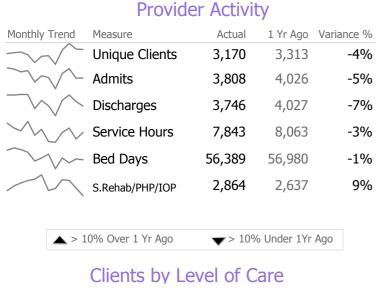
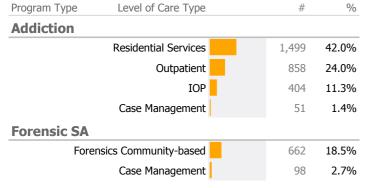
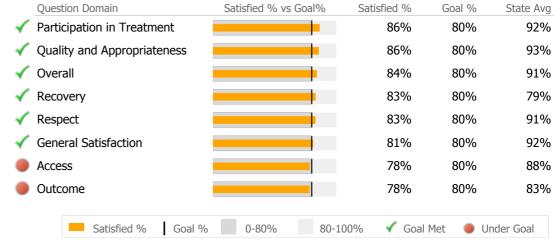
SCADD Lebanon, CT

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)





Consumer Satisfaction Survey (Based on 240 FY14 Surveys)



Client Demographics

Age

18-25

26-34

35-44

45-54

55-64

65+

Ethnicity Non-Hispanic Hisp-Puerto Rican Hispanic-Other Hispanic-Cuban Hispanic-Mexican

Unknown

	#	%	State Avg	Gender	#	%	State Avg
	553	17%	16%	Male	2,447	77%	▲ 60%
	1,029	33%	24%	Female 🧧 📔	717	23%	▼ 40%
Ĺ	653	21%	19%				
i	676	21%	23%				
-	224	7%	14%	Race	#	%	State Avg
	28	1%	4%	White/Caucasian	2,352	74%	66%
				Other 📘	355	11%	13%
	#	%	State Avg	Black/African American	315	10%	17%
	2,805	88%	▲ 75%	Am. Indian/Native Alaskan	63	2%	1%
	205	6%	12%	Unknown	48	2%	3%
	104	3%	6%	Asian	15	0%	1%
	40	1%	0%	Multiple Races	13	0%	1%
				Hawaiian/Other Pacific Islander	9	0%	0%
	14	0%	1%				
	2	0%	6%				

Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	88	124	-29% 🔻	,
Admits	74	101	-27% 🔻	,
Discharges	66	115	-43% 🔻	,
Service Hours	301	467	-35% 🔻	-

Data Submission Quality

	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	100%	86%
	On-Time Periodic	 Actual	State Avg
\checkmark	6 Month Updates	75%	22%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		60	91%	50%	76%	41%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🖌 Self Help		60	67%	60%	57%	7%	
Employed		0	0%	20%	15%	-20%	-
Social Support	<u> </u>	24	27%	60%	55%	-33%	-
Stable Living Situation	· · · ·	1	1%	80%	44%	-79%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		14	61%	90%	81%	-29%	
Apr May Jun % Months Submitted			> 10% Over	V < 10 ⁰	% Under		
100%		Actual	Goal 🖌	Goal Met	Below	Goal	

* State Avg based on 8 Active Standard Case Management Programs

Data Submitted to DMHAS by Month



1 or more Records Submitted to DMHAS

Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

Program Activity

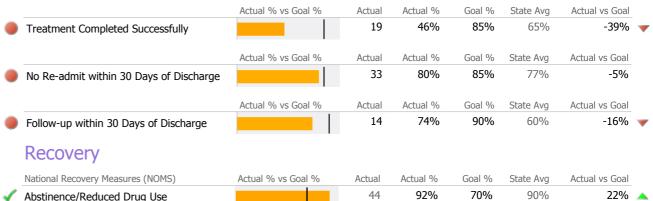
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	46	51	-10%
Admits	38	42	-10%
Discharges	41	42	-2%
Bed Days	3,315	3,457	-4%

Data Submission Quality

Data Entry	Actual	State Avg
🗹 Valid NOMS Data	99%	99%
√ Valid TEDS Data	100%	100%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	33%
Cooccurring	Actual	State Avg
🞻 MH Screen Complete	100%	99%
🞻 SA Screen Complete	100%	99%
Diagnosis	Actual	State Avg

Diagnosis	Actua	al State Avg
🗸 Valid Axis I Diagnosis	100%	6 100%
🗸 Valid Axis V GAF Score	100%	6 100%

Discharge Outcomes

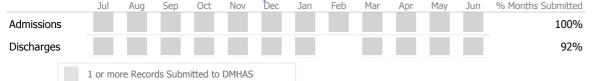


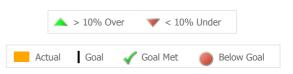
Hadonal Recovery Fieldsures (Nor15)	Actual 70 VS Coul 70	Actual	Actual 70	0001 /0	State Avg	Actual V3 Goal	
Abstinence/Reduced Drug Use		44	92%	70%	90%	22%	
Improved/Maintained Axis V GAF Score		36	88%	75%	90%	13%	
Employed		21	44%	60%	42%	-16%	•

Bed Utilization

			12	Months	Trend	Beds	Avg LC	DS	Turnover	Act	ual %	Goa	al %	State	e Avg	Actua	al vs Goal
«	Avg Utilization F	Rate				10	108 da	ays	0.1		91%	9	0%	9	92%		1%
			< 90%	0	90-110%		>110%										

Data Submitted to DMHAS by Month





* State Avg based on 11 Active Transitional/Halfway House 3.1 Programs

Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

Program Activity

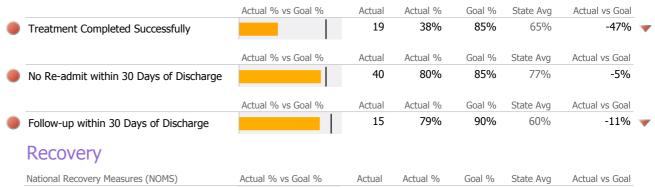
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	58	49	18%	
Admits	48	45	7%	
Discharges	50	40	25%	
Bed Days	3,464	3,573	-3%	

Data Submission Quality

	Data Entry	Actual	State Avg	
\checkmark	Valid NOMS Data	99%	99%	
\checkmark	Valid TEDS Data	100%	100%	
	On-Time Periodic	Actual	State Avg	
	6 Month Updates	N/A	33%	
	Cooccurring	Actual	State Avg	
	MH Screen Complete	98%	99%	
	SA Screen Complete	98%	99%	
	Diagnosis	Actual	State Avg	

Diagnosis	Actual	State Avy
🞸 Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	100%	100%

Discharge Outcomes

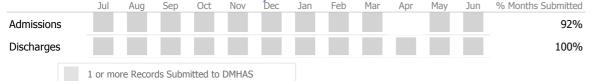


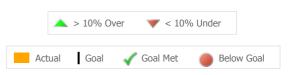
National Recovery measures (Norris)	Actual 70 V3 Goul 70	Accuui	Actual 70	0001 70	State Avg	Actual V5 Goul	
Abstinence/Reduced Drug Use		56	95%	70%	90%	25%	
Improved/Maintained Axis V GAF Score		44	88%	75%	90%	13%	
Employed		21	36%	60%	42%	-24%	-

Bed Utilization

		12	Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization F	Rate			11	103 day	s 0.1	86%	90%	92%	-4%
		< 90%	90-110%		>110%					

Data Submitted to DMHAS by Month





* State Avg based on 11 Active Transitional/Halfway House 3.1 Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	988	1,135	-13% 🔻
Admits	1,337	1,489	-10%
Discharges	1,332	1,493	-11% 🔻
Bed Days	5,870	5,819	1%

Data Submission Quality

Data Entry	Actual	State Avg
🖉 Valid NOMS Data	99%	96%
Valid TEDS Data	100%	100%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	N/A
Cooccurring	Actual	State Avg
MH Screen Complete	96%	99%
SA Screen Complete	96%	99%
Diagnosis	Actual	State Avg
DIADDOSIS	ACTUAL	State AVG

Diagnosis	Actual	State Avy
🞻 Valid Axis I Diagnosis	100%	100%
🗸 Valid Axis V GAF Score	100%	99%

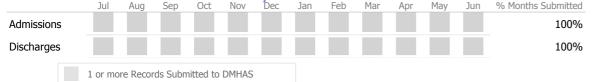
Discharge Outcomes

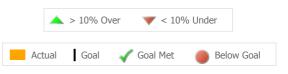


Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization F	Rate		20	5 days	0.0	80%	90%	88%	-10%
	<	90% 90-110%		>110%					

Data Submitted to DMHAS by Month





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

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

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

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	96	89	8%	
Admits	72	66	9%	
Discharges	73	64	14% 🔺	
Bed Days	8,632	8,454	2%	

Data Submission Quality

Data Entry	A	ctual	State Avg
🗸 Valid NOMS Data	9	98%	98%
🞸 Valid TEDS Data	10	00%	100%
On-Time Periodic	A	ctual	State Avg
🞸 6 Month Updates	10	00%	7%
Cooccurring	A	ctual	State Avg
MH Screen Complete	10	00%	98%
🖌 SA Screen Complete	10	00%	98%
Diagnosis	Δ	ctual	State Avo

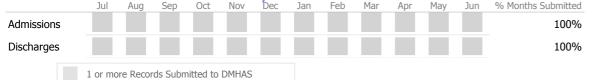
Diagnosis	Actual	State Avy
√ Valid Axis I Diagnosis	100%	100%
🗸 Valid Axis V GAF Score	100%	100%

Discharge Outcomes

Bed Utilization							
Improved/Maintained Axis V GAF Sco	bre		69	93%	95%	89%	-2%
Abstinence/Reduced Drug Use			. 87	90%	70%	80%	20%
National Recovery Measures (NOMS)	Actual %	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Recovery							
Follow-up within 30 Days of Discharg	je		33	63%	90%	58%	-27%
	Actual	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Disch	arge		67	92%	85%	91%	7%
	Actual	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully			52	71%	70%	71%	1%
	Actual	% vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal

		< 90%	90-110%	>110%
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Data Submitted to Sep OCt Nov Dec Jan





* State Avg based on 40 Active Intermediate/Long Term Res.Tx 3.5 Programs

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

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	507	489	4%
Admits	467	439	6%
Discharges	454	449	1%
Bed Days	29,754	27,780	7%

Data Submission Quality

Data Entry	Actual	State Avg
🞸 Valid NOMS Data	100%	98%
√ Valid TEDS Data	100%	100%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	7%
Cooccurring	Actual	State Avg
🞻 MH Screen Complete	100%	98%
🞸 SA Screen Complete	100%	98%
Diagnosis	Actual	State Avo

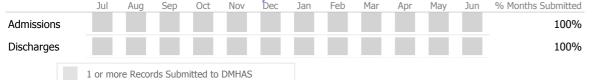
Diagnosis	Actual	State Avy
√ Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	100%	100%

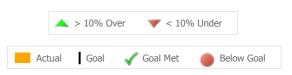
Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		288	63%	70%	71%	-7%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
No Re-admit within 30 Days of Discharge		411	91%	85%	91%	6%	
			A - H 1 0/	Goal %	Chaba Aura	Actual vs Goal	
	Actual % vs Goal %	Actual	Actual %	Guai 70	State Avg	Actual vs Guai	
Follow-up within 30 Days of Discharge	Actual % vs Goal %	Actual	78%	90%	58%	-12%	
Follow-up within 30 Days of Discharge Recovery	Actual % vs Goal %						
	Actual % vs Goal %						
Recovery		226	78%	90%	58%	-12%	

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
<	Avg Utilization Rate		84	72 days	0.1	97%	90%	100%	7%
		< 90% 90-110%		>110%					

Data Submitted to DMHAS by Month





* State Avg based on 40 Active Intermediate/Long Term Res.Tx 3.5 Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	73	78	-6%
Admits	62	67	-7%
Discharges	63	65	-3%
Bed Days	4,232	4,069	4%

Data Submission Quality

Valid Axis I Diagnosis

Valid Axis V GAF Score

Data Entry	Actual	State Avg	
🗸 Valid NOMS Data	99%	99%	
🗸 Valid TEDS Data	100%	100%	
On-Time Periodic	Actual	State Avg	
6 Month Updates	N/A	33%	
Cooccurring	Actual	State Avg	
🞻 MH Screen Complete	99%	99%	
🞻 SA Screen Complete	99%	99%	
Diagnosis	Actual	State Avg	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		38	60%	85%	65%	-25%	-
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	No Re-admit within 30 Days of Discharge		51	81%	85%	77%	-4%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		33	87%	90%	60%	-3%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Abstinence/Reduced Drug Use		75	100%	70%	90%	30%	
\checkmark	Improved/Maintained Axis V GAF Score		62	98%	75%	90%	23%	

Bed Utilization

Employed

Improved/Maintained Axis V GAF Score

		12	Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Ra	ate			13	73 days	0.1	89%	90%	92%	-1%
		< 90%	90-110%		>110%					

39

52%

60%

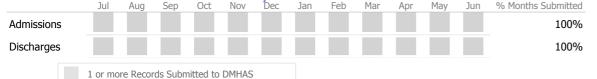
42%

-8%

Data Submitted to DMHAS by Month

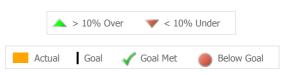
100%

100%



100%

100%



* State Avg based on 11 Active Transitional/Halfway House 3.1 Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	108	108	0%
Admits	109	111	-2%
Discharges	104	107	-3%
Service Hours	111	104	7%
Social Rehab/PHP/IOP Days	676	828	-18% 🔻

Data Submission Quality

Data Entry	Actua	State Avg
Valid NOMS Data	99%	
🞸 Valid TEDS Data	100%	99%
On-Time Periodic	Actua	I State Avg
6 Month Updates	N/A	14%
Cooccurring	Actua	I State Avg
√ MH Screen Complete	100%	96%
🞻 SA Screen Complete	100%	96%
Diagnosis	Actua	State Ava

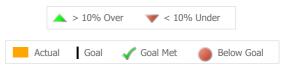
Diagnosis	A	ctual State A	٩vg
🞻 Valid Axis I Diagnosis	10	98 %0	3%
Valid Axis V GAF Score	10	0% 98	3%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		54	52%	50%	55%	2%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		19	35%	90%	52%	-55%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Abstinence/Reduced Drug Use		93	79%	55%	65%	24%	4
Not Arrested		112	95%	75%	93%	20%	
Stable Living Situation		110	93%	95%	90%	-2%	
Self Help		65	55%	60%	51%	-5%	
Improved/Maintained Axis V GAF Score		83	80%	75%	83%	5%	
Employed		49	42%	50%	31%	-8%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		14	100%	90%	80%	10%	-

Data Submitted to DMHAS by Month





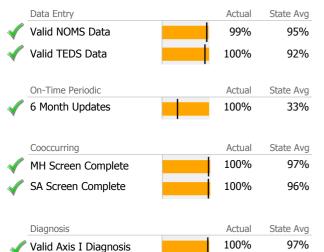
* State Avg based on 50 Active Standard IOP Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	406	401	1%
Admits	364	379	-4%
Discharges	354	359	-1%
Service Hours	2,947	2,728	8%

Data Submission Quality

Valid Axis V GAF Score



Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
(Treatment Completed Successfully		214	60%	50%	51%	10%
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Abstinence/Reduced Drug Use		373	86%	55%	58%	31%
	Not Arrested		422	97%	75%	86%	22%
	Employed		254	58%	50%	40%	8%
	Stable Living Situation		412	95%	95%	85%	0%
	Self Help		201	46%	60%	26%	-14%
	Improved/Maintained Axis V GAF Score		254	72%	75%	62%	-3%
	Service Utilization						
_		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
,	Clients Receiving Services		81	99%	90%	81%	9%
	Service Engagement						
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	2 or more Services within 30 days		285	84%	75%	73%	9%

Actual

Goal

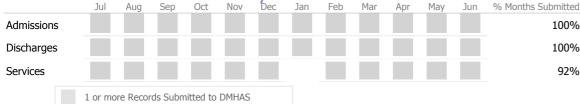
* State Avg based on 116 Active Standard Outpatient Programs

🗹 Goal Met

Below Goal

Data Submitted to DMHAS by Month

100%



95%

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	300	276	9%	
Admits	320	275	16% 🔺	
Discharges	317	282	12% 🔺	
Service Hours	234	350	-33% 🔻	,
Social Rehab/PHP/IOP Days	2,188	1,809	21% 🔺	

Data Submission Quality

	Data Entry	Actual	State Avg	
\checkmark	Valid NOMS Data	96%	96%	
\checkmark	Valid TEDS Data	100%	99%	
	On-Time Periodic	Actual	State Avg	
	6 Month Updates	N/A	14%	
	Cooccurring	Actual	State Avg	
\checkmark	MH Screen Complete	100%	96%	
\checkmark	SA Screen Complete	100%	96%	
Ŧ		Γ		
	Diagnosis	Actual	State Ava	

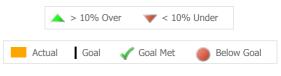
Diagnosis	A	Actual	State Avg
🞻 Valid Axis I Diagnosis	1	00%	98%
🞸 Valid Axis V GAF Score	1	00%	98%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		132	42%	50%	55%	-8%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Follow-up within 30 Days of Discharge		71	54%	90%	52%	-36%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		329	98%	75%	93%	23%	
Abstinence/Reduced Drug Use		248	74%	55%	65%	19%	
Stable Living Situation		310	92%	95%	90%	-3%	
Improved/Maintained Axis V GAF Score		216	68%	75%	83%	-7%	
Self Help		160	47%	60%	51%	-13%	
Employed		124	37%	50%	31%	-13%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		21	100%	90%	80%	10%	

Data Submitted to DMHAS by Month





* State Avg based on 50 Active Standard IOP Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	467	524	-11%	▼
Admits	420	463	-9%	
Discharges	425	475	-11%	▼
Service Hours	3,543	3,514	1%	

Data Submission Quality

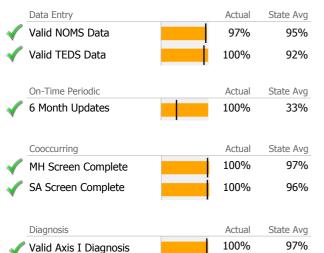
Valid Axis V GAF Score

Admissions Discharges

Services

Jul

Aug



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		247	58%	50%	51%	8%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		393	79%	55%	58%	24%
Not Arrested		491	99%	75%	86%	24%
Employed		270	54%	50%	40%	4%
Stable Living Situation		471	95%	95%	85%	0%
Improved/Maintained Axis V GAF Score		305	72%	75%	62%	-3%
Self Help		155	31%	60%	26%	-29%
Clients Receiving Services	Actual % vs Goal %	Actual 72	Actual %	Goal % 90%	State Avg 81%	Actual vs Goal
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		333	85%	75%	73%	10%
Apr May Jun % Months Submitted			> 10% Over	▼ < 100	% Under	
100%			> 10% Over	▼ < 10°	% Under	

92%

1 or more Records Submitted to DMHAS

Data Submitted to DMHAS by Month

Oct

Sep

100%

Nov

Dec

95%

Jan

Feb

Μ



Forensic SA - Case Management - Standard Case Management

Reporting Period: July 2014 - June 2015 (Data as of Sep 17, 2015)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	44	40	10%
Admits	34	33	3%
Discharges	36	31	16% 🔺
Service Hours	264	466	-43% 🔻

Data Submission Quality

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Data Entry		Actual	State Avg	
Valid NOMS Data		100%	86%	
	-			
On-Time Periodic		Actual	State Avg	
6 Month Updates		N/A	22%	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		18	50%	50%	76%	0%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Self Help		35	80%	60%	57%	20%
Stable Living Situation	· · · · ·	36	82%	80%	44%	2%
Social Support		22	50%	60%	55%	-10%
Employed		1	2%	20%	15%	-18%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
		7	88%	90%	81%	-2%

Data Submitted to DMHAS by Month



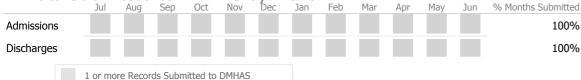
	> 10% 0	ver 🛛 🔻 < 10	% Under	
Actual	Goal	🖌 Goal Met	Below	/ Goal

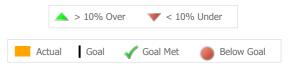
* State Avg based on 8 Active Standard Case Management Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	662	668	-1%
Admits	387	401	-3%
Discharges	342	388	-12% 🔻

Data Submitted to DMHAS by Month





* State Avg based on 16 Active Pre-trial Intervention Programs Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	51	49	4%	
Admits	48	38	26% 🔺	
Discharges	50	41	22% 🔺	
Service Hours	443	435	2%	

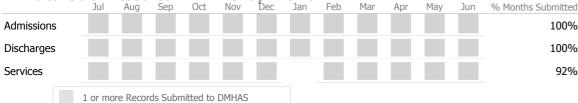
Data Submission Quality

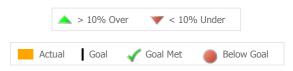
	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	100%	99%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	N/A	56%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completion	eted Successfully		42	84%	50%	48%	34%
Recovery							
National Recovery M	easures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/ Self Help			48	86%	60%	66%	26%
Stable Living Situa	tion		51	91%	80%	84%	11%
Employed		•	3	5%	20%	14%	-15%
Service Ut	ilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving S	Services		6	100%	90%	90%	10%

Data Submitted to DMHAS by Month





 \ast State Avg based on 17 Active Standard Case Management Programs

Program Activity

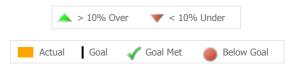
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	39	87	-55% 🔻
Admits	28	77	-64% 🔻
Discharges	39	76	-49% 🔻
Bed Days	1,122	932	20% 🔺

Data Submission Quality

Actual	State Avg	
99%	98%	
Actual	State Avg	
N/A	0%	
	99% Actual	99% 98% Actual State Avg

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													25%
Discharges													25%
	1 or mo	ore Reco	rds Subn	nitted to	DMHAS								



* State Avg based on 39 Active Supported Recovery Houses Programs