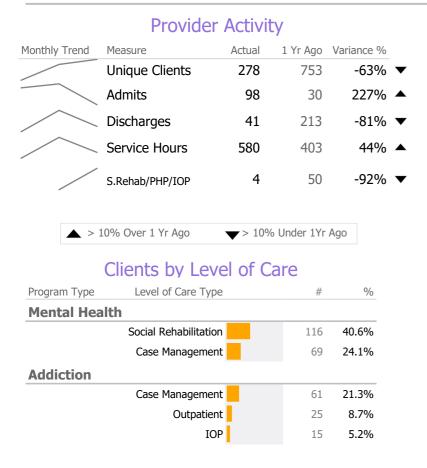
Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)



### Consumer Satisfaction Survey (Based on 5 FY21 Surveys)



### **Client Demographics**

| Age               | #        | %      | State Avg   | Gender                          | #         | %        | State Avg    |
|-------------------|----------|--------|-------------|---------------------------------|-----------|----------|--------------|
| 18-25             | 7        | 3%     | 9%          | Female                          | 145       | 52%      | 42%          |
| 26-34             | 36       | 13%    | 20%         | Male 🗾                          | 133       | 48%      | 58%          |
| 35-44 📕           | 35       | 13%    | 23%         | Transgender                     |           |          | 0%           |
| 45-54 📕           | 45       | 17%    | 19%         |                                 |           |          |              |
| 55-64             | 68       | 25%    | 20%         |                                 |           |          |              |
| 65+               | 80       | 30%    | <b>▲</b> 9% | Race                            | #         | %        | State Avg    |
|                   |          |        |             | White/Caucasian 📒 📔             | 116       | 42%      | <b>▼</b> 63% |
| Ethnicity         | #        | %      | State Avg   | Black/African American 📙        | 89        | 32%      | <b>▲</b> 17% |
| Non-Hispanic      | 180      | 65%    | 69%         | Other <mark> </mark>            | 38        | 14%      | 13%          |
| Hispanic-Other    | 50       | 18%    | 8%          | Unknown 📘                       | 29        | 10%      | 5%           |
| Unknown           | 24       | 9%     | 11%         | Asian                           | 3         | 1%       | 1%           |
| Hisp-Puerto Rican | 18       | 6%     | 12%         | Multiple Races                  | 2         | 1%       | 1%           |
| · ·               |          |        |             | Am. Indian/Native Alaskan       | 1         | 0%       | 1%           |
| Hispanic-Mexican  | 6        | 2%     | 0%          | Hawaiian/Other Pacific Islander |           |          | 0%           |
| Hispanic-Cuban    |          |        | 0%          |                                 |           |          |              |
|                   |          |        |             |                                 |           |          |              |
|                   | Unique C | lients | State Avg   | ▲ > 10% Over State Avg          | / > 10% L | Inder St | tate Avg     |

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

### Coach 2.0

Family and Children's Agency Inc Addiction - Case Management - Standard Case Management

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 61     |          |            |
| Admits         | 61     | -        |            |
| Discharges     | 5      | -        |            |
| Service Hours  | 72     | -        |            |

# Data Submission Quality

| Data Entry       | A | ctual St | tate Avg  |
|------------------|---|----------|-----------|
| Valid NOMS Data  |   | 86%      | 95%       |
|                  |   |          |           |
| On-Time Periodic |   | Actual   | State Avg |
| 6 Month Updates  |   | N/A      | 61%       |

# Data Submitted to DMHAS by Month

| Data                                 | Jul Aug | Sep % Months Submitted |  |  |  |  |
|--------------------------------------|---------|------------------------|--|--|--|--|
| Admissions                           |         | 100%                   |  |  |  |  |
| Discharges                           |         | 67%                    |  |  |  |  |
| Services                             |         | 100%                   |  |  |  |  |
| 1 or more Records Submitted to DMHAS |         |                        |  |  |  |  |

|              |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|---|
|              | Treatment Completed Successfully  |                    | 2      | 40%      | 50%    | 74%       | -10%           | • |
|              | Recovery                          |                    |        |          |        |           |                |   |
|              | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| $\checkmark$ | Stable Living Situation           |                    | 51     | 84%      | 80%    | 82%       | 4%             |   |
| $\checkmark$ | Employed                          |                    | 12     | 20%      | 20%    | 27%       | 0%             |   |
|              | Self Help                         |                    | 0      | 0%       | 60%    | 55%       | -60%           |   |
|              | Service Utilization               |                    |        |          |        |           |                |   |
|              |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |   |
| $\checkmark$ | Clients Receiving Services        |                    | 54     | 96%      | 90%    | 76%       | 6%             |   |

|        | > 10% 0\ | ver 🔻 < 10% | % Under  |     |
|--------|----------|-------------|----------|-----|
| Actual | Goal     | V Goal Met  | Below Go | bal |

\* State Avg based on 11 Active Standard Case Management Programs

**Discharge Outcomes** 

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 25     | 26       | -4%        |
| Admits         | 6      | 5        | 20% 🔺      |
| Discharges     | 8      | 2        | 300% 🔺     |
| Service Hours  | 234    | 290      | -19% 🔻     |

# Data Submission Quality

| Data Entry         | Actua        | al Sta | ite Avg   |
|--------------------|--------------|--------|-----------|
| Valid NOMS Data    | 1            | 00%    | 87%       |
| Valid TEDS Data    | 1            | 00%    | 88%       |
| I                  |              |        |           |
| On-Time Periodic   | A            | Actual | State Avg |
| 6 Month Updates    |              | 0%     | 25%       |
|                    |              |        |           |
| Co-occurring       | A            | Actual | State Avg |
| MH Screen Complete |              | 33%    | 94%       |
| SA Screen Complete | <b>i</b> i : | 33%    | 94%       |
| I                  |              |        |           |
| Diagnosis          | A            | Actual | State Avg |

### **Discharge Outcomes**

|                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully  |                    | 2      | 25%      | 50%    | 50%       | -25%           |
| Recovery                          |                    |        |          |        |           |                |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Abstinence/Reduced Drug Use       |                    | 22     | 88%      | 55%    | 37%       | 33%            |
| Not Arrested                      |                    | 25     | 100%     | 75%    | 69%       | 25%            |
| Stable Living Situation           |                    | 25     | 100%     | 95%    | 67%       | 5%             |
| Employed                          | <b>—</b>           | 8      | 32%      | 50%    | 25%       | -18%           |
| Self Help                         | <u> </u>           | 6      | 24%      | 60%    | 13%       | -36%           |
| Service Utilization               |                    |        |          |        |           |                |
|                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Clients Receiving Services        |                    | 17     | 100%     | 90%    | 50%       | 10%            |
| Service Engagement                |                    |        |          |        |           |                |
| Outpatient                        | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| 2 or more Services within 30 days |                    | 6      | 100%     | 75%    | 62%       | 25%            |

# Data Submitted to DMHAS by Month

100%

99%



Valid Axis I Diagnosis



\* State Avg based on 106 Active Standard Outpatient Programs

#### **New Hope**

Family and Children's Agency Inc

Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 15     |          |            |
| Admits         | 3      | -        |            |
| Discharges     | 3      | -        |            |
| Service Hours  | 62     | -        |            |

### Recovery

|              | /                                 |                    |        |          |        |           |                |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
|              | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| $\checkmark$ | Stable Living Situation           |                    | 14     | 93%      | 85%    | 88%       | 8%             |
|              | Service Utilization               |                    |        |          |        |           |                |
|              |                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| $\checkmark$ | Clients Receiving Services        |                    | 12     | 100%     | 90%    | 90%       | 10%            |

# Data Submission Quality

|              | Data Entry         | Actual | State Avg |
|--------------|--------------------|--------|-----------|
|              | Valid NOMS Data    | 90%    | 96%       |
|              |                    |        |           |
|              | On-Time Periodic   | Actual | State Avg |
|              | 6 Month Updates    | N/A    | 81%       |
|              | - · ·              |        |           |
|              | Co-occurring       | Actual | State Avg |
| $\checkmark$ | MH Screen Complete | 100%   | 76%       |
| $\checkmark$ | SA Screen Complete | 100%   | 76%       |
|              |                    | ·      |           |
|              |                    |        |           |

| Diagnosis              | Actual | State Avg |
|------------------------|--------|-----------|
| Valid Axis I Diagnosis | 0%     | 57%       |

## Data Submitted to DMHAS by Month

|            | Jul     | Aug       | Sep     | % Months Submitted |
|------------|---------|-----------|---------|--------------------|
| Admissions |         |           |         | 33%                |
| Discharges |         |           |         | 67%                |
| Services   |         |           |         | 100%               |
|            | 1 or mo | ore Recor | ds Subr | nitted to DMHAS    |

|        | > 10% 0 | ver 🔻 < 109 | % Under |      |
|--------|---------|-------------|---------|------|
| Actual | Goal    | V Goal Met  | Below   | Goal |

\* State Avg based on 108 Active Supportive Housing – Scattered Site Programs

#### Next Step Supportive Hsg105551

Family and Children's Agency Inc

Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 8      | 8        | 0%         |
| Admits         | 1      | -        |            |
| Discharges     | -      | -        |            |
| Service Hours  | 26     | 15       | 74%        |

#### Recovery

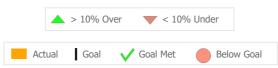
| · · · · · · · · · · · · · · · · · · · |                    |        |          |        |           |                |
|---------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| National Recovery Measures (NOMS)     | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Stable Living Situation               |                    | 6      | 75%      | 85%    | 88%       | -10%           |
| Service Utilization                   |                    |        |          |        |           |                |
|                                       | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Clients Receiving Services            |                    | 7      | 88%      | 90%    | 90%       | -2%            |

# Data Submission Quality

| 0            | Data Entry       | Actual | State Avg |
|--------------|------------------|--------|-----------|
| $\checkmark$ | Valid NOMS Data  | 100%   | 96%       |
|              | On-Time Periodic | Actual | State Avg |
|              | 6 Month Updates  | 0%     | 81%       |

### Data Submitted to DMHAS by Month

|            | <br>Jul | Aug | Sep | % Months Submitted |
|------------|---------|-----|-----|--------------------|
| Admissions |         |     |     | 33%                |
| Discharges |         |     |     | 0%                 |
| Services   |         |     |     | 100%               |



\* State Avg based on 108 Active Supportive Housing – Scattered Site Programs

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

#### **ODFC 0285**

Family and Children's Agency Inc

Connecticut Dept of Mental Health and Addiction Services

#### Program Quality Dashboard

Mental Health - Case Management - Supportive Housing - Scattered Site

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

# **Program Activity**

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

### Recovery

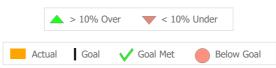
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| Stable Living Situation           |                    | N/A    | N/A      | 85%    | 88%       | -85%           |  |
| Service Utilization               |                    |        |          |        |           |                |  |
|                                   | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |  |
| Clients Receiving Services        |                    | N/A    | N/A      | 90%    | 90%       | N/A            |  |

# Data Submission Quality

| Actual State | Avg             |
|--------------|-----------------|
| N/A          | 96%             |
|              |                 |
| Actual S     | tate Avg        |
| N/A          | 81%             |
|              | N/A<br>Actual S |

### Data Submitted to DMHAS by Month

|            | Jul     | Aug      | Sep      | % Months Submitted |
|------------|---------|----------|----------|--------------------|
| Admissions |         |          |          | 0%                 |
| Discharges |         |          |          | 0%                 |
|            | 1 or mo | re Recor | rds Subr | nitted to DMHAS    |



\* State Avg based on 108 Active Supportive Housing – Scattered Site Programs

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

Family and Children's Agency Inc

Addiction - IOP - Standard IOP

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

## **Program Activity**

| Measure                      | Actual | 1 Yr Ago | Variance % |
|------------------------------|--------|----------|------------|
| Unique Clients               | 15     |          |            |
| Admits                       | 9      | -        |            |
| Discharges                   | 8      | -        |            |
| Service Hours                | 170    | -        |            |
| Social Rehab/PHP/IOP<br>Days | 4      | 0        |            |

# Data Submission Quality

| Data Entry           | Actual S | tate Avg  |
|----------------------|----------|-----------|
| Valid NOMS Data      | 98%      | 85%       |
| Valid TEDS Data      | 100%     | 87%       |
|                      |          |           |
| On-Time Periodic     | Actual   | State Avg |
| 6 Month Updates      | N/A      | 4%        |
|                      |          |           |
| Co-occurring         | Actual   | State Avg |
| MH Screen Complete   | 100%     | 87%       |
| V SA Screen Complete | 100%     | 87%       |
|                      |          |           |
| Diagnosis            | Actual   | State Ava |

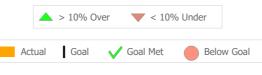


## Data Submitted to DMHAS by Month



# **Discharge Outcomes**

|                                       | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully      |                    | 6      | 75%      | 50%    | 62%       | 25%            |
|                                       | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Follow-up within 30 Days of Discharge |                    | 4      | 67%      | 90%    | 64%       | -23%           |
| Recovery                              |                    |        |          |        |           |                |
| National Recovery Measures (NOMS)     | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Not Arrested                          |                    | 14     | 93%      | 75%    | 68%       | 18%            |
| Stable Living Situation               |                    | 14     | 93%      | 95%    | 74%       | -2%            |
| Abstinence/Reduced Drug Use           |                    | 6      | 40%      | 55%    | 39%       | -15%           |
| Employed                              |                    | 3      | 20%      | 50%    | 23%       | -30%           |
| Self Help                             |                    | 2      | 13%      | 60%    | 11%       | -47%           |
| Service Utilization                   |                    |        |          |        |           |                |
|                                       | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Clients Receiving Services            |                    | 6      | 86%      | 90%    | 45%       | -4%            |



\* State Avg based on 55 Active Standard IOP Programs

# **Program Activity**

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 46     | 42       | 10%        |
| Admits         | 18     | 17       | 6%         |
| Discharges     | 17     | 21       | -19% 🔻     |
| Service Hours  | 16     | 13       | 26% 🔺      |

# Service Engagement



# Data Submitted to DMHAS by Month

|           |     | Jul     | Aug      | Sep     | % Months Submitted |
|-----------|-----|---------|----------|---------|--------------------|
| Admission | s   |         |          |         | 100%               |
| Discharge | 5   |         |          |         | 100%               |
| Services  |     |         |          |         | 100%               |
|           | 1 0 | or more | e Record | ls Subr | nitted to DMHAS    |

|        | > 10% Ove | er           | ▼ < 10%  | Under |            |
|--------|-----------|--------------|----------|-------|------------|
| Actual | Goal      | $\checkmark$ | Goal Met |       | Below Goal |

\* State Avg based on 43 Active Outreach & Engagement Programs

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

# Program Activity

| Measure                      | Actual | 1 Yr Ago | Variance % |
|------------------------------|--------|----------|------------|
| Unique Clients               | 116    | 659      | -82% 🔻     |
| Admits                       | -      | -        |            |
| Discharges                   | -      | 186      | -100% 🔻    |
| Service Hours                | -      | -        |            |
| Social Rehab/PHP/IOP<br>Days | 0      | 50       | -100% 🔻    |

### Service Utilization

|                            | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services |                    | 0      | 0%       | 90%    | 61%       | N/A 🔶          |
|                            |                    |        |          |        |           |                |
|                            |                    |        |          |        |           |                |
|                            |                    |        |          |        |           |                |
|                            |                    |        |          |        |           |                |
|                            |                    |        |          |        |           |                |

# Data Submitted to DMHAS by Month

| Admissions<br>Discharges | 0% |
|--------------------------|----|
| Discharges               |    |
|                          | 0% |
| Services                 | 0% |

| Actual Goal 🗸 Goal Met 🛑 Below Goal | Actua |
|-------------------------------------|-------|

\* State Avg based on 34 Active Social Rehabilitation Programs