39% 🔺      |
| Service Hours  | 137    | 119      | 15%        |

## Service Engagement



|                                      | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|--------------------------------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions                           |     |     |     |     |     |     | 100%               |
| Discharges                           |     |     |     |     |     |     | 83%                |
| Services                             |     |     |     |     |     |     | 100%               |
| 1 or more Records Submitted to DMHAS |     |     |     |     |     |     |                    |



<sup>\*</sup> State Avg based on 47 Active Outreach & Engagement Programs

## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance %    |  |
|----------------|--------|----------|---------------|--|
| Unique Clients | 24     | 34       | -29% ▼        |  |
| Admits         | 14     | 20       | -30% ▼        |  |
| Discharges     | 14     | 19       | <b>-26%</b> ▼ |  |
| Service Hours  | 69     | 112      | -38% ▼        |  |

#### Service Engagement



| Data                                 | Jul | Aug | Sep | Oct | Nov | Dec | % Months Submitted |
|--------------------------------------|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions                           |     |     |     |     |     |     | 100%               |
| Discharges                           |     |     |     |     |     |     | 83%                |
| Services                             |     |     |     |     |     |     | 100%               |
| 1 or more Records Submitted to DMHAS |     |     |     |     |     |     |                    |



<sup>\*</sup> State Avg based on 47 Active Outreach & Engagement Programs

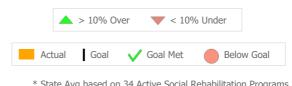
# **Program Activity**

| Measure                      | Actual | 1 Yr Ago | Variance %    |   |
|------------------------------|--------|----------|---------------|---|
| Unique Clients               | 68     | 88       | -23% 🔻        | • |
| Admits                       | 11     | 24       | <b>-54%</b> ▼ | • |
| Discharges                   | 3      | 19       | -84% <b>▼</b> | • |
| Service Hours                | 24     | 22       | 11% 🔺         |   |
| Social Rehab/PHP/IOP<br>Days | 698    | 800      | -13% 🔻        | , |

## Service Utilization



|                                      | Ju | Jul | Aug | Sep |  | Oct | Nov |  | Dec | % Months Submitted |
|--------------------------------------|----|-----|-----|-----|--|-----|-----|--|-----|--------------------|
| Admissions                           |    |     |     |     |  |     |     |  |     | 100%               |
| Discharges                           |    |     |     |     |  |     |     |  |     | 17%                |
| Services                             |    |     |     |     |  |     |     |  |     | 100%               |
| 1 or more Records Submitted to DMHAS |    |     |     |     |  |     |     |  |     |                    |



#### **PILOTS Development 409-555**

Reliance Health Inc.

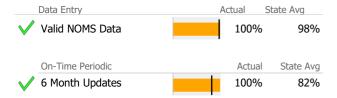
Mental Health - Case Management - Supportive Housing - Development

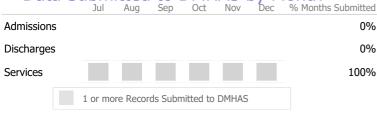
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

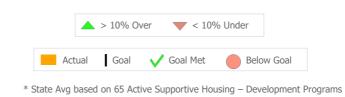
Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

#### **Program Activity** Recovery National Recovery Measures (NOMS) Actual % Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Variance % Measure 1 Yr Ago 100% 85% 93% 15% Stable Living Situation **Unique Clients** 0% Service Utilization Admits Discharges State Ava Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 100% 90% 93% 10% 88 Service Hours 50 **78%**

# **Data Submission Quality**







#### Pilots Supp. Housing 409-552Y

Reliance Health Inc.

Mental Health - Case Management - Supportive Housing - Scattered Site

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

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

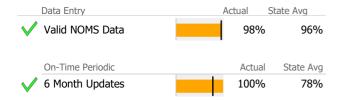
# **Program Activity**

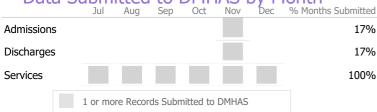
| Measure        | Actual | 1 Yr Ago | Variance %    |
|----------------|--------|----------|---------------|
| Unique Clients | 16     | 17       | -6%           |
| Admits         | 1      | 2        | <b>-50%</b> ▼ |
| Discharges     | 1      | 2        | <b>-50%</b> ▼ |
| Service Hours  | 193    | 101      | 91% 🔺         |

#### Recovery

|          | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| <b>V</b> | Stable Living Situation           |                    | 16     | 100%     | 85%    | 88%       | 15%            |
|          | Service Utilization               |                    |        |          |        |           |                |
|          |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| <b>/</b> | Clients Receiving Services        |                    | 15     | 100%     | 90%    | 95%       | 10%            |

#### **Data Submission Quality**







<sup>\*</sup> State Avg based on 108 Active Supportive Housing - Scattered Site Programs

Forensic MH - Case Management - Standard Case Management

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

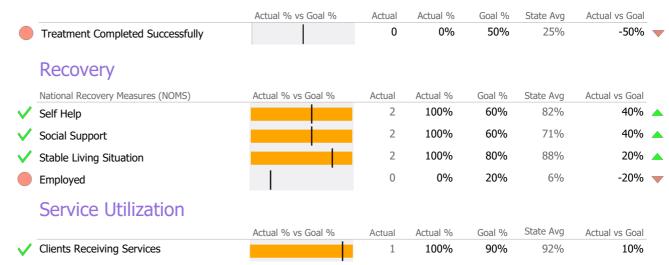
# **Program Activity**

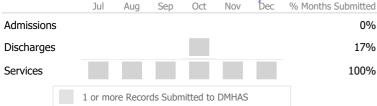
| Measure        | Actual | 1 Yr Ago | Variance %    |
|----------------|--------|----------|---------------|
| Unique Clients | 2      | 3        | -33% <b>▼</b> |
| Admits         | -      | -        |               |
| Discharges     | 1      | -        |               |
| Service Hours  | 5      | 5        | -3%           |

# **Data Submission Quality**

| Data Entry        | Actual Stat | e Avg     |
|-------------------|-------------|-----------|
| ✓ Valid NOMS Data | 100%        | 90%       |
| On-Time Periodic  | Actual      | State Avg |
| ✓ 6 Month Updates | 100%        | 78%       |

#### Discharge Outcomes







<sup>\*</sup> State Avg based on 3 Active Standard Case Management Programs

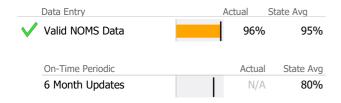
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

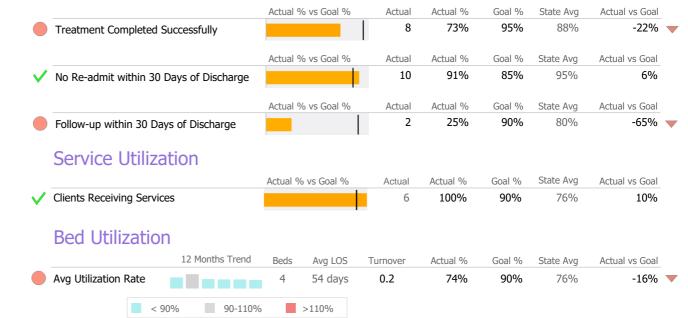
## **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 17     | 12       | 42%        | • |
| Admits         | 15     | 8        | 88%        | • |
| Discharges     | 11     | 8        | 38%        | • |
| Service Hours  | 44     | 36       | 21%        | • |
| Bed Days       | 544    | 633      | -14%       | • |

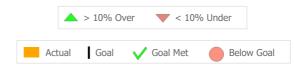
# **Data Submission Quality**



#### Discharge Outcomes







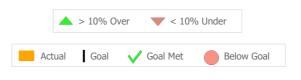
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

## **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 % Months Submitted Admissions 0% 0% Discharges 1 or more Records Submitted to DMHAS



<sup>\*</sup> State Avg based on 47 Active Outreach & Engagement Programs

#### **Supported Education 409-271**

Reliance Health Inc.

Mental Health - Education Support - Education Support

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

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 36     | 34       | 6%         |   |
| Admits         | 9      | 4        | 125%       | • |
| Discharges     | 11     | 4        | 175%       | • |
| Service Hours  | 152    | 55       | 179%       | • |

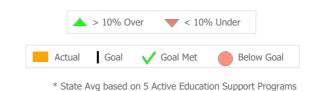
# Recovery

|          |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|----------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
|          | Service Utilization               |                    |        |          |        |           |                |   |
| <b>\</b> | Enrolled in Educational Program   |                    | 25     | 69%      | 35%    | 72%       | 34%            | _ |
|          | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|          | •                                 |                    |        |          |        |           |                |   |

## **Data Submission Quality**

| Data Entry       | Actual | State Avg |
|------------------|--------|-----------|
| Valid NOMS Data  | 99%    | 100%      |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates  | 59%    | 75%       |

|            |   | Jul    | Aug      | Sep     | Oct      | Nov   | Dec | % Months Submitted |
|------------|---|--------|----------|---------|----------|-------|-----|--------------------|
| Admissions |   |        |          |         |          |       |     | 67%                |
| Discharges |   |        |          |         |          |       |     | 67%                |
| Services   |   |        |          |         |          |       |     | 100%               |
|            | 1 | or mor | e Record | ds Subm | itted to | DMHAS |     |                    |



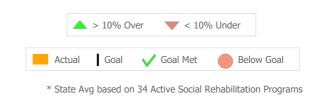
# **Program Activity**

| Measure                      | Actual | 1 Yr Ago | Variance % |   |
|------------------------------|--------|----------|------------|---|
| Unique Clients               | 211    | 163      | 29%        | • |
| Admits                       | 40     | 9        | 344%       | • |
| Discharges                   | 15     | 11       | 36%        | • |
| Service Hours                | 145    | 288      | -49%       | • |
| Social Rehab/PHP/IOP<br>Days | 1,649  | 226      | 630%       | • |

# Service Utilization



|            | u | Jul     | Aug        | Sep     | Oct       | Nov   | Dec | % Months Submitted |
|------------|---|---------|------------|---------|-----------|-------|-----|--------------------|
| Admissions | S |         |            |         |           |       |     | 100%               |
| Discharges | 5 |         |            |         |           |       |     | 67%                |
| Services   |   |         |            |         |           |       |     | 100%               |
|            |   | 1 or mo | ore Record | ls Subn | nitted to | DMHAS |     |                    |



Admissions

Discharges

1 or more Records Submitted to DMHAS

Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard

Actual vs Goal

Actual vs Goal

Actual vs Goal

Actual vs Goal

-4%

-10%

26%

4%

-9%

-2%

Reporting Period: July 2021 - December 2021 (Data as of Mar 16, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava **Unique Clients** 21 16 31% Treatment Completed Successfully 5 56% 60% 73% 5 25% 🔺 Admits 4 Actual % vs Goal % Actual Actual % Goal % State Avg 9 5 80% 🔺 Discharges 80% 90% 83% Follow-up within 30 Days of Discharge **Bed Days** 2,271 1,953 16% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg **Data Submission Quality** Social Support 18 86% 60% 86% Data Entry Actual State Avg 6 25% 29% 13% **Employed** Valid NOMS Data 97% 77% 18 86% 95% 96% Stable Living Situation On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 91% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg 340 days Avg Utilization Rate 88% 90% 95% 14 0.4 Co-occurring Actual State Avg 100% 98% MH Screen Complete 90-110% >110% < 90% SA Screen Complete 100% 88% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov % Months Submitted

67%

83%

▲ > 10% Over

Goal

Actual

< 10% Under</p>

Below Goal

✓ Goal Met

\* State Avg based on 80 Active Supervised Apartments Programs

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 47     | 33       | 42%        | • |
| Admits         | 15     | -        |            |   |
| Discharges     | 18     | 1        | 1700%      | • |

| Data       | Jubili | itteu i | LU L | וויוע |     | Dy I' | i Oi i Li i        |
|------------|--------|---------|------|-------|-----|-------|--------------------|
|            | Jul    | Aug S   | Sep  | Oct   | Nov | Dec   | % Months Submitted |
| Admissions |        |         |      |       |     |       | 100%               |
| Discharges |        |         |      |       |     |       | 67%                |
|            |        |         |      |       |     |       |                    |

