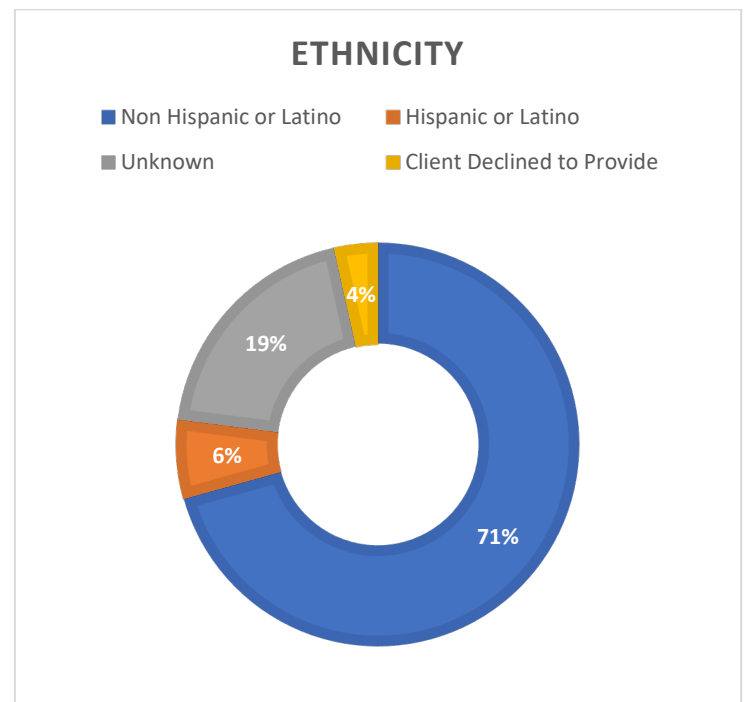
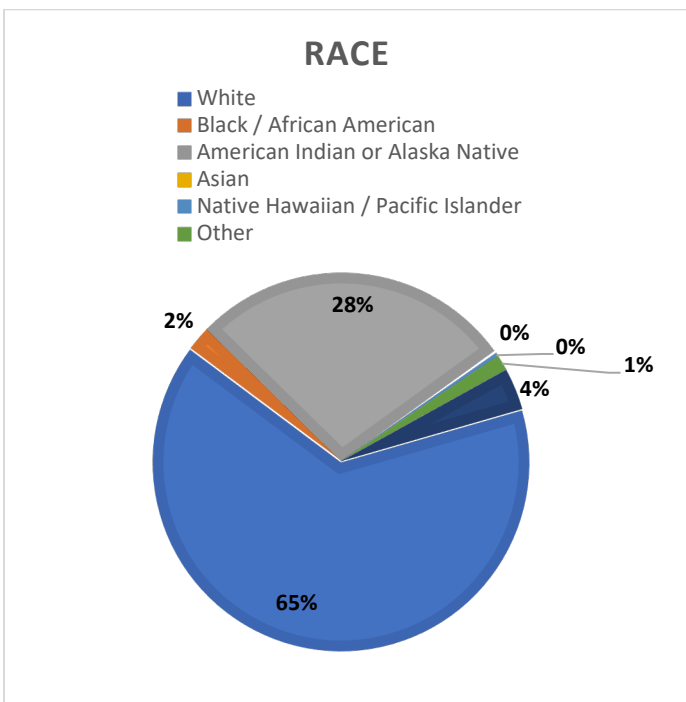
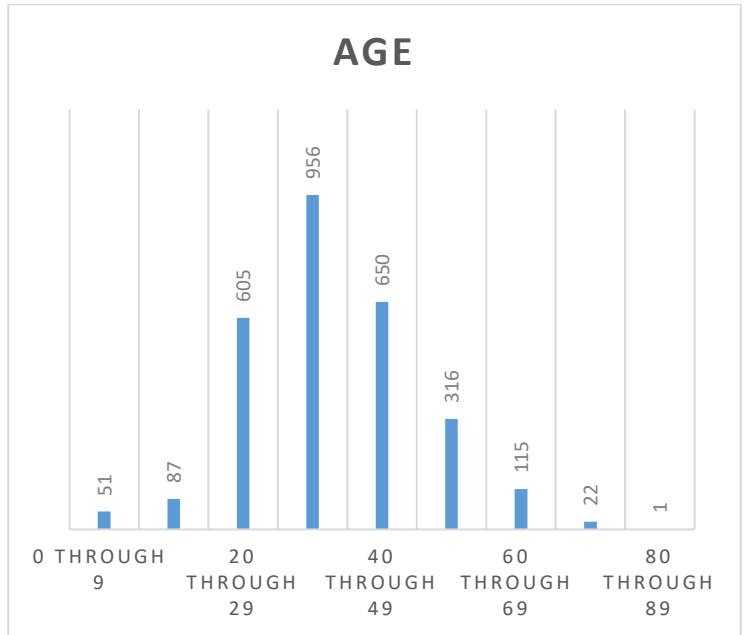
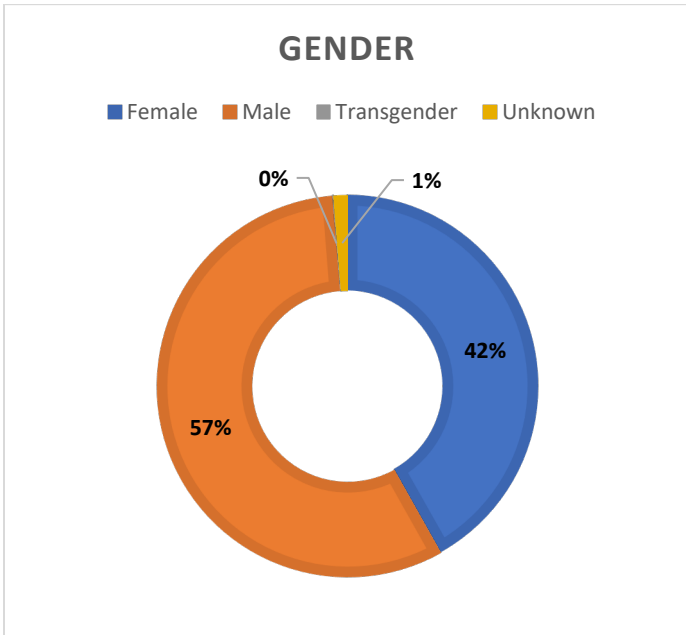
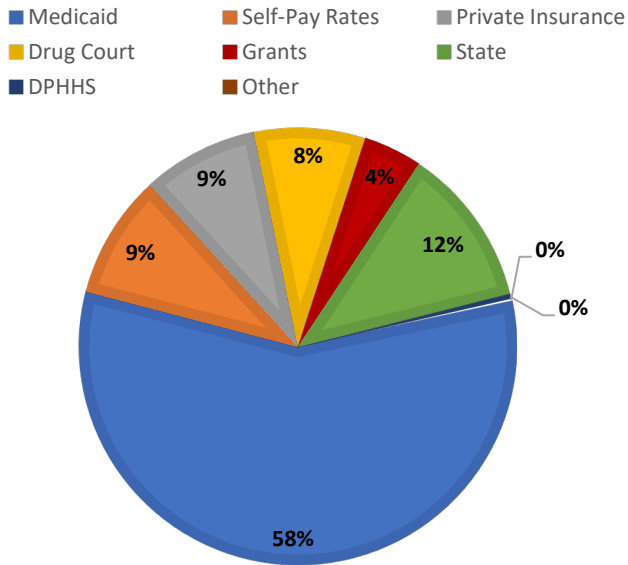


CLIENT INFORMATION / DEMOGRAPHICS – JUNE 2022 THROUGH DECEMBER 2022

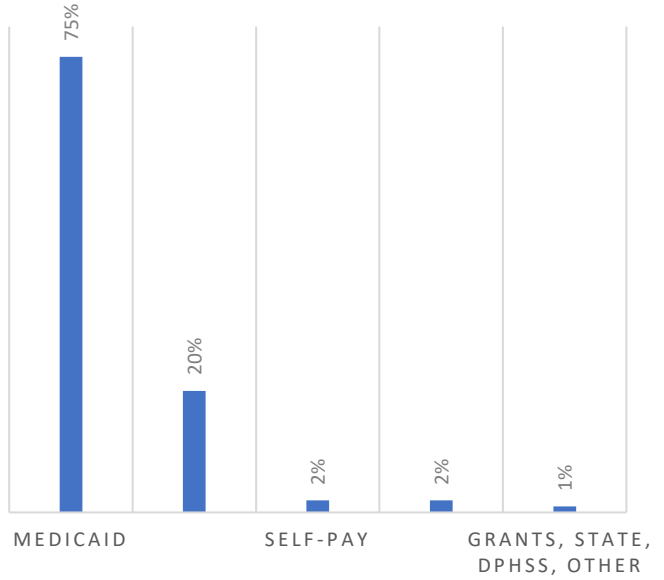
- Clients Served: 2,803
- Program Enrollment Count: 7,906
  - On average, clients are enrolled in 2.82 programs at Rimrock.
- # of Program Discharges: 5,126
- Average Program Length: 98 Days
- Sum Service Hours: 120,863
- Services Count: 113,433



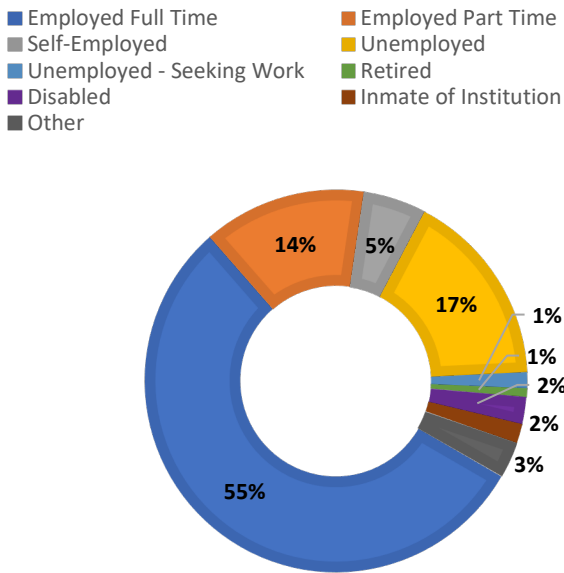
### BENEFIT ASSIGNMENT - PAYOR TYPE



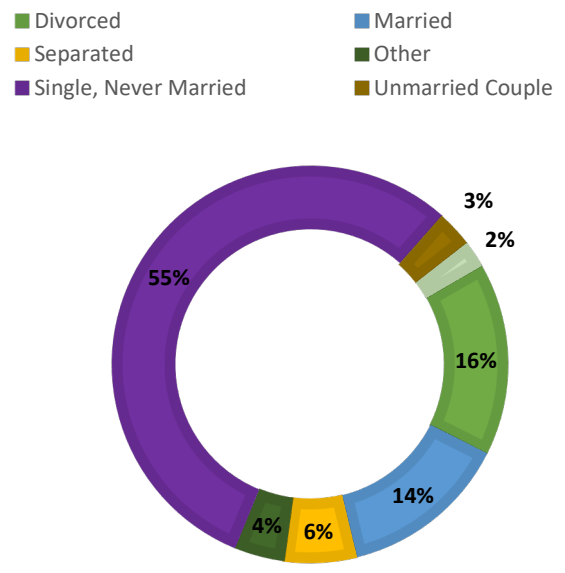
### BENEFIT ASSIGNMENT - AMOUNT PAID



### EMPLOYMENT STATUS

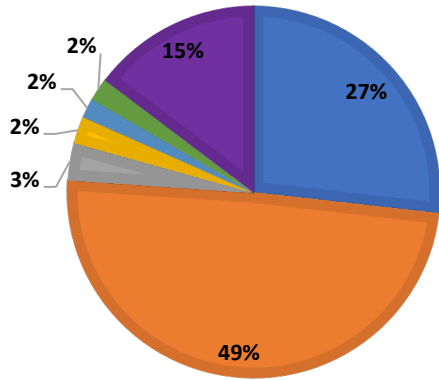


### MARITAL STATUS



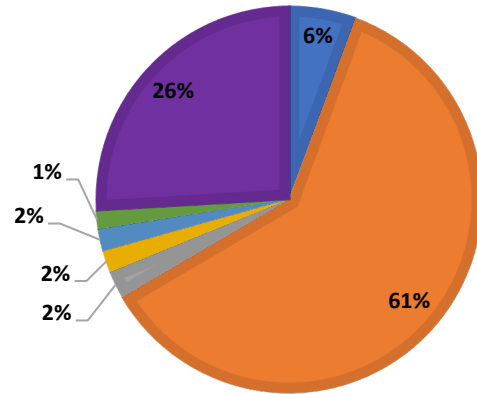
### CLIENT LOCATION - COUNTY

- Unknown / No Entry
- Big Horn
- Missoula
- Other
- Yellowstone
- Gallatin
- Cascade

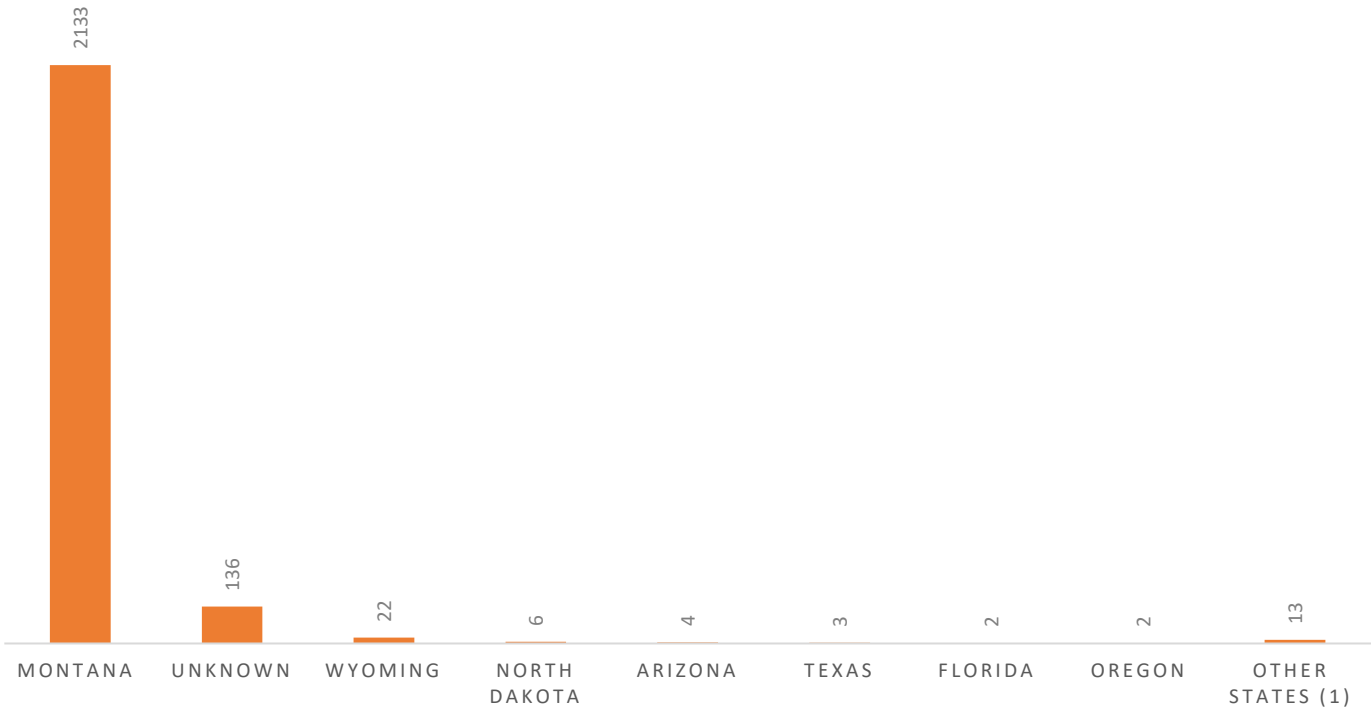


### CLIENT LOCATION - CITY

- Unknown / No Entry
- Great Falls
- Missoula
- Other
- Billings
- Laurel
- Bozeman

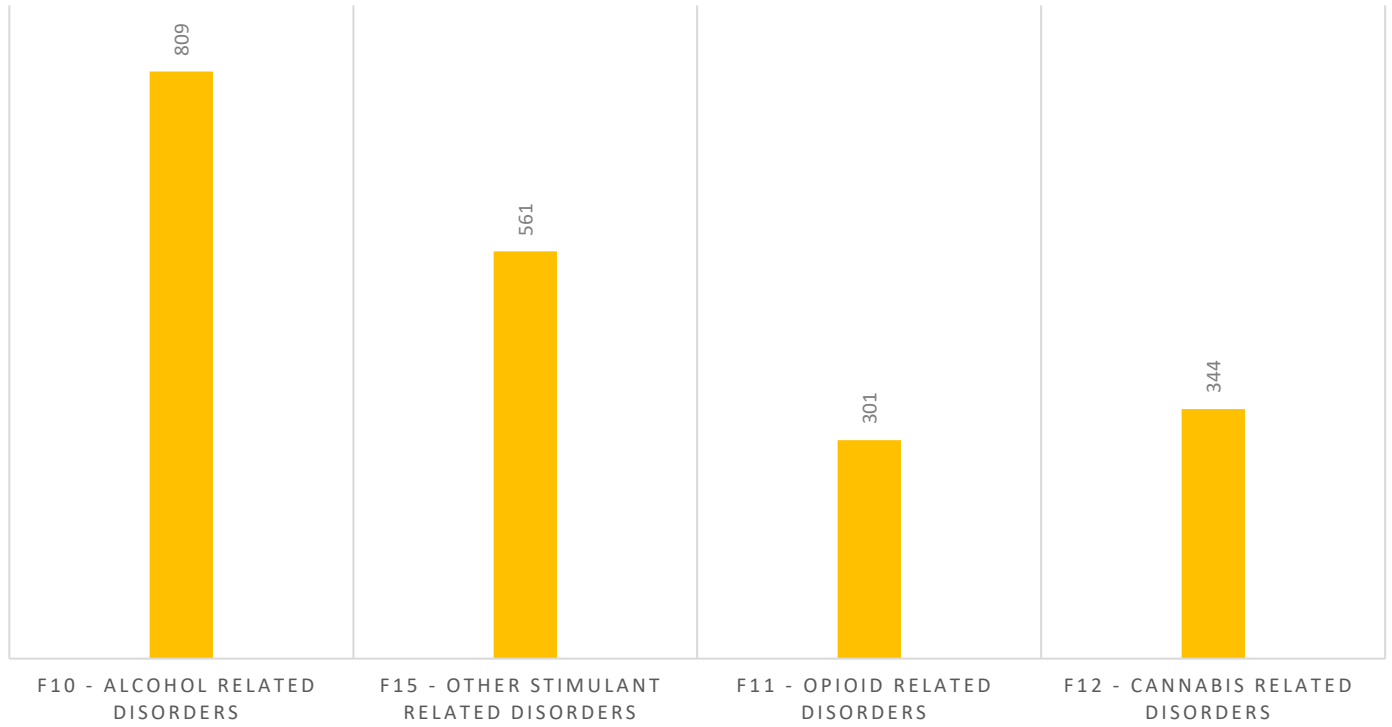


### CLIENT LOCATION - STATE

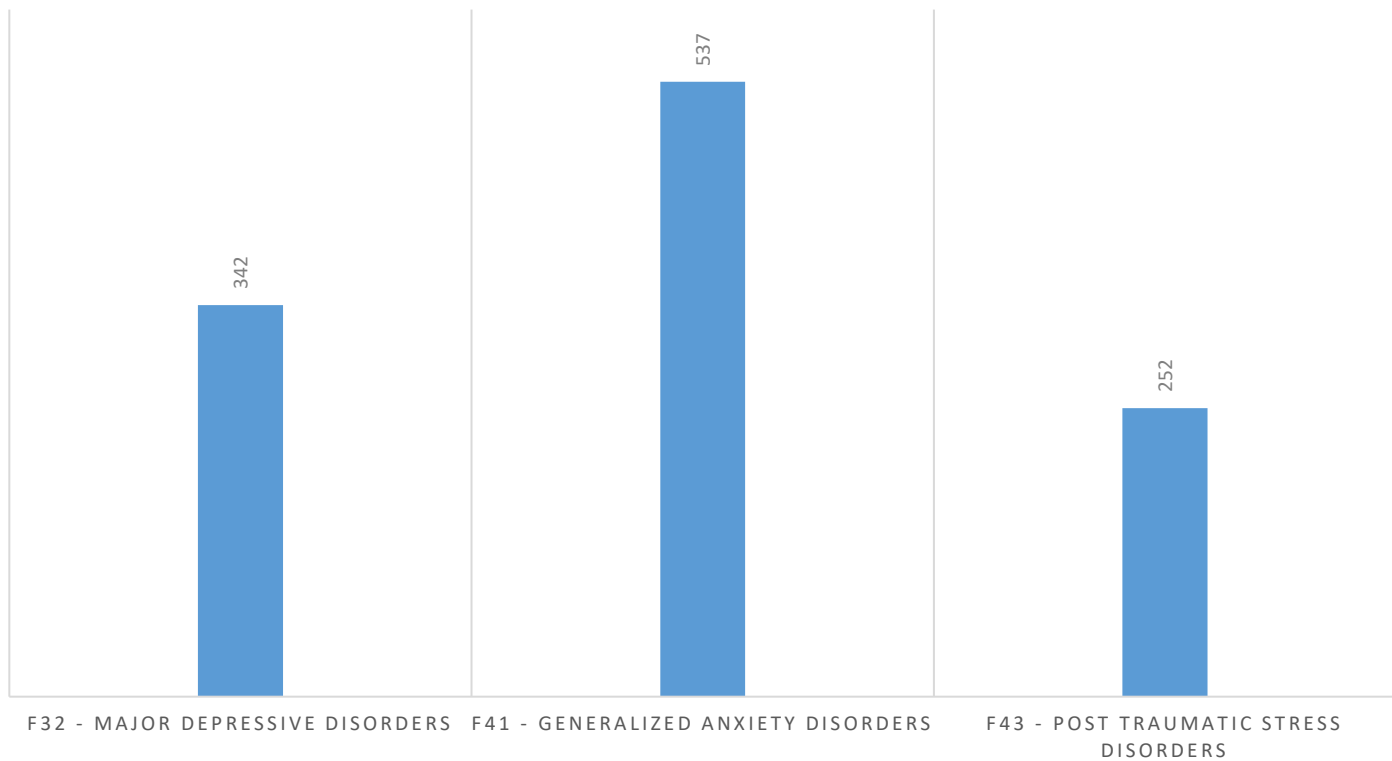


“Other States” include: Alaska, Colorado, Idaho, Maine, Missouri, Nebraska, Nevada, Ohio, Oklahoma, South Dakota, Virginia, Washington, Wisconsin

## SUBSTANCE USE DISORDERS

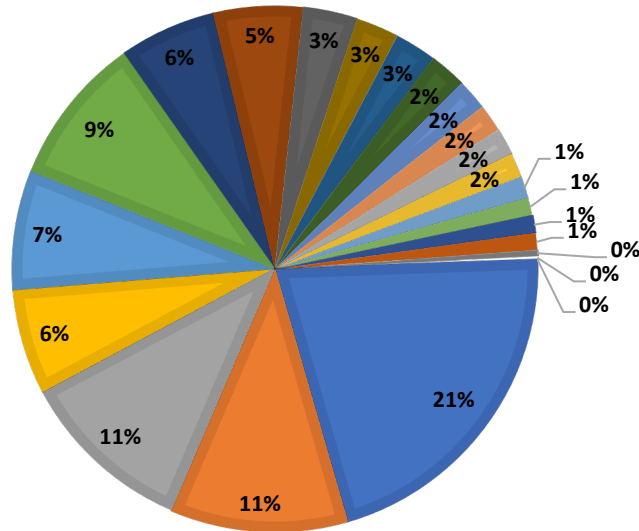


## MENTAL HEALTH DIAGNOSES

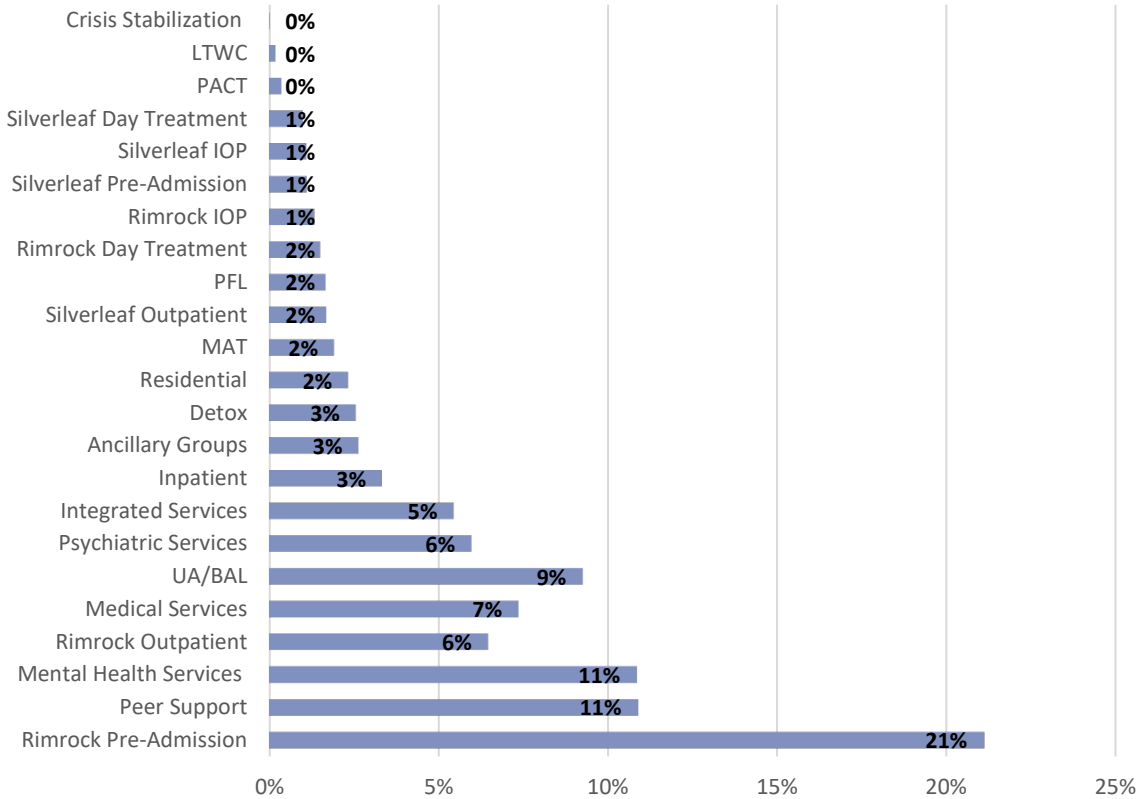


### PROGRAM NAME V1

- Rimrock Pre-Admission
- UA/BAL
- Detox
- Rimrock Day Treatment
- PACT
- Peer Support
- Psychiatric Services
- Residential
- Rimrock IOP
- LTWC
- Mental Health Services
- Integrated Services
- MAT
- Silverleaf Pre-Admission
- Crisis Stabilization
- Rimrock Outpatient
- Inpatient
- Silverleaf Outpatient
- Silverleaf IOP
- Medical Services
- Ancillary Groups
- PFL
- Silverleaf Day Treatment

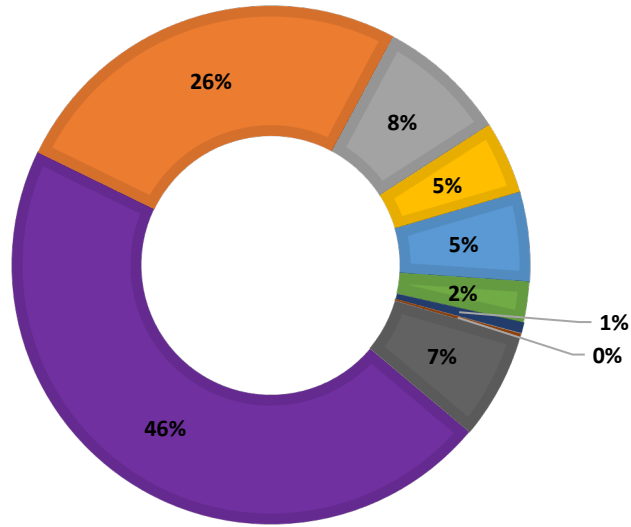


### PROGRAM NAME V2

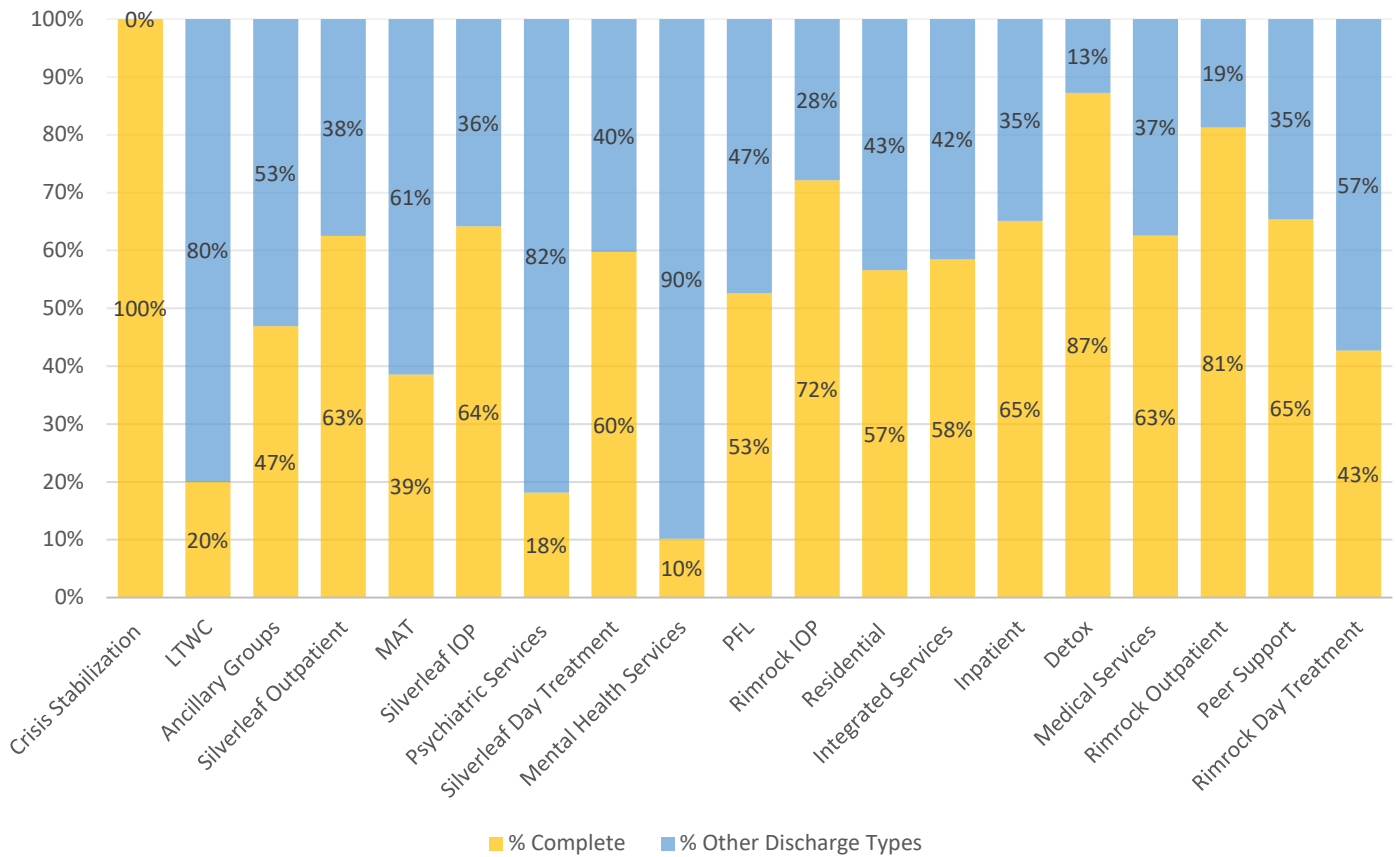


## PROGRAM DISCHARGE REASON

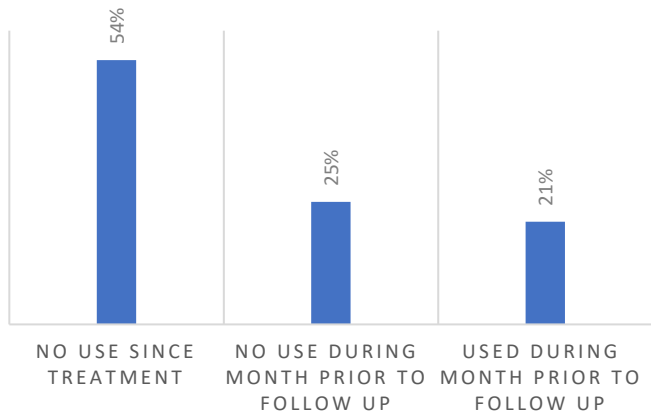
- Complete
- Administrative Discharge
- Unplanned Discharge
- Incomplete
- No Show
- Therapeutic Transfer
- On-going
- Incomplete - Maximum Benefit Received
- Other



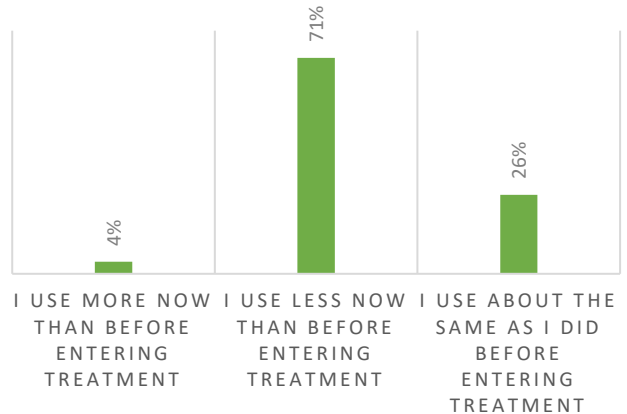
## COMPLETE DISCHARGES PER PROGRAM



### SUBSTANCE USE RELAPSE - FREQUENCY (110 RESPONDANTS)

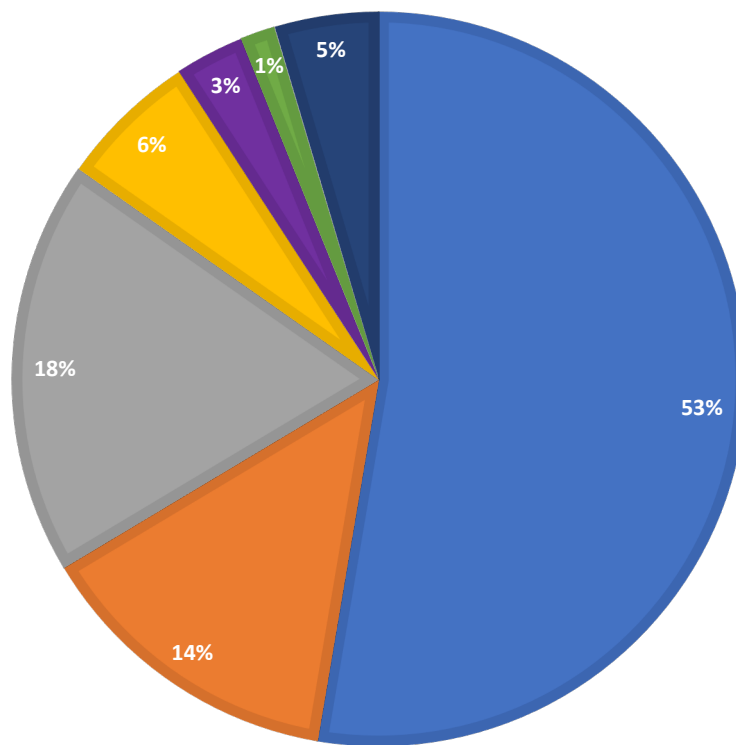


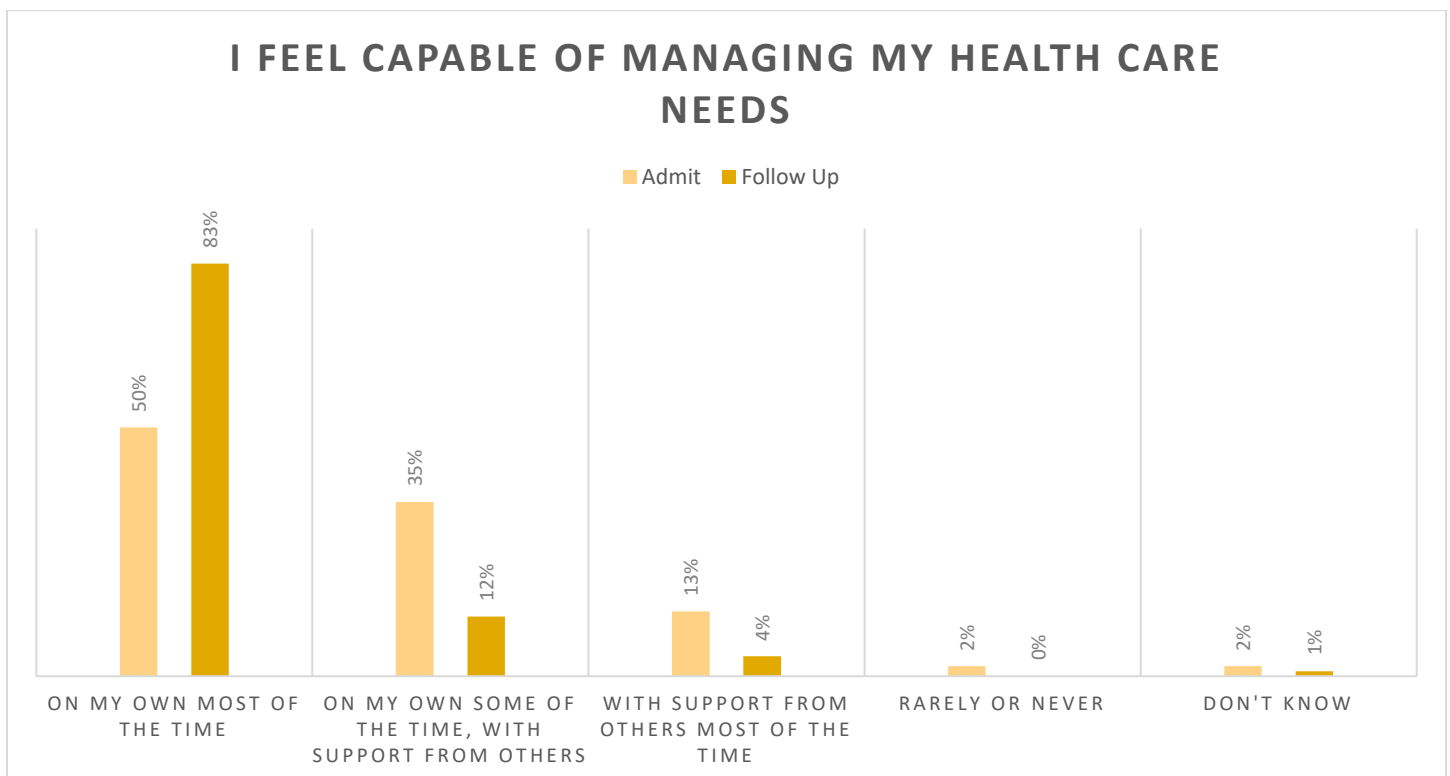
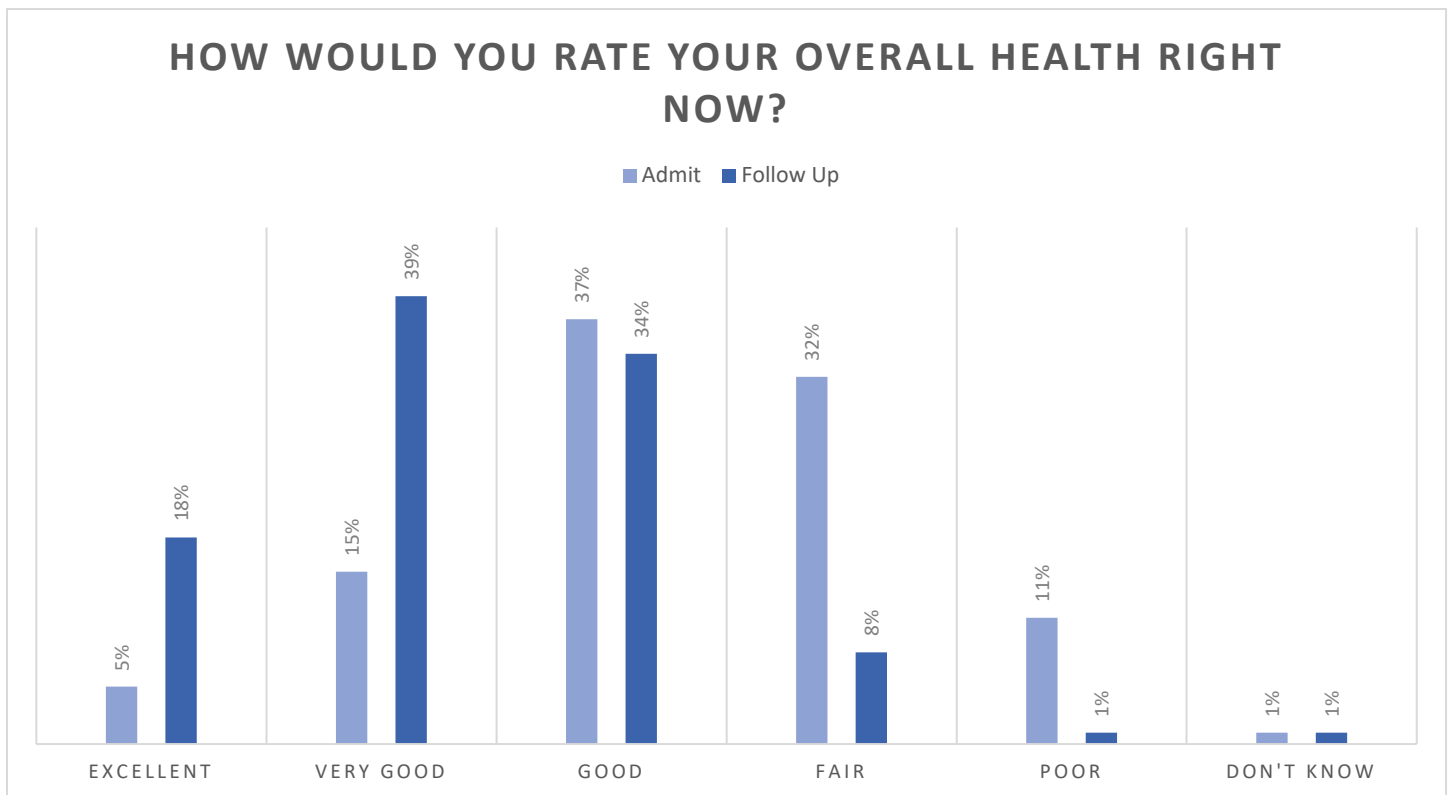
### SUBSTANCE USE RELAPSE - INTENSITY (51 RESPONDANTS)



### IF RELAPSED, INDICATE UP TO THREE MONST PREFERRED DRUG(S) OF CHOICE:

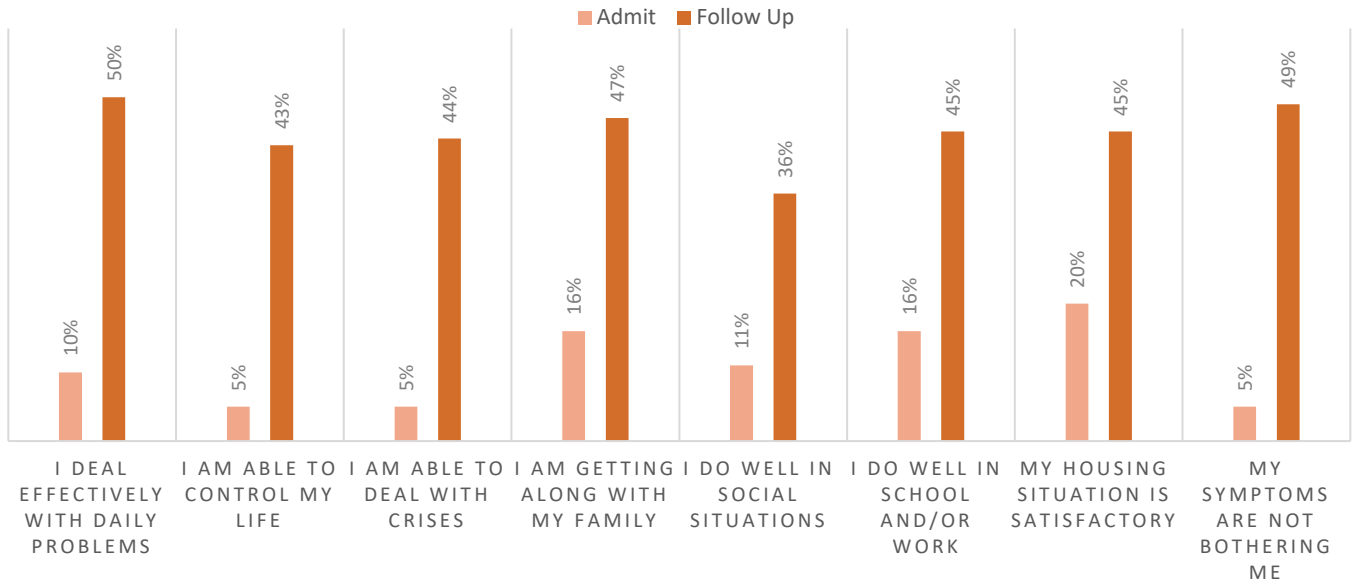
■ Alcohol 
 ■ Cannabis 
 ■ Methamphetamine 
 ■ Narcotics 
 ■ Opiates not prescribed by a doctor 
 ■ Hallucinogens 
 ■ Other



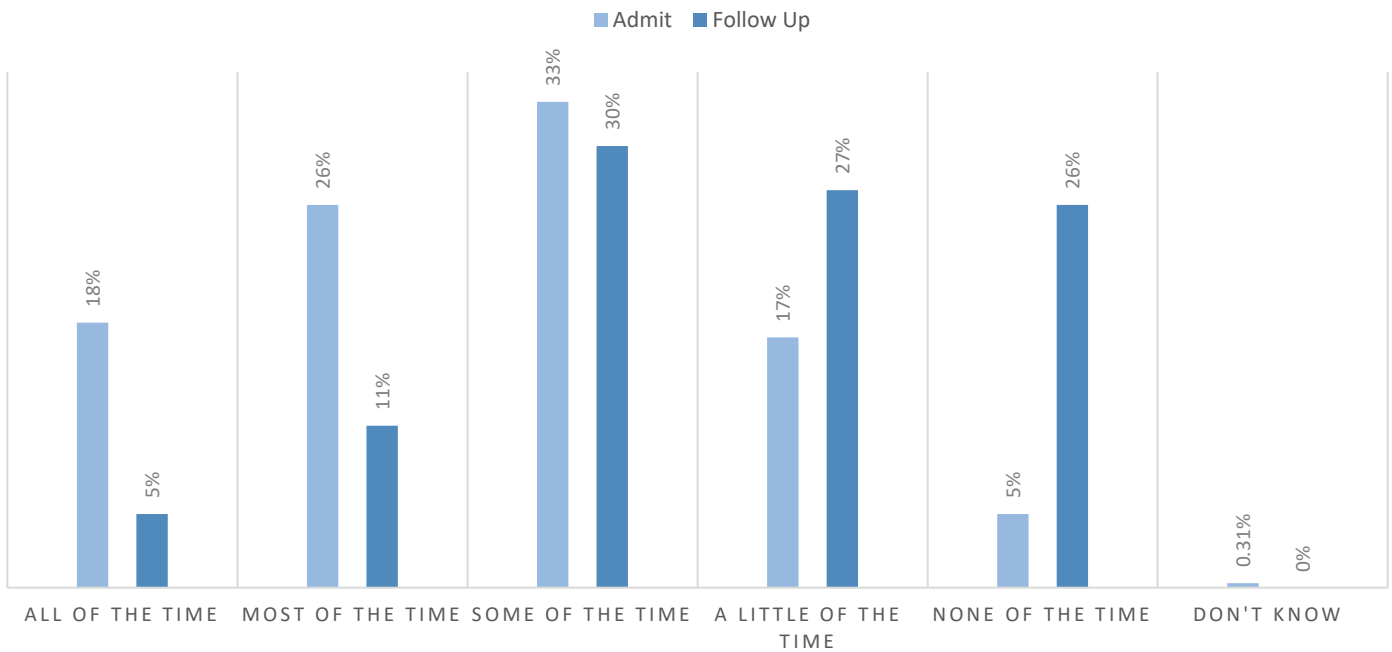




## CHANGE IN "STRONGLY AGREE" RESPONSES FOR THE PROMPT: "IN THE PAST 30 DAYS, I WAS ABLE TO DEAL WITH EVERY DAY LIFE."

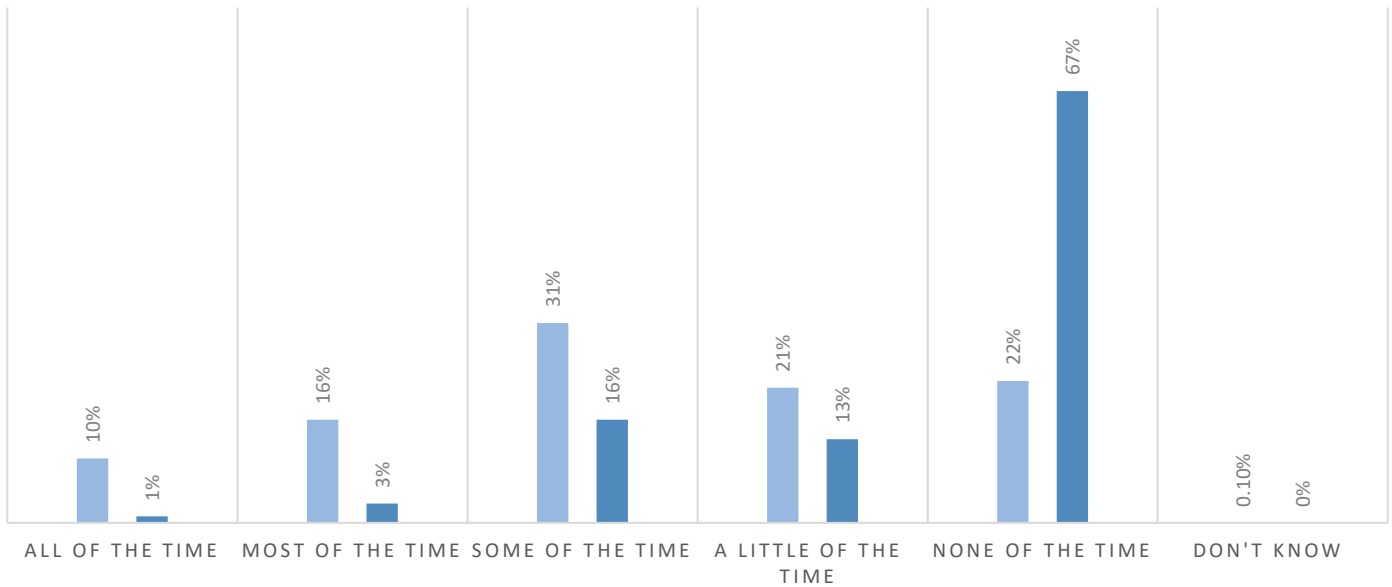


## IN THE PAST 30 DAYS, HOW MUCH HAVE YOU FELT NERVOUS?



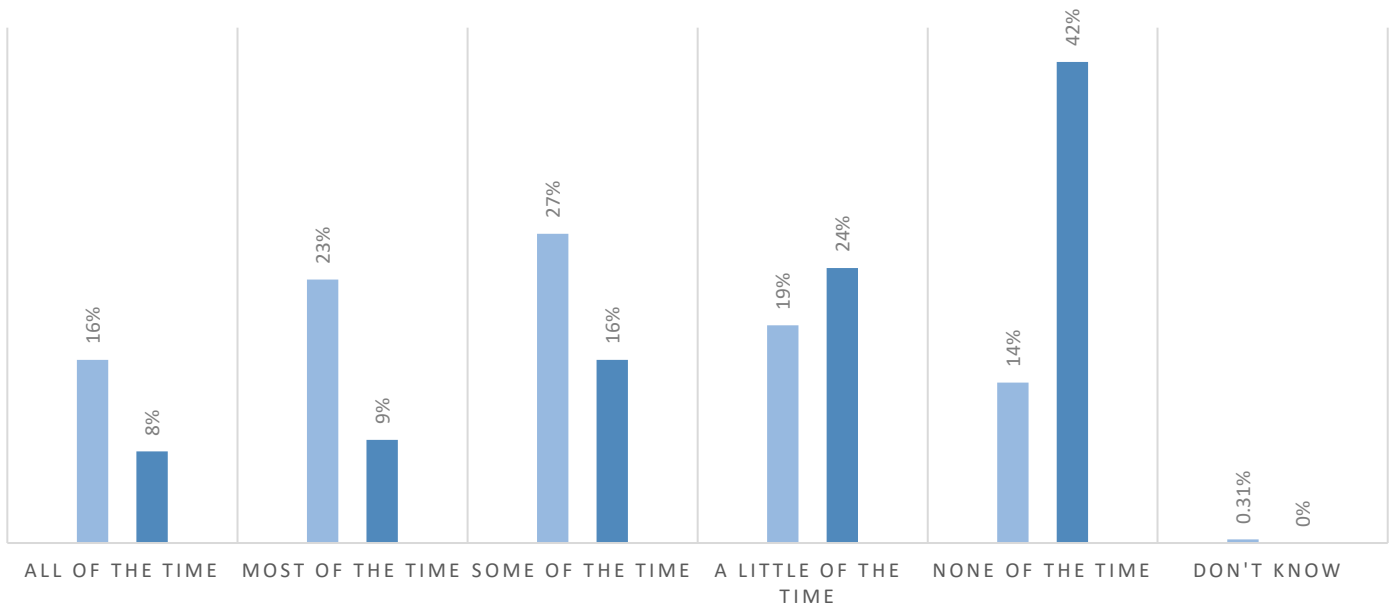
## IN THE PAST 30 DAYS, HOW MUCH HAVE YOU FELT HOPELESS?

Admit Follow Up



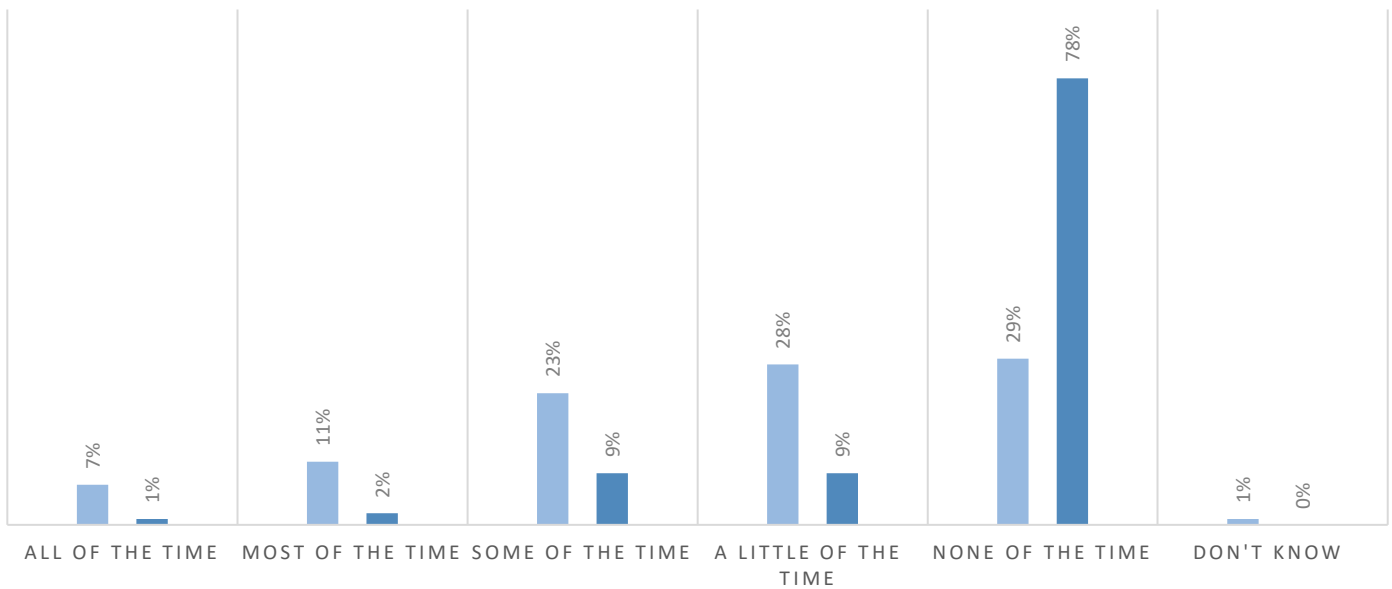
## IN THE PAST 30 DAYS, HOW MUCH HAVE YOU FELT RESTLESS OR FIDGETY?

Admit Follow Up



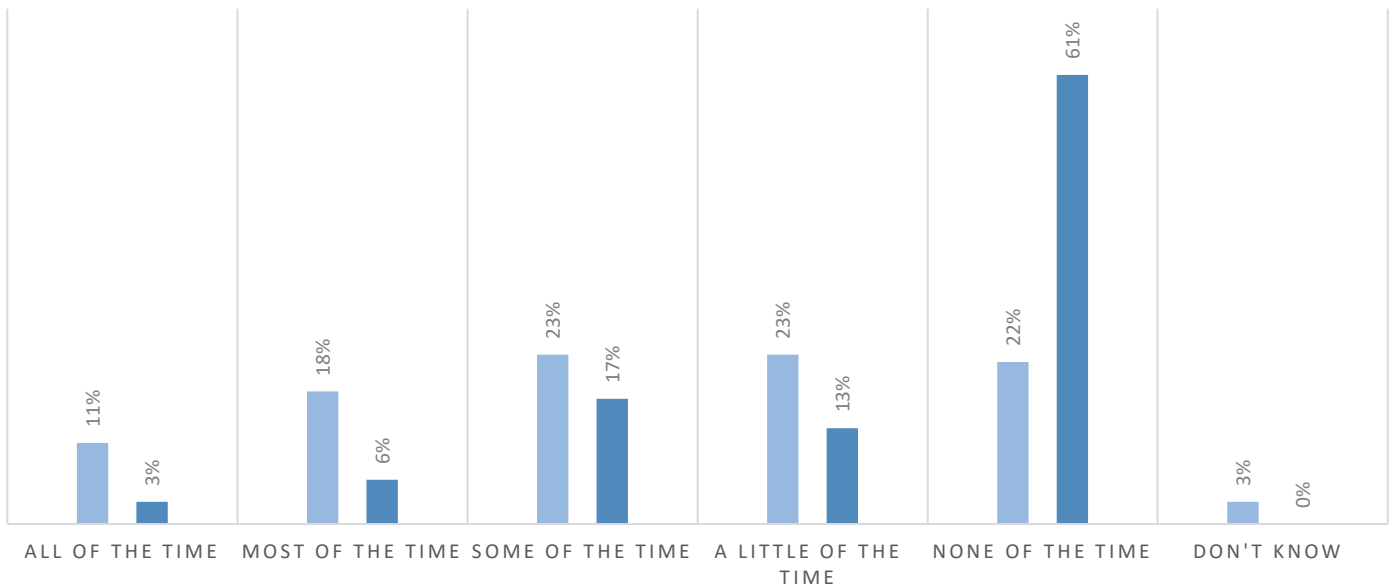
## IN THE PAST 30 DAYS, HOW MUCH HAVE YOU FELT SO DEPRESSED THAT NOTHING COULD CHEER YOU UP?

Admit Follow Up



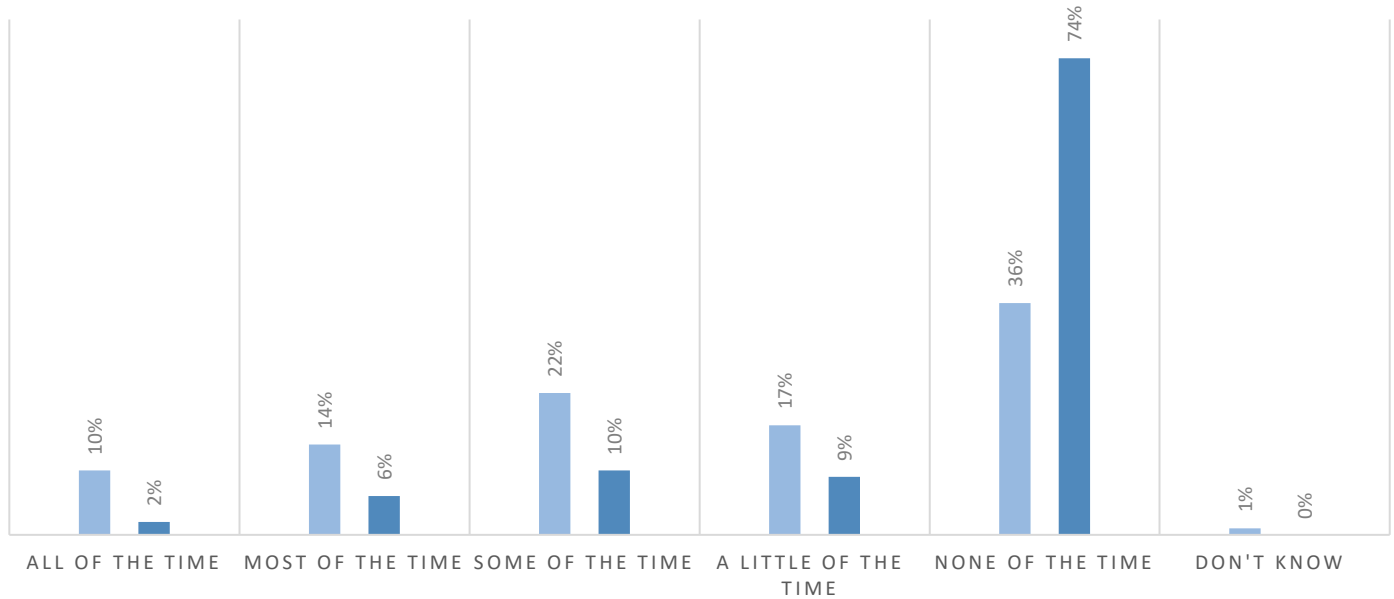
## IN THE PAST 30 DAYS, HOW MUCH HAVE YOU FELT EVERYTHING WAS AN EFFORT?

Admit Follow Up



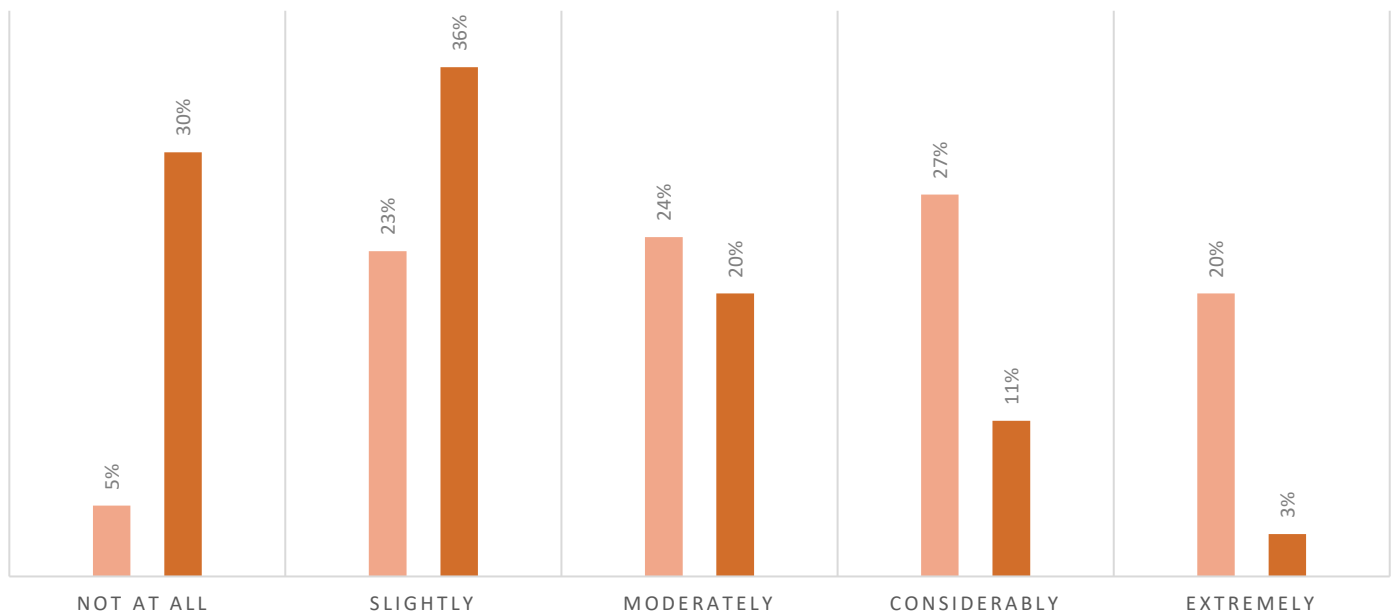
## IN THE PAST 30 DAYS, HOW MUCH HAVE YOU FELT WORTHLESS?

Admit Follow Up



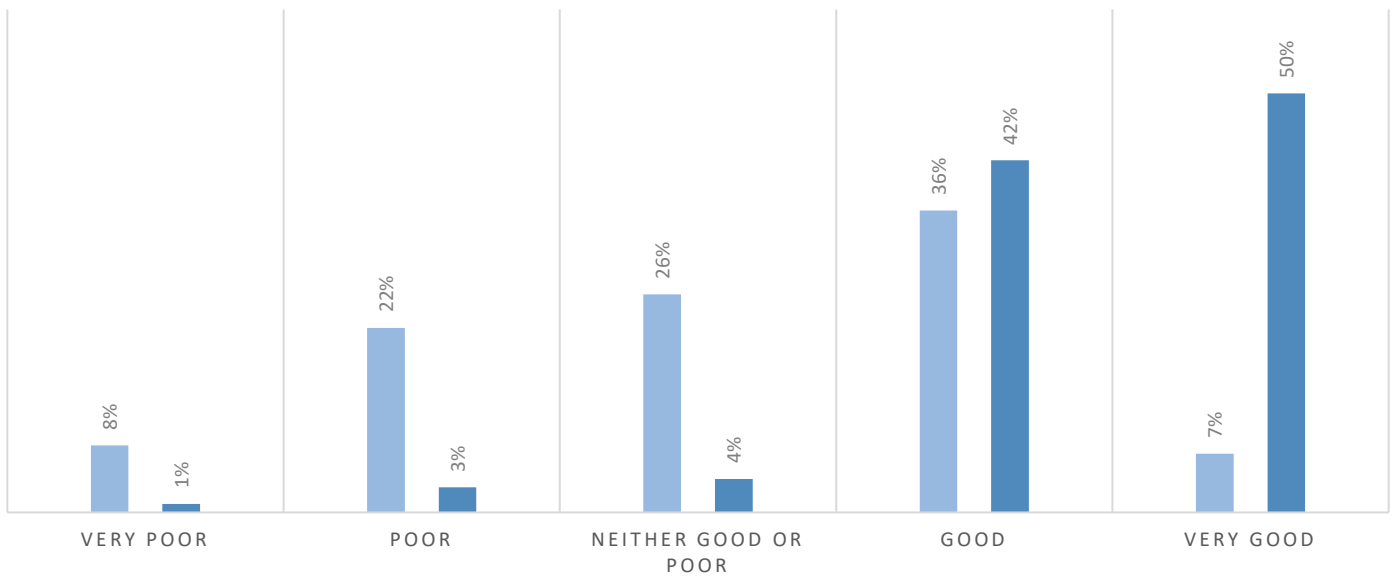
## IN THE PAST 30 DAYS, HOW MUCH HAVE YOU BEEN BOTHERED BY PSYCHOLOGICAL OR EMOTIONAL PROBLEMS?

Admit Follow-Up



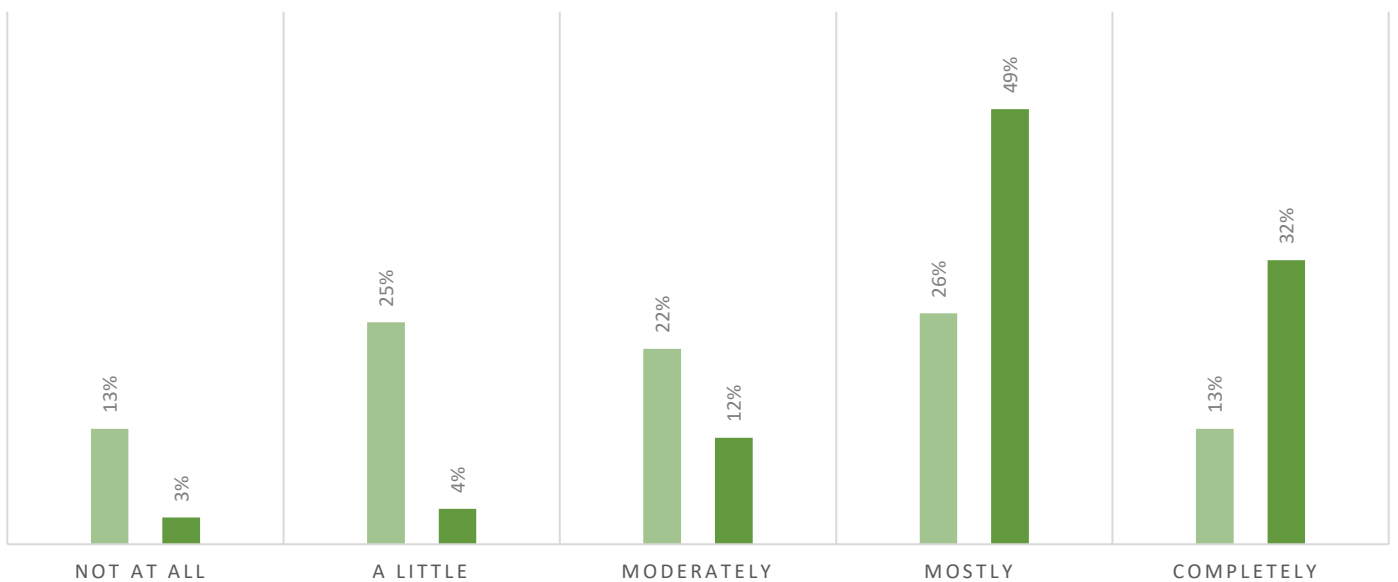
## IN THE PAST FOUR WEEKS, HOW WOULD YOU RATE YOUR QUALITY OF LIFE?

Admit Follow Up



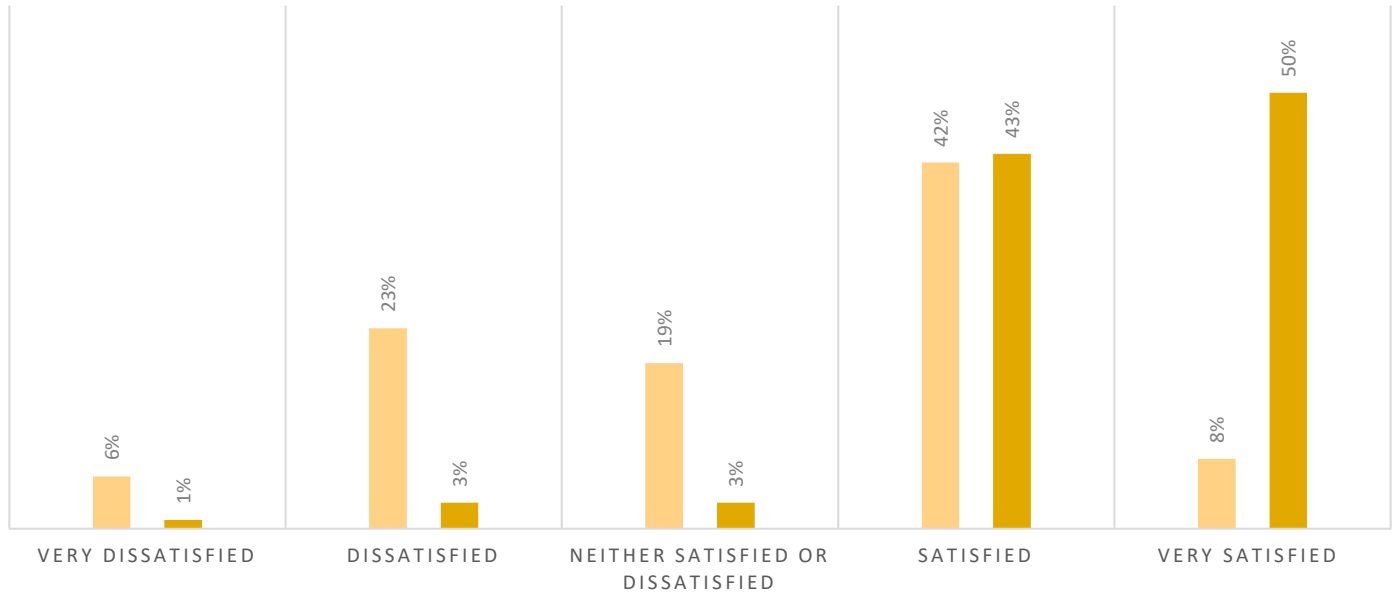
## IN THE PAST FOUR WEEKS, HAVE YOU HAD ENOUGH ENERGY FOR EVERY DAY LIFE?

Admit Follow Up



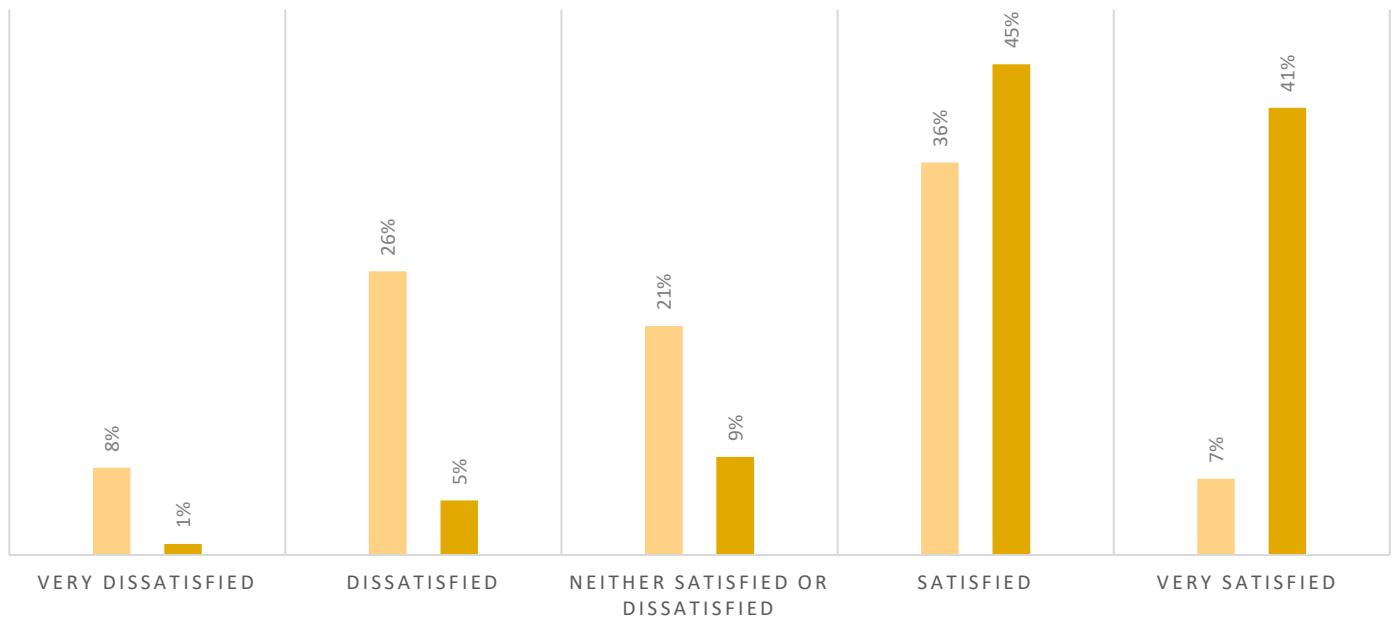
## IN THE PAST FOUR WEEKS, HOW SATISFIED HAVE YOU BEEN WITH YOUR ABILITY TO PERFORM YOUR DAILY LIVING ACTIVITIES?

Admit Follow Up



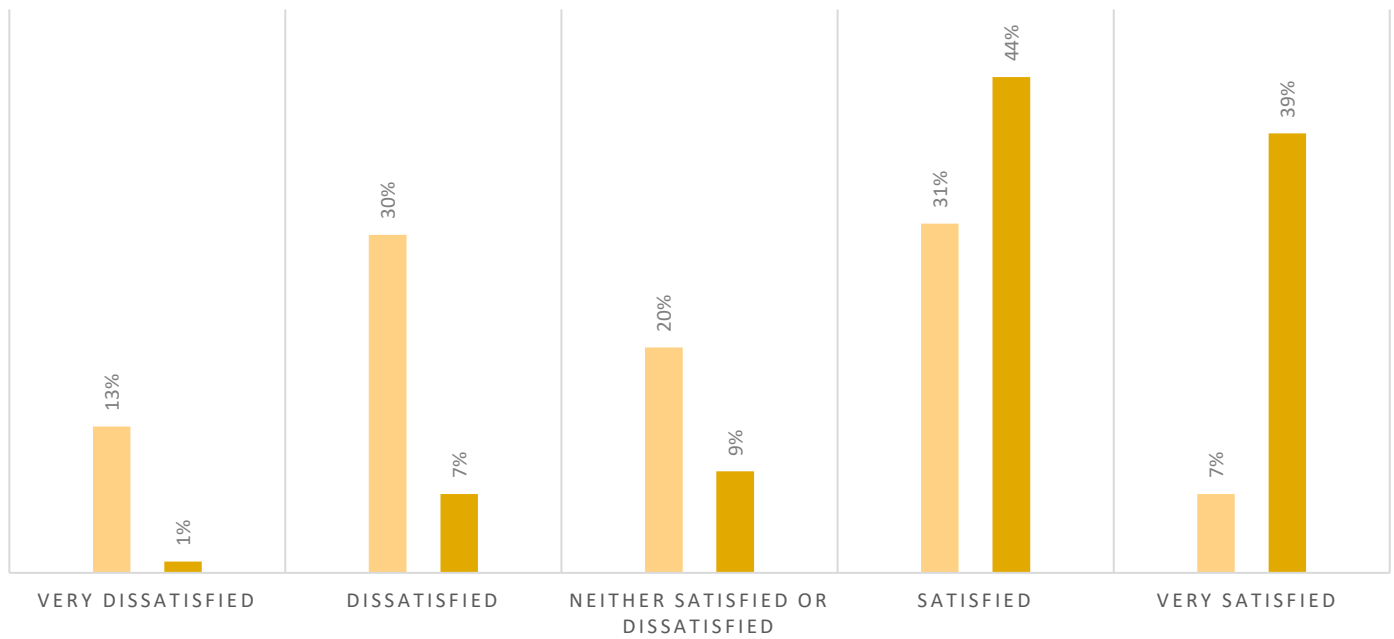
## IN THE PAST FOUR WEEKS, HOW SATISFIED HAVE YOU BEEN WITH YOUR HEALTH?

Admit Follow Up



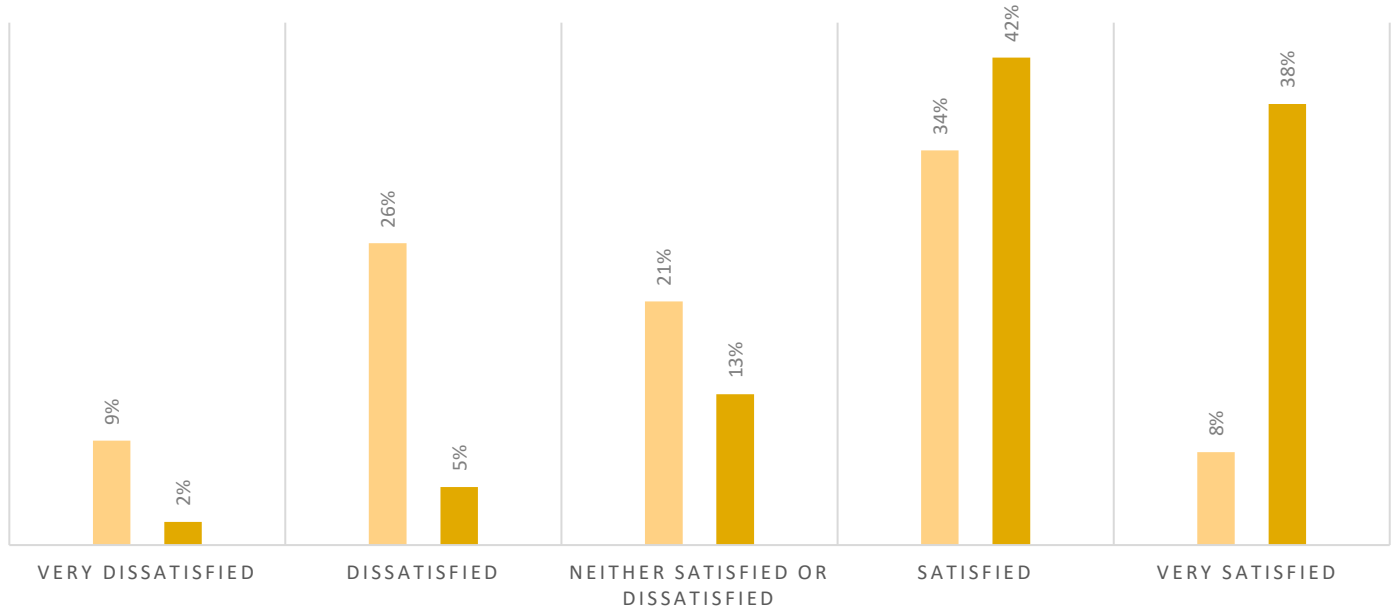
## IN THE PAST FOUR WEEKS, HOW SATISFIED HAVE YOU BEEN WITH YOUR YOURSELF?

Admit Follow Up



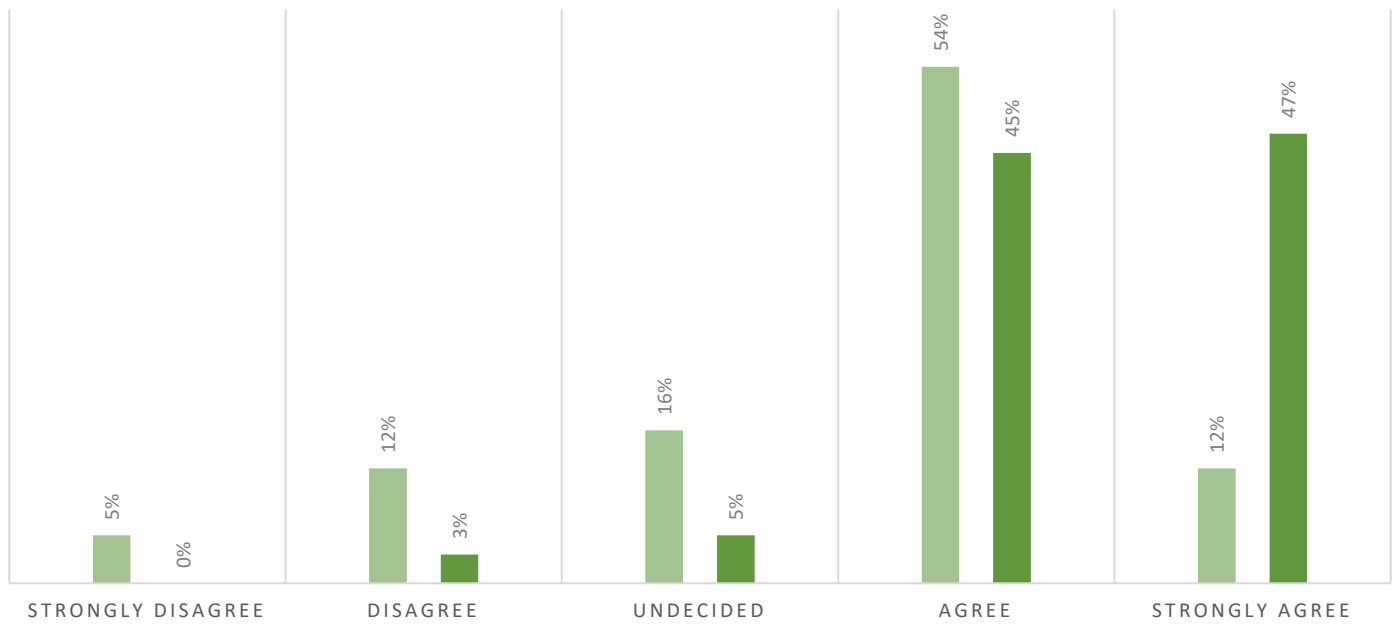
## IN THE PAST FOUR WEEKS, HOW SATISFIED HAVE YOU BEEN WITH YOUR PERSONAL RELATIONSHIPS?

Admit Follow Up



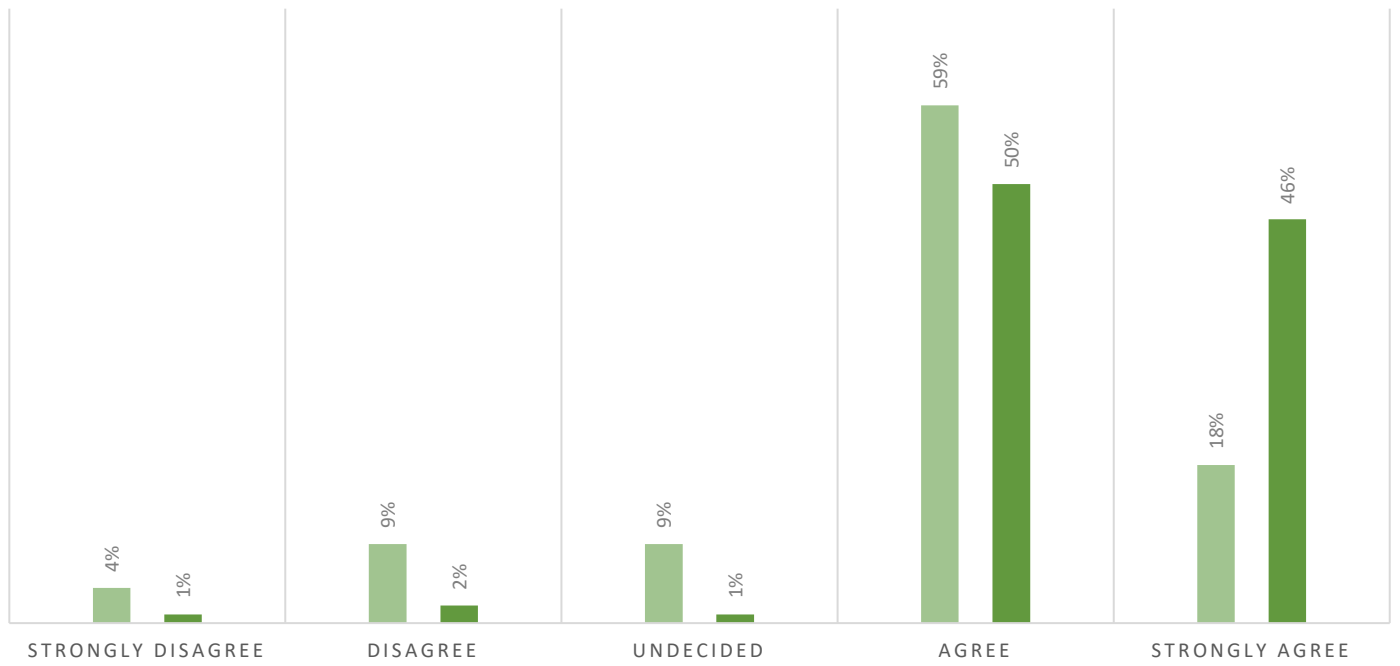
## IN THE PAST 30 DAYS, I HAVE BEEN HAPPY WITH THE FRIENDSHIPS THAT I HAVE.

Admit Follow Up



## IN THE PAST 30 DAYS, I HAVE HAD PEOPLE WITH WHOM I CAN DO ENJOYABLE THINGS.

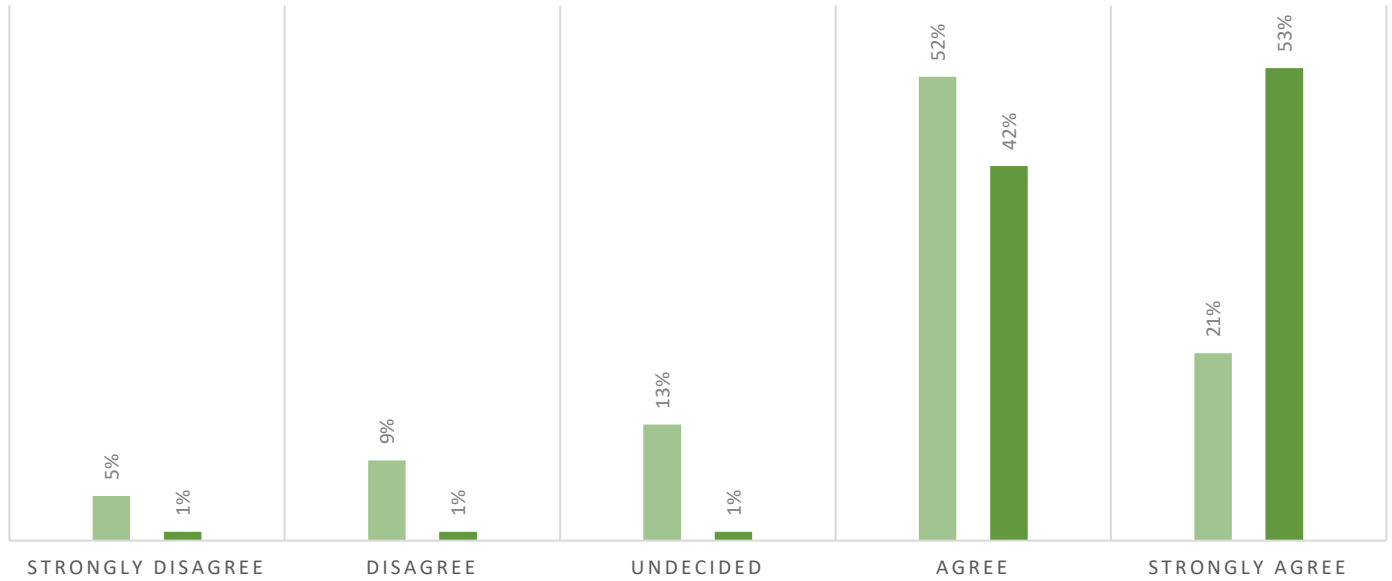
Admit Follow Up





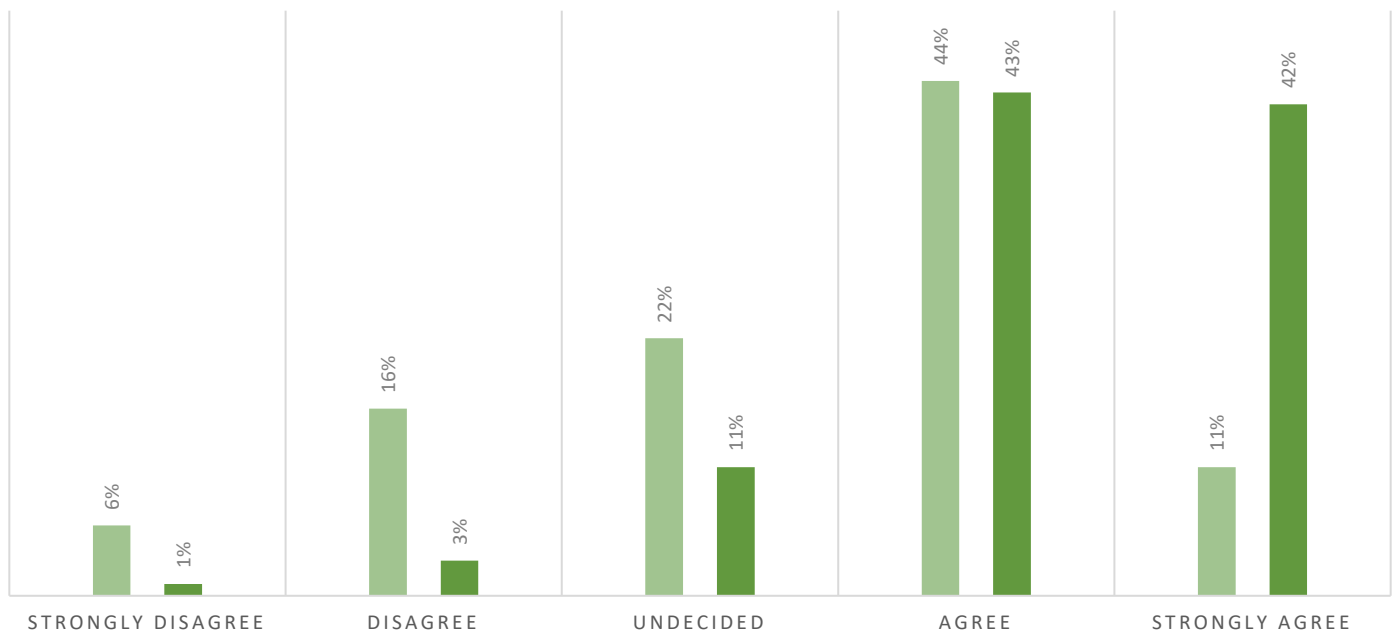
## IN THE PAST 30 DAYS, I FEEL LIKE I WOULD HAVE THE SUPPORT FROM FAMILY OR FRIENDS IF I WAS IN A CRISIS

Admit Follow Up

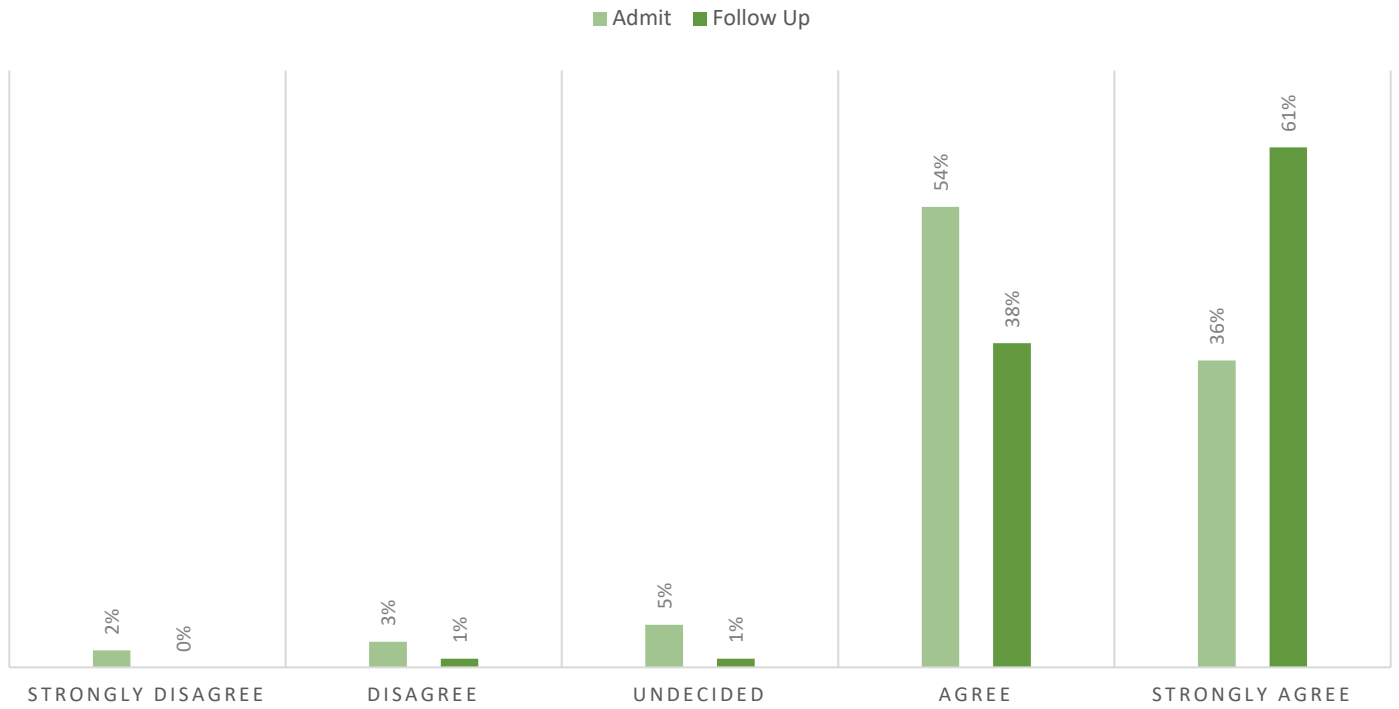


## IN THE PAST 30 DAYS, I HAVE FELT LIKE I BELONG IN MY COMMUNITY.

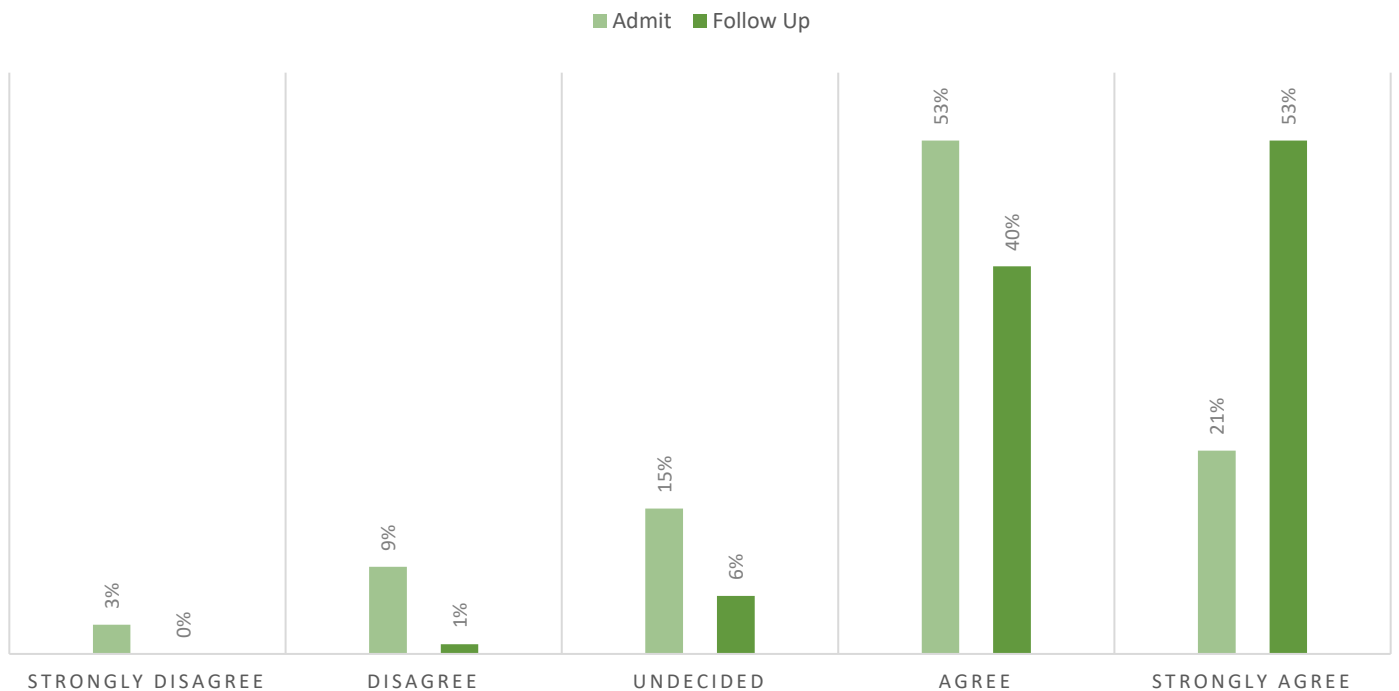
Admit Follow Up



## IN THE PAST 30 DAYS, I HAVE FELT LIKE I HAVE FRIENDS OR FAMILY WHO ARE SUPPORTIVE OF MY RECOVERY.

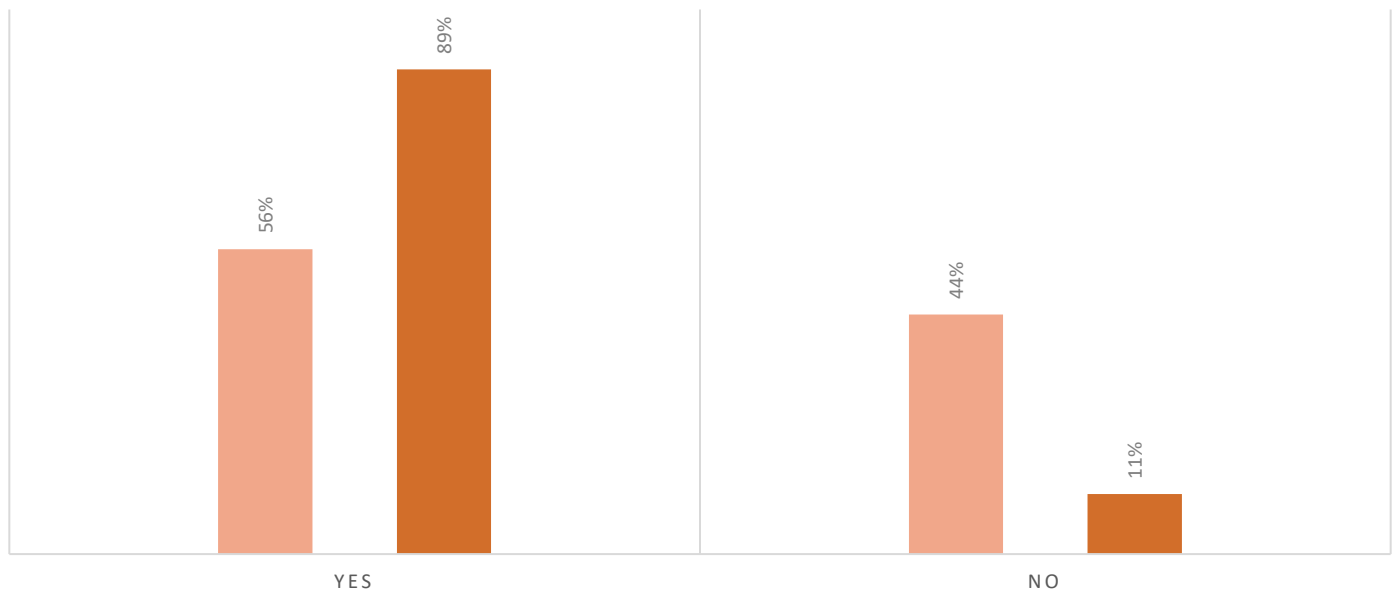


## IN THE PAST 30 DAYS, I HAVE FELT LIKE I GENERALLY ACCOMPLISH WHAT I SET OUT TO DO.



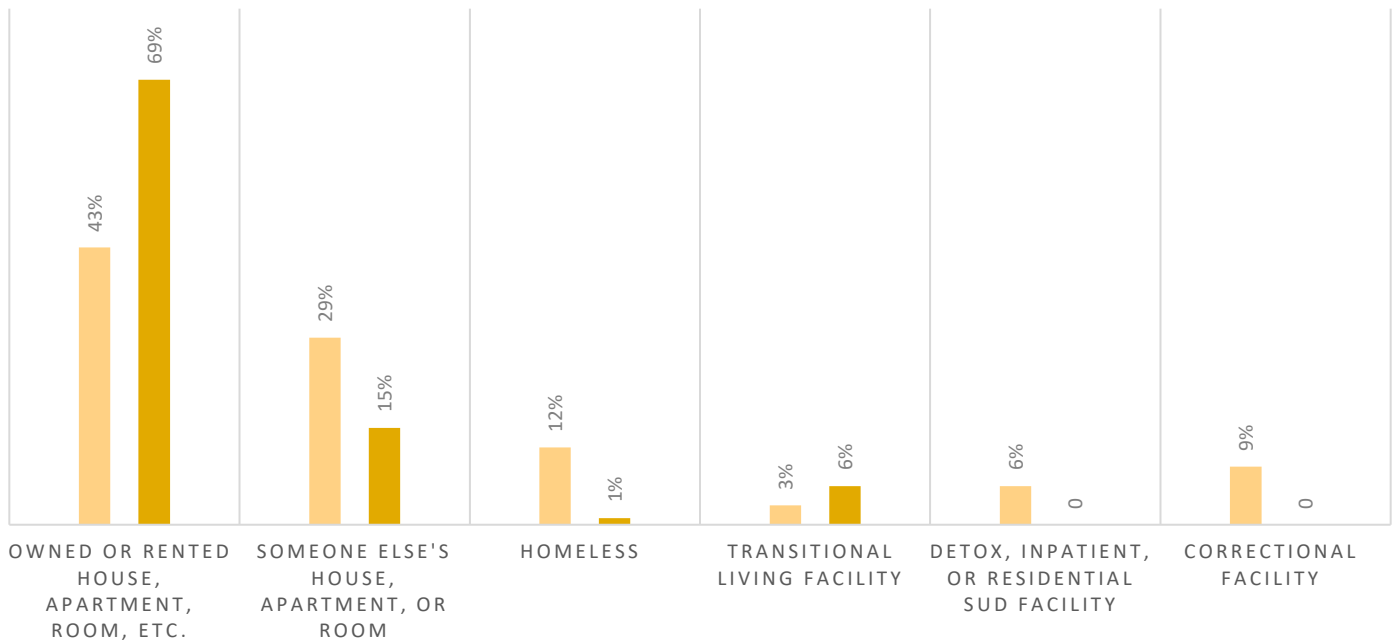
## ARE YOU CURRENTLY ATTENDING ANY MAINTENANCE OR SUPPORT PROGRAMMING?

Admit Follow Up



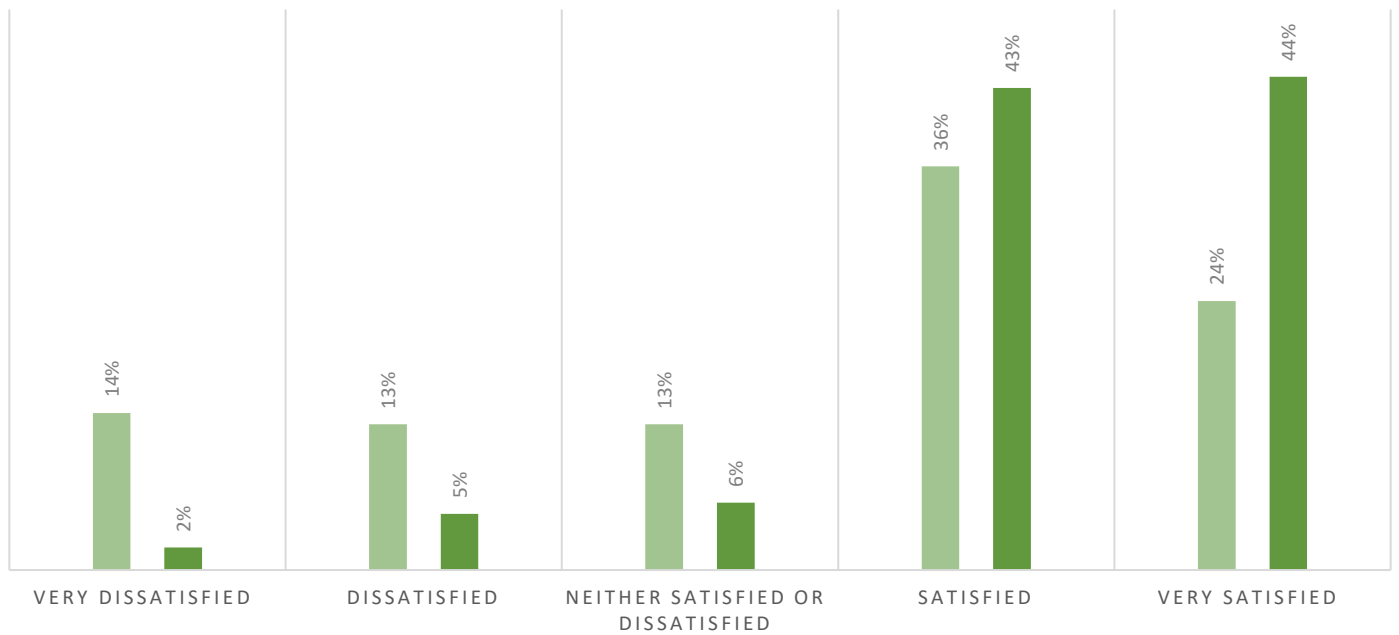
## IN THE PAST 30 DAYS, WHERE HAVE YOU BEEN LIVING MOST OF THE TIME?

Admit Follow Up



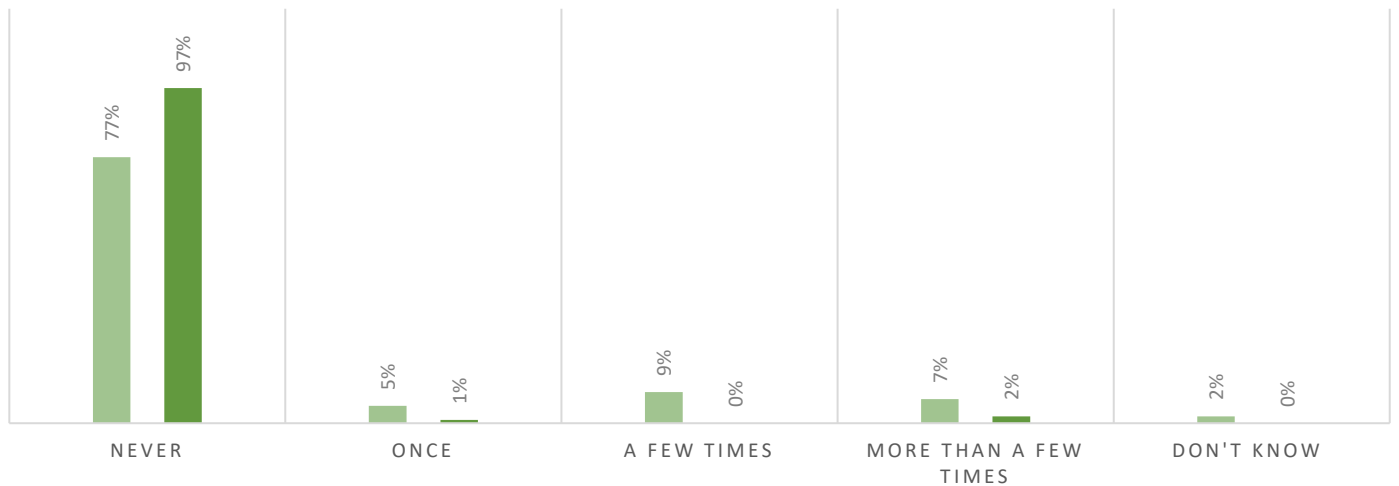
## IN THE PAST FOUR WEEKS, HOW SATISFIED HAVE YOU BEEN WITH THE CONDITIONS OF YOUR LIVING PLACE?

Admit Follow Up



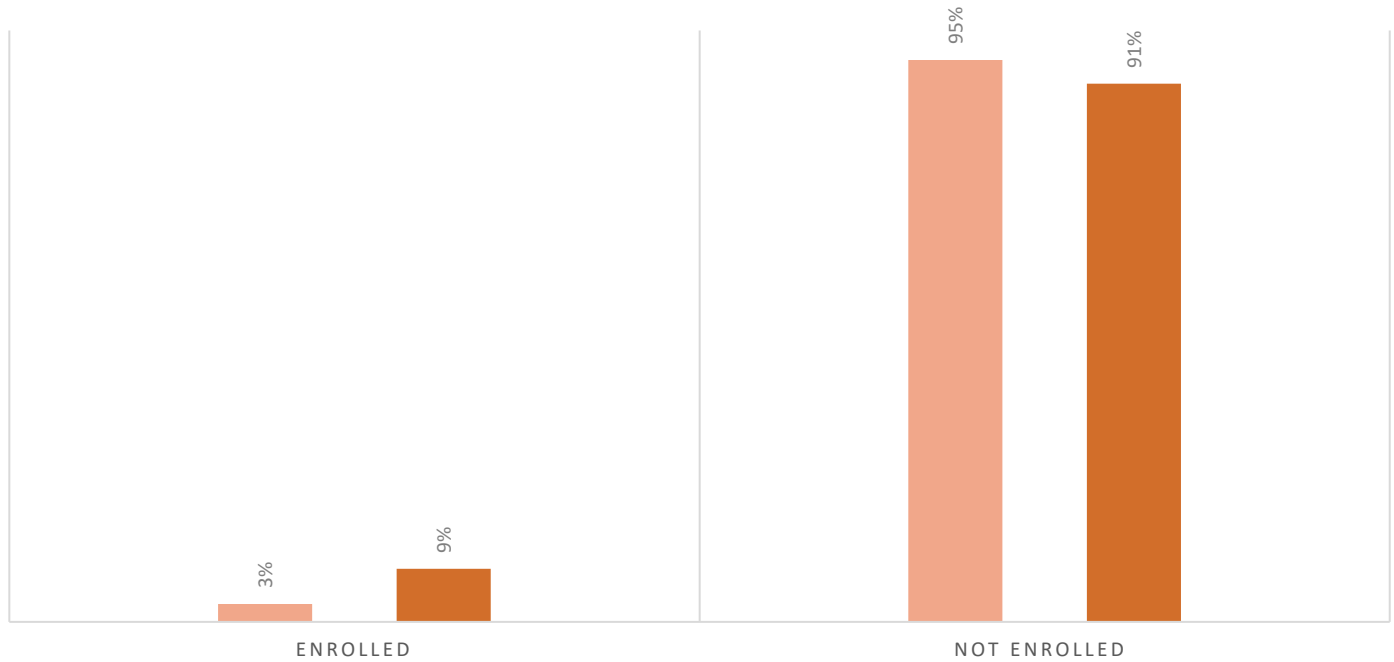
## IN THE PAST 30 DAYS, HOW OFTEN HAVE YOU BEEN HIT, KICKED, SLAPPED, OR OTHERWISE PHYSICALLY HURT?

Admit Follow Up



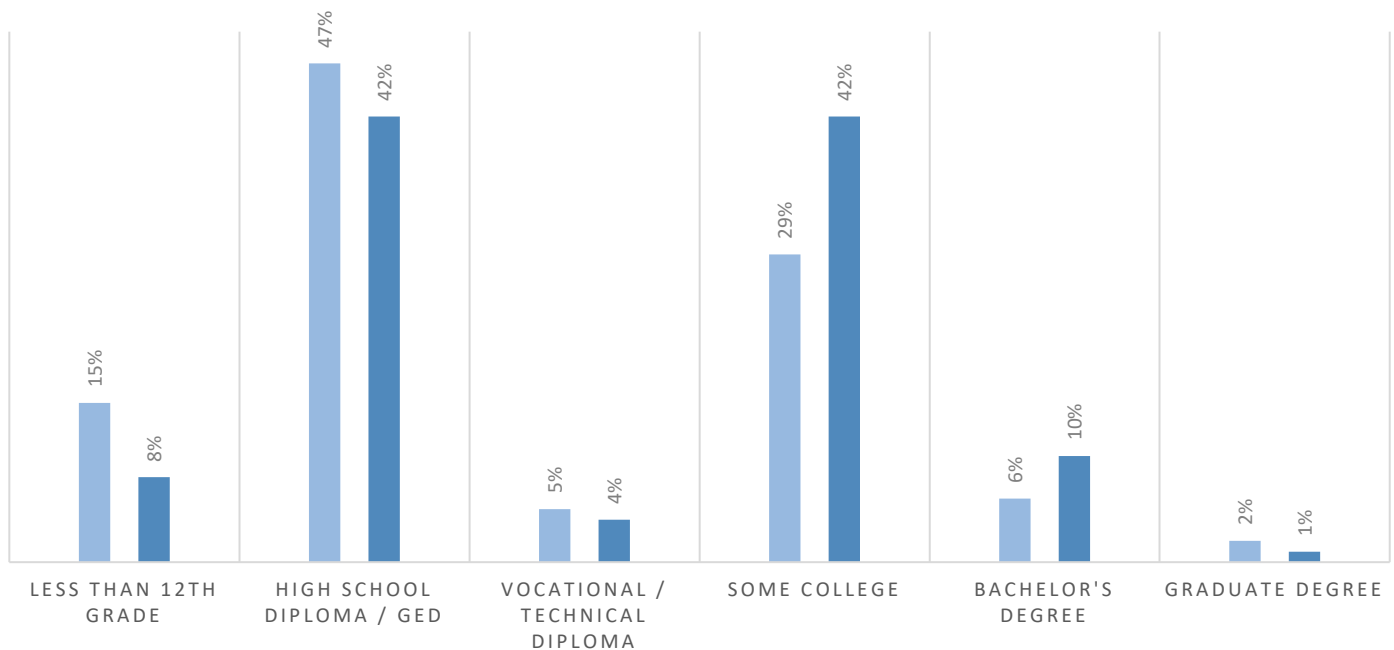
## ARE YOU CURRENTLY ENROLLED IN SCHOOL OR A JOB TRAINING PROGRAM?

Admit Follow Up



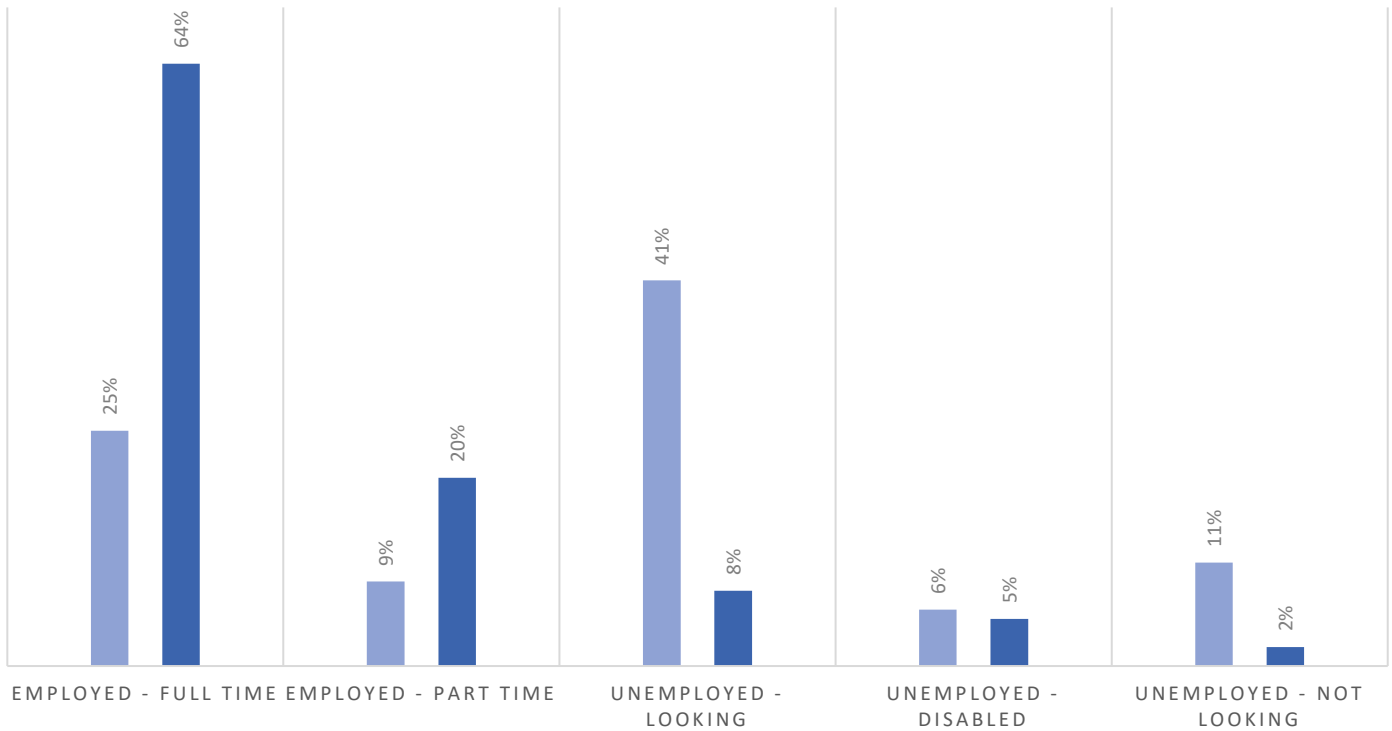
## WHAT IS THE HIGHEST LEVEL OF EDUCATION THAT YOU HAVE FINISHED?

Admit Follow Up



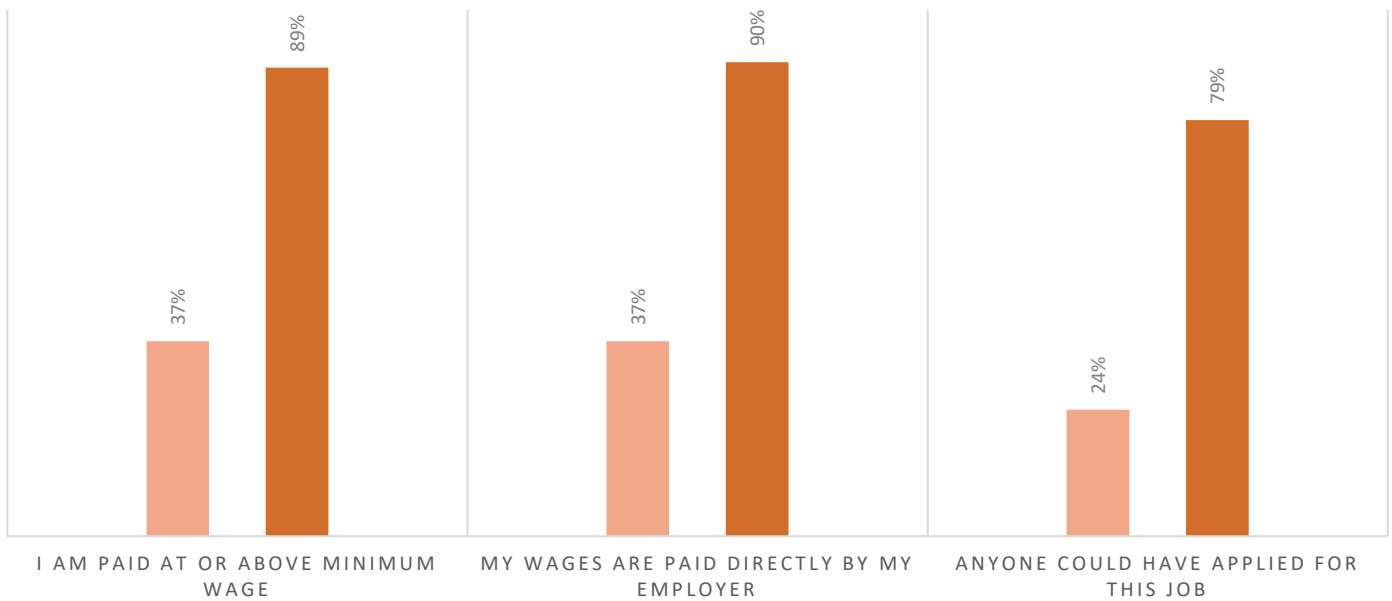
## ARE YOU CURRENTLY EMPLOYED?

■ Admit ■ Follow Up



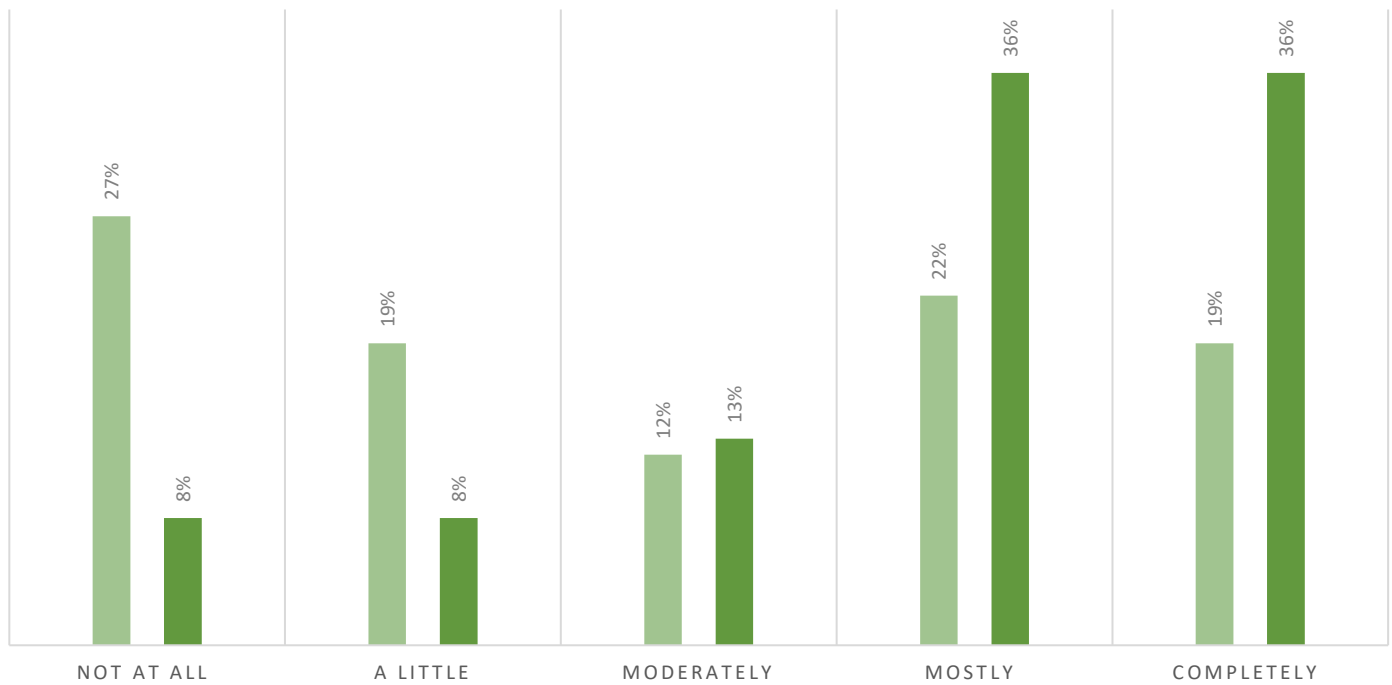
## CLIENTS ANSWERED "YES" TO THE FOLLOWING QUESTIONS:

■ Admit ■ Follow Up



## IN THE PAST FOUR WEEKS, HAVE YOU HAD ENOUGH MONEY TO MEET YOUR NEEDS?

Admit Follow Up



## ARE YOU CURRENTLY ENROLLED IN...

Admit Follow Up

