Wheeler Clinic
Plainville, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2017 - December 2017   (Data as of Mar 21, 2018)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	4,012	4,921	-18%	▼
	Admits	1,751	2,726	-36%	▼
	Discharges	1,648	2,843	-42%	▼
	Service Hours	8,005	20,935	-62%	▼
	S.Rehab/PHP/IOP	328	1,050	-69%	▼

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

Clients by Level of Care

Program Type	Level of Care Type		#	%
Addiction				
	Outpatient		2,420	58.8%
	IOP		70	1.7%
	Case Management		49	1.2%
Forensic SA				
	Forensics Community-based		1,511	36.7%
	Case Management		66	1.6%

Consumer Satisfaction Survey   (Based on 664 FY17 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔	Participation in Treatment		93%	80%	92%
✔	Quality and Appropriateness		93%	80%	93%
✔	General Satisfaction		89%	80%	92%
✔	Respect		89%	80%	91%
✔	Overall		89%	80%	91%
✔	Access		85%	80%	88%
●	Recovery		78%	80%	79%
●	Outcome		77%	80%	83%

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

Client Demographics

Age

	#	%	State Avg
18-25	839	21%	12%
26-34	1,277	32%	23%
35-44	833	21%	20%
45-54	564	14%	22%
55-64	383	10%	18%
65+	103	3%	6%

Gender

	#	%	State Avg
Male	2,568	64%	59%
Female	1,442	36%	41%
Transgender			0%

Ethnicity

	#	%		State Avg
Non-Hispanic	2,497	62%	▼	74%
Hisp-Puerto Rican	892	22%		13%
Unknown	431	11%		6%
Hispanic-Other	147	4%		7%
Hispanic-Mexican	32	1%		1%
Hispanic-Cuban	13	0%		0%

Race

	#	%	State Avg
White/Caucasian	2,402	60%	65%
Black/African American	609	15%	16%
Other	447	11%	13%
Multiple Races	419	10%	1%
Unknown	53	1%	3%
Asian	36	1%	1%
Am. Indian/Native Alaskan	28	1%	1%
Hawaiian/Other Pacific Islander	18	0%	0%

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

ABI SA Counselor
Wheeler Clinic
Addiction - Consultation - Consultation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 0 Active Consultation Programs

Bettor Choice 620740
Wheeler Clinic
Addiction - Outpatient - Gambling Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	31	-58%	▼
Admits	1	10	-90%	▼
Discharges	3	13	-77%	▼
Service Hours	30	146	-79%	▼

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		2	67%	75%	47%	-8%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		6	60%	90%	96%	-30% ▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	87%
✔ Valid TEDS Data		43%	22%

On-Time Periodic		Actual	State Avg
6 Month Updates		22%	82%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	90%
✔ SA Screen Complete		100%	91%

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

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ 2 or more Services within 30 days		1	100%	75%	71%	25% ▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		▪					17%
Discharges	▪	▪	▪				50%
Services	▪	▪	▪	▪		▪	83%

☐ 1 or more Records Submitted to DMHAS
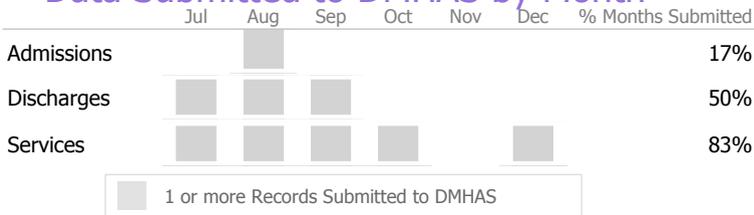
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

*State Avg based on 8 Active Gambling Outpatient Programs

Latino Outreach 620296
Wheeler Clinic
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	29	-38%	▼
Admits	6	8	-25%	▼
Discharges	6	14	-57%	▼
Service Hours	244	408	-40%	▼

Service Engagement
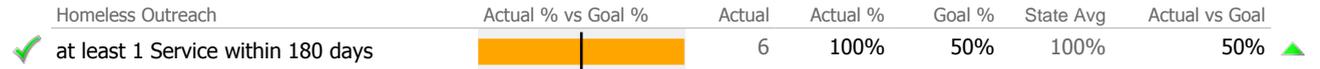
Homeless Outreach		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	at least 1 Service within 180 days		6	100%	50%	100%	50%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions				▢	▢		33%
Discharges	▢	▢	▢	▢			67%
Services	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS
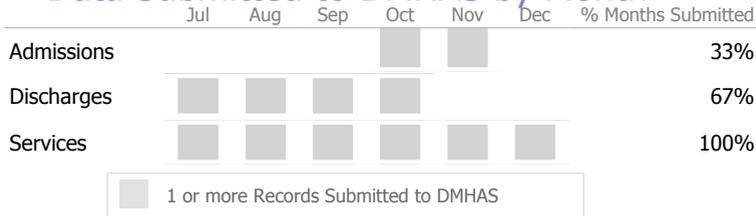
▲ > 10% Over	▼ < 10% Under

🟧 Actual	┃ Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 7 Active Outreach & Engagement Programs

Lifeline For Wmn and Chld62030
Wheeler Clinic
Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	70	113	-38%	▼
Admits	36	108	-67%	▼
Discharges	43	98	-56%	▼
Service Hours	34	126	-73%	▼
Social Rehab/PHP/IOP Days	328	1,050	-69%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓	Valid NOMS Data	99%	95%
✓	Valid TEDS Data	99%	99%

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

Cooccurring		Actual	State Avg
✓	MH Screen Complete	100%	97%
✓	SA Screen Complete	100%	97%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		35	81%	50%	63%	31%	▲
●	Follow-up within 30 Days of Discharge		17	49%	90%	60%	-41%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Not Arrested		70	99%	75%	92%	24%	▲
✓	Self Help		50	70%	60%	43%	10%	
✓	Abstinence/Reduced Drug Use		43	61%	55%	66%	6%	
●	Stable Living Situation		64	90%	95%	88%	-5%	
✓	Improved/Maintained Axis V GAF Score		44	79%	75%	84%	4%	
●	Employed		21	30%	50%	33%	-20%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		15	54%	90%	83%	-36%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▪	▪	▪				50%
Discharges	▪	▪	▪				50%
Services	▪	▪	▪	▪			67%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 50 Active Standard IOP Programs

Lifeline for Women and Children - OP
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	94	140	-33%	▼
Admits	34	96	-65%	▼
Discharges	42	113	-63%	▼
Service Hours	260	1,045	-75%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	99%	94%
✔	Valid TEDS Data	94%	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	6%	27%

Cooccurring		Actual	State Avg
✔	MH Screen Complete	100%	99%
✔	SA Screen Complete	100%	99%

Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	99%
✔	Valid Axis V GAF Score	100%	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■				50%
Discharges	■	■	■				50%
Services	■	■	■	■	■		83%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		33	79%	50%	51%	29%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Not Arrested		89	95%	75%	84%	20%	▲
✔	Abstinence/Reduced Drug Use		59	63%	55%	54%	8%	
✔	Self Help		59	63%	60%	33%	3%	
●	Stable Living Situation		81	86%	95%	83%	-9%	
●	Employed		33	35%	50%	41%	-15%	▼
●	Improved/Maintained Axis V GAF Score		43	58%	75%	53%	-17%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
●	Clients Receiving Services		36	69%	90%	69%	-21%	▼

Service Engagement

	Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	2 or more Services within 30 days		32	94%	75%	71%	19%	▲
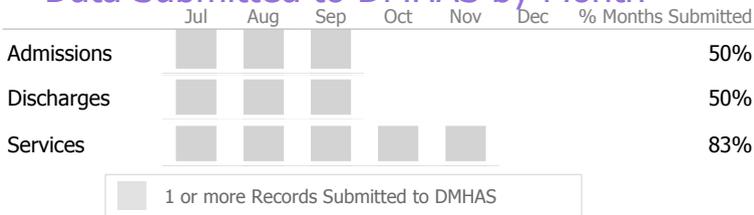
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

MATx OP
Wheeler Clinic
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

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

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	92%
Valid TEDS Data		N/A	98%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	72%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	87%
SA Screen Complete		N/A	97%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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 5 Active Buprenorphine Maintenance Programs

Post-Release Transitional Forensic Case Management
Wheeler Clinic
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	15	20%	▲
Admits	12	12	0%	
Discharges	4	8	-50%	▼
Service Hours	91	134	-32%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		99%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	19%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		3	75%	50%	68%	25%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		16	89%	60%	73%	29%	▲
✔ Self Help		14	78%	60%	47%	18%	▲
✔ Employed		5	28%	20%	10%	8%	
✔ Stable Living Situation		15	83%	80%	45%	3%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		10	71%	90%	83%	-19%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▪	▪	▪		▪		83%
Discharges		▪	▪		▪		50%
Services	▪	▪	▪	▪			67%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

▪ Actual	▮ Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 8 Active Standard Case Management Programs

Pre-Release Transitional Forensic Case Management
Wheeler Clinic
Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)
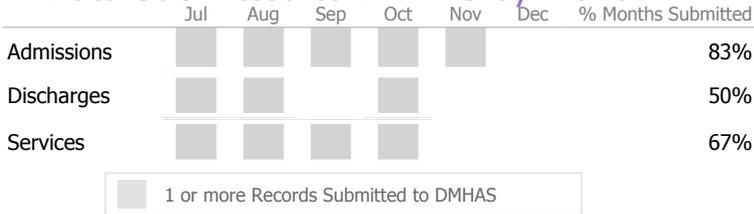
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	59	61	-3%	
Admits	24	41	-41%	▼
Discharges	45	29	55%	▲
Service Hours	118	154	-23%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		98%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	19%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		33	73%	50%	68%	23%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		56	95%	60%	73%	35%	▲
● Employed		6	10%	20%	10%	-10%	▼
● Self Help		28	47%	60%	47%	-13%	▼
● Stable Living Situation		23	39%	80%	45%	-41%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		10	71%	90%	83%	-19%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							83%
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 8 Active Standard Case Management Programs

PTIP - 2024 E. Main St. 620713
Wheeler Clinic
Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	588	608	-3%
Admits	285	304	-6%
Discharges	326	297	10%

Data Submitted to DMHAS by Month
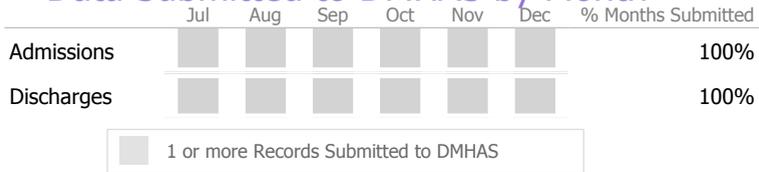
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 16 Active Pre-trial Intervention Programs Programs

PTIP-75 N. Mountain Rd. 620707
Wheeler Clinic
Forensic SA - Forensics Community-based - Pre-trial Intervention Programs

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	927	1,022	-9%	
Admits	319	367	-13%	▼
Discharges	310	394	-21%	▼

Data Submitted to DMHAS by Month
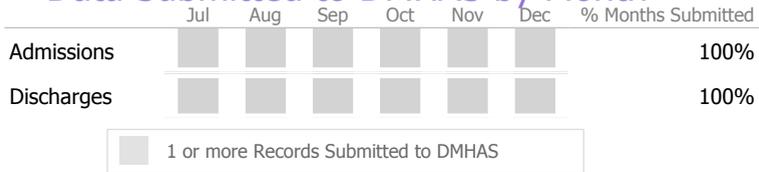
	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							100%

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 16 Active Pre-trial Intervention Programs Programs

SA OP Hartford 620203
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	856	1,264	-32%	▼
Admits	380	781	-51%	▼
Discharges	391	816	-52%	▼
Service Hours	2,295	6,712	-66%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		99%	94%
Valid TEDS Data		91%	93%

On-Time Periodic		Actual	State Avg
6 Month Updates		20%	27%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	99%
✔ SA Screen Complete		100%	99%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		98%	99%
✔ Valid Axis V GAF Score		98%	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							67%
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		266	68%	50%	51%	18%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Not Arrested		831	95%	75%	84%	20%	▲
🔴 Abstinence/Reduced Drug Use		449	51%	55%	54%	-4%	
🔴 Stable Living Situation		789	90%	95%	83%	-5%	
🔴 Employed		376	43%	50%	41%	-7%	
🔴 Improved/Maintained Axis V GAF Score		422	72%	75%	53%	-3%	
🔴 Self Help		254	29%	60%	33%	-31%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Clients Receiving Services		373	77%	90%	69%	-13%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ 2 or more Services within 30 days		326	87%	75%	71%	12%	▲
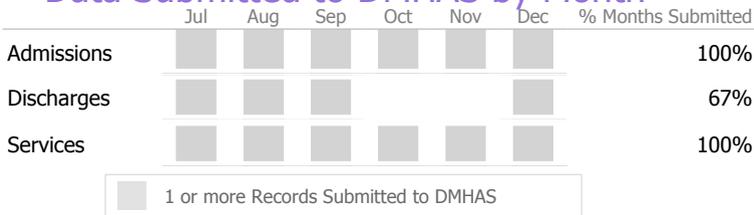
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

SA OP Plainville 620200
Wheeler Clinic
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	1,469	1,797	-18%	▼
Admits	647	978	-34%	▼
Discharges	468	1,043	-55%	▼
Service Hours	4,788	11,712	-59%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		99%	94%
Valid TEDS Data		88%	93%

On-Time Periodic		Actual	State Avg
6 Month Updates		11%	27%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	99%
✔ SA Screen Complete		100%	99%

Diagnosis		Actual	State Avg
Valid Axis I Diagnosis		97%	99%
✔ Valid Axis V GAF Score		97%	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							100%
Discharges							83%
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		253	54%	50%	51%	4%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Not Arrested		1,373	91%	75%	84%	16%	▲
● Employed		739	49%	50%	41%	-1%	
● Stable Living Situation		1,397	92%	95%	83%	-3%	
● Abstinence/Reduced Drug Use		716	47%	55%	54%	-8%	
● Self Help		707	47%	60%	33%	-13%	▼
● Improved/Maintained Axis V GAF Score		543	55%	75%	53%	-20%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		763	73%	90%	69%	-17%	▼

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ 2 or more Services within 30 days		503	78%	75%	71%	3%

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

Senior Services
Wheeler Clinic
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - December 2017 (Data as of Mar 21, 2018)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	31	47	-34%	▼
Admits	7	21	-67%	▼
Discharges	10	18	-44%	▼
Service Hours	146	497	-71%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		99%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		6%	50%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							50%
Discharges							33%
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		7	70%	50%	76%	20%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Stable Living Situation		28	90%	80%	84%	10%	
⬤ Employed		5	16%	20%	23%	-4%	
⬤ Self Help		14	45%	60%	70%	-15%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
⬤ Clients Receiving Services		14	67%	90%	77%	-23%	▼
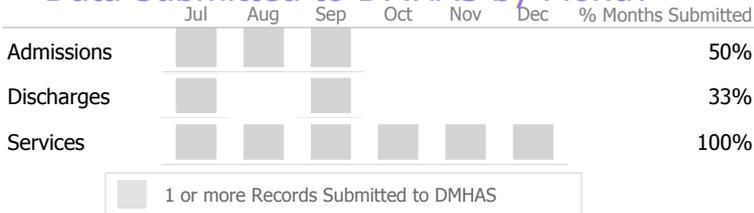
▲ > 10% Over   ▼ < 10% Under

Actual | Goal   ✔ Goal Met   ⬤ Below Goal

* State Avg based on 13 Active Standard Case Management Programs