

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---------------|----------------|--------|----------|------------|
| | Unique Clients | 4,257 | 4,734 | -10% |
| | Admits | 912 | 1,211 | -25% ▼ |
| | Discharges | 971 | 1,030 | -6% |
| | Service Hours | 3,767 | 5,349 | -30% ▼ |

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

Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|--------------------|-------------------------------|-------|-------|
| Addiction | Outpatient | 2,505 | 56.8% |
| | Intake | 251 | 5.7% |
| | Medication Assisted Treatment | 235 | 5.3% |
| | Case Management | 69 | 1.6% |
| | Consultation | 30 | 0.7% |
| | Recovery Support | 19 | 0.4% |
| | IOP | 16 | 0.4% |
| Forensic SA | Forensics Community-based | 1,256 | 28.5% |
| | Case Management | 32 | 0.7% |

Consumer Satisfaction Survey

(Based on 202 FY19 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ Overall | | 91% | 80% | 91% |
| ✓ Quality and Appropriateness | | 90% | 80% | 93% |
| ✓ General Satisfaction | | 87% | 80% | 92% |
| ✓ Participation in Treatment | | 86% | 80% | 92% |
| ✓ Access | | 83% | 80% | 88% |
| ✓ Respect | | 83% | 80% | 91% |
| ● Recovery | | 77% | 80% | 79% |
| ● Outcome | | 76% | 80% | 83% |

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

Client Demographics

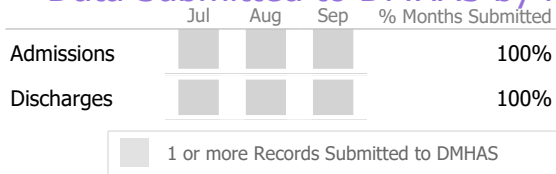
| Age | # | % | State Avg | Gender | # | % | State Avg |
|-------------------|-------|-------|-----------|---------------------------------|-------|-----|-----------|
| 18-25 | 714 | 17% | 9% | Male | 2,582 | 61% | 59% |
| 26-34 | 1,216 | 29% | 22% | Female | 1,673 | 39% | 41% |
| 35-44 | 970 | 23% | 21% | Transgender | | | 0% |
| 45-54 | 688 | 16% | 20% | | | | |
| 55-64 | 489 | 12% | 20% | | | | |
| 65+ | 171 | 4% | 7% | | | | |
| Ethnicity | # | % | State Avg | Race | # | % | State Avg |
| Unknown | 1,927 | 45% ▲ | 9% | White/Caucasian | 2,507 | 59% | 64% |
| Non-Hispanic | 1,544 | 36% ▼ | 71% | Other | 761 | 18% | 13% |
| Hisp-Puerto Rican | 617 | 14% | 12% | Black/African American | 592 | 14% | 16% |
| Hispanic-Other | 129 | 3% | 7% | Unknown | 162 | 4% | 5% |
| Hispanic-Mexican | 30 | 1% | 1% | Multiple Races | 137 | 3% | 1% |
| Hispanic-Cuban | 10 | 0% | 0% | Asian | 49 | 1% | 1% |
| | | | | Hawaiian/Other Pacific Islander | 25 | 1% | 0% |
| | | | | Am. Indian/Native Alaskan | 24 | 1% | 1% |

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 251 | 121 | 107% ▲ |
| Admits | 268 | 122 | 120% ▲ |
| Discharges | 268 | 120 | 123% ▲ |

Data Submitted to DMHAS by Month



* State Avg based on 1 Active Central Intake Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 13 | 11 | 18% ▲ |
| Admits | 3 | 4 | -25% ▼ |
| Discharges | 3 | - | |
| Service Hours | 4 | 30 | -87% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|-----------------|--------|-----------|
| Valid NOMS Data | 89% | 93% |
| Valid TEDS Data | 57% | 41% |

| On-Time Periodic | Actual | State Avg |
|------------------|--------|-----------|
| 6 Month Updates | 20% | 63% |

| Co-occurring | Actual | State Avg |
|--------------------|--------|-----------|
| MH Screen Complete | 100% | 100% |
| SA Screen Complete | 100% | 100% |

| Diagnosis | Actual | State Avg |
|------------------------|--------|-----------|
| Valid Axis I Diagnosis | 92% | 99% |
| Valid Axis V GAF Score | 100% | 96% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 3 | 100% | 75% | 88% | 25% ▲ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 1 | 10% | 90% | 84% | -80% ▼ |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 0 | 0% | 75% | 72% | -75% ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 33% |
| Discharges | | | | 67% |
| Services | | | | 33% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

* State Avg based on 6 Active Gambling Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 69 | 36 | 92% ▲ |
| Admits | 2 | 15 | -87% ▼ |
| Discharges | - | - | |
| Service Hours | 88 | 206 | -57% ▼ |

Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ at least 1 Service within 180 days | | 2 | 100% | 50% | 78% | 50% ▲ |

Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 19 Active Outreach & Engagement Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---------------------------|--------|----------|------------|
| Unique Clients | 16 | 21 | -24% ▼ |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | - | - | |
| Social Rehab/PHP/IOP Days | 0 | 0 | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|-------------------------|--------|-----------|
| Valid NOMS Data | N/A | 95% |
| Valid TEDS Data | N/A | 97% |
| On-Time Periodic | | |
| 6 Month Updates | 0% | 0% |
| Co-occurring | | |
| MH Screen Complete | N/A | 89% |
| SA Screen Complete | N/A | 89% |
| Diagnosis | | |
| 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 | | N/A | N/A | 50% | 68% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 66% | N/A |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Employed | | 0 | 0% | 50% | 29% | -50% ▼ |
| Abstinence/Reduced Drug Use | | 0 | 0% | 55% | 47% | -55% ▼ |
| Self Help | | 0 | 0% | 60% | 20% | -60% ▼ |
| Improved/Maintained Axis V GAF Score | | 0 | 0% | 75% | 69% | -75% ▼ |
| Not Arrested | | 0 | 0% | 75% | 79% | -75% ▼ |
| Stable Living Situation | | 0 | 0% | 95% | 83% | -95% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 0 | 0% | 90% | 60% | N/A ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | | | | 0% |

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 49 Active Standard IOP Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 123 | 47 | 162% ▲ |
| Admits | 21 | 1 | 2000% ▲ |
| Discharges | 10 | 1 | 900% ▲ |
| Service Hours | 185 | 1 | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|-------------------------|--------|-----------|
| Valid NOMS Data | 90% | 92% |
| Valid TEDS Data | 90% | 90% |
| On-Time Periodic | | |
| 6 Month Updates | 3% | 31% |
| Co-occurring | | |
| MH Screen Complete | 100% | 91% |
| SA Screen Complete | 100% | 97% |
| Diagnosis | | |
| 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 | | 7 | 70% | 50% | 54% | 20% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Not Arrested | | 101 | 81% | 75% | 79% | 6% |
| ✓ Employed | | 63 | 51% | 50% | 40% | 1% |
| ● Stable Living Situation | | 107 | 86% | 95% | 78% | -9% |
| ● Abstinence/Reduced Drug Use | | 48 | 39% | 55% | 48% | -16% ▼ |
| ● Self Help | | 35 | 28% | 60% | 28% | -32% ▼ |
| ● Improved/Maintained Axis V GAF Score | | 12 | 15% | 75% | 47% | -60% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ● Clients Receiving Services | | 37 | 32% | 90% | 59% | -58% ▼ |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ 2 or more Services within 30 days | | 16 | 76% | 75% | 67% | 1% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 33% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal Goal Met Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

Program Activity

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

Data Submission Quality

| Data Entry | Actual | State Avg |
|-------------------------|--------|-----------|
| Valid NOMS Data | N/A | 83% |
| Valid TEDS Data | N/A | 100% |
| On-Time Periodic | | |
| | Actual | State Avg |
| 6 Month Updates | N/A | 13% |
| Co-occurring | | |
| | Actual | State Avg |
| MH Screen Complete | N/A | 97% |
| SA Screen Complete | N/A | 100% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 74% | N/A |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Abstinence/Reduced Drug Use | | N/A | N/A | 55% | 46% | -55% ▼ |
| Employed | | N/A | N/A | 50% | 27% | -50% ▼ |
| Improved/Maintained Axis V GAF Score | | N/A | N/A | 75% | 56% | -75% ▼ |
| Not Arrested | | N/A | N/A | 75% | 82% | -75% ▼ |
| Self Help | | N/A | N/A | 60% | 24% | -60% ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 82% | -95% ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 7 Active Naltrexone Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 235 | 165 | 42% ▲ |
| Admits | 16 | 37 | -57% ▼ |
| Discharges | - | - | |
| Service Hours | - | - | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|-------------------------|--------|-----------|
| Valid NOMS Data | 96% | 93% |
| Valid TEDS Data | 94% | 97% |
| On-Time Periodic | | |
| 6 Month Updates | 0% | 37% |
| Co-occurring | | |
| MH Screen Complete | 100% | 78% |
| SA Screen Complete | 100% | 92% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 100% | 100% |
| Valid Axis V GAF Score | 100% | 99% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 50% | 47% | N/A |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Employed | | 55 | 23% | 50% | 31% | -27% ▼ |
| Not Arrested | | 101 | 43% | 75% | 71% | -32% ▼ |
| Abstinence/Reduced Drug Use | | 44 | 19% | 55% | 52% | -36% ▼ |
| Self Help | | 53 | 23% | 60% | 25% | -37% ▼ |
| Stable Living Situation | | 93 | 40% | 95% | 71% | -55% ▼ |
| Improved/Maintained Axis V GAF Score | | 0 | 0% | 75% | 44% | -75% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 0 | 0% | 90% | 57% | N/A ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 100% |
| Discharges | | | | 0% |
| Services | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

* State Avg based on 23 Active Buprenorphine Maintenance Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 30 | 11 | 173% ▲ |
| Admits | 16 | 5 | 220% ▲ |
| Discharges | 12 | - | |
| Service Hours | - | - | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | ■ | ■ | ■ | 100% |
| Discharges | ■ | ■ | ■ | 100% |
| Services | | | | 0% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under



■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 1 Active Consultation Programs


Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 7 | 19 | -63% ▼ |
| Admits | - | 7 | -100% ▼ |
| Discharges | - | 7 | -100% ▼ |
| Service Hours | - | 59 | -100% ▼ |

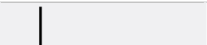

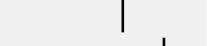
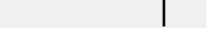
Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|---|-----------|
| Valid NOMS Data |  99% | N/A |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates |  0% | 6% |

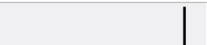
Discharge Outcomes

| | 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 |
|-----------------------------------|---|--------|----------|--------|-----------|----------------|
| Employed |  | 0 | 0% | 20% | 11% | -20% ▼ |
| Self Help |  | 0 | 0% | 60% | 83% | -60% ▼ |
| Social Support |  | 0 | 0% | 60% | 82% | -60% ▼ |
| Stable Living Situation |  | 0 | 0% | 80% | 31% | -80% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|---|--------|----------|--------|-----------|----------------|
| Clients Receiving Services |  | 0 | 0% | 90% | 57% | N/A ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | | | | 0% |

 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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 26 | 30 | -13% ▼ |
| Admits | 3 | 3 | 0% |
| Discharges | - | 15 | -100% ▼ |
| Service Hours | 3 | 59 | -95% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|--------|-----------|
| Valid NOMS Data | 100% | 99% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 8% | 6% |

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 | | 19 | 73% | 60% | 82% | 13% ▲ |
| ● Self Help | | 14 | 54% | 60% | 83% | -6% |
| ● Employed | | 0 | 0% | 20% | 11% | -20% ▼ |
| ● Stable Living Situation | | 1 | 4% | 80% | 31% | -76% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ● Clients Receiving Services | | 2 | 8% | 90% | 57% | -82% ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 67% |
| Discharges | | | | 0% |
| Services | | | | 67% |

▲ > 10% Over ▼ < 10% Under

* State Avg based on 8 Active Standard Case Management Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 410 | 436 | -6% |
| Admits | 123 | 161 | -24% ▼ |
| Discharges | 149 | 154 | -3% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 847 | 830 | 2% |
| Admits | 173 | 171 | 1% |
| Discharges | 192 | 159 | 21% ▲ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 1,307 | 1,173 | 11% ▲ |
| Admits | 190 | 284 | -33% ▼ |
| Discharges | 205 | 225 | -9% |
| Service Hours | 2,269 | 2,045 | 11% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|-------------------------|--------|-----------|
| Valid NOMS Data | 84% | 92% |
| Valid TEDS Data | 87% | 90% |
| On-Time Periodic | | |
| 6 Month Updates | 17% | 31% |
| Co-occurring | | |
| MH Screen Complete | 100% | 91% |
| SA Screen Complete | 100% | 97% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 98% | 99% |
| Valid Axis V GAF Score | 100% | 97% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 78 | 38% | 50% | 54% | -12% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Not Arrested | | 1,021 | 78% | 75% | 79% | 3% |
| Employed | | 492 | 38% | 50% | 40% | -12% ▼ |
| Abstinence/Reduced Drug Use | | 457 | 35% | 55% | 48% | -20% ▼ |
| Self Help | | 498 | 38% | 60% | 28% | -22% ▼ |
| Stable Living Situation | | 957 | 73% | 95% | 78% | -22% ▼ |
| Improved/Maintained Axis V GAF Score | | 329 | 40% | 75% | 47% | -35% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 541 | 49% | 90% | 59% | -41% ▼ |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| 2 or more Services within 30 days | | 138 | 73% | 75% | 67% | -2% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 33% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal Goal Met Below Goal

* State Avg based on 113 Active Standard Outpatient Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 1,158 | 2,030 | -43% ▼ |
| Admits | 97 | 397 | -76% ▼ |
| Discharges | 132 | 349 | -62% ▼ |
| Service Hours | 1,217 | 2,931 | -58% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|-------------------------|--------|-----------|
| Valid NOMS Data | 85% | 92% |
| Valid TEDS Data | 83% | 90% |
| On-Time Periodic | | |
| 6 Month Updates | 11% | 31% |
| Co-occurring | | |
| MH Screen Complete | 100% | 91% |
| SA Screen Complete | 100% | 97% |
| Diagnosis | | |
| Valid Axis I Diagnosis | 98% | 99% |
| Valid Axis V GAF Score | 100% | 97% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Treatment Completed Successfully | | 81 | 61% | 50% | 54% | 11% ▲ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--|--------------------|--------|----------|--------|-----------|----------------|
| ● Employed | | 407 | 35% | 50% | 40% | -15% ▼ |
| ● Not Arrested | | 696 | 60% | 75% | 79% | -15% ▼ |
| ● Abstinence/Reduced Drug Use | | 317 | 27% | 55% | 48% | -28% ▼ |
| ● Self Help | | 352 | 30% | 60% | 28% | -30% ▼ |
| ● Stable Living Situation | | 698 | 60% | 95% | 78% | -35% ▼ |
| ● Improved/Maintained Axis V GAF Score | | 280 | 31% | 75% | 47% | -44% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ● Clients Receiving Services | | 287 | 28% | 90% | 59% | -62% ▼ |

Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ 2 or more Services within 30 days | | 76 | 78% | 75% | 67% | 3% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 33% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal


* State Avg based on 113 Active Standard Outpatient Programs

Program Activity

| 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 more Records Submitted to DMHAS

 > 10% Over  < 10% Under

 Actual  Goal  Goal Met  Below Goal

* State Avg based on 19 Active Outreach & Engagement Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 19 | | |
| Admits | - | - | |
| Discharges | - | - | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------|--------|-----------|
|------------|--------|-----------|

| | | | |
|-----------------|---|-----|-----|
| Valid TEDS Data |  | N/A | N/A |
|-----------------|---|-----|-----|

| Co-occurring | Actual | State Avg |
|--------------|--------|-----------|
|--------------|--------|-----------|

| | | | |
|--------------------|---|-----|-----|
| MH Screen Complete |  | N/A | 71% |
|--------------------|---|-----|-----|

| | | | |
|--------------------|---|-----|-----|
| SA Screen Complete |  | N/A | 85% |
|--------------------|---|-----|-----|

| Diagnosis | Actual | State Avg |
|-----------|--------|-----------|
|-----------|--------|-----------|

| | | | |
|--------------------------|---|------|----|
| ✓ Valid Axis I Diagnosis |  | 100% | 3% |
|--------------------------|---|------|----|


| | | | |
|--------------------------|---|------|----|
| ✓ Valid Axis V GAF Score |  | 100% | 3% |
|--------------------------|---|------|----|

Data Submitted to DMHAS by Month

Jul Aug Sep % 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 9 Active Peer Based Mentoring Programs