Pathways Inc.
Greenwich, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - September 2020 (Data as of Feb 01, 2021)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	73	76	-4%
	Admits	2	3	-33% ▼
	Discharges	3	7	-57% ▼
	Service Hours	941	1,082	-13% ▼
	Bed Days	1,472	1,432	3%
	S.Rehab/PHP/IOP	1,476	1,840	-20% ▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	42	40.4%
	Community Support	36	34.6%
	Residential Services	16	15.4%
	Case Management	10	9.6%

Consumer Satisfaction Survey (Based on 51 FY20 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Participation in Treatment		94%	80%	92%
✓ Respect		93%	80%	91%
✓ Overall		92%	80%	91%
✓ General Satisfaction		88%	80%	92%
✓ Access		88%	80%	88%
✓ Quality and Appropriateness		86%	80%	93%
● Outcome		78%	80%	83%
● Recovery		50%	80%	79%

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

Client Demographics

Age	#	%	State Avg
18-25	2	3%	8%
26-34	7	10% ▼	21%
35-44	10	14%	22%
45-54	17	23%	20%
55-64	21	29%	20%
65+	16	22% ▲	9%

Gender	#	%	State Avg
Male	54	74% ▲	58%
Female	19	26% ▼	42%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	63	86% ▲	69%
Unknown	7	10%	11%
Hispanic-Other	3	4%	8%
Hispanic-Cuban			0%
Hispanic-Mexican			1%
Hisp-Puerto Rican		▼	12%

Race	#	%	State Avg
White/Caucasian	61	84% ▲	63%
Black/African American	6	8%	16%
Asian	2	3%	1%
Other	2	3%	13%
Unknown	2	3%	5%
Am. Indian/Native Alaskan			1%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%

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

Variances in data may be indicative of operational adjustments related to the pandemic.

175 Milbank Ave.GrpRes 116-240
Pathways Inc.
Mental Health - Residential Services - Group Home

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	8	8	0%
Admits	-	-	
Discharges	-	1	-100% ▼
Bed Days	736	704	5%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	98%

On-Time Periodic	Actual	State Avg
6 Month Updates	75%	88%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	84%
SA Screen Complete	N/A	84%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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	80%	94%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	94%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	94%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		6	75%	60%	88%	15% ▲
✓ Stable Living Situation		8	100%	90%	99%	10%
● Improved/Maintained Axis V GAF Score		4	50%	95%	69%	-45% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		8	1,463 days	1.0	100%	90%	89%	10%

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 24 Active Group Home Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

258 Davis Ave.SupRes 116-250
Pathways Inc.
Mental Health - Residential Services - Supervised Apartments

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	8	8	0%	
Admits	-	1	-100%	▼
Discharges	-	-		
Service Hours	48	34	41%	▲
Bed Days	736	728	1%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	74%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	87%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	82%
SA Screen Complete	N/A	67%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%
✓ Valid Axis V GAF Score	100%	96%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
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		N/A	N/A	60%	84%	N/A

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	76%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		8	100%	60%	84%	40%	▲
✓ Improved/Maintained Axis V GAF Score		8	100%	95%	58%	5%	
✓ Stable Living Situation		8	100%	95%	92%	5%	
✓ Employed		2	25%	25%	8%	0%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		8	1,505 days	1.0	100%	90%	101%	10%

< 90% | 90-110% | >110%

> 10% Over | < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

8 Sinawoy Road SR Clbhse 116-280
Pathways Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

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	42	47	-11%	▼
Admits	-	1	-100%	▼
Discharges	-	2	-100%	▼
Service Hours	-	-		
Social Rehab/PHP/IOP Days	1,476	1,840	-20%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		24	57%	90%	49%	-33%	▼

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 33 Active Social Rehabilitation Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

CSP 116-260
Pathways Inc.
Mental Health - Community Support - CSP

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	36	36	0%	
Admits	2	1	100%	▲
Discharges	3	4	-25%	▼
Service Hours	345	605	-43%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	80%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	90%	85%

Co-occurring	Actual	State Avg
MH Screen Complete	0%	78%
SA Screen Complete	0%	61%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%
✓ Valid Axis V GAF Score	100%	96%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions	■		■	67%
Discharges	■	■		67%
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		3	100%	65%	61%	35%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		33	92%	60%	81%	32%	▲
✓ Stable Living Situation		36	100%	80%	89%	20%	▲
● Employed		6	17%	20%	13%	-3%	
● Improved/Maintained Axis V GAF Score		20	61%	65%	56%	-4%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		32	97%	90%	94%	7%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 36 Active CSP Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Suppv Housing PILOTS 116-551
Pathways Inc.
Mental Health - Case Management - Supportive Housing – Scattered Site

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	10	10	0%	
Admits	-	-		
Discharges	-	-		
Service Hours	548	443	24%	▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Stable Living Situation		10	100%	85%	88%	15%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		10	100%	90%	92%	10%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	96%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	87%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 101 Active Supportive Housing – Scattered Site Programs

Variances in data may be indicative of operational adjustments related to the pandemic.