Ability Beyond Disability Institute
Brookfield, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2012 - June 2013   (Data as of Dec 16, 2013)

Provider Activity

12 Month Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	320	297	8%	
	Admits	159	127	25%	▲
	Discharges	128	120	7%	
	Service Hours	5,331	6,330	-16%	▼
	Bed Days	17,667	12,041	47%	▲

▲ > 10% Over 1 Yr Ago	▼ > 10% Under 1Yr Ago

Unique Clients by Level of Care

Program Type	Level of Care Type		#	%
Mental Health				
	Employment Services		250	78.1%
	Residential Services		79	24.7%

Consumer Satisfaction Survey   (Based on 107 FY12 Surveys)

Question Domain	Satisfied % vs Goal%		Satisfied %	Goal %	State Avg
✓ Respect			96%	80%	91%
✓ Overall			89%	80%	91%
✓ Quality and Appropriateness			88%	80%	93%
✓ Participation in Treatment			87%	80%	92%
✓ General Satisfaction			87%	80%	92%
✓ Access			85%	80%	88%
✓ Outcome			81%	80%	83%
✓ Recovery			81%	80%	79%

Satisfied %		Goal %	0-80%	80-100%	✓ Goal Met	● Under Goal

Client Demographics

Age		#	%	State Avg
18-25		54	17%	17%
26-34		54	17%	22%
35-44		62	19%	20%
45-54		90	28%	24%
55-64		51	16%	13%
65+		9	3%	4%

Gender		#	%	State Avg
Male		171	54%	60%
Female		148	46%	40%

Ethnicity		#	%		State Avg
Non-Hispanic		285	89%	▲	74%
Hispanic-Other		22	7%		7%
Hisp-Puerto Rican		8	3%		12%
Unknown		4	1%		7%
Hispanic-Mexican		1	0%		0%
Hispanic-Cuban					0%

Race		#	%	State Avg
White/Caucasian		230	72%	64%
Black/African American		55	17%	17%
Other		18	6%	15%
Asian		7	2%	1%
Unknown		6	2%	2%
Multiple Races		3	1%	1%
Am. Indian/Native Alaskan		1	0%	1%
Hawaiian/Other Pacific Islander				0%

Unique Clients		State Avg	▲ > 10% Over State Avg	▼ > 10% Under State Avg

Blakeslee Apartments YAS
Ability Beyond Disability Institute
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	10	10	0%	
Admits	3	5	-40%	▼
Discharges	1	3	-67%	▼
Bed Days	3,103	2,906	7%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		0	0%	60%	59%	-60%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		10	100%	60%	77%	40%	▲
✓	Stable Living Situation		10	100%	95%	92%	5%	
🔴	Employed		2	20%	25%	7%	-5%	
🔴	Improved/Maintained Axis V GAF Score		1	11%	95%	55%	-84%	▼

Data Submission Quality

	Data Entry		Actual	State Avg
✓	Valid NOMS Data		100%	97%

	On-Time Periodic		Actual	State Avg
✓	6 Month Updates		100%	74%

	Cooccurring		Actual	State Avg
	MH Screen Complete		75%	78%
	SA Screen Complete		50%	77%

	Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis		100%	99%
✓	Valid Axis V GAF Score		100%	96%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		9	704 days	0.9	94%	90%	96%	4%
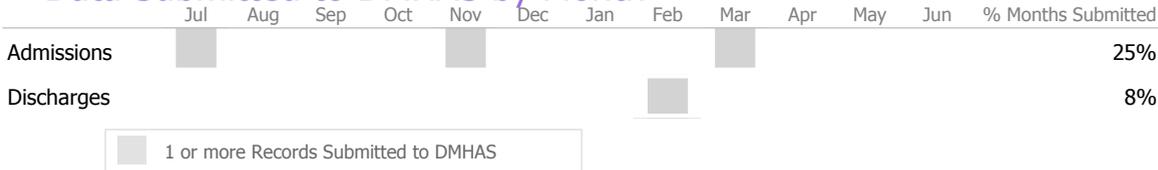
- ☐ < 90% ☐ 90-110% ☐ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	☐				☐				☐				25%
Discharges								☐					8%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

☐ Actual   │ Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 68 Active Supervised Apartments Programs

Corbin House ABI/TBI - 165
Ability Beyond Disability Institute
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	3	33%	▲
Admits	1	-		
Discharges	1	-		
Bed Days	1,044	1,098	-5%	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		93%	98%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	77%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	88%
SA Screen Complete		0%	85%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	99%
Valid Axis V GAF Score		75%	97%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		1	100%	80%	61%	20%	▲
✔ No Re-admit within 30 Days of Discharge		1	100%	85%	88%	15%	▲
✔ Follow-up within 30 Days of Discharge		1	100%	90%	87%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		4	100%	60%	78%	40%	▲
● Stable Living Situation		3	75%	90%	95%	-15%	▼
● Improved/Maintained Axis V GAF Score		0	0%	95%	55%	-95%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		3	2,139 days	0.8	95%	90%	93%	5%

▢ < 90%	▢ 90-110%	▢ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions							▢						8%
Discharges					▢								8%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▢ Actual	❘ Goal	✔ Goal Met	● Below Goal

* State Avg based on 26 Active Group Home Programs

Employment Svs Reg 5 - 271
Ability Beyond Disability Institute
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	107	109	-2%	
Admits	49	54	-9%	
Discharges	53	47	13%	▲
Service Hours	2,338	2,309	1%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Employed		43	39%	35%	31%	4%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		58	100%	90%	96%	10%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		96%	93%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	73%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													92%
Services													100%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 40 Active Employment Services Programs

Employment Svs Reg V - 270
Ability Beyond Disability Institute
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	144	147	-2%
Admits	63	61	3%
Discharges	59	63	-6%
Service Hours	2,595	4,022	-35% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Employed		60	41%	35%	31%	6%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		89	100%	90%	96%	10%

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		95%	93%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	73%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 40 Active Employment Services Programs

Intensive Res Recovery Program 250
Ability Beyond Disability Institute
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10		
Admits	10	-	
Discharges	-	-	
Bed Days	2,243	-	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		86%	97%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	74%

Cooccurring		Actual	State Avg
MH Screen Complete		40%	78%
SA Screen Complete		40%	77%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	99%
Valid Axis V GAF Score		80%	96%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	59%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Stable Living Situation		10	100%	95%	92%	5%
● Social Support		5	50%	60%	77%	-10%
● Employed		1	10%	25%	7%	-15% ▼
● Improved/Maintained Axis V GAF Score		0	0%	95%	55%	-95% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		16	377 days	1.6	58%	90%	95%	58%
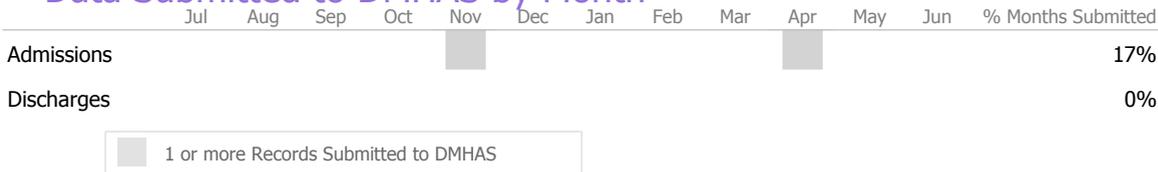
☐ < 90%	☐ 90-110%	☐ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions					☐					☐			17%
Discharges													0%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

☐ Actual	│ Goal	✔ Goal Met	● Below Goal

* State Avg based on 68 Active Supervised Apartments Programs

Intensive Res Support Program 251
Ability Beyond Disability Institute
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	18		
Admits	18	-	
Discharges	3	-	
Bed Days	3,123	-	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		96%	97%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	74%

Cooccurring		Actual	State Avg
MH Screen Complete		72%	78%
SA Screen Complete		72%	77%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	99%
✔ Valid Axis V GAF Score		100%	96%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Treatment Completed Successfully		2	67%	60%	59%	7%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		16	89%	60%	77%	29%	▲
✔ Stable Living Situation		18	100%	95%	92%	5%	
⬤ Employed		0	0%	25%	7%	-25%	▼
⬤ Improved/Maintained Axis V GAF Score		2	12%	95%	55%	-83%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		11	335 days	0.6	134%	90%	95%	134%
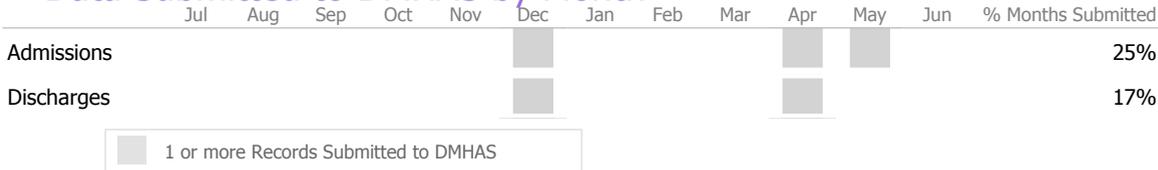
☐ < 90%	☐ 90-110%	☐ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions						☐				☐	☐		25%
Discharges						☐				☐			17%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

☐ Actual | Goal ✔ Goal Met ⬤ Below Goal

* State Avg based on 68 Active Supervised Apartments Programs

Nicholas Drive YAS - 332
Ability Beyond Disability Institute
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	17	12	42%	▲
Admits	8	3	167%	▲
Discharges	8	3	167%	▲
Bed Days	3,232	3,284	-2%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		6	75%	60%	59%	15%	▲

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		15	88%	60%	77%	28%	▲
✓	Stable Living Situation		17	100%	95%	92%	5%	
⬤	Employed		0	0%	25%	7%	-25%	▼
⬤	Improved/Maintained Axis V GAF Score		4	29%	95%	55%	-66%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	97%

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	100%	74%

Cooccurring		Actual	State Avg
	MH Screen Complete	75%	78%
	SA Screen Complete	62%	77%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	99%
✓	Valid Axis V GAF Score	100%	96%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		9	585 days	0.5	98%	90%	96%	8%
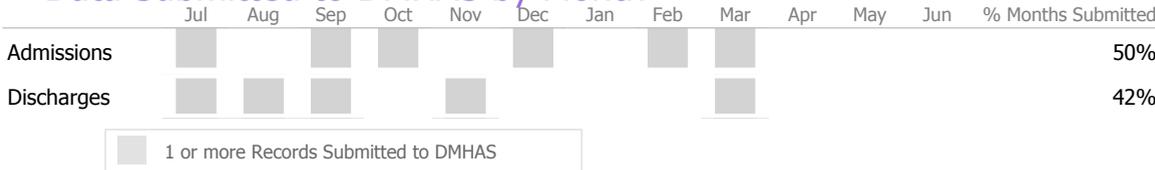
■ < 90%   ■ 90-110%   ■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■		■	■		■		■	■				50%
Discharges	■	■	■		■				■				42%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ⬤ Below Goal

* State Avg based on 68 Active Supervised Apartments Programs

Sheffield Apartments YAS - 172
Ability Beyond Disability Institute
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	10	-20%	▼
Admits	1	2	-50%	▼
Discharges	2	3	-33%	▼
Bed Days	2,431	2,197	11%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	97%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	74%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	78%
✔ SA Screen Complete		100%	77%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	99%
✔ Valid Axis V GAF Score		100%	96%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		1	50%	60%	59%	-10%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		8	100%	60%	77%	40%	▲
✔ Stable Living Situation		8	100%	95%	92%	5%	
🔴 Employed		0	0%	25%	7%	-25%	▼
🔴 Improved/Maintained Axis V GAF Score		0	0%	95%	55%	-95%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		7	1,123 days	0.9	95%	90%	96%	5%
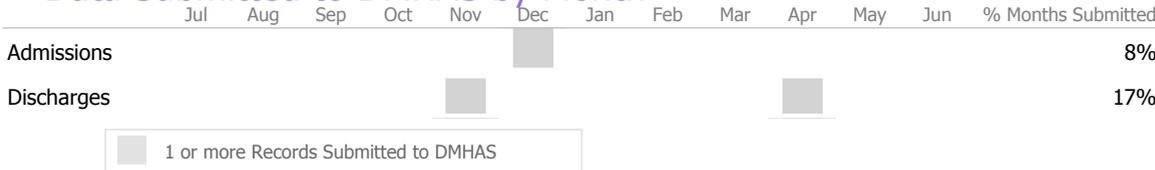
■ < 90%	■ 90-110%	■ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions						■							8%
Discharges				■					■				17%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

■ Actual	│ Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 68 Active Supervised Apartments Programs

Unionville House ABI/TBI - 166
Ability Beyond Disability Institute
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	3	4	-25%	▼
Admits	-	1	-100%	▼
Discharges	-	1	-100%	▼
Bed Days	1,095	1,092	0%	

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	98%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	77%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	88%
SA Screen Complete		N/A	85%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	99%
✔ Valid Axis V GAF Score		100%	97%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	80%	61%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	88%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	87%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Stable Living Situation		3	100%	90%	95%	10%	
● Social Support		1	33%	60%	78%	-27%	▼
● Improved/Maintained Axis V GAF Score		0	0%	95%	55%	-95%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		3	1,648 days	1.0	100%	90%	93%	10%

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 26 Active Group Home Programs

Woodland House ABI/TBI - 167
Ability Beyond Disability Institute
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	4	25%	▲
Admits	1	-		
Discharges	1	-		
Bed Days	1,396	1,464	-5%	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		1	100%	80%	61%	20%	▲
✔ No Re-admit within 30 Days of Discharge		1	100%	85%	88%	15%	▲
✔ Follow-up within 30 Days of Discharge		1	100%	90%	87%	10%	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		94%	98%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	77%

Cooccurring		Actual	State Avg
MH Screen Complete		50%	88%
SA Screen Complete		50%	85%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		60%	99%
Valid Axis V GAF Score		20%	97%

Recovery

National Recovery Measures (NOMS)

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Stable Living Situation		5	100%	90%	95%	10%	
✔ Social Support		3	60%	60%	78%	0%	
● Improved/Maintained Axis V GAF Score		0	0%	95%	55%	-95%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		4	3,338 days	0.8	96%	90%	93%	6%
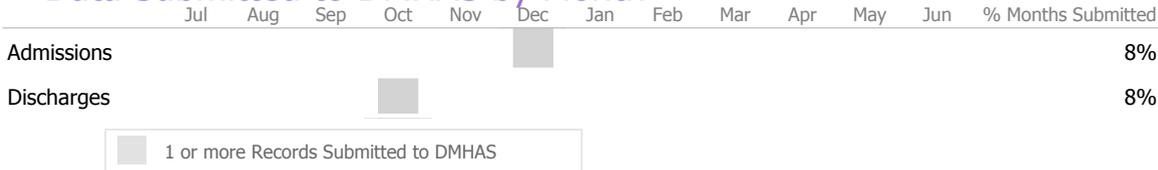
▪ < 90%	▪ 90-110%	▪ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions						▪							8%
Discharges				▪									8%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▪ Actual	❘ Goal	✔ Goal Met	● Below Goal

* State Avg based on 26 Active Group Home Programs

YAS Park Ridge Residential Support 271Y
Ability Beyond Disability Institute
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2012 - June 2013 (Data as of Dec 16, 2013)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	3	167%	▲
Admits	5	1	400%	▲
Discharges	-	-		
Service Hours	-	-		

Data Submission Quality

Data Entry	Actual % vs Goal %	Actual	State Avg
✔ Valid NOMS Data		100%	98%

On-Time Periodic	Actual % vs Goal %	Actual	State Avg
6 Month Updates		0%	80%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	57%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Social Support		4	50%	60%	79%	-10%
● Stable Living Situation		6	75%	85%	93%	-10%
● Employed		0	0%	25%	10%	-25% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		0	0%	90%	96%	-90% ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▪		▪	▪	▪	▪							42%
Discharges													0%
Services													0%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual (orange) | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 54 Active Residential Support Programs