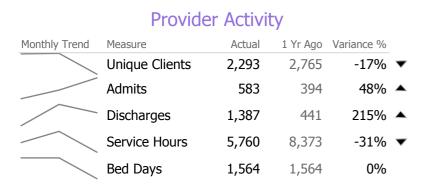
InterCommunity Inc.

East Hartford, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)



▲ > 10% Over 1 Yr Ago

▼ > 10% Under 1Yr Ago

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Healt	h		
	Outpatient	2,065	76.8%
	Community Support	280	10.4%
	Employment Services	80	3.0%
	Social Rehabilitation	74	2.8%
	Consultation	57	2.1%

Consumer Satisfaction Survey (Based on 288 FY18 Surveys)		eys)		
Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
General Satisfaction		95%	80%	92%
Access		94%	80%	88%
Quality and Appropriateness		94%	80%	93%
Respect		94%	80%	91%
Participation in Treatment		94%	80%	92%
Overall		93%	80%	91%
Outcome		80%	80%	83%
Recovery		74%	80%	79%

Client Demographics

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
	244	11%	10%	Female	•	1,181	52%	▲ 41%
	431	19%	22%	Male		1,111	48%	58%
	421	18%	20%	Transgender				0%
1	516	23%	21%					
	482	21%	19%					
I	199	9%	7%	Race		#	%	State Avg
				White/Caucasian		1,220	53%	63%
	#	%	State Avg	Black/African American 📕		482	21%	16%
	1,403	61%	71%	Other 📘		399	17%	13%
<u>ا</u>	444	19%	13%	Unknown		127	6%	5%
i	232	10%	8%	Asian		43	2%	1%
	198	9%	7%	Am. Indian/Native Alaskan		11	0%	1%
				Hawaiian/Other Pacific Islander		11	0%	0%
	9	0%	0%	Multiple Races				1%
	7	0%	1%					
	Unique C	lients	State Avg	▲ > 10% Over State Avg	▼:	> 10% U	nder St	tate Avg

ACT 50 1.9% **Crisis Services** 44 1.6% Case Management 21 0.8% **Residential Services** 17 0.6%

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	57	82	-30%	▼
Admits	-	12	-100%	▼
Discharges	1	11	-91%	▼
Service Hours	-	171	-100%	•

Data	Submitted to DMHAS by Month
Admissions	0%
Discharges	33%
Services	67%
	1 or more Records Submitted to DMHAS

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

* State Avg based on 9 Active Consultation Programs

ACT Program

InterCommunity Inc. Mental Health - ACT - Assertive Community Treatment Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	37	32	16%	
Admits	9	4	125%	
Discharges	8	3	167%	
Service Hours	699	720	-3%	

Data Submission Quality

	Data Entry	Actual	State Avg	
	Valid NOMS Data	94%	97%	
	On-Time Periodic	Actual	State Avg	
	6 Month Updates	89%	91%	
	Cooccurring	Actual	State Avg	
	MH Screen Complete	100%	93%	
	SA Screen Complete	100%	95%	
V				
	Dia mandria	Astron	Charles Asses	
	Diagnosis	Actual	State Avg	
	Valid Axis I Diagnosis	97%	98%	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		7	88%	65%	57%	23%	-
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
No Re-admit within 30 Days of Discharge		6	75%	85%	91%	-10%	
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Follow-up within 30 Days of Discharge		4	57%	90%	45%	-33%	
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Social Support		37	97%	60%	81%	37%	
Stable Living Situation		37	97%	60%	91%	37%	
Employed		2	5%	15%	15%	-10%	
Improved/Maintained Axis V GAF Score		16	59%	85%	53%	-26%	-
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		28	93%	90%	99%	3%	

Data Submitted to DMHAS by Month

97%

89%

	Jui	Aug	Sep	70 MOITUIS SUDITILLEU
Admissions				100%
Discharges				100%
Services				100%
	1 or mo	re Recor	ds Subr	nitted to DMHAS

Valid Axis V GAF Score

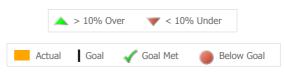
	 >	10% Ove	r	▼ .	< 10%	Unde	r		
Ac	tual	Goal	√	Goal N	1et		Belo	w Goal	

* 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	þγ	/ Month
Dutu	Submitted			~ 7	

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



* State Avg based on 8 Active Central Intake Programs

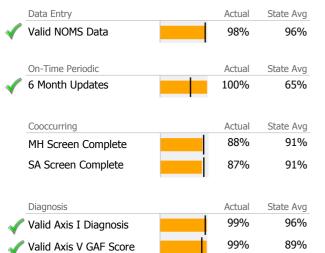
InterCommunity Inc.

Mental Health - Outpatient - Standard Outpatient

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	239	28	754%	
Admits	122	8	1425%	
Discharges	17	1	1600%	
Service Hours	373	39		

Data Submission Quality



Data Submitted to DMHAS by Month

	100%
	100%
	100%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Treatment Completed Successfully		17	100%	50%	55%	50%	1
Recovery							
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
Social Support		237	99%	60%	65%	39%	4
Stable Living Situation		209	87%	95%	82%	-8%	
Employed		31	13%	30%	22%	-17%	4
Improved/Maintained Axis V GAF Score		30	65%	75%	42%	-10%	
Service Utilization							
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		151	68%	90%	79%	-22%	
Service Engagement							
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
2 or more Services within 30 days		41	34%	75%	68%	-41%	٠,

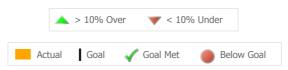


* State Avg based on 93 Active Standard Outpatient Programs

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

Data	Submitte	d to	DMHAS by Month
	Jul Aug	Sep	% Months Submitted
			00/

Admissions		0%
Discharges		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

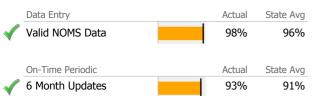
Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	80	79	1%	
Admits	11	15	-27%	▼
Discharges	10	14	-29%	▼
Service Hours	538	452	19%	

Data Submission Quality

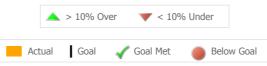


Data Submitted to Sep DMHAS by Month



Recovery

	,						
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
-	Employed		35	43%	35%	44%	8%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Clients Receiving Services		63	89%	90%	93%	-1%



* State Avg based on 41 Active Employment Services Programs

CASA HOPE 18 - 260

InterCommunity Inc.

Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

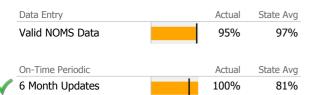
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	20	20	0%
Admits	-	-	
Discharges	1	-	
Service Hours	126	118	7%

Recovery

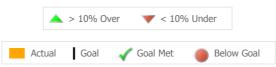
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
	Stable Living Situation		16	80%	85%	85%	-5%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Clients Receiving Services		18	95%	90%	94%	5%

Data Submission Quality



Data Submitted to DMHAS by Month





* State Avg based on 74 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 2018 - September 2018 (Data as of Dec 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	74	67	10%	
Admits	4	10	-60%	▼
Discharges	1	4	-75%	▼
Service Hours	256	83		
Social Rehab/PHP/IOP Days	0	0		

Service Utilization





1 or more Records Submitted to DMHAS

		• 10% Ove	er	▼ <	: 10%	Unde	r		
Ac	tual	Goal	<	Goal M	let		Belo	w Goal	

* State Avg based on 36 Active Social Rehabilitation Programs

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	17	17	0%
Admits	-	-	
Discharges	-	-	
Bed Days	1,564	1,564	0%

Data Submission Quality

	Data Entry	 Actual	State Avg
	Valid NOMS Data	97%	99%
	On-Time Periodic	Actual	State Avg
\checkmark	6 Month Updates	100%	80%
Ţ	Cooccurring	Actual	State Avg
	MH Screen Complete	60%	87%
	SA Screen Complete	67%	86%
	Diagnosis	 Actual	State Avg
\checkmark	Valid Axis I Diagnosis	100%	96%
*	Valid Axis V GAF Score	88%	93%

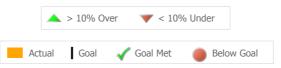
Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Treatment Completed Successfully		N/A	N/A	60%	63%	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	
\checkmark	Social Support		17	100%	60%	80%	40%	
«	Stable Living Situation		17	100%	95%	92%	5%	
	Employed		1	6%	25%	11%	-19%	-
	Improved/Maintained Axis V GAF Score		6	38%	95%	59%	-57%	-

Bed Utilization

		12	Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
\checkmark	Avg Utilization R	late		17	2,355 days	1.0	100%	90%	95%	10%
		< 90%	90-110%		>110%					

Data Submitted to DMHAS by Month



* State Avg based on 62 Active Supervised Apartments Programs

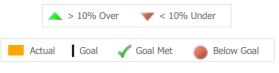
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	44	45	-2%	
Admits	32	43	-26%	▼
Discharges	30	36	-17%	▼

Crisis

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Evaluation within 1.5 hours of Request		12	100%	75%	71%	25%	
Community Location Evaluation		12	100%	80%	91%	20%	
Follow-up Service within 48 hours		10	100%	90%	88%	10%	

Data Submitted to DMHAS by Month

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



* State Avg based on 25 Active Mobile Crisis Team Programs

InterCommunity Inc.

Mental Health - Community Support - CSP

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	280	241	16%	
Admits	96	37	159%	
Discharges	50	56	-11%	▼
Service Hours	2,441	1,950	25%	

Data Submission Quality

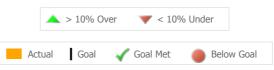
	Data Entry	Actual	State Avg
	Valid NOMS Data	96%	98%
	On-Time Periodic	Actual	State Avg
«	6 Month Updates	98%	92%
	Cooccurring	Actual	State Avg
\checkmark	MH Screen Complete	90%	90%
	SA Screen Complete	88%	89%
	Diagnosis	Actual	State Avg
\checkmark	Valid Axis I Diagnosis	100%	98%
\checkmark	Valid Axis V GAF Score	100%	97%

Data Submitted to DMHAS by Month



Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Treatment Completed Successfully		50	100%	65%	69%	35%	
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Social Support		280	99%	60%	82%	39%	
«	Stable Living Situation		248	88%	80%	93%	8%	
	Employed		29	10%	20%	12%	-10%	-
\checkmark	Improved/Maintained Axis V GAF Score		133	73%	65%	61%	8%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
\checkmark	Clients Receiving Services		244	98%	90%	99%	8%	



* State Avg based on 48 Active CSP Programs

NHDTP

InterCommunity Inc. Mental Health - Case Management - Standard Case Management

Program Activity

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

Data Submission Quality

	Data Entry	Actual	State Avg
\checkmark	Valid NOMS Data	100%	95%
	On-Time Periodic	Actual	State Avg
	6 Month Updates	N/A	63%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted				
Admissions				33%				
Discharges				0%				
Services				0%				
	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%	42%	N/A
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🗸 Social Support		1	100%	60%	63%	40% 🔺
Stable Living Situation		1	100%	80%	76%	20% 🔺
Employed		0	0%	20%	9%	-20% 🤘
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		1	100%	90%	69%	10%

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

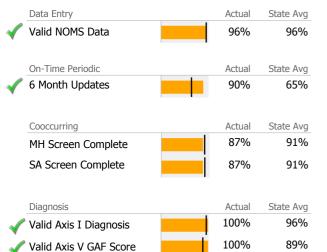
* State Avg based on 30 Active Standard Case Management Programs

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,948	2,635	-26%	▼
Admits	304	263	16%	
Discharges	1,267	295	329%	
Service Hours	990	4,306	-77%	▼

Data Submission Quality

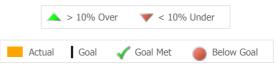


Data Submitted to DMHAS by Month

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		1,131	89%	50%	55%	39%
Recovery						
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		1,959	100%	60%	65%	40%
Employed		524	27%	30%	22%	-3%
Stable Living Situation		1,763	90%	95%	82%	-5%
Improved/Maintained Axis V GAF Score		964	59%	75%	42%	-16%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		397	57%	90%	79%	-33%
Service Engagement						
Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days		25	8%	75%	68%	-67%



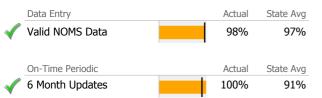
* State Avg based on 93 Active Standard Outpatient Programs

Reporting Period: July 2018 - September 2018 (Data as of Dec 13, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	14	12	17%	
Admits	4	2	100%	
Discharges	2	1	100%	
Service Hours	338	482	-30%	•

Data Submission Quality



Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	-
	Treatment Completed Successfully		2	100%	65%	57%	35%	-
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	_
/	No Re-admit within 30 Days of Discharge		2	100%	85%	91%	15%	1
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Follow-up within 30 Days of Discharge		1	50%	90%	45%	-40%	4
	Recovery							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
•	Social Support		14	100%	60%	81%	40%	
۶	Stable Living Situation		14	100%	60%	91%	40%	
P	Employed	_	3	21%	15%	15%	6%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
<i>`</i>	Clients Receiving Services		12	100%	90%	99%	10%	-

Data	Submi	tted	to	DMHAS by Month % Months Submitted				
Admissions	541	, lag	COP	67%				
Discharges				67%				
Services				100%				
1 or more Records Submitted to DMHAS								

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

* State Avg based on 15 Active Assertive Community Treatment Programs