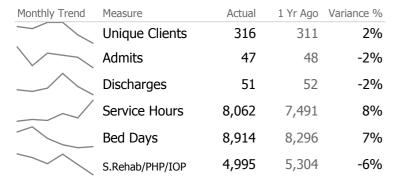**Gilead Community Services Inc.**
Middletown, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)
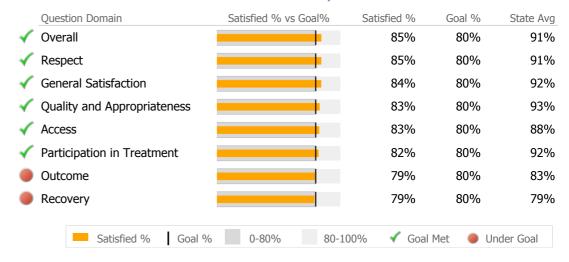
Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	316	311	2%
	Admits	47	48	-2%
	Discharges	51	52	-2%
	Service Hours	8,062	7,491	8%
	Bed Days	8,914	8,296	7%
	S.Rehab/PHP/IOP	4,995	5,304	-6%

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

Consumer Satisfaction Survey (Based on 162 FY15 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔ Overall		85%	80%	91%
✔ Respect		85%	80%	91%
✔ General Satisfaction		84%	80%	92%
✔ Quality and Appropriateness		83%	80%	93%
✔ Access		83%	80%	88%
✔ Participation in Treatment		82%	80%	92%
🔴 Outcome		79%	80%	83%
🔴 Recovery		79%	80%	79%

Legend: Satisfied % | Goal % | 0-80% | 80-100% | ✔ Goal Met | 🔴 Under Goal

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	184	43.0%
	ACT	99	23.1%
	Residential Services	86	20.1%
	Community Support	59	13.8%

Client Demographics

Age

Age	#	%	State Avg
18-25	14	4%	13%
26-34	39	12% ▼	23%
35-44	51	16%	19%
45-54	89	28%	23%
55-64	85	27% ▲	16%
65+	38	12%	5%

Gender

Gender	#	%	State Avg
Male	195	62%	59%
Female	120	38%	41%
Transgender			0%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	284	90% ▲	75%
Unknown	16	5%	6%
Hisp-Puerto Rican	12	4%	12%
Hispanic-Other	4	1%	6%
Hispanic-Cuban			0%
Hispanic-Mexican			1%

Race

Race	#	%	State Avg
White/Caucasian	249	79% ▲	65%
Black/African American	41	13%	17%
Other	14	4%	13%
Multiple Races	5	2%	1%
Asian	3	1%	1%
Unknown	3	1%	3%
Am. Indian/Native Alaskan	1	0%	0%
Hawaiian/Other Pacific Islander			0%

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

ACT Team 306292
Gilead Community Services Inc.
Mental Health - ACT - Assertive Community Treatment

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
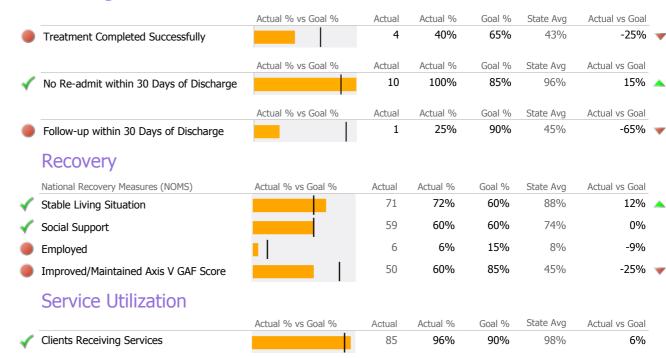Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	99	98	1%	
Admits	18	17	6%	
Discharges	10	15	-33%	▼
Service Hours	2,422	1,561	55%	▲

Data Submission Quality

Data Entry	Actual % vs Goal	Actual	State Avg
Valid NOMS Data		94%	96%

On-Time Periodic	Actual % vs Goal	Actual	State Avg
6 Month Updates		19%	72%

Cooccurring	Actual % vs Goal	Actual	State Avg
MH Screen Complete		57%	82%
SA Screen Complete		57%	77%

Diagnosis	Actual % vs Goal	Actual	State Avg
Valid Axis I Diagnosis		99%	100%
✔ Valid Axis V GAF Score		99%	74%

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		4	40%	65%	43%	-25%	▼
✔ No Re-admit within 30 Days of Discharge		10	100%	85%	96%	15%	▲
🔴 Follow-up within 30 Days of Discharge		1	25%	90%	45%	-65%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Stable Living Situation		71	72%	60%	88%	12%	▲
✔ Social Support		59	60%	60%	74%	0%	
🔴 Employed		6	6%	15%	8%	-9%	
🔴 Improved/Maintained Axis V GAF Score		50	60%	85%	45%	-25%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		85	96%	90%	98%	6%

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 10 Active Assertive Community Treatment Programs

Gateway - CSP/RP Program
Gilead Community Services Inc.
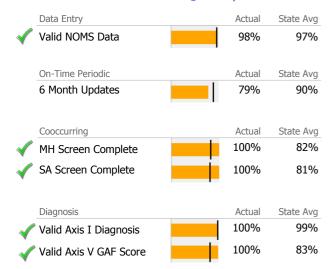Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
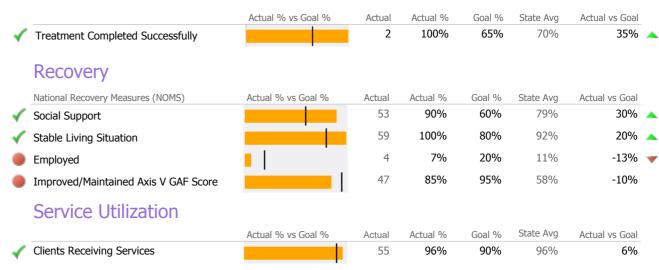Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	59	55	7%	
Admits	4	7	-43%	▼
Discharges	2	5	-60%	▼
Service Hours	870	841	3%	

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		98%	97%

On-Time Periodic		Actual	State Avg
6 Month Updates		79%	90%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	82%
✓ SA Screen Complete		100%	81%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	99%
✓ Valid Axis V GAF Score		100%	83%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions			▪	▪			33%
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		2	100%	65%	70%	35%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		53	90%	60%	79%	30%	▲
✓	Stable Living Situation		59	100%	80%	92%	20%	▲
●	Employed		4	7%	20%	11%	-13%	▼
●	Improved/Maintained Axis V GAF Score		47	85%	95%	58%	-10%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Clients Receiving Services		55	96%	90%	96%	6%	

▲ > 10% Over   ▼ < 10% Under

☐ Actual	│ Goal	✓ Goal Met	● Below Goal

* State Avg based on 40 Active CSP Programs

Gateway - Social Rehab 306285
Gilead Community Services Inc.
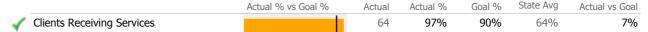Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	71	74	-4%	
Admits	8	8	0%	
Discharges	5	11	-55%	▼
Service Hours	-	-		
Social Rehab/PHP/IOP Days	2,029	2,149	-6%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		64	97%	90%	64%	7%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions			▢	▢	▢		67%
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 39 Active Social Rehabilitation Programs

Gilead Apartment Program306251
Gilead Community Services Inc.
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)
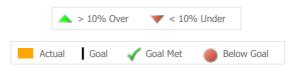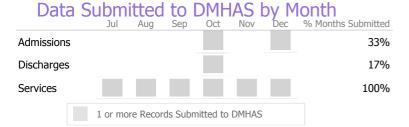
Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	20	19	5%
Admits	3	3	0%
Discharges	2	3	-33% ▼
Service Hours	3,456	3,494	-1%

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		80%	92%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	92%
SA Screen Complete		75%	90%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	97%
✔ Valid Axis V GAF Score		100%	96%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions				▉		▉	33%
Discharges				▉			17%
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		2	100%	50%	71%	50% ▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Social Support		15	75%	60%	87%	15% ▲
✔ Stable Living Situation		20	100%	85%	93%	15% ▲
🔴 Employed		1	5%	25%	13%	-20% ▼
🔴 Improved/Maintained Axis V GAF Score		14	82%	95%	73%	-13% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		18	100%	90%	96%	10%

▲ > 10% Over	▼ < 10% Under

▉ Actual		Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 51 Active Residential Support Programs

Gilead One Group Home 306240
Gilead Community Services Inc.
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
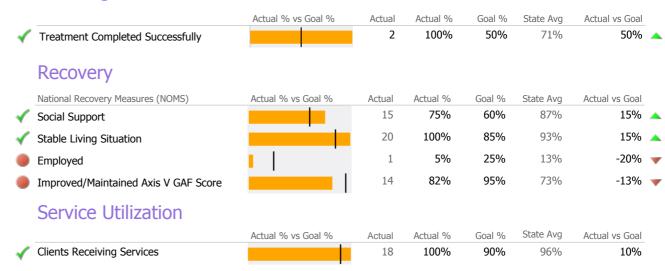Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)
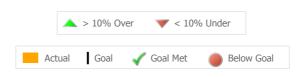
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	11	10	10%	
Admits	2	1	100%	▲
Discharges	3	1	200%	▲
Bed Days	1,574	1,646	-4%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		3	100%	80%	64%	20%	▲
●	No Re-admit within 30 Days of Discharge		2	67%	85%	81%	-18%	▼
●	Follow-up within 30 Days of Discharge		0	0%	90%	72%	-90%	▼

Data Submission Quality

	Data Entry		Actual	State Avg
✓	Valid NOMS Data		100%	99%

	On-Time Periodic		Actual	State Avg
	6 Month Updates		83%	91%

	Cooccurring		Actual	State Avg
✓	MH Screen Complete		100%	91%
✓	SA Screen Complete		100%	91%

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

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		9	82%	60%	76%	22%	▲
✓	Stable Living Situation		11	100%	90%	97%	10%	
●	Improved/Maintained Axis V GAF Score		6	67%	95%	66%	-28%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		9	435 days	0.5	95%	90%	98%	5%

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

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

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

▮ Actual	▎ Goal	✓ Goal Met	● Below Goal

*State Avg based on 24 Active Group Home Programs

Gilead Two Group Home 306241
Gilead Community Services Inc.
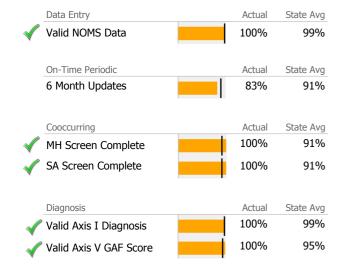Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
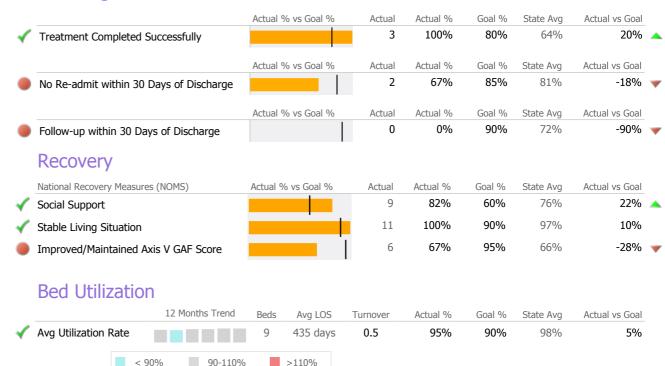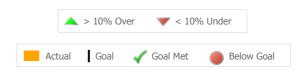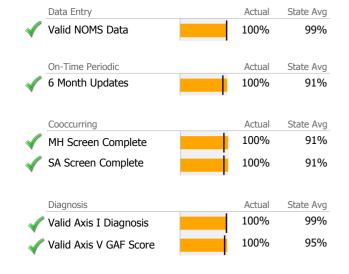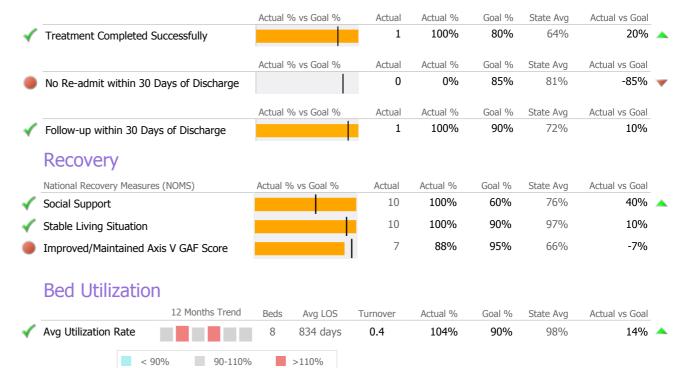Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	10	12	-17%	▼
Admits	2	4	-50%	▼
Discharges	1	5	-80%	▼
Bed Days	1,530	1,414	8%	

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	91%

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

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					▢		33%
Discharges	▢						17%

▢ 1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		1	100%	80%	64%	20%	▲
🔴	No Re-admit within 30 Days of Discharge		0	0%	85%	81%	-85%	▼
✔	Follow-up within 30 Days of Discharge		1	100%	90%	72%	10%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		10	100%	60%	76%	40%	▲
✔	Stable Living Situation		10	100%	90%	97%	10%	
🔴	Improved/Maintained Axis V GAF Score		7	88%	95%	66%	-7%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Avg Utilization Rate		8	834 days	0.4	104%	90%	98%	14%	▲

▢ < 90%   ▢ 90-110%   🟥 >110%

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 24 Active Group Home Programs

Juniper Home
Gilead Community Services Inc.
Mental Health - Residential Services - Supervised Apartments
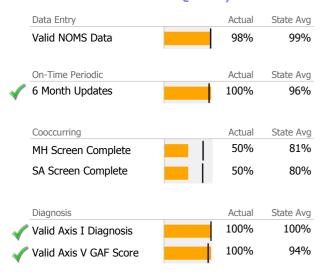
Connecticut Dept of Mental Health and Addiction Services
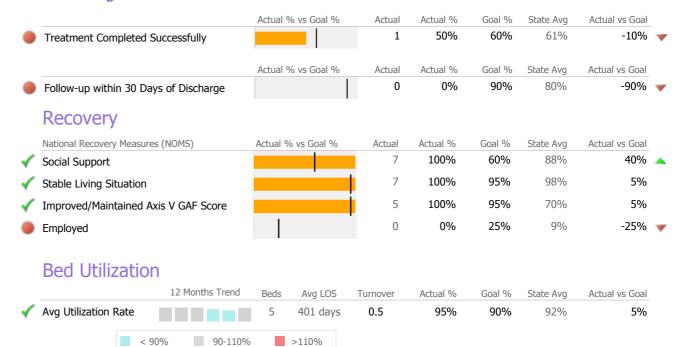Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	6	17%	▲
Admits	2	1	100%	▲
Discharges	2	3	-33%	▼
Bed Days	870	833	4%	

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Treatment Completed Successfully		1	50%	60%	61%	-10%	▼
🔴 Follow-up within 30 Days of Discharge		0	0%	90%	80%	-90%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		7	100%	60%	88%	40%	▲
✔ Stable Living Situation		7	100%	95%	98%	5%	
✔ Improved/Maintained Axis V GAF Score		5	100%	95%	70%	5%	
🔴 Employed		0	0%	25%	9%	-25%	▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	96%

Cooccurring		Actual	State Avg
MH Screen Complete		50%	81%
SA Screen Complete		50%	80%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	100%
✔ Valid Axis V GAF Score		100%	94%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		5	401 days	0.5	95%	90%	92%	5%

▢ < 90%	▢ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions					▢		17%
Discharges			▢		▢		33%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

🟧 Actual	❘ Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 72 Active Supervised Apartments Programs

Liberty Home 306230
Gilead Community Services Inc.
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	1	-	
Discharges	1	-	
Bed Days	1,049	1,104	-5%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	96%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	81%
✓ SA Screen Complete		100%	80%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	100%
✓ Valid Axis V GAF Score		100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions			▣				17%
Discharges	▣						17%

▣ 1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		1	100%	60%	61%	40%	▲
✓	Follow-up within 30 Days of Discharge		1	100%	90%	80%	10%	

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		7	100%	60%	88%	40%	▲
✓	Stable Living Situation		7	100%	95%	98%	5%	
●	Improved/Maintained Axis V GAF Score		5	83%	95%	70%	-12%	▼
●	Employed		0	0%	25%	9%	-25%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	1,650 days	0.5	95%	90%	92%	5%

▢ < 90%	▢ 90-110%	▢ >110%

▲ > 10% Over	▼ < 10% Under

▬ Actual	❘ Goal	✓ Goal Met	● Below Goal

* State Avg based on 72 Active Supervised Apartments Programs

Magnolia Home
Gilead Community Services Inc.
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3	4	-25% ▼
Admits	1	1	0%
Discharges	1	1	0%
Bed Days	551	552	0%

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		50%	96%

Cooccurring		Actual	State Avg
MH Screen Complete		0%	81%
SA Screen Complete		0%	80%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	100%
✔ Valid Axis V GAF Score		100%	94%

Data Submitted to DMHAS by Month

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

▪ 1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Treatment Completed Successfully		1	100%	60%	61%	40% ▲
✔	Follow-up within 30 Days of Discharge		1	100%	90%	80%	10%

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Social Support		4	100%	60%	88%	40% ▲
✔	Stable Living Situation		4	100%	95%	98%	5%
●	Employed		0	0%	25%	9%	-25% ▼
●	Improved/Maintained Axis V GAF Score		2	67%	95%	70%	-28% ▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔	Avg Utilization Rate		3	672 days	0.5	100%	90%	92%	10%

▫ < 90%	▫ 90-110%	▫ >110%

▲ > 10% Over   ▼ < 10% Under

▮ Actual		Goal	✔ Goal Met	● Below Goal

* State Avg based on 72 Active Supervised Apartments Programs

Phoenix Home
Gilead Community Services Inc.
Mental Health - Residential Services - Supervised Apartments
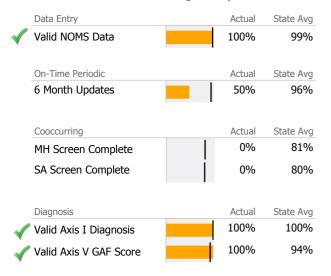
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	2		
Admits	2	-	
Discharges	2	-	
Bed Days	512	-	

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	96%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	81%
✔ SA Screen Complete		100%	80%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	100%
✔ Valid Axis V GAF Score		100%	94%

Data Submitted to DMHAS by Month

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

▪ 1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		2	100%	60%	61%	40%	▲
●	Follow-up within 30 Days of Discharge		1	50%	90%	80%	-40%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		2	100%	60%	88%	40%	▲
✔	Stable Living Situation		2	100%	95%	98%	5%	
●	Employed		0	0%	25%	9%	-25%	▼
●	Improved/Maintained Axis V GAF Score		1	50%	95%	70%	-45%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
●	Avg Utilization Rate		12	64 days	6.0	46%	90%	92%	-44%	▼

< 90%	90-110%	>110%

▲ > 10% Over   ▼ < 10% Under

Actual	Goal	✔ Goal Met	● Below Goal

* State Avg based on 72 Active Supervised Apartments Programs

SCAP - Apartment Program306260
Gilead Community Services Inc.
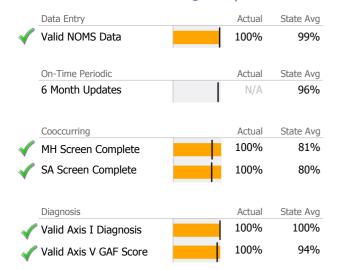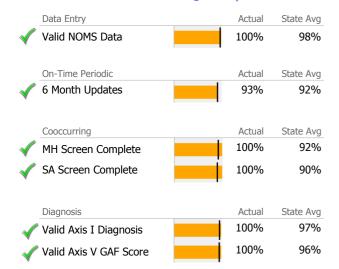Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
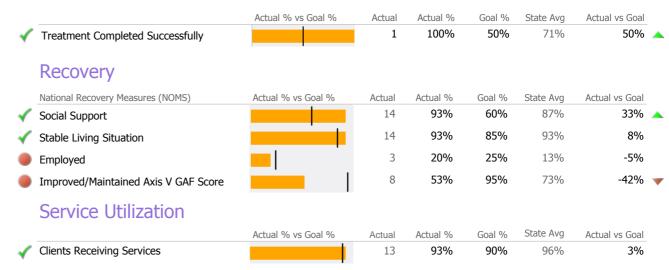Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	15	17	-12%	▼
Admits	-	3	-100%	▼
Discharges	1	2	-50%	▼
Service Hours	1,315	1,596	-18%	▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		93%	92%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	92%
✔ SA Screen Complete		100%	90%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	97%
✔ Valid Axis V GAF Score		100%	96%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges					▢		17%
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	100%	50%	71%	50%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		14	93%	60%	87%	33%	▲
✔ Stable Living Situation		14	93%	85%	93%	8%	
🔴 Employed		3	20%	25%	13%	-5%	
🔴 Improved/Maintained Axis V GAF Score		8	53%	95%	73%	-42%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		13	93%	90%	96%	3%

▲ > 10% Over   ▼ < 10% Under

▢ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 51 Active Residential Support Programs

SCAP - Group Home 306265
Gilead Community Services Inc.
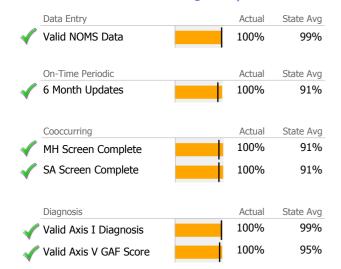Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	6	33%	▲
Admits	2	-		
Discharges	3	1	200%	▲
Bed Days	1,033	1,091	-5%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		1	33%	80%	64%	-47%	▼
✓	No Re-admit within 30 Days of Discharge		1	100%	85%	81%	15%	▲
✓	Follow-up within 30 Days of Discharge		1	100%	90%	72%	10%	

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	91%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	91%
✓ SA Screen Complete		100%	91%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		8	100%	60%	76%	40%	▲
✓	Stable Living Situation		8	100%	90%	97%	10%	
🔴	Improved/Maintained Axis V GAF Score		3	50%	95%	66%	-45%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		6	807 days	0.4	94%	90%	98%	4%

Legend: < 90% 90-110% >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▣	▣					33%
Discharges	▣	▣				▣	50%

▣ 1 or more Records Submitted to DMHAS

Legend:
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 24 Active Group Home Programs

Social Rehab 306280
Gilead Community Services Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)
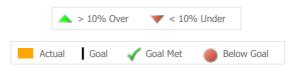
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	114	134	-15%	▼
Admits	2	3	-33%	▼
Discharges	17	5	240%	▲
Service Hours	-	-		
Social Rehab/PHP/IOP Days	2,966	3,155	-6%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		87	90%	90%	64%	0%

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 39 Active Social Rehabilitation Programs

Valor Home 306231
Gilead Community Services Inc.
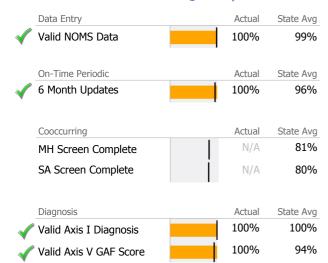Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	5	5	0%
Admits	-	-	
Discharges	-	-	
Bed Days	920	920	0%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	96%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	81%
SA Screen Complete		N/A	80%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	100%
✓ Valid Axis V GAF Score		100%	94%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	61%	N/A
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
✓ Social Support		5	100%	60%	88%	40% ▲
✓ Improved/Maintained Axis V GAF Score		5	100%	95%	70%	5%
✓ Stable Living Situation		5	100%	95%	98%	5%
🔴 Employed		0	0%	25%	9%	-25% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		5	946 days	0.5	100%	90%	92%	10%

< 90%		90-110%		>110%

▲ > 10% Over   ▼ < 10% Under

▮ Actual		Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 72 Active Supervised Apartments Programs

Women's Program 306235
Gilead Community Services Inc.
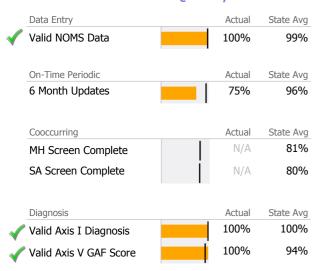Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - December 2015 (Data as of Mar 22, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	5	4	25%	▲
Admits	-	-		
Discharges	1	-		
Bed Days	875	736	19%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		75%	96%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	81%
SA Screen Complete		N/A	80%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	100%
✔ Valid Axis V GAF Score		100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges							17%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Treatment Completed Successfully		1	100%	60%	61%	40%	▲
✔ Follow-up within 30 Days of Discharge		1	100%	90%	80%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		4	80%	60%	88%	20%	▲
✔ Stable Living Situation		5	100%	95%	98%	5%	
🔴 Improved/Maintained Axis V GAF Score		4	80%	95%	70%	-15%	▼
🔴 Employed		0	0%	25%	9%	-25%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		5	1,737 days	0.5	95%	90%	92%	5%

■ < 90%   ■ 90-110%   ■ >110%

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 72 Active Supervised Apartments Programs