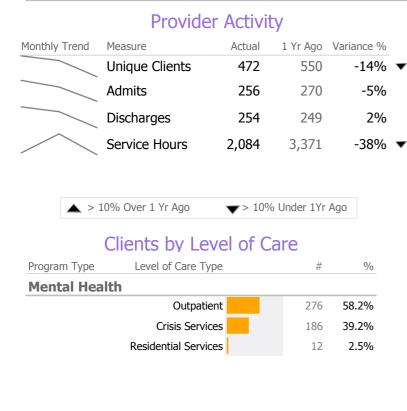
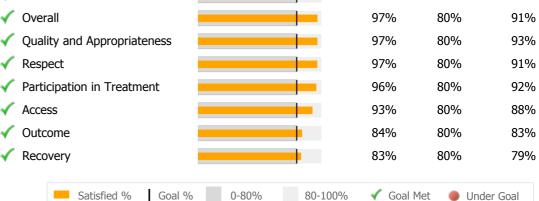
CommuniCare Inc

New Haven, CT

Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)



Consumer Satisfaction Survey (Based on 126 FY16 Surveys) Question Domain Goal % Satisfied % vs Goal% Satisfied % State Avg General Satisfaction 98% 80% 92%



Client Demographics

Age		#	%	State Avg	Gender	#	%	Sta	te Avg
18-25		31	7%	12%	Female	261	55%		42%
26-34 <mark> </mark>		57	12%	22%	Male 🗾	211	45%	▼	58%
35-44 📕		93	20%	19%	Transgender				0%
45-54 📒		136	29%	23%					
55-64 📕		107	23%	18%					
65+		42	9%	6%	Race	#	%	Sta	te Avg
•					White/Caucasian 📒 📔	218	46%	▼	65%
Ethnicity		#	%	State Avg	Other	209	44%	۸	13%
Non-Hispanic		189	40%	▼ 75%	Black/African American	36	8%		16%
Hisp-Puerto Rican		187	40%	▲ 12%	Am. Indian/Native Alaskan	5	1%		1%
Hispanic-Other		76	16%	7%	Unknown	2	0%		3%
Hispanic-Mexican		15	3%	1%	Asian	1	0%		1%
· · · · ·					Multiple Races	1	0%		1%
Unknown		3	1%	6%	Hawaiian/Other Pacific Islander				0%
Hispanic-Cuban		2	0%	0%					
		Unique C	lients	State Avg	▲ > 10% Over State Avg ▼	> 10% L	Inder S	tate A	vg

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	60	43	40%	
Admits	61	42	45%	
Discharges	60	42	43%	

Crisis

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark Evaluation within 1.5 hours of Request		60	98%	75%	67%	23%	
Community Location Evaluation		61	100%	80%	81%	20%	
Follow-up Service within 48 hours		24	96%	90%	54%	6%	

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted					
Admissions				100%					
Discharges				100%					
1 or more Records Submitted to DMHAS									

	> 10% 0	ver	▼ < 10	% Under	
Actual	Goal	\checkmark	Goal Met	Belo	w Goal

BH Care Shoreline Supported Residential Prog 315-2

CommuniCare Inc

Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3		
Admits	3	-	
Discharges	2	-	
Service Hours	-	-	

Data Submission Quality

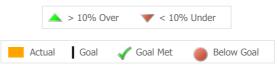
	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	100%	98%
		•	
	On-Time Periodic	Actual	State Avg
	6 Month Updates	N/A	89%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				33%
Discharges				33%
Services				0%
	1 or mo	re Recor	ds Subr	nitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		2	100%	50%	92%	50%	4
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		2	67%	60%	87%	7%	
Stable Living Situation		2	67%	85%	93%	-18%	
Employed		0	0%	25%	14%	-25%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		0	0%	90%	95%	N/A	



* State Avg based on 39 Active Residential Support Programs

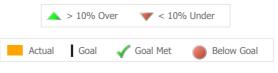
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	37	46	-20%	▼
Admits	42	56	-25%	▼
Discharges	42	56	-25%	▼

Crisis

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Evaluation within 1.5 hours of Request		42	100%	75%	67%	25%	
«	Community Location Evaluation		39	93%	80%	81%	13%	
\checkmark	Follow-up Service within 48 hours		21	91%	90%	54%	1%	

Data Submitted to DMHAS by Month

Admissions	100%	
Discharges	100%	
	1 or more Records Submitted to DMHAS	



BH Care Valley Supported Residential Program 311-2

CommuniCare Inc

Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3	1	200%	
Admits	2	-		
Discharges	-	-		
Service Hours	33	-		

Data Submission Quality

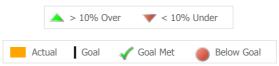
	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	100%	98%
		•	
	On-Time Periodic	Actual	State Avg
	6 Month Updates	0%	89%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted			
Admissions				33%			
Discharges				0%			
Services				67%			
	1 or more Records Submitted to DMHAS						

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		N/A	N/A	50%	92%	N/A	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Employed		1	33%	25%	14%	8%	
\checkmark	Social Support		2	67%	60%	87%	7%	
	Stable Living Situation		2	67%	85%	93%	-18%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		2	67%	90%	95%	-23%	-



* State Avg based on 39 Active Residential Support Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	50	43	16%	
Admits	66	40	65%	
Discharges	67	39	72%	

Crisis

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Evaluation within 1.5 hours of Request		76	100%	75%	67%	25% 🔺
Community Location Evaluation		57	75%	80%	81%	-5%
Follow-up Service within 48 hours		49	100%	90%	54%	10%

Data Submitted to DMHAS by Month

Admissions	100%
Discharges	100%
	1 or more Records Submitted to DMHAS



CommuniCare Inc

Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	5	20% 🔺
Admits	-	-	
Discharges	-	-	
Service Hours	85	43	95% 🔺

Data Submission Quality

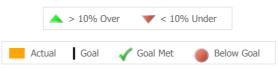
Data Entry	Actual	State Avg
√ Valid NOMS Data	100%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	17%	89%

Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted
Admissions	5				0%
Discharges	;				0%
Services					100%
		1 or mo	ore Recor	ds Subr	nitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	92%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		5	83%	60%	87%	23%
Stable Living Situation		4	67%	85%	93%	-18%
Employed		0	0%	25%	14%	-25%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		4	67%	90%	95%	-23%



* State Avg based on 39 Active Residential Support Programs

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	16	-44%	▼
Admits	-	-		
Discharges	-	5	-100%	▼
Service Hours	64	71	-11%	▼

Data Submission Quality

	Data Entry		Actual	State Avg
	Valid NOMS Data		N/A	93%
	On-Time Periodic		Actual	State Avg
\checkmark	6 Month Updates		100%	58%
¥				
	Cooccurring		Actual	State Avg
	MH Screen Complete		N/A	83%
	•		,	
	SA Screen Complete		N/A	81%
		•		
	Diagnosis		Actual	State Avg
\checkmark	Valid Axis I Diagnosis		100%	97%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		N/A	N/A	50%	42%	N/A	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		7	78%	60%	64%	18%	
\checkmark	Improved/Maintained Axis V GAF Score		6	86%	75%	45%	11%	
	Stable Living Situation		7	78%	95%	80%	-17%	•
	Employed		1	11%	30%	19%	-19%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		9	100%	90%	69%	10%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		0	0%	75%	64%	-75%	-

Data Submitted to DMHAS by Month

100%

86%

	501	, lug	ocp	70 TIONEID DUDINICCOU
Admissions				0%
Discharges				0%
Services				100%
	1 or mo	re Reco	rds Subn	nitted to DMHAS

Valid Axis V GAF Score

	> 10% 0	ver 🔻 < 10	% Under	
Actual	Goal	🞻 Goal Met	Belo	w Goal

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	24	8%	
Admits	1	3	-67% 🔻	
Discharges	2	3	-33% 🔻	
Service Hours	72	88	-18% 🔻	

Data Submission Quality

	Data Entry		Actual	State Avg
\checkmark	Valid NOMS Data		100%	93%
		·		
	On-Time Periodic		Actual	State Avg
	6 Month Updates		37%	58%
	Cooccurring		Actual	State Avg
	MH Screen Complete		0%	83%
	SA Screen Complete		0%	81%
	Diagnosis		Actual	State Avg
√	Valid Axis I Diagnosis		100%	97%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		0	0%	50%	42%	-50%	-
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		25	96%	60%	64%	36%	
\checkmark	Stable Living Situation		25	96%	95%	80%	1%	
	Employed	—	5	19%	30%	19%	-11%	-
	Improved/Maintained Axis V GAF Score		14	67%	75%	45%	-8%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		20	83%	90%	69%	-7%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
V	2 or more Services within 30 days		1	100%	75%	64%	25%	

Data Submitted to DMHAS by Month

100%

86%



Valid Axis V GAF Score

	> 10% 0	ver 🔻 < 10%	6 Under	
Actual	Goal	🖌 Goal Met	Below	/ Goal

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	19	16%	
Admits	1	5	-80%	▼
Discharges	2	3	-33%	▼
Service Hours	130	143	-9%	

Data Submission Quality

	Data Entry	Actua	I State Avg
	Valid NOMS Data	93%	93%
	On-Time Periodic	Actua	State Avg
V	6 Month Updates	60%	58%
	Cooccurring	Actua	State Avg
\checkmark	MH Screen Complete	100%	83%
V	SA Screen Complete	100%	81%
	Diagnosis	Actua	I State Avg
\checkmark	Valid Axis I Diagnosis	100%	97%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
«	Treatment Completed Successfully		1	50%	50%	42%	0%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Stable Living Situation		22	100%	95%	80%	5%	
√	Improved/Maintained Axis V GAF Score		16	94%	75%	45%	19%	
	Social Support		11	50%	60%	64%	-10%	
	Employed	– 1 –	3	14%	30%	19%	-16%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		20	100%	90%	69%	10%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
«	2 or more Services within 30 days		1	100%	75%	64%	25%	

Data Submitted to DMHAS by Month

100%

86%



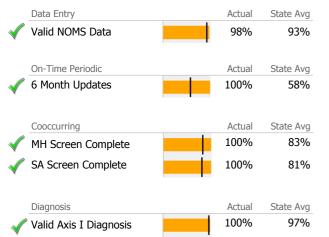
Valid Axis V GAF Score

	> 10% 0	ver 🔻 < 10%	6 Under	
Actual	Goal	🞻 Goal Met	Below	Goal

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	31	16%	
Admits	8	6	33%	
Discharges	6	7	-14%	▼
Service Hours	176	191	-8%	

Data Submission Quality



Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Treatment Completed Successfully		6	100%	50%	42%	50%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		28	76%	60%	64%	16%	
«	Employed	<u> </u>	11	30%	30%	19%	0%	
«	Improved/Maintained Axis V GAF Score		28	100%	75%	45%	25%	
	Stable Living Situation	· · · ·	34	92%	95%	80%	-3%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
«	Clients Receiving Services		30	97%	90%	69%	7%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
«	2 or more Services within 30 days		8	100%	75%	64%	25%	

Data Submitted to DMHAS by Month

100%

86%



Valid Axis V GAF Score

	> 10% 0	ver 🔻 < 10%	6 Under
Actual	Goal	🖌 Goal Met	Below Goal

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	12	32	-63% 🔻
Admits	6	15	-60% 🔻
Discharges	8	17	-53% 🔻
Service Hours	1,084	2,274	-52% 🔻

Data Submission Quality

Data Entry		Actual	State Avg	
Valid NOMS Data		90%	93%	
On-Time Periodic	-	Actual	State Avg	
6 Month Updates		N/A	58%	
Cooccurring		Actual	State Avg	
MH Screen Complete		100%	83%	
🖌 SA Screen Complete		100%	81%	
Diagnosis		Actual	State Avg	
🞻 Valid Axis I Diagnosis		100%	97%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Treatment Completed Successfully		8	100%	50%	42%	50%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		12	100%	60%	64%	40%	
	Stable Living Situation		11	92%	95%	80%	-3%	
\checkmark	Improved/Maintained Axis V GAF Score		7	88%	75%	45%	13%	
	Employed		0	0%	30%	19%	-30%	-
	Service Utilization							
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		4	100%	90%	69%	10%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	2 or more Services within 30 days		6	100%	75%	64%	25%	

Data Submitted to DMHAS by Month

100%

86%



Valid Axis V GAF Score

	> 10% 0	ver 🔻 < 10%	6 Under	
Actual	Goal	🞻 Goal Met	Below Goa	al

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	31	26	19%	
Admits	-	25	-100%	▼
Discharges	-	5	-100%	▼
Service Hours	-	113	-100%	▼

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	93%
On-Time Periodic	Actual	State Avg
6 Month Updates	3%	58%
Cooccurring	Actual	State Avg
MH Screen Complete	N/A	83%
SA Screen Complete	N/A	81%
SA Screen complete	11/7	0170
Diagnosis	Actual	State Avg

Diagnosis	Diagnosis			
🗸 Valid Axis I Diagnosis		100%	97%	
🗸 Valid Axis V GAF Score		100%	86%	

Data Submitted to DMHAS by Month

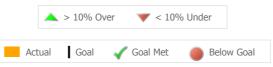
	Jui	Aug	JCP	70 PIOTICIS Submitteeu
Admissions				0%
Discharges				0%
Services				0%

1 or more Records Submitted to DMHAS

Discharge Outcomes

 \checkmark

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		N/A	N/A	50%	42%	N/A	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
1	Stable Living Situation		30	97%	95%	80%	2%	
	Employed	<mark> </mark>	5	16%	30%	19%	-14%	-
	Social Support		1	3%	60%	64%	-57%	
	Improved/Maintained Axis V GAF Score		0	0%	75%	45%	-75%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		0	0%	90%	69%	N/A	-
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		0	0%	75%	64%	-75%	•



Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	56	159	-65%	▼
Admits	-	18	-100%	▼
Discharges	-	4	-100%	▼
Service Hours	152	201	-25%	▼

Data Submission Quality

	Data Entry		Actual	State Avg
	Valid NOMS Data		N/A	93%
	On-Time Periodic		Actual	State Avg
\checkmark	6 Month Updates		86%	58%
÷				
	Cooccurring		Actual	State Avg
	MH Screen Complete		N/A	83%
	SA Screen Complete	ĺ	N/A	81%
	Diagnosis		Actual	State Avg
	Valid Axis I Diagnosis		100%	97%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		N/A	N/A	50%	42%	N/A	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Improved/Maintained Axis V GAF Score		52	93%	75%	45%	18%	
\checkmark	Stable Living Situation		56	100%	95%	80%	5%	
\checkmark	Social Support		36	64%	60%	64%	4%	
	Employed		13	23%	30%	19%	-7%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		42	75%	90%	69%	-15%	•
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		0	0%	75%	64%	-75%	-

Data Submitted to DMHAS by Month

100%

86%

	Jui	riag	ocp	70 TIONEID DUDINICCO
Admissions				0%
Discharges				0%
Services				100%
	1 or mo	ore Reco	rds Subr	nitted to DMHAS

Valid Axis V GAF Score

	> 10% 0	ver 🔻 < 109	% Under	
Actual	Goal	🖌 Goal Met	Below	Goal

Program Activity

Mental Health - Outpatient - Standard Outpatient

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	86	71	21%	
Admits	16	13	23%	
Discharges	16	21	-24%	▼
Service Hours	291	247	18%	

Data Submission Quality

	Data Entry	Actu	al State Avg	_
\checkmark	Valid NOMS Data	999	% 93%	
		•		
	On-Time Periodic	Actu	al State Avg	
	6 Month Updates	589	% 58%	
	Cooccurring	Actu	al State Avg	
\checkmark	MH Screen Complete	1000	% 83%	-
	SA Screen Complete	739	% 81%	
	Diagnosis	Actu	al State Avg	
\checkmark	Valid Axis I Diagnosis	1009	% 97%	
	Valid Axis V GAF Score	1009	% 86%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		5	31%	50%	42%	-19%	-
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		85	99%	60%	64%	39%	
\checkmark	Stable Living Situation		84	98%	95%	80%	3%	
	Employed	<u> </u>	14	16%	30%	19%	-14%	-
	Improved/Maintained Axis V GAF Score	<mark></mark>	16	29%	75%	45%	-46%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		65	93%	90%	69%	3%	
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
~	2 or more Services within 30 days		13	81%	75%	64%	6%	

Data Submitted to DMHAS by Month

	1000/
	100%
	67%
	100%

	> 10% 0	/er	V < 10	% Under	
Actual	Goal	-	🕈 Goal Met	🔵 Belo	w Goal

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	40	39	3%
Admits	50	47	6%
Discharges	49	47	4%

Crisis

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Evaluation within 1.5 hours of Request		41	93%	75%	67%	18%	
«	Community Location Evaluation		41	93%	80%	81%	13%	
\checkmark	Follow-up Service within 48 hours		40	95%	90%	54%	5%	

Data Submitted to DMHAS by Month

		, rug	000	70 Honeno Sabinicea	
Admissions				100%	
Discharges				100%	
	1 or mo	1 or more Records Submitted to DMHAS			

