

### Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	13	13	0%
	Admits	3	5	-40% ▼
	Discharges	3	2	50% ▲
	Service Hours	131	88	49% ▲

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

### Clients by Level of Care

Program Type	Level of Care Type	#	%
<b>Mental Health</b>	Case Management	13	100.0%

### Client Demographics

Age	#	%	State Avg
18-25	0	0%	9%
26-34	1	9%	20%
35-44	4	36%	24%
45-54	3	27%	18%
55-64	3	27%	20%
65+	0	0%	9%

Gender	#	%	State Avg
Female	10	91%	42%
Male	1	9%	58%
Transgender	0	0%	0%

Ethnicity	#	%	State Avg
Non-Hispanic	9	69%	69%
Hispanic-Other	4	31%	8%
Hispanic-Cuban	0	0%	0%
Hispanic-Mexican	0	0%	1%
Hisp-Puerto Rican	0	0%	11%
Unknown	0	0%	11%

Race	#	%	State Avg
White/Caucasian	11	85%	62%
Other	2	15%	13%
Am. Indian/Native Alaskan	0	0%	1%
Asian	0	0%	1%
Black/African American	0	0%	17%
Multiple Races	0	0%	1%
Hawaiian/Other Pacific Islander	0	0%	0%
Unknown	0	0%	6%

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

Survey Data Not Available

## Brookside Commons

Association of Religious Communities

Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2022 - December 2022 (Data as of Mar 20, 2023)

### Program Activity

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### Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		13	100%	85%	86%	15% ▲

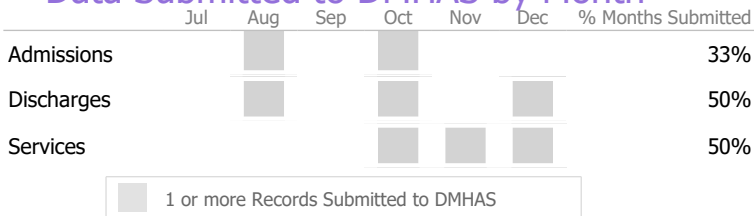
### Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		10	100%	90%	95%	10%

### Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data		93% 97%
On-Time Periodic	Actual	State Avg
✓ 6 Month Updates		86% 83%

### Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met Below Goal

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

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