### InterCommunity Inc.

East Hartford, CT

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

Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

80-100%

Under Goal

Provider Activity							
Monthly Trend	Measure	Actual	1 Yr Ago	Variance %			
	Unique Clients	2,756	3,050	-10%			
	Admits	385	492	-22%	▼		
	Discharges	436	399	9%			
	Service Hours	8,374	9,857	-15%	▼		
	Bed Days	1,564	1,656	-6%			

▲ > 10% Over 1 Yr Ago

▼ > 10% Under 1Yr Ago

66

47

31

28

21

2.0%

1.5%

1.0%

0.9%

0.6%

## Clients by Level of Care

Program Type Level of Care Type		#	%
Mental Health			
Outpatient	2,6	37	81.6%
Community Support	24	42	7.5%
Consultation	1	82	2.5%
Employment Services		79	2.4%

Social Rehabilitation

**Residential Services** 

Case Management

**Crisis Services** 

ACT

#### Question Domain Satisfied % vs Goal% Satisfied % Goal % State Avg Respect 99% 80% 91% $\checkmark$ Quality and Appropriateness 97% 80% 93% Overall 97% 80% 91% Participation in Treatment 97% 80% 92% 97% 80% 88% Access General Satisfaction 80% 92% 96% Outcome 93% 80% 83% Recovery 91% 80% 79% 🗸 Goal Met

# **Client Demographics**

0-80%

Goal %

Satisfied %

Age 18-25 26-34 35-44

45-54

55-64

65+

**Ethnicity** Non-Hispanic Hisp-Puerto Rican

Unknown Hispanic-Other Hispanic-Cuban Hispanic-Mexican

	#	%	State Avg	Gender #		%	State Avg
	311	11%	11%	Female	1,446	52%	<b>▲</b> 41%
	496	18%	22%	Male 🗾	1,310	48%	58%
	524	19%	19%	Transgender			0%
	666	24%	22%				
	557	20%	19%				
	201	7%	6%	Race	#	%	State Avg
				White/Caucasian	1,520	55%	65%
	#	%	State Avg	Black/African American	524	19%	16%
	1,738	63%	▼ 74%	Other <mark> </mark>	447	16%	13%
	476	17%	13%	Unknown	189	7%	3%
	275	10%	6%	Asian	43	2%	1%
	243	9%	7%	Hawaiian/Other Pacific Islander	18	1%	0%
				Am. Indian/Native Alaskan	15	1%	1%
	12	0%	0%	Multiple Races			1%
	12	0%	1%				
ι	Jnique C	lients	State Avg	ightarrow > 10% Over State Avg $ ightarrow$	> 10% L	Inder S	tate Avg

#### **Consumer Satisfaction Survey** (Based on 187 FY17 Surveys)

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	82		
Admits	12	-	
Discharges	11	-	
Service Hours	171	-	

Data	Submitted	to Sep	DMHAS by Month % Months Submitted		
Admissions			100%		
Discharges			100%		
Services			100%		
	1 or more Records Submitted to DMHAS				

	> 10% 0	ver 🔻 < 109	% Under	
Actual	Goal	🞻 Goal Met	🔵 Belo	w Goal

\* State Avg based on 8 Active Consultation Programs

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	31	32	-3%
Admits	4	4	0%
Discharges	3	-	
Service Hours	720	618	17% 🔺

# Data Submission Quality

	Data Entry	Actual	State Avg
	Valid NOMS Data	96%	97%
	On-Time Periodic	Actual	State Avg
V	6 Month Updates	90%	83%
	Cooccurring	Actual	State Avg
$\checkmark$	MH Screen Complete	94%	94%
$\checkmark$	SA Screen Complete	94%	94%
	Diagnosis	Actual	State Avg
	Diagnosis		5
$\checkmark$	Valid Axis I Diagnosis	100%	98%
$\checkmark$	Valid Axis V GAF Score	100%	86%

# Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		2	67%	65%	49%	2%	_
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
No Re-admit within 30 Days of Discharge		2	100%	85%	94%	15%	4
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Follow-up within 30 Days of Discharge		1	50%	90%	55%	-40%	7
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		31	100%	60%	78%	40%	-
Stable Living Situation		30	97%	60%	88%	37%	
Employed		1	3%	15%	12%	-12%	
Improved/Maintained Axis V GAF Score		16	67%	85%	43%	-18%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		27	96%	90%	99%	6%	

# Data Submitted to DMHAS by Month



	▲ > 10% C	Over 🔻 < 10	% Under	
Actua	l Goal	🞻 Goal Met	Below Goal	

\* State Avg based on 15 Active Assertive Community Treatment Programs

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

Data	Submitted	to	DMHAS by Month	

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

	> 10% 0	ver 🔻 < 109	% Under	
Actual	Goal	🞻 Goal Met	Belo	w Goal

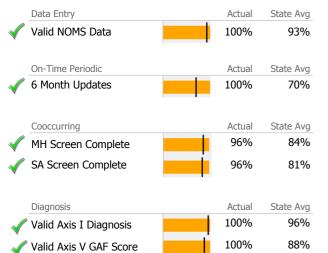
\* State Avg based on 8 Active Central Intake Programs

InterCommunity Inc. Mental Health - Outpatient - Standard Outpatient

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	23	13%	
Admits	8	12	-33%	▼
Discharges	1	5	-80%	▼
Service Hours	39	35	12%	

# Data Submission Quality

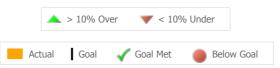


# Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		0	0%	50%	40%	-50%	-
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		26	100%	60%	67%	40%	
<b>«</b>	Stable Living Situation		25	96%	95%	83%	1%	
	Employed		5	19%	30%	21%	-11%	-
	Improved/Maintained Axis V GAF Score		9	69%	75%	43%	-6%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Clients Receiving Services		19	76%	90%	78%	-14%	-
	Service Engagement							
	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	2 or more Services within 30 days		3	38%	75%	67%	-37%	•

# Data Submitted to DMHAS by Month



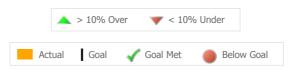


\* State Avg based on 93 Active Standard Outpatient Programs

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

Data	Submi	tted Aug	to Sep	DMHAS by Month % Months Submitted
Admissions				0%

			0.0
Discharge	S		0%
		1 or more Records Submitted to DMHAS	



\* State Avg based on 39 Active Outreach & Engagement Programs

#### **Career Opportunities 612-270**

InterCommunity Inc.

Mental Health - Employment Services - Employment Services

# Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	79	83	-5%
Admits	14	6	133% 🔺
Discharges	14	23	-39% 🔻
Service Hours	452	560	-19% 🔻

# Data Submission Quality

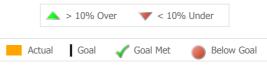
	Data Entry	Actual	State Avg
	Valid NOMS Data	94%	96%
	On-Time Periodic	Actual	State Avg
$\checkmark$	6 Month Updates	100%	95%

# Data Submitted to DMHAS by Month



#### Recovery

	· ·						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Employed		32	41%	35%	44%	6%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Clients Receiving Services		59	91%	90%	94%	1%



\* State Avg based on 41 Active Employment Services Programs

#### **CASA HOPE 18 - 260** InterCommunity Inc.

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Mental Health - Case Management - Supportive Housing - Scattered Site

Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

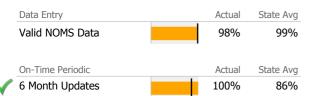
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	21	21	0%
Admits	-	1	-100% 🔻
Discharges	-	-	
Service Hours	118	134	-12% 🔻

#### Recovery

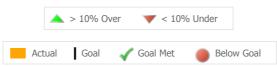
	/							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Stable Living Situation		15	71%	85%	87%	-14%	-
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		19	90%	90%	92%	0%	

# Data Submission Quality



## Data Submitted to DMHAS by Month

		Jul	Aug	Sep	% Months Submitted
Admission	S				0%
Discharge	5				0%
Services					100%
		1 or mo	re Recor	ds Subr	nitted to DMHAS



\* State Avg based on 69 Active Supportive Housing – Scattered Site Programs

#### Common Ground 612-281

InterCommunity Inc. Mental Health - Social Rehabilitation - Social Rehabilitation Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	66	65	2%	
Admits	9	2	350%	
Discharges	4	3	33%	
Service Hours	83	51	63%	
Social Rehab/PHP/IOP Days	0	0		

#### Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		56	90%	90%	65%	0%



1 or more Records Submitted to DMHAS

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

\* State Avg based on 36 Active Social Rehabilitation Programs

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	17	18	-6%
Admits	-	-	
Discharges	-	-	
Bed Days	1,564	1,656	-6%

# Data Submission Quality

	Data Entry		Actual	State Avg
	Valid NOMS Data		97%	99%
		•		
	On-Time Periodic		Actual	State Avg
$\checkmark$	6 Month Updates		100%	81%
	Cooccurring		Actual	State Avg
	MH Screen Complete		64%	85%
	SA Screen Complete	Í	71%	83%
	Diagnosis	-	Actual	State Avg
$\checkmark$	Valid Axis I Diagnosis		100%	99%
√	Valid Axis V GAF Score		100%	96%

# Data Submitted to DMHAS by Month

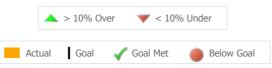
	Jui	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
	1 or mo	re Recor	ds Subr	nitted to DMHAS

# Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Treatment Completed Successfully		N/A	N/A	60%	77%	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%	80%	N/A
	Recovery						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
<b>«</b>	Social Support		17	100%	60%	85%	40% 🔺
	Stable Living Situation		16	94%	95%	98%	-1%
	Employed		0	0%	25%	6%	-25% 🔻
	Improved/Maintained Axis V GAF Score		7	44%	95%	66%	-51% 🔻

# **Bed Utilization**

		12	Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Avg Utilization R	late		17	2,096 days	1.0	100%	90%	95%	10%
		< 90%	90-110%		>110%					



\* State Avg based on 70 Active Supervised Apartments Programs

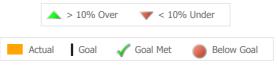
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	47	29	62%	
Admits	42	29	45%	
Discharges	36	29	24%	

### Crisis

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Evaluation within 1.5 hours of Request		42	95%	75%	69%	20%	
Community Location Evaluation		44	100%	80%	77%	20%	
Follow-up Service within 48 hours		11	52%	90%	58%	-38%	-

# Data Submitted to DMHAS by Month

Admissions		100%
Discharges		100%
	1 or more Records Submitted to DMH	HAS



\* State Avg based on 25 Active Mobile Crisis Team Programs

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	242	249	-3%
Admits	37	38	-3%
Discharges	51	61	-16% 🔻
Service Hours	1,950	1,973	-1%

# Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	98%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	98%	92%
Cooccurring	Actual	State Avg
√ MH Screen Complete	91%	84%
🗸 SA Screen Complete	90%	83%
Diagnosis	Actual	State Avg
🞻 Valid Axis I Diagnosis	100%	98%
Valid Axis V GAF Score	100%	95%

# Data Submitted to DMHAS by Month

	Jui	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%
	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		50	98%	65%	65%	33%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Social Support		239	99%	60%	82%	39%	
<b>«</b>	Stable Living Situation		209	86%	80%	93%	6%	
$\checkmark$	Improved/Maintained Axis V GAF Score		142	75%	65%	58%	10%	
	Employed		31	13%	20%	12%	-7%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		222	97%	90%	98%	7%	

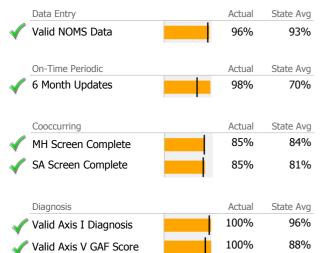


\* State Avg based on 48 Active CSP Programs

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	2,622	2,986	-12%	•
Admits	258	392	-34%	•
Discharges	298	264	13%	
Service Hours	4,307	5,540	-22%	•

# Data Submission Quality

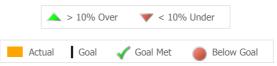


# Data Submitted to DMHAS by Month

	Jui	Aug	Sep	% Months Submitted
Admissions				100%
Discharges				100%
Services				100%
	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		270	91%	50%	40%	41%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		2,617	99%	60%	67%	39%
Employed		703	27%	30%	21%	-3%
Stable Living Situation	· · ·	2,319	88%	95%	83%	-7%
Improved/Maintained Axis V GAF Score		1,404	65%	75%	43%	-10%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		1,281	54%	90%	78%	-36%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		77	30%	75%	67%	-45%



\* State Avg based on 93 Active Standard Outpatient Programs

InterCommunity Inc. Mental Health - Residential Services - Residential Support

Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	11	10	10%
Admits	1	-	
Discharges	1	-	
Service Hours	482	662	-27% 🔻

# Data Submission Quality

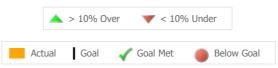
	Data Entry	Actual	State Avg
$\checkmark$	Valid NOMS Data	99%	99%
	On-Time Periodic	Actual	State Avg
$\checkmark$	6 Month Updates	100%	99%

# Data Submitted to Sep DMHAS by Month



# **Discharge Outcomes**

					<u>.</u>	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		1	100%	50%	84%	50%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		11	100%	60%	91%	40%
Stable Living Situation		11	100%	85%	96%	15%
Employed	·	3	27%	25%	11%	2%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		9	90%	90%	98%	0%



\* State Avg based on 38 Active Residential Support Programs