**CommuniCare Inc**
New Haven, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
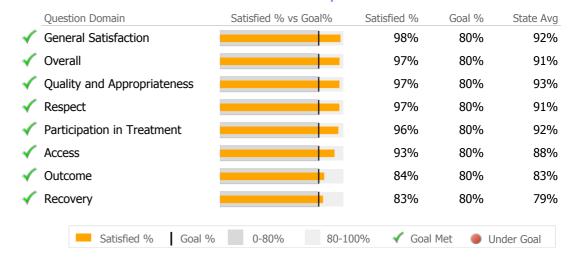Reporting Period: July 2016 - March 2017   (Data as of Jun 08, 2017)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 919 | 927 | -1% | |
| | Admits | 985 | 842 | 17% | ▲ |
| | Discharges | 949 | 794 | 20% | ▲ |
| | Service Hours | 5,692 | 11,247 | -49% | ▼ |

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

## Clients by Level of Care

| Program Type | Level of Care Type | | # | % |
|---|---|---|---|---|
| **Mental Health** | | | | |
| | Crisis Services | | 530 | 57.4% |
| | Outpatient | | 380 | 41.2% |
| | Residential Services | | 13 | 1.4% |

## Consumer Satisfaction Survey   (Based on 126 FY16 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | General Satisfaction | | 98% | 80% | 92% |
| ✓ | Overall | | 97% | 80% | 91% |
| ✓ | Quality and Appropriateness | | 97% | 80% | 93% |
| ✓ | Respect | | 97% | 80% | 91% |
| ✓ | Participation in Treatment | | 96% | 80% | 92% |
| ✓ | Access | | 93% | 80% | 88% |
| ✓ | Outcome | | 84% | 80% | 83% |
| ✓ | Recovery | | 83% | 80% | 79% |

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

## Client Demographics

| Age | | # | % | State Avg |
|---|---|---|---|---|
| 18-25 | | 92 | 10% | 14% |
| 26-34 | | 126 | 14% | 24% |
| 35-44 | | 180 | 20% | 20% |
| 45-54 | | 228 | 25% | 22% |
| 55-64 | | 199 | 22% | 16% |
| 65+ | | 81 | 9% | 5% |

| Gender | | # | % | | State Avg |
|---|---|---|---|---|---|
| Female | | 509 | 55% | ▲ | 40% |
| Male | | 410 | 45% | ▼ | 60% |
| Transgender | | | | | 0% |

| Ethnicity | | # | % | | State Avg |
|---|---|---|---|---|---|
| Non-Hispanic | | 485 | 53% | ▼ | 74% |
| Hisp-Puerto Rican | | 251 | 27% | ▲ | 12% |
| Hispanic-Other | | 141 | 15% | | 7% |
| Hispanic-Mexican | | 20 | 2% | | 1% |
| Unknown | | 19 | 2% | | 6% |
| Hispanic-Cuban | | 3 | 0% | | 0% |

| Race | | # | % | | State Avg |
|---|---|---|---|---|---|
| White/Caucasian | | 495 | 54% | ▼ | 65% |
| Other | | 309 | 34% | ▲ | 13% |
| Black/African American | | 89 | 10% | | 17% |
| Unknown | | 15 | 2% | | 3% |
| Am. Indian/Native Alaskan | | 6 | 1% | | 1% |
| Asian | | 3 | 0% | | 1% |
| Multiple Races | | 1 | 0% | | 1% |
| Hawaiian/Other Pacific Islander | | 1 | 0% | | 0% |

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

**BH Care Shoreline Crisis Prog 315-200Y**
CommuniCare Inc
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)
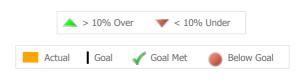
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 164 | 127 | 29% | ▲ |
| Admits | 239 | 178 | 34% | ▲ |
| Discharges | 244 | 175 | 39% | ▲ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Evaluation within 1.5 hours of Request | | 235 | 99% | 75% | 68% | 24% | ▲ |
| ✔ | Community Location Evaluation | | 194 | 82% | 80% | 75% | 2% | |
| ✔ | Follow-up Service within 48 hours | | 120 | 99% | 90% | 60% | 9% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 25 Active Mobile Crisis Team Programs

**BH Care Shoreline Supported Residential Prog 315-2**
CommuniCare Inc
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017   (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 4 | | |
| Admits | 4 | - | |
| Discharges | 2 | - | |
| Service Hours | 59 | - | |

## Data Submission Quality

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

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

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 2 | 100% | 50% | 88% | 50% | ▲ |

## 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% | 85% | 93% | 15% | ▲ |
| 🔴 | Employed | | 0 | 0% | 25% | 13% | -25% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 2 | 100% | 90% | 97% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | | | ▢ | | | | | | 22% |
| Discharges | ▢ | | | | | | | | | 11% |
| Services | | | | | ▢ | ▢ | ▢ | ▢ | ▢ | 56% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| Actual | | Goal | ✔ Goal Met | 🔴 Below Goal |

* State Avg based on 39 Active Residential Support Programs

**BH Care Valley Crisis 315-200**
CommuniCare Inc
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 110 | 97 | 13% | ▲ |
| Admits | 183 | 158 | 16% | ▲ |
| Discharges | 180 | 158 | 14% | ▲ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Evaluation within 1.5 hours of Request | | 177 | 98% | 75% | 68% | 23% | ▲ |
| ✔ | Community Location Evaluation | | 165 | 91% | 80% | 75% | 11% | ▲ |
| ✔ | Follow-up Service within 48 hours | | 122 | 98% | 90% | 60% | 8% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 25 Active Mobile Crisis Team Programs

**BH Care Valley Supported Residential Program 311-2**
CommuniCare Inc
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
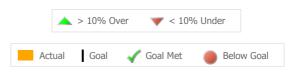Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)
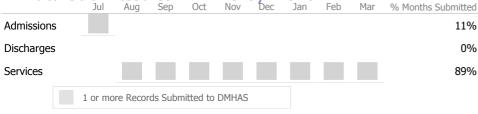
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 3 | 1 | 200% ▲ |
| Admits | 2 | - | |
| Discharges | - | - | |
| Service Hours | 79 | - | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 88% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Employed | | 2 | 67% | 25% | 13% | 42% ▲ |
| ✔ Social Support | | 2 | 67% | 60% | 88% | 7% |
| 🔴 Stable Living Situation | | 2 | 67% | 85% | 93% | -18% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 2 | 67% | 90% | 97% | -23% ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 67% | 96% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | | | | | | | | | 11% |
| Discharges | | | | | | | | | | 0% |
| Services | | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 89% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

| Actual | | Goal | ✔ Goal Met | 🔴 Below Goal |

* State Avg based on 39 Active Residential Support Programs

**Bridges Crisis Prog 315-200Y**
CommuniCare Inc
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 153 | 129 | 19% | ▲ |
| Admits | 243 | 174 | 40% | ▲ |
| Discharges | 244 | 181 | 35% | ▲ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Evaluation within 1.5 hours of Request | | 241 | 99% | 75% | 68% | 24% | ▲ |
| 🔴 | Community Location Evaluation | | 167 | 69% | 80% | 75% | -11% | ▼ |
| ✔ | Follow-up Service within 48 hours | | 173 | 99% | 90% | 60% | 9% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 25 Active Mobile Crisis Team Programs

**Bridges Supported Residential Prog 309 315-201Y**
CommuniCare Inc
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
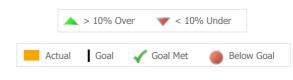Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 6 | 6 | 0% |
| Admits | - | 1 | -100% ▼ |
| Discharges | - | - | |
| Service Hours | 202 | 195 | 3% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 88% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Social Support | | 5 | 83% | 60% | 88% | 23% ▲ |
| ● Stable Living Situation | | 4 | 67% | 85% | 93% | -18% ▼ |
| ● Employed | | 0 | 0% | 25% | 13% | -25% ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 67% | 96% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 4 | 67% | 90% | 97% | -23% ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |
| 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 Residential Support Programs

**Greater New Haven After Hours Crisis Svs**
CommuniCare Inc
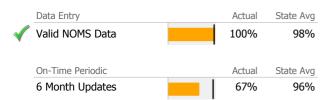Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
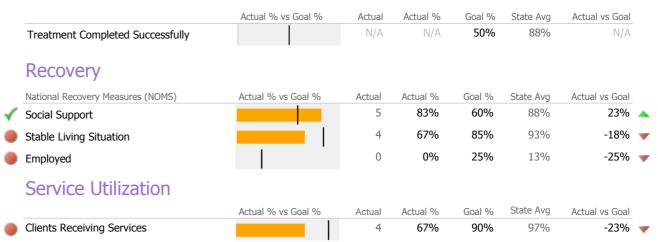Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## 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 | Jan | Feb | Mar | % 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 25 Active Mobile Crisis Team Programs

**Latino Behavioral Health Services - BH Care Shorel**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
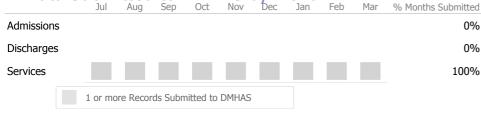Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

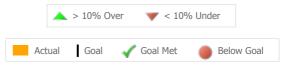| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 10 | 16 | -38% | ▼ |
| Admits | 1 | - | | |
| Discharges | - | 8 | -100% | ▼ |
| Service Hours | 224 | 274 | -18% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 94% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 89% | 64% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | 0% | 82% |
| SA Screen Complete | | 0% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 97% |
| ✔ Valid Axis V GAF Score | | 100% | 88% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 41% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Social Support | | 9 | 90% | 60% | 68% | 30% ▲ |
| 🔴 Stable Living Situation | | 9 | 90% | 95% | 85% | -5% |
| 🔴 Employed | | 2 | 20% | 30% | 22% | -10% |
| 🔴 Improved/Maintained Axis V GAF Score | | 6 | 67% | 75% | 53% | -8% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 10 | 100% | 90% | 85% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 1 | 100% | 75% | 64% | 25% ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | ▪ | 11% |
| Discharges | | | | | | | | | | 0% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▫ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| Actual | Goal | ✔ Goal Met | 🔴 Below Goal |

* State Avg based on 93 Active Standard Outpatient Programs

# Latino Behavioral Health Services - BH Care Valley
CommuniCare Inc
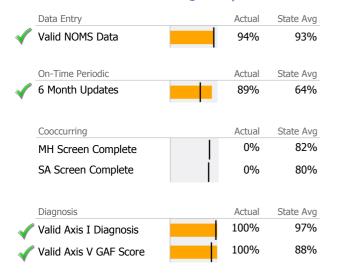Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017   (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 36 | 31 | 16% | ▲ |
| Admits | 11 | 12 | -8% | |
| Discharges | 6 | 10 | -40% | ▼ |
| Service Hours | 237 | 271 | -12% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 93% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 76% | 64% |

| Cooccurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 88% | 82% |
| ✔ SA Screen Complete | | 88% | 80% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 94% | 97% |
| ✔ Valid Axis V GAF Score | | 100% | 88% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 3 | 50% | 50% | 41% | 0% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 35 | 97% | 60% | 68% | 37% | ▲ |
| 🔴 Stable Living Situation | | 33 | 92% | 95% | 85% | -3% | |
| 🔴 Employed | | 8 | 22% | 30% | 22% | -8% | |
| 🔴 Improved/Maintained Axis V GAF Score | | 17 | 63% | 75% | 53% | -12% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 26 | 87% | 90% | 85% | -3% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 5 | 45% | 75% | 64% | -30% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▢ | | ▢ | | ▢ | ▢ | ▢ | ▢ | 67% |
| Discharges | | ▢ | | ▢ | ▢ | | ▢ | | | 44% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Latino Behavioral Health Services - Bridges**
CommuniCare Inc
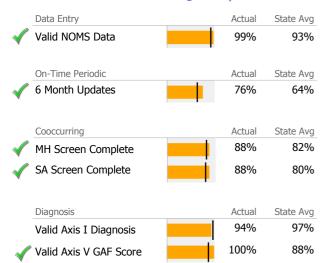Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)
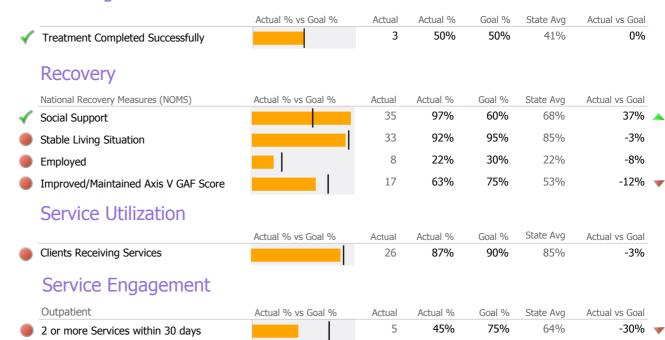
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 24 | 23 | 4% | |
| Admits | 3 | 10 | -70% | ▼ |
| Discharges | 3 | 4 | -25% | ▼ |
| Service Hours | 439 | 531 | -17% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs State Avg | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 90% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 89% | 64% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 82% |
| ✓ SA Screen Complete | | 100% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 88% | 97% |
| ✓ Valid Axis V GAF Score | | 100% | 88% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Treatment Completed Successfully | | 2 | 67% | 50% | 41% | 17% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Improved/Maintained Axis V GAF Score | | 20 | 91% | 75% | 53% | 16% | ▲ |
| ✓ Stable Living Situation | | 24 | 100% | 95% | 85% | 5% | |
| 🔴 Social Support | | 14 | 58% | 60% | 68% | -2% | |
| 🔴 Employed | | 4 | 17% | 30% | 22% | -13% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 21 | 100% | 90% | 85% | 10% | |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 3 | 100% | 75% | 64% | 25% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ■ | | ■ | | | | | | 22% |
| Discharges | ■ | ■ | | | | | | ■ | | 33% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Latino Behavioral Health Services - CASA/MAAS**
CommuniCare Inc
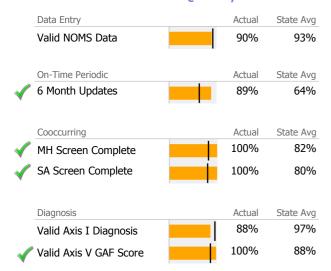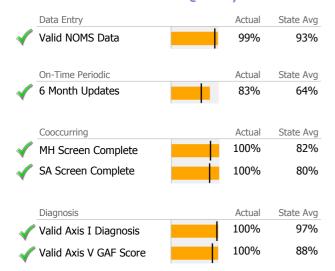Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 49 | 41 | 20% | ▲ |
| Admits | 22 | 18 | 22% | ▲ |
| Discharges | 19 | 16 | 19% | ▲ |
| Service Hours | 605 | 494 | 22% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 83% | 64% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 82% |
| ✔ SA Screen Complete | | 100% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 97% |
| ✔ Valid Axis V GAF Score | | 100% | 88% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 14 | 74% | 50% | 41% | 24% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 39 | 76% | 60% | 68% | 16% | ▲ |
| ✔ | Improved/Maintained Axis V GAF Score | | 41 | 98% | 75% | 53% | 23% | ▲ |
| ✔ | Employed | | 17 | 33% | 30% | 22% | 3% | |
| 🔴 | Stable Living Situation | | 44 | 86% | 95% | 85% | -9% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 32 | 100% | 90% | 85% | 10% | |

## Service Engagement

| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | 2 or more Services within 30 days | | 20 | 91% | 75% | 64% | 16% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 89% |
| 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 93 Active Standard Outpatient Programs

**Latino Behavioral Health Services - Crossroads**
CommuniCare Inc
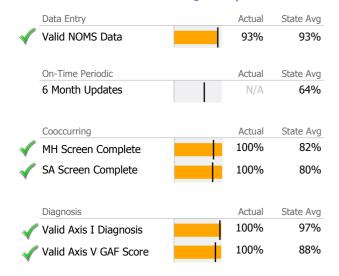Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 20 | 59 | -66% | ▼ |
| Admits | 14 | 42 | -67% | ▼ |
| Discharges | 16 | 45 | -64% | ▼ |
| Service Hours | 2,519 | 7,842 | -68% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs State Avg | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 93% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 64% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 100% | 82% |
| ✔ SA Screen Complete | | 100% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 97% |
| ✔ Valid Axis V GAF Score | | 100% | 88% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Treatment Completed Successfully | | 15 | 94% | 50% | 41% | 44% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 20 | 100% | 60% | 68% | 40% | ▲ |
| 🔴 Stable Living Situation | | 18 | 90% | 95% | 85% | -5% | |
| ✔ Improved/Maintained Axis V GAF Score | | 13 | 81% | 75% | 53% | 6% | |
| 🔴 Employed | | 0 | 0% | 30% | 22% | -30% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 4 | 100% | 90% | 85% | 10% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ 2 or more Services within 30 days | | 14 | 100% | 75% | 64% | 25% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | | | 67% |
| Discharges | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | | | 67% |
| Services | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | | 89% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual   | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Latino Behavioral Health Services - CS - Hill Heal**
CommuniCare Inc
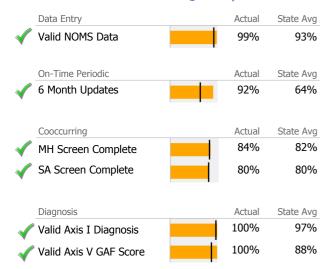Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 77 | 55 | 40% | ▲ |
| Admits | 47 | 51 | -8% | |
| Discharges | 30 | 17 | 76% | ▲ |
| Service Hours | 237 | 346 | -31% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 92% | 64% |

| Cooccurring | | Actual | State Avg |
|---|---|---|---|
| ✔ MH Screen Complete | | 84% | 82% |
| ✔ SA Screen Complete | | 80% | 80% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 97% |
| ✔ Valid Axis V GAF Score | | 100% | 88% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 15 | 50% | 50% | 41% | 0% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Stable Living Situation | | 80 | 98% | 95% | 85% | 3% | |
| 🔴 | Employed | | 14 | 17% | 30% | 22% | -13% | ▼ |
| 🔴 | Social Support | | 36 | 44% | 60% | 68% | -16% | ▼ |
| 🔴 | Improved/Maintained Axis V GAF Score | | 27 | 64% | 75% | 53% | -11% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 49 | 94% | 90% | 85% | 4% | |

## Service Engagement

| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | 2 or more Services within 30 days | | 31 | 66% | 75% | 64% | -9% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | 89% |
| Discharges | ▢ | | ▢ | | ▢ | ▢ | ▢ | ▢ | ▢ | 78% |
| Services | | | | | | | | ▢ | ▢ | 22% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual   | Goal   ✔ Goal Met   🔴 Below Goal

\* State Avg based on 93 Active Standard Outpatient Programs

**Latino Behavioral Health Services - Fair Haven**
CommuniCare Inc
Mental Health - Outpatient - Standard Outpatient

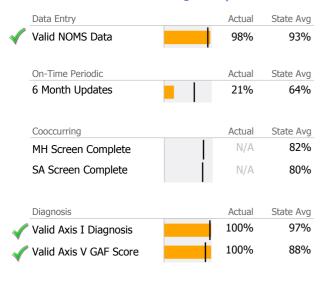Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 56 | 162 | -65% | ▼ |
| Admits | - | 21 | -100% | ▼ |
| Discharges | - | 4 | -100% | ▼ |
| Service Hours | 203 | 541 | -62% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 98% | 93% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 21% | 64% |

| Cooccurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| MH Screen Complete | | N/A | 82% |
| SA Screen Complete | | N/A | 80% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 100% | 97% |
| ✔ Valid Axis V GAF Score | | 100% | 88% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 41% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Improved/Maintained Axis V GAF Score | | 52 | 93% | 75% | 53% | 18% ▲ |
| ✔ Stable Living Situation | | 56 | 100% | 95% | 85% | 5% |
| ✔ Social Support | | 36 | 64% | 60% | 68% | 4% |
| ● Employed | | 14 | 25% | 30% | 22% | -5% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 42 | 75% | 90% | 85% | -15% ▼ |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | 0 | 0% | 75% | 64% | -75% ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |
| Services | | | | | | | | | | 44% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Latino Behavioral Health Services - Hispanos Unido**
CommuniCare Inc
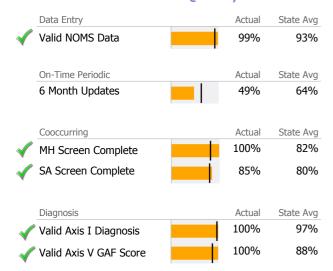Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
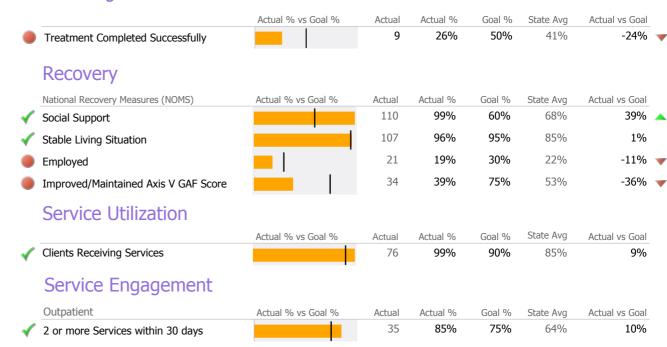Reporting Period: July 2016 - March 2017   (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 109 | 98 | 11% | ▲ |
| Admits | 41 | 41 | 0% | |
| Discharges | 34 | 40 | -15% | ▼ |
| Service Hours | 890 | 754 | 18% | ▲ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 93% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 49% | 64% |

| Cooccurring | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ MH Screen Complete | | 100% | 82% |
| ✓ SA Screen Complete | | 85% | 80% |

| Diagnosis | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 97% |
| ✓ Valid Axis V GAF Score | | 100% | 88% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 9 | 26% | 50% | 41% | -24% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 110 | 99% | 60% | 68% | 39% | ▲ |
| ✓ Stable Living Situation | | 107 | 96% | 95% | 85% | 1% | |
| ● Employed | | 21 | 19% | 30% | 22% | -11% | ▼ |
| ● Improved/Maintained Axis V GAF Score | | 34 | 39% | 75% | 53% | -36% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 76 | 99% | 90% | 85% | 9% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ 2 or more Services within 30 days | | 35 | 85% | 75% | 64% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | 100% |
| Discharges | | | | | | | | | | 78% |
| Services | | | | | | | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 93 Active Standard Outpatient Programs

**Latino Behvior Health - Fellowship**
CommuniCare Inc
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
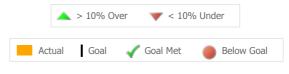Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

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

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | N/A | N/A | 90% | 70% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 37 Active Social Rehabilitation Programs

**Primary Care - Fair Haven Clinic - Healthy Lifesty**
CommuniCare Inc
Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

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

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 59% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Employed | | N/A | N/A | 20% | 11% | -20% ▼ |
| 🔴 Social Support | | N/A | N/A | 60% | 62% | -60% ▼ |
| 🔴 Stable Living Situation | | N/A | N/A | 80% | 80% | -80% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | N/A | N/A | 90% | 68% | N/A ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 96% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 64% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 31 Active Standard Case Management Programs

**Yale Crisis Prog 315-200Y**
CommuniCare Inc
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - March 2017  (Data as of Jun 08, 2017)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 108 | 92 | 17% | ▲ |
| Admits | 175 | 136 | 29% | ▲ |
| Discharges | 171 | 136 | 26% | ▲ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Evaluation within 1.5 hours of Request | | 152 | 97% | 75% | 68% | 22% | ▲ |
| 🔴 | Community Location Evaluation | | 123 | 79% | 80% | 75% | -1% | |
| ✔ | Follow-up Service within 48 hours | | 148 | 97% | 90% | 60% | 7% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % 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 25 Active Mobile Crisis Team Programs