

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---------------|----------------|--------|----------|------------|
| | Unique Clients | 114 | 113 | 1% |
| | Admits | 8 | 1 | 700% |
| | Discharges | 17 | 5 | 240% ▲ |
| | Service Hours | 644 | 238 | 171% ▲ |

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

Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|----------------------|--------------------|-----|--------|
| Mental Health | Case Management | 114 | 100.0% |

Client Demographics

| Age | # | % | State Avg |
|-------|----|-----|-----------|
| 18-25 | 1 | 1% | 10% |
| 26-34 | 3 | 3% | 22% ▼ |
| 35-44 | 9 | 8% | 23% ▼ |
| 45-54 | 22 | 19% | 19% |
| 55-64 | 37 | 32% | 19% ▲ |
| 65+ | 42 | 37% | 8% ▲ |

| Ethnicity | # | % | State Avg |
|-------------------|-----|-----|-----------|
| Non-Hispanic | 111 | 97% | 68% ▲ |
| Hisp-Puerto Rican | 3 | 3% | 11% |
| Hispanic-Cuban | | | 0% |
| Hispanic-Mexican | | | 1% |
| Hispanic-Other | | | 8% |
| Unknown | | | 12% ▼ |

| Gender | # | % | State Avg |
|-------------|----|-----|-----------|
| Female | 80 | 70% | 41% ▲ |
| Male | 34 | 30% | 59% ▼ |
| Transgender | | | 0% |

| Race | # | % | State Avg |
|---------------------------------|-----|-----|-----------|
| Asian | 112 | 98% | 1% ▲ |
| Multiple Races | 2 | 2% | 1% |
| Am. Indian/Native Alaskan | | | 0% |
| Black/African American | | | 17% ▼ |
| Hawaiian/Other Pacific Islander | | | 0% |
| Other | | | 13% ▼ |
| Unknown | | | 6% |
| White/Caucasian | | | 62% ▼ |

■ Unique Clients | State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

Survey Data Not Available

Case Management

Khmer Health Advocates

Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 114 | 113 | 1% |
| Admits | 8 | 1 | 700% ▲ |
| Discharges | 17 | 5 | 240% ▲ |
| Service Hours | 644 | 238 | 171% ▲ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|--------|-----------|
| Valid NOMS Data | 99% | 95% |
| On-Time Periodic | | |
| 6 Month Updates | 55% | 59% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | 0 | 0% | 50% | 62% | -50% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Social Support | | 67 | 57% | 60% | 72% | -3% |
| Employed | | 18 | 15% | 20% | 17% | -5% |
| Stable Living Situation | | 84 | 72% | 80% | 75% | -8% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|----------------------------|--------------------|--------|----------|--------|-----------|----------------|
| Clients Receiving Services | | 79 | 79% | 90% | 85% | -11% ▼ |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | ■ | | ■ | | | | ■ | | ■ | 44% |
| Discharges | ■ | | | ■ | | ■ | ■ | ■ | | 56% |
| Services | | | ■ | | | | ■ | ■ | ■ | 44% |

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 30 Active Standard Case Management Programs

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