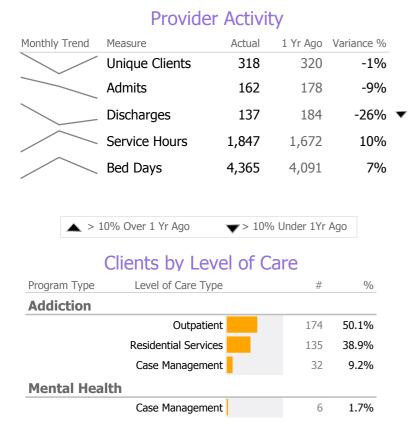
McCall Foundation Inc

Torrington, CT

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



Consumer Satisfaction Survey (Based on 194 FY16 Surveys)



Client Demographics

Age

18-25

26-34

35-44

45-54 55-64 65+

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

State Avg		%	#		Gender	State Avg	%	#	
58%		62%	197		Male	12%	12%	38	
42%		38%	121		Female	22%	30%	96	•
0%					Transgender	19%	17%	55	Ĺ
						23%	21%	67	
						18%	13%	42	
State Avg		%	#		Race	6%	6%	20	
▲ 65%	4	91%	290		White/Caucasian				
▼ 16%	7	4%	13		Black/African American	State Avg	%	#	
▼ 13%		2%	6		Other	▲ 75%	94%	298	
1%		1%	3		Asian	12%	4%	14	
1%		1%	2		Am. Indian/Native Alaskan	7%	2%	5	
1%		1%	2		Multiple Races	6%	0%	1	
3%		1%	2		Unknown		0%	T	
0%					Hawaiian/Other Pacific Islander	0%			
				,		1%			

Unique Clients 🛛 State Avg 🔹 🔺 > 10% Over State Avg 🔹 🔻 > 10% Under State Avg

221 Migeon-PILOTS Development 562-551

McCall Foundation Inc

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

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

Program Quality Dashboard

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	-	-	
Discharges	-	-	
Service Hours	26	25	4%

Data Submission Quality

	Data Entry		Actual	State Avg
	Valid NOMS Data		80%	98%
		·		
	On-Time Periodic		Actual	State Avg
\checkmark	6 Month Updates		83%	69%

Data Submitted to DMHAS by Month

	Jui	Aug	Sep	% Monus Submitted				
Admission	5			0%				
Discharge	5			0%				
Services				67%				
	1 or more Records Submitted to DMHAS							

Recovery

Clients Receiving Services		4	67%	90%	87%	-23%	-
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Service Utilization							
Stable Living Situation		4	67%	85%	83%	-18%	
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
/							

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

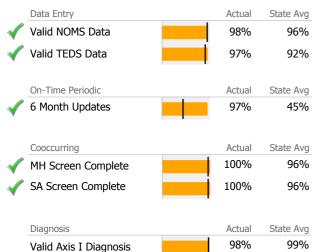
* State Avg based on 54 Active Supportive Housing – Development Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	168	154	9%	
Admits	66	74	-11% 🔻	,
Discharges	46	75	-39% 🔻	,
Service Hours	1,385	1,116	24% 🔺	

Data Submission Quality



Valid Axis V GAF Score 98% 93%

Data Submitted to DMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		32	70%	50%	51%	20%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		156	92%	75%	83%	17%	
Abstinence/Reduced Drug Use		108	64%	55%	51%	9%	
Employed	i	84	50%	50%	40%	0%	
Self Help		99	59%	60%	23%	-1%	
Stable Living Situation	i	139	82%	95%	83%	-13%	-
Improved/Maintained Axis V GAF Score	• I .	6	8%	75%	52%	-67%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		114	93%	90%	68%	3%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		60	91%	75%	77%	16%	



* State Avg based on 115 Active Standard Outpatient Programs

McCall Foundation Inc

Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

25% 🔺

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	91	91	0%
Admits	73	72	1%
Discharges	66	71	-7%
Bed Days	1,822	1,742	5%

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	0%
Cooccurring	Actual	State Avg
🖌 MH Screen Complete	100%	93%
🖌 SA Screen Complete	100%	94%
Diagnosis	Actual	State Avg
🖌 Valid Axis I Diagnosis	100%	100%

Data Submitted to DMHAS by Month

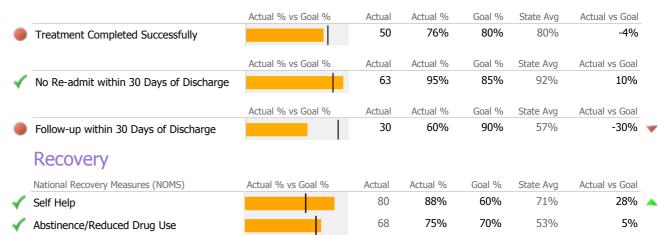
100%

100%

	Jui	Aug	Sep	70 MOITUIS SubITILLEU
Admissions				100%
Discharges				100%
	1 or mo	ore Recor	rds Subr	nitted to DMHAS

Valid Axis V GAF Score

Discharge Outcomes



Bed Utilization

Improved/Maintained Axis V GAF Score

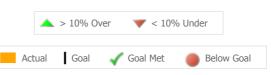
		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
K	Avg Utilization Rate		20	25 days	0.2	99%	90%	98%	9%
	< 90	90-110%		>110%					

66

100%

75%

74%



* State Avg based on 12 Active SA Intensive Res. Rehabilitation 3.7 Programs

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16	21	-24% 🔻
Admits	5	8	-38% 🔻
Discharges	3	10	-70% 🔻
Bed Days	1,170	1,120	4%

Data	Subn	nitted Aug	to _{Sep}	DMHAS by Month % Months Submitted
Admissions				100%
Discharges				67%
	1 or m	nore Record	ds Sub	pmitted to DMHAS



* State Avg based on 14 Active Recovery House Programs

McCall Foundation Inc Addiction - Residential Services - Transitional/Halfway House 3.1 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	30	28	7%
Admits	15	16	-6%
Discharges	15	15	0%
Bed Days	1,373	1,229	12% 🔺

Data Submission Quality

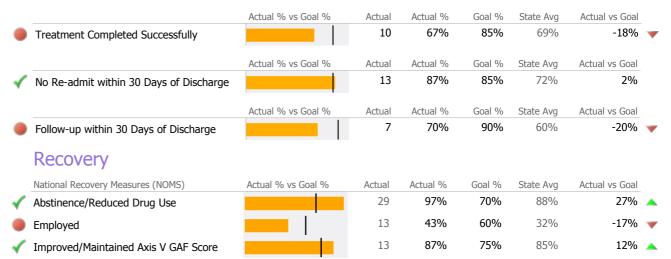
	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	99%	99%
	Valid TEDS Data	98%	100%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	N/A	14%
	Cooccurring	Actual	State Avg
	MH Screen Complete	90%	96%
	SA Screen Complete	90%	97%
	Diagnosis	Actual	State Avg
~		 4000/	1000/

5		
🞻 Valid Axis I Diagnosis	100%	100%
Valid Axis V GAF Score	100%	94%

Data Submitted to DMHAS by Month

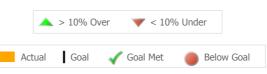


Discharge Outcomes



Bed Utilization





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

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	32	34	-6%
Admits	2	-	
Discharges	3	-	
Service Hours	409	441	-7%

Data Submission Quality

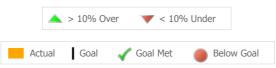
	Data Entry	Actual	State Avg
	Valid NOMS Data	84%	98%
	On-Time Periodic	Actual	State Avg
\checkmark	6 Month Updates	73%	69%

Data Submitted to Sep OMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		3	100%	50%	48%	50%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
/ Self Help		30	94%	60%	67%	34%
Stable Living Situation		29	91%	80%	82%	11%
Employed	<mark>=</mark>	4	12%	20%	17%	-8%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		28	97%	90%	82%	7%



* State Avg based on 17 Active Standard Case Management Programs

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

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	19	-68%	▼
Admits	1	8	-88%	▼
Discharges	4	13	-69%	▼
Service Hours	27	90	-70%	▼

Data Submission Quality

Data Entry	A	ctual	State Avg
🞻 Valid NOMS Data		97%	96%
√ Valid TEDS Data	10	00%	92%
	·		
On-Time Periodic	A	ctual	State Avg
6 Month Updates		N/A	45%
Cooccurring	A	ctual	State Avg
🞻 MH Screen Complete	1	00%	96%
🞻 SA Screen Complete	1	00%	96%
Diagnosis	A	ctual	State Avg
Valid Axis I Diagnosis	1	00%	99%

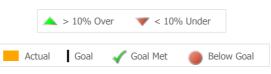
	100 %	9970
🖋 Valid Axis V GAF Score	100%	93%

Data Submitted to DMHAS by Month



Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Treatment Completed Successfully		1	25%	50%	51%	-25%	-
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested		6	100%	75%	83%	25%	
🖉 Self Help		4	67%	60%	23%	7%	
Stable Living Situation	· · ·	6	100%	95%	83%	5%	
Employed	·	3	50%	50%	40%	0%	
Abstinence/Reduced Drug Use	i	3	50%	55%	51%	-5%	
Improved/Maintained Axis V GAF Score	' I	0	0%	75%	52%	-75%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		1	50%	90%	68%	-40%	-
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		0	0%	75%	77%	-75%	-



* State Avg based on 115 Active Standard Outpatient Programs