#### **St. Vincent's Medical Center** 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)

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FIU	viu		Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
$\sim$	Unique Clients	113	126	-10%
$\sim \sim$	Admits	41	51	-20% 🔻
$\sim\sim\sim$	Discharges	47	55	-15% 🔻
$\sim$	Service Hours	7,489	9,905	-24% 🔻
$\[mathchar]{}$	Bed Days	1,647	1,783	-8%

▲ > 10% Over 1 Yr Ago  $\checkmark$  > 10% Under 1Yr Ago

### Clients by Level of Care

Program Type	Level of Care Type	#	%
<b>Mental Health</b>			
	Inpatient Services	44	38.9%
	Case Management	42	37.2%
I	Residential Services	27	23.9%

Age	#	%	State Avg	Gender	#	%	State Avg
18-25	6	5%	10%	Male 🔜	68	60%	59%
26-34	15	13%	22%	Female	45	40%	41%
35-44 📒	19	17%	23%	Transgender			0%
45-54	24	21%	18%				
55-64	34	30%	<b>▲</b> 18%				
65+	15	13%	8%	Race	#	%	State Avg
				White/Caucasian	64	57%	61%
Ethnicity	#	%	State Avg	Black/African American 📙	42	37%	▲ 17%
Non-Hispanic	97	86%	▲ 68%	Other	6	5%	13%
Hisp-Puerto Rican	9	8%	11%	Unknown	1	1%	6%
Hispanic-Other	4	4%	9%	Am. Indian/Native Alaskan			0%
Unknown	3	3%	12%	Asian			1%
1	5	570	0%	Multiple Races			1%
Hispanic-Cuban				Hawaiian/Other Pacific Islander			0%
Hispanic-Mexican			1%				

### Survey Data Not Available

#### **Homestead Apts. Residential Support** St. Vincent's Medical Center Mental Health - Residential Services - Residential Support

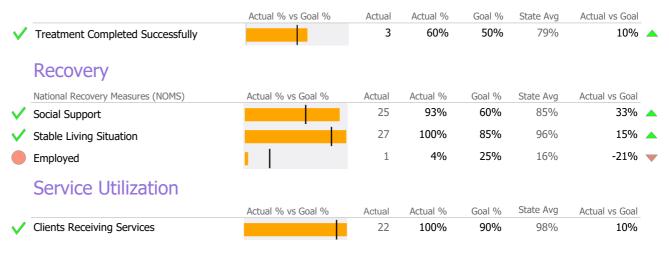
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	32	-16% 🔻	
Admits	1	2	-50% 🔻	
Discharges	5	6	-17% 🔻	
Service Hours	3,173	4,360	-27% 🔻	

### Data Submission Quality

Data Entry	Actual S	State Avg
Valid NOMS Data	100%	99%
On-Time Periodic	Actual	State Avg
🗸 6 Month Updates	100%	96%

### Discharge Outcomes



#### Data Submitted to DMHAS by Month



	> 10% 0	ver <b>v</b> < 10 <sup>4</sup>	% Under	
Actual	Goal	V Goal Met	Below	Goal

\* State Avg based on 25 Active Residential Support Programs

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

### **Program Activity**

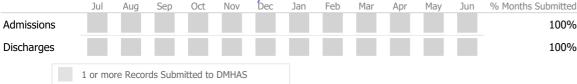
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	44	51	-14% 🔻
Admits	40	49	-18% 🔻
Discharges	40	47	-15% 🔻
Bed Days	1,647	1,783	-8%

# Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	NaN
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%
Co-occurring	Actual	State Avg
MH Screen Complete	0%	2%
SA Screen Complete	0%	2%
SA Screen Complete	0%	

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	100%

# Data Submitted to DMHAS by Month



	> 10% O	ver 🔻 < 10°	% Under	
Actual	Goal	🗸 Goal Met	Below Go	oal

\* State Avg based on 2 Active Acute Pyschiatric - Intermediate Programs

### Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	Treatment Completed Successfully		40	100%	95%	100%	5%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
$\checkmark$	No Re-admit within 30 Days of Discharge		37	92%	85%	93%	7%
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal

### Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
Avg Utilization Ration	te	8	52 days	0.1	56%	90%	94%	-34% 🔻	
	< 90% 90-110%		>110%						

#### St. Vincent's Community Residential Support

St. Vincent's Medical Center

Mental Health - Case Management - Supportive Housing - Scattered Site

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	42	44	-5%
Admits	-	-	
Discharges	2	2	0%
Service Hours	4,316	5,545	-22% 🔻

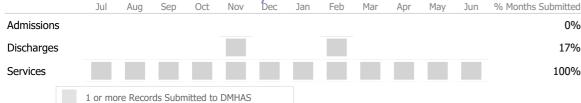
#### Recovery

	,							
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Stable Living Situation		42	100%	85%	87%	15%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
$\checkmark$	Clients Receiving Services		40	100%	90%	97%	10%	

# Data Submission Quality



### Data Submitted to DMHAS by Month



	> 10% O	ver <b>v</b> < 10 <sup>0</sup>	% Under	
Actual	Goal	V Goal Met	Belov	v Goal

\* State Avg based on 110 Active Supportive Housing – Scattered Site Programs