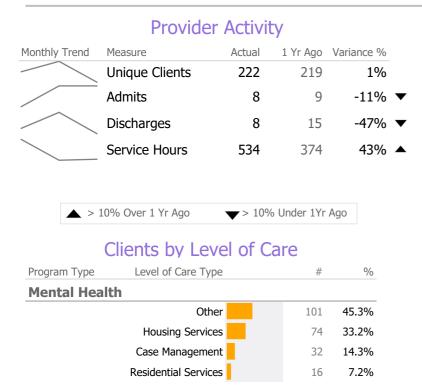
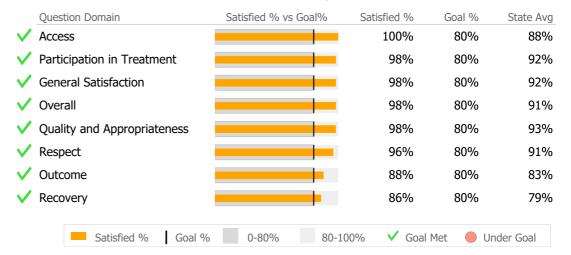
Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)



#### Consumer Satisfaction Survey (Based on 51 FY20 Surveys)



#### **Client Demographics**

| Age               | #        | %      | State Avg    | Gender                          | #         | %       | State Avg    |
|-------------------|----------|--------|--------------|---------------------------------|-----------|---------|--------------|
| 18-25             | 83       | 37%    | ▲ 8%         | Male 🗾                          | 115       | 52%     | 58%          |
| 26-34             | 29       | 13%    | 21%          | Female                          | 107       | 48%     | 42%          |
| 35-44 📕           | 26       | 12%    | 22%          | Transgender                     |           |         | 0%           |
| 45-54 📕           | 30       | 14%    | 20%          |                                 |           |         |              |
| 55-64 📕           | 37       | 17%    | 20%          |                                 |           |         |              |
| 65+               | 17       | 8%     | 9%           | Race                            | #         | %       | State Avg    |
|                   |          |        |              | Black/African American          | 108       | 49%     | <b>▲</b> 16% |
| Ethnicity         | #        | %      | State Avg    | White/Caucasian 📒 📔             | 57        | 26%     | <b>▼</b> 63% |
| Non-Hispanic      | 153      | 69%    | 69%          | Other 📘                         | 42        | 19%     | 13%          |
| Hisp-Puerto Rican | 50       | 23%    | <b>▲</b> 12% | Unknown                         | 11        | 5%      | 5%           |
| Hispanic-Other    | 11       | 5%     | 8%           | Asian                           | 3         | 1%      | 1%           |
| Unknown           | 8        | 4%     | 11%          | Am. Indian/Native Alaskan       | 1         | 0%      | 1%           |
| 1                 | 0        | 170    |              | Multiple Races                  |           |         | 1%           |
| Hispanic-Cuban    |          |        | 0%           | Hawaiian/Other Pacific Islander |           |         | 0%           |
| Hispanic-Mexican  |          |        | 1%           |                                 |           |         |              |
|                   | Unique C | lients | 1% State Avg | ▲ > 10% Over State Avg          | ▼ > 10% L | Inder S | tate Avg     |

# Program Activity

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 74     | 74       | 0%         |
| Admits         | -      | -        |            |
| Discharges     | -      | -        |            |

| Data       | Submitted to Sep OMHAS by Month      |
|------------|--------------------------------------|
| Admissions | 0%                                   |
| Discharges | 0%                                   |
|            | 1 or more Records Submitted to DMHAS |

|        | > 10% 0 | ver 🔻 < 10 <sup>0</sup> | % Under |      |
|--------|---------|-------------------------|---------|------|
| Actual | Goal    | V Goal Met              | Below G | ioal |

\* State Avg based on 4 Active Housing Coordination Programs

#### Mary Seymour Place 616290

My Sisters' Place

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

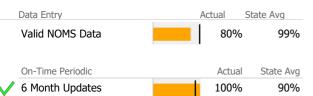
#### Program Quality Dashboard

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |  |
|----------------|--------|----------|------------|--|
| Unique Clients | 18     | 18       | 0%         |  |
| Admits         | -      | 1        | -100% 🔻    |  |
| Discharges     | -      | 2        | -100% 🔻    |  |
| Service Hours  | 210    | 167      | 26% 🔺      |  |

# Data Submission Quality



### Data Submitted to DMHAS by Month

| Jul     | Aug      | Sep     | % Months Submitted |
|---------|----------|---------|--------------------|
|         |          |         | 0%                 |
|         |          |         | 0%                 |
|         |          |         | 0%                 |
| 1 or mo | are Peco | de Subr |                    |
|         |          |         | Jul Aug Sep        |

### Recovery

|              | ,                                 |                    |        |          |        |           |                |  |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
|              | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
| $\checkmark$ | Stable Living Situation           |                    | 18     | 100%     | 85%    | 93%       | 15%            |  |
|              | Service Utilization               |                    |        |          |        |           |                |  |
|              |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
|              | Clients Receiving Services        |                    | 14     | 78%      | 90%    | 96%       | -12%           |  |

|     | <b></b> | > 10% Ov | er           | ▼ < 10%  | 6 Under |        |
|-----|---------|----------|--------------|----------|---------|--------|
| Act | ual     | Goal     | $\checkmark$ | Goal Met | Belo    | w Goal |

\* State Avg based on 66 Active Supportive Housing – Development Programs

#### Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 16     | 13       | 23% 🔺      |
| Admits         | -      | -        |            |
| Discharges     | -      | -        |            |
| Service Hours  | 188    | 68       | 175% 🔺     |

# Data Submission Quality

| Data E  | ntry             | Actual | State Avg |
|---------|------------------|--------|-----------|
| Valid   | NOMS Data        | 100%   | 99%       |
|         |                  | -      |           |
| On-Tir  | ne Periodic      | Actual | State Avg |
| V 6 Mor | nth Updates      | 100%   | 95%       |
| Co-oco  | curring          | Actual | State Avg |
| MH S    | creen Complete   | N/A    | 90%       |
| SA So   | reen Complete    | N/A    | 85%       |
|         |                  |        |           |
| Diagno  | osis             | Actual | State Avg |
| Valid   | Axis I Diagnosis | 100%   | 94%       |

# Data Submitted to DMHAS by Month

100%

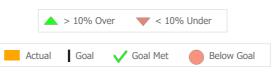
94%

| Admissions0Discharges0 |
|------------------------|
| Discharges 0           |
|                        |
| Services 0             |

Valid Axis I Diagnosis Valid Axis V GAF Score

### **Discharge Outcomes**

|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully     |                    | N/A    | N/A      | 50%    | 75%       | N/A            |
| Recovery                             |                    |        |          |        |           |                |
| National Recovery Measures (NOMS)    | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| ✓ Social Support                     |                    | 12     | 75%      | 60%    | 84%       | 15% 🔺          |
| Stable Living Situation              |                    | 16     | 100%     | 85%    | 98%       | 15% 🔺          |
| Employed                             |                    | 1      | 6%       | 25%    | 11%       | -19% 🗨         |
| Improved/Maintained Axis V GAF Score | ·                  | 0      | 0%       | 95%    | 55%       | -95% 🗨         |
| Service Utilization                  |                    |        |          |        |           |                |
|                                      | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Clients Receiving Services           |                    | 14     | 88%      | 90%    | 98%       | -2%            |



\* State Avg based on 25 Active Residential Support Programs

My Sisters' Place Mental Health - Case Management - Outreach & Engagement Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

# Program Activity

| Measure        | Actual | 1 Yr Ago | Variance % |  |
|----------------|--------|----------|------------|--|
| Unique Clients | 13     | 8        | 63% 🔺      |  |
| Admits         | -      | 1        | -100% 🔻    |  |
| Discharges     | -      | -        |            |  |
| Service Hours  | 99     | -        |            |  |

# Service Engagement

| Homeless Outreach                  | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| at least 1 Service within 180 days |                    | 0      | 0%       | 50%    | 93%       | -50% 🔻         |
| at least 1 Service within 100 days |                    | 0      | 070      | 5070   | 5070      |                |

# Data Submitted to DMHAS by Month

|            |   | 5 011 | 71019    | 000     |                 |
|------------|---|-------|----------|---------|-----------------|
| Admission  | S |       |          |         | 0%              |
| Discharges | 5 |       |          |         | 0%              |
| Services   |   |       |          |         | 100%            |
|            | 1 | or mo | re Recor | ds Subn | nitted to DMHAS |

|   |       | > 10% Ove | er           | ▼ < 10%  | Under |        |
|---|-------|-----------|--------------|----------|-------|--------|
| A | ctual | Goal      | $\checkmark$ | Goal Met | Belo  | w Goal |

\* State Avg based on 45 Active Outreach & Engagement Programs

#### Sue Ann Shay Place

My Sisters' Place

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services

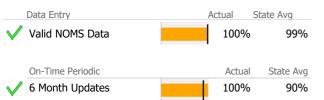
#### Program Quality Dashboard

Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |  |
|----------------|--------|----------|------------|--|
| Unique Clients | 13     | 15       | -13% 🔻     |  |
| Admits         | -      | 1        | -100% 🔻    |  |
| Discharges     | -      | 1        | -100% 🔻    |  |
| Service Hours  | 38     | 139      | -73% 🔻     |  |

# Data Submission Quality



### Data Submitted to DMHAS by Month

|  | 00/ |
|--|-----|
|  | 0%  |
|  | 0%  |
|  | 67% |
|  |     |

#### Recovery

|              | · ·                               |                    |        |          |        |           |                |  |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
|              | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
| $\checkmark$ | Stable Living Situation           |                    | 13     | 100%     | 85%    | 93%       | 15%            |  |
|              | Service Utilization               |                    |        |          |        |           |                |  |
|              |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
| $\checkmark$ | Clients Receiving Services        |                    | 13     | 100%     | 90%    | 96%       | 10%            |  |

|       | > 10% 0 | )ver 🔻 < 10 | 0% Under   |
|-------|---------|-------------|------------|
| Actua | Goal    | 🗸 Goal Met  | Below Goal |

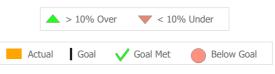
\* State Avg based on 66 Active Supportive Housing – Development Programs

# Program Activity

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 101    | 100      | 1%         |   |
| Admits         | 8      | 6        | 33%        |   |
| Discharges     | 8      | 12       | -33%       | ▼ |
| Service Hours  | -      | -        |            |   |

# Data Submitted to DMHAS by Month

|            | Jul     | Aug       | Sep     | % Months Submitted |
|------------|---------|-----------|---------|--------------------|
| Admissions |         |           |         | 100%               |
| Discharges |         |           |         | 100%               |
| Services   |         |           |         | 0%                 |
|            | 1 or mo | ore Recor | ds Subr | nitted to DMHAS    |



\* State Avg based on 5 Active Fiduciary Programs