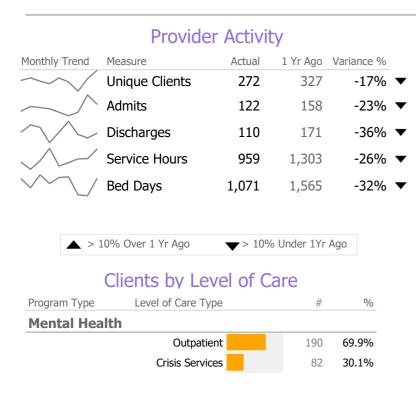
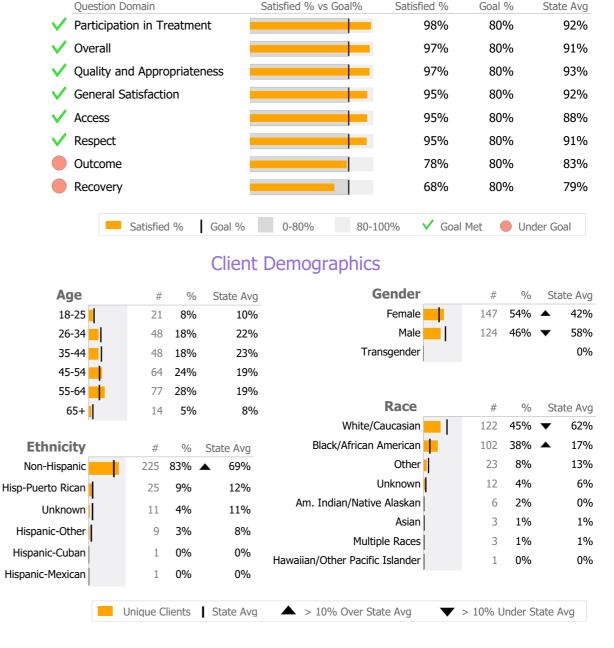
(Based on 100 FY20 Surveys)

New Haven, CT

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)





Consumer Satisfaction Survey

Respite Bed Program

Yale-New Haven Hospital

Mental Health - Crisis Services - Respite Bed

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	82	116	-29%	•
Admits	83	114	-27% 🔻	7
Discharges	81	118	-31%	•
Bed Days	1,071	1,565	-32%	7

Discharge Outcomes

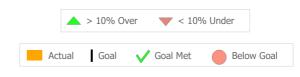


Bed Utilization



Data Submitted to DMHAS by Month





^{*} State Avg based on 10 Active Respite Bed Programs

1 or more Records Submitted to DMHAS

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 Discharge Outcomes Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 190 213 -11% Treatment Completed Successfully 0 0% 50% 34% -50% Admits 39 44 -11% Recovery 29 Discharges 53 **-45% ** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 1,303 Service Hours 959 -26% 144 76% 60% 62% 16% 🔺 Social Support 94% 95% 74% -1% 178 Stable Living Situation **Data Submission Quality** -6% **Employed** 45 24% 30% 23% Data Entry Actual State Avg Service Utilization Valid NOMS Data 98% 86% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 155 96% 90% 84% 6% On-Time Periodic Actual State Avg 6 Month Updates 61% 55% Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Ava Actual vs Goal Co-occurring Actual State Avg Actual 100% 26 67% 75% 76% -8% 78% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 100% 79% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% Discharges 67% ✓ Goal Met Actual Goal Below Goal 89% Services * State Avg based on 85 Active Standard Outpatient Programs