**Bridge House**
Bridgeport, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - June 2022   (Data as of Oct 03, 2022)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 437 | 427 | 2% | |
| | Admits | 126 | 79 | 59% | ▲ |
| | Discharges | 146 | 117 | 25% | ▲ |
| | Service Hours | 12,995 | 7,662 | 70% | ▲ |
| | S.Rehab/PHP/IOP | 7,150 | 3,610 | 98% | ▲ |

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

## Clients by Level of Care

| Program Type | Level of Care Type | | # | % |
|---|---|---|---|---|
| **Mental Health** | | | | |
| | Case Management | | 232 | 53.0% |
| | Social Rehabilitation | | 206 | 47.0% |

## Consumer Satisfaction Survey   (Based on 79 FY21 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|
| ✓ Quality and Appropriateness | | 96% | 80% | 93% |
| ✓ General Satisfaction | | 95% | 80% | 92% |
| ✓ Overall | | 95% | 80% | 91% |
| ✓ Access | | 95% | 80% | 88% |
| ✓ Participation in Treatment | | 91% | 80% | 92% |
| ✓ Respect | | 89% | 80% | 91% |
| ✓ Outcome | | 89% | 80% | 83% |
| ✓ Recovery | | 86% | 80% | 79% |

Legend: ▮ Satisfied %   | Goal %   ▮ 0-80%   ▮ 80-100%   ✓ Goal Met   ⬤ Under Goal

## Client Demographics

**Age**

| | | # | % | State Avg |
|---|---|---|---|---|
| 18-25 | | 22 | 5% | 10% |
| 26-34 | | 66 | 15% | 22% |
| 35-44 | | 83 | 19% | 23% |
| 45-54 | | 84 | 19% | 18% |
| 55-64 | | 123 | 28% | 18% |
| 65+ | | 59 | 14% | 8% |

**Gender**

| | | # | % | State Avg |
|---|---|---|---|---|
| Male | | 285 | 65% | 59% |
| Female | | 151 | 35% | 41% |
| Transgender | | | | 0% |

**Ethnicity**

| | | # | % | State Avg |
|---|---|---|---|---|
| Non-Hispanic | | 285 | 65% | 68% |
| Hisp-Puerto Rican | | 105 | 24% ▲ | 11% |
| Hispanic-Other | | 32 | 7% | 9% |
| Unknown | | 9 | 2% | 12% |
| Hispanic-Cuban | | 4 | 1% | 0% |
| Hispanic-Mexican | | 2 | 0% | 1% |

**Race**

| | | # | % | State Avg |
|---|---|---|---|---|
| White/Caucasian | | 172 | 39% ▼ | 61% |
| Black/African American | | 163 | 37% ▲ | 17% |
| Other | | 84 | 19% | 13% |
| Asian | | 8 | 2% | 1% |
| Multiple Races | | 5 | 1% | 1% |
| Unknown | | 3 | 1% | 6% |
| Am. Indian/Native Alaskan | | 1 | 0% | 0% |
| Hawaiian/Other Pacific Islander | | 1 | 0% | 0% |

Legend: ▮ Unique Clients   | State Avg   ▲ > 10% Over State Avg   ▼ > 10% Under State Avg

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

**880 Fairfield Ave. Soc Re 280**
Bridge House
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - June 2022  (Data as of Oct 03, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 206 | 209 | -1% | |
| Admits | 5 | 9 | -44% | ▼ |
| Discharges | 19 | 8 | 138% | ▲ |
| Service Hours | 11,375 | 6,932 | 64% | ▲ |
| Social Rehab/PHP/IOP Days | 7,150 | 3,610 | 98% | ▲ |

## Service Utilization
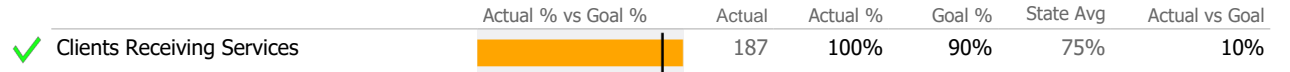
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 187 | 100% | 90% | 75% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | ▪ | | | | | ▪ | ▪ | | | | 25% |
| Discharges | | ▪ | ▪ | ▪ | ▪ | | ▪ | ▪ | ▪ | ▪ | ▪ | | 75% |
| Services | | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS
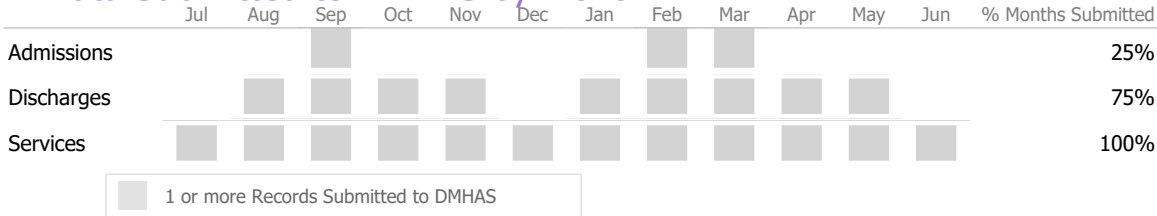
▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

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

**Outreach and Engagement Program**
Bridge House
Mental Health - Case Management - Outreach & Engagement
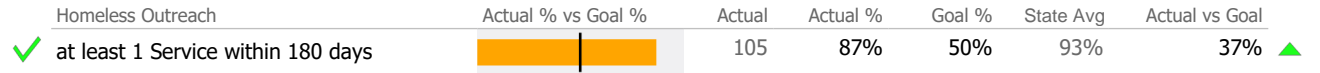
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
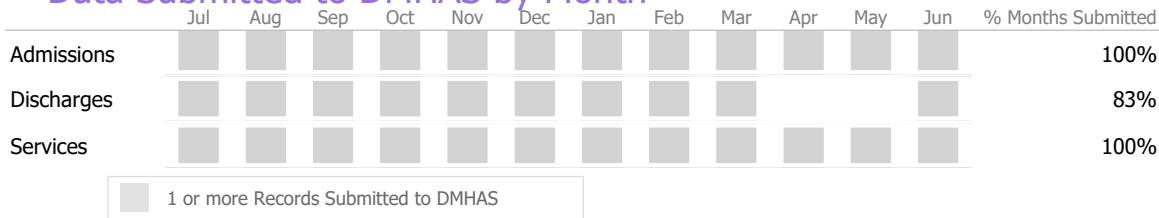Reporting Period: July 2021 - June 2022  (Data as of Oct 03, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 232 | 222 | 5% | |
| Admits | 121 | 70 | 73% | ▲ |
| Discharges | 127 | 109 | 17% | ▲ |
| Service Hours | 1,620 | 730 | 122% | ▲ |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ at least 1 Service within 180 days | | 105 | 87% | 50% | 93% | 37% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | | | ▢ | 83% |
| Services | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 50 Active Outreach & Engagement Programs

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