Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Provider Activity Client Demographics 1 Yr Ago Variance % Monthly Trend Measure Actual Gender Age # State Avg State Avg **Unique Clients** 39 38 3% 18-25 24 62% 59% 3 8% 9% Male 400% 5 Admits 1 15 38% 41% 26-34 6 15% 21% Female Discharges 2 3 -33% ▼ Transgender 0% 35-44 5 13% 23% 45-54 23% 19% Service Hours 119 149 **-20%** ▼ 55-64 10 26% 19% Race State Avg 65+ 6 15% 9% Black/African American 17% ▲ > 10% Over 1 Yr Ago > 10% Under 1Yr Ago **Ethnicity** White/Caucasian 62% 36% % State Avg Multiple Races 3% 1% Non-Hispanic 36 92% 68% Clients by Level of Care Am. Indian/Native Alaskan 0% Hispanic-Other 3 8% 8% Program Type Level of Care Type % Asian 1% Hispanic-Cuban 0% **Mental Health** Hawaiian/Other Pacific Islander 0% Hispanic-Mexican 1% Case Management 39 100.0% 13% Other Hisp-Puerto Rican 11% Unknown 6% Unknown 11% Unique Clients | State Avg ▲ > 10% Over State Avg > 10% Under State Avg

Survey Data Not Available

451 Putnm Next Stp Dv 2 931555

Leeway Inc.

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	18	18	0%	
Admits	3	1	200%	•
Discharges	1	3	-67%	•
Service Hours	79	88	-9%	

Recovery

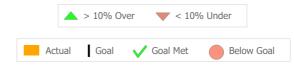
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		14	78%	85%	94%	-7%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		14	82%	90%	95%	-8%

Data Submission Quality

Data Entry	Actual 5	State Avg
Valid NOMS Data	94%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	79%	86%

Data Submitted to DMHAS by Month





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

Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

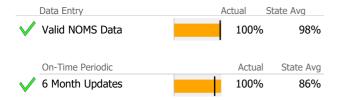
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	5	20%	•
Admits	1	-		
Discharges	1	-		
Service Hours	21	22	-7%	

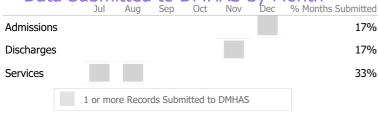
Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		5	83%	85%	94%	-2%
Service Utilization						
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		4	80%	90%	95%	-10%

Data Submission Quality



Data Submitted to DMHAS by Month





Next Steps SupportiveHsg931551

Leeway Inc.

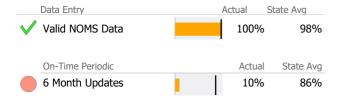
Mental Health - Case Management - Supportive Housing - Development

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

Program Activity Recovery National Recovery Measures (NOMS) Actual vs Goal Actual % vs Goal % Actual % Goal % Actual State Avg Variance % Measure 1 Yr Ago 8 80% 85% 94% -5% Stable Living Situation Unique Clients 10 10 0% Service Utilization Admits Discharges State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 9 90% 90% 95% 0% Service Hours 14 30 -52%

Data Submission Quality



Data Submitted to DMHAS by Month





Pilots Housing CaseMgmt931-290

Leeway Inc.

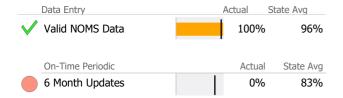
Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - December 2021 (Data as of Apr 18, 2022)

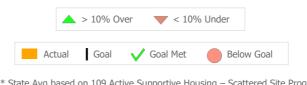
Program Activity Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Variance % Measure 1 Yr Ago 67% 85% 88% -18% Stable Living Situation 5 **Unique Clients** 20% Service Utilization Admits Discharges State Ava Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 3 50% 90% 96% -40% -5 9 Service Hours **-46% \rightarrow**

Data Submission Quality



Data Submitted to DMHAS by Month

Date	<i>a</i> 50	Jul	Aug	Sep	Oct	Nov		% Months Submitted
Admissions	6							17%
Discharges	;							0%
Services								0%
		1 or mo	ore Record	ls Sub	mitted to	DMHA	S	



^{*} State Avg based on 109 Active Supportive Housing - Scattered Site Programs