**Central CT Coast YMCA**
New Haven, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|---|
| | Unique Clients | 112 | 119 | -6% |
| | Admits | 14 | 30 | -53% ▼ |
| | Discharges | 22 | 21 | 5% |
| | Service Hours | 1,840 | 1,602 | 15% ▲ |

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

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Case Management | 112 | 100.0% |

## Consumer Satisfaction Survey

(Based on 68 FY20 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|
| ✓ Access | | 97% | 80% | 88% |
| ✓ Respect | | 97% | 80% | 91% |
| ✓ General Satisfaction | | 96% | 80% | 92% |
| ✓ Overall | | 96% | 80% | 91% |
| ✓ Quality and Appropriateness | | 90% | 80% | 93% |
| ✓ Outcome | | 88% | 80% | 83% |
| ✓ Participation in Treatment | | 86% | 80% | 92% |
| ✓ Recovery | | 80% | 80% | 79% |

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

## Client Demographics

| Age | # | % | State Avg |
|---|---|---|---|
| 18-25 | 3 | 3% | 10% |
| 26-34 | 14 | 13% | 22% |
| 35-44 | 19 | 17% | 23% |
| 45-54 | 24 | 21% | 19% |
| 55-64 | 40 | 36% ▲ | 19% |
| 65+ | 12 | 11% | 8% |

| Gender | # | % | State Avg |
|---|---|---|---|
| Male | 72 | 64% | 58% |
| Female | 40 | 36% | 42% |
| Transgender | | | 0% |

| Ethnicity | # | % | State Avg |
|---|---|---|---|
| Non-Hispanic | 75 | 67% | 69% |
| Hisp-Puerto Rican | 28 | 25% ▲ | 12% |
| Hispanic-Other | 8 | 7% | 8% |
| Unknown | 1 | 1% | 11% |
| Hispanic-Cuban | | | 0% |
| Hispanic-Mexican | | | 0% |

| Race | # | % | State Avg |
|---|---|---|---|
| Black/African American | 56 | 50% ▲ | 17% |
| White/Caucasian | 46 | 41% ▼ | 62% |
| Other | 9 | 8% | 13% |
| Unknown | 1 | 1% | 6% |
| Am. Indian/Native Alaskan | | | 0% |
| Asian | | | 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.

**Crescent Apts. -290**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 25 | 20 | 25% | ▲ |
| Admits | 6 | 1 | 500% | ▲ |
| Discharges | 6 | 2 | 200% | ▲ |
| Service Hours | 672 | 517 | 30% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 25 | 100% | 85% | 95% | 15% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 19 | 100% | 90% | 99% | 10% |

## Data Submission Quality

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

| | On-Time Periodic | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 89% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | ■ | ■ | ■ | ■ | ■ | ■ | 67% |
| Discharges | | ■ | | ■ | ■ | ■ | | ■ | | 56% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 65 Active Supportive Housing – Development Programs

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

**Fairfield Apts. - 291**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 20 | 17 | 18% | ▲ |
| Admits | 3 | - | | |
| Discharges | 3 | - | | |
| Service Hours | 603 | 417 | 45% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 20 | 100% | 85% | 95% | 15% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 17 | 100% | 90% | 99% | 10% |

## Data Submission Quality

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

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| ✓ 6 Month Updates | 100% | 89% |

## 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 65 Active Supportive Housing – Development Programs

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

**Franklin Apartments 128292**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 24 | 26 | -8% | |
| Admits | 1 | 3 | -67% | ▼ |
| Discharges | 5 | 4 | 25% | ▲ |
| Service Hours | 212 | 248 | -14% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 24 | 100% | 85% | 95% | 15% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 19 | 100% | 90% | 99% | 10% |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 95% | 89% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ■ | | | | | | | | 11% |
| 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 65 Active Supportive Housing – Development Programs

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

**Harrison Apartments**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 33 | 36 | -8% | |
| Admits | 2 | 18 | -89% | ▼ |
| Discharges | 3 | 3 | 0% | |
| Service Hours | 297 | 289 | 3% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 32 | 97% | 85% | 95% | 12% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 30 | 100% | 90% | 99% | 10% |

## Data Submission Quality

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

| | On-Time Periodic | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 97% | 89% |

## 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 65 Active Supportive Housing – Development Programs

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

**SAMSHA Apartments**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 10 | 20 | -50% | ▼ |
| Admits | 2 | 8 | -75% | ▼ |
| Discharges | 5 | 12 | -58% | ▼ |
| Service Hours | 56 | 132 | -57% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| Stable Living Situation | | 6 | 60% | 85% | 89% | -25% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 5 | 100% | 90% | 98% | 10% |

## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| ✓ Valid NOMS Data | 98% | 96% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| ✓ 6 Month Updates | 100% | 92% |

## 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 104 Active Supportive Housing – Scattered Site Programs

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