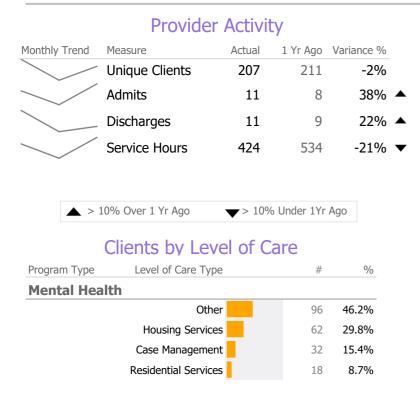
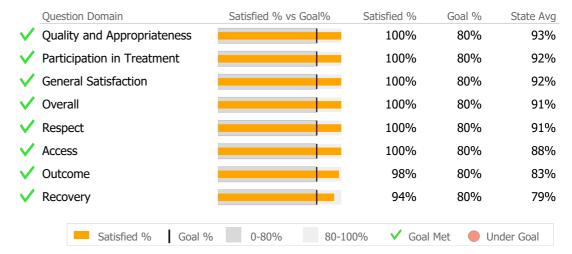
My Sisters' Place Hartford, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

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



Consumer Satisfaction Survey (Based on 51 FY21 Surveys)



Client Demographics

| State Avg | % | # | Gender | State Avg | % | # | Age |
|--------------|-----|-----|---------------------------------|--------------|-----|-----|-------------------|
| 58% | 53% | 110 | Male 🗾 | ▲ 9% | 40% | 82 | 18-25 |
| 42% | 47% | 97 | Female | 20% | 14% | 29 | 26-34 |
| 0% | | | Transgender | ▼ 23% | 9% | 18 | 35-44 📕 |
| | | | | 19% | 13% | 26 | 45-54 📕 |
| | | | | 20% | 17% | 36 | 55-64 📒 |
| State Avg | % | # | Race | 9% | 8% | 16 | 65+ |
| ▲ 17% | 49% | 101 | Black/African American | | | | |
| ▼ 63% | 24% | 49 | White/Caucasian | State Avg | % | # | Ethnicity |
| 13% | 21% | 43 | Other | 69% | 68% | 141 | Non-Hispanic |
| 5% | 4% | 9 | Unknown | ▲ 12% | 24% | 49 | Hisp-Puerto Rican |
| 1% | 1% | 3 | Asian | 8% | 6% | 13 | Hispanic-Other |
| 1% | 0% | 1 | Am. Indian/Native Alaskan | 11% | 2% | 4 | Unknown |
| 1% | 0% | 1 | Multiple Races | | 270 | 4 | I |
| 0% | | | Hawaiian/Other Pacific Islander | 0% | | | Hispanic-Cuban |
| 0,0 | | | | 0% | | | Hispanic-Mexican |

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 62 | 63 | -2% |
| Admits | - | - | |
| Discharges | - | - | |

| Data | Submitted Jul Aug | to _{Sep} | DMHAS by Mon % Months Submitted | th |
|------------|----------------------|----------------------|------------------------------------|----|
| Admissions | | | 0% | |
| Discharges | | | 0% | |
| | 1 or more Record | ls Sub | omitted to DMHAS | |

| | > 10% 0 | ver 🔻 < 10º | % Under | |
|--------|---------|-------------|---------|--------|
| Actual | Goal | 🗸 Goal Met | Below | v Goal |

* State Avg based on 3 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 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 17 | 18 | -6% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | 103 | 210 | -51% |

Recovery

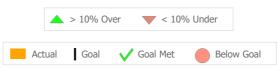
| | / | | | | | | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| \checkmark | Stable Living Situation | | 16 | 94% | 85% | 93% | 9% |
| | Service Utilization | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| \checkmark | Clients Receiving Services | | 16 | 94% | 90% | 91% | 4% |

Data Submission Quality

| Data Entry | Actual State Avg |
|-------------------|------------------|
| Valid NOMS Data | N/A 98% |
| | |
| On-Time Periodic | Actual State Avg |
| V 6 Month Updates | 100% 87% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|------------|-----|-----|-----|--------------------|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | | | | 100% |



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

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 18 | 16 | 13% 🔺 |
| Admits | 1 | - | |
| Discharges | - | - | |
| Service Hours | 185 | 188 | -1% |

Data Submission Quality

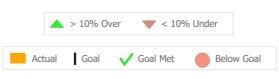
| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 100% | 97% |
| | • | |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 87% | 95% |
| | | |
| Co-occurring | Actual | State Avg |
| MH Screen Complete | 0% | 95% |
| SA Screen Complete | 0% | 93% |
| | | |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 95% |
| | 100/0 | 5570 |

Data Submitted to DMHAS by Month

| | 33% 0% |
|---|-----------|
| | 0% |
| | |
| | 100% |
| | |
| • | ecords Su |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| | Treatment Completed Successfully | | N/A | N/A | 50% | 88% | N/A | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Social Support | | 14 | 78% | 60% | 83% | 18% | |
| \checkmark | Stable Living Situation | | 17 | 94% | 85% | 96% | 9% | |
| | Employed | | 2 | 11% | 25% | 13% | -14% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Clients Receiving Services | | 17 | 94% | 90% | 97% | 4% | |



* State Avg based on 24 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 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 14 | 13 | 8% |
| Admits | 1 | - | |
| Discharges | 1 | - | |
| Service Hours | 28 | 99 | -72% 🔻 |

Service Engagement



Data Submitted to DMHAS by Month

| | | Jul | Aug | Sep | % Months Submitted | | | |
|------------|--------------------------------------|-----|-----|-----|--------------------|--|--|--|
| Admission | 5 | | | | 33% | | | |
| Discharges | 5 | | | | 33% | | | |
| Services | | | | | 100% | | | |
| | 1 or more Records Submitted to DMHAS | | | | | | | |

| | | > 10% Ove | er | ▼ < 10% | Unde | er | |
|---|--------|-----------|--------------|----------|------|------------|--|
| ļ | Actual | Goal | \checkmark | Goal Met | | Below Goal | |

* State Avg based on 43 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 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 14 | 13 | 8% |
| Admits | 1 | - | |
| Discharges | 1 | 1 | 0% |
| Service Hours | 108 | 38 | 184% 🔺 |

Data Submission Quality



Data Submitted to DMHAS by Month

| | | | 33% | | | | |
|---------------|---------|------------------|------------------------|--|--|--|--|
| | | | 33% | | | | |
| | | | 100% | | | | |
| Services 100% | | | | | | | |
| | 1 or mo | 1 or more Record | 1 or more Records Subr | | | | |

Recovery

| | · | | | | | | | |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|--|
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Stable Living Situation | | 14 | 100% | 85% | 93% | 15% | |
| | Service Utilization | | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| \checkmark | Clients Receiving Services | | 13 | 100% | 90% | 91% | 10% | |

| | > 1 | 0% Over | ▼ < 10% | Under |
|------|-----|---------|----------|------------|
| Actu | al | ioal 🗸 | Goal Met | Below Goal |

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 96 | 102 | -6% |
| Admits | 8 | 8 | 0% |
| Discharges | 9 | 8 | 13% 🔺 |
| Service Hours | - | - | |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted | | |
|--------------------------------------|-----|-----|-----|--------------------|--|--|
| Admissions | | | | 100% | | |
| Discharges | | | | 100% | | |
| Services | | | | 0% | | |
| 1 or more Records Submitted to DMHAS | | | | | | |

| | ^ > 2 | 10% Over | | • | < 10% | Under | | |
|------|--------------|----------|--------------|--------|-------|-------|-------|------|
| Actu | ual | Goal | \checkmark | Goal N | 1et | | Below | Goal |

* State Avg based on 5 Active Fiduciary Programs