**Central CT Coast YMCA**
New Haven, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
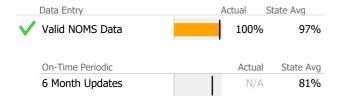Reporting Period: July 2022 - June 2023   (Data as of Sep 25, 2023)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 129 | 120 | 8% | |
| | Admits | 29 | 30 | -3% | |
| | Discharges | 26 | 21 | 24% | ▲ |
| | Service Hours | 1,671 | 1,486 | 12% | ▲ |

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

## Clients by Level of Care

| Program Type | Level of Care Type | | # | % |
|---|---|---|---|---|
| **Mental Health** | | | | |
| | Case Management | | 129 | 100.0% |

## Consumer Satisfaction Survey   (Based on 86 FY22 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Quality and Appropriateness | | 98% | 80% | 93% |
| ✓ | Access | | 98% | 80% | 88% |
| ✓ | General Satisfaction | | 95% | 80% | 92% |
| ✓ | Respect | | 95% | 80% | 91% |
| ✓ | Overall | | 94% | 80% | 91% |
| ✓ | Outcome | | 94% | 80% | 83% |
| ✓ | Recovery | | 93% | 80% | 79% |
| ✓ | Participation in Treatment | | 89% | 80% | 92% |

| ▮ Satisfied % | | Goal % | 0-80% | 80-100% | ✓ Goal Met | ● Under Goal |
|---|---|---|---|---|---|---|

## Client Demographics

### Age

| Age | | # | % | | State Avg |
|---|---|---|---|---|---|
| 18-25 | | 8 | 6% | | 10% |
| 26-34 | | 14 | 11% | | 21% |
| 35-44 | | 16 | 12% | ▼ | 24% |
| 45-54 | | 35 | 27% | | 18% |
| 55-64 | | 40 | 31% | ▲ | 18% |
| 65+ | | 16 | 12% | | 9% |

### Gender

| Gender | | # | % | | State Avg |
|---|---|---|---|---|---|
| Male | | 85 | 66% | | 59% |
| Female | | 43 | 34% | | 41% |
| Transgender | | | | | 0% |

### Ethnicity

| Ethnicity | | # | % | | State Avg |
|---|---|---|---|---|---|
| Non-Hispanic | | 83 | 64% | | 67% |
| Hisp-Puerto Rican | | 31 | 24% | ▲ | 10% |
| Hispanic-Other | | 12 | 9% | | 9% |
| Hispanic-Mexican | | 2 | 2% | | 1% |
| Hispanic-Cuban | | 1 | 1% | | 0% |
| Unknown | | | | ▼ | 13% |

### Race

| Race | | # | % | | State Avg |
|---|---|---|---|---|---|
| Black/African American | | 70 | 54% | ▲ | 18% |
| White/Caucasian | | 50 | 39% | ▼ | 60% |
| Other | | 6 | 5% | | 12% |
| Am. Indian/Native Alaskan | | 1 | 1% | | 1% |
| Multiple Races | | 1 | 1% | | 1% |
| Hawaiian/Other Pacific Islander | | 1 | 1% | | 0% |
| Asian | | | | | 1% |
| Unknown | | | | | 7% |

| ▮ 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.

**ARPA-SHP**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023  (Data as of Sep 25, 2023)

## Program Activity

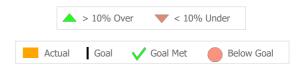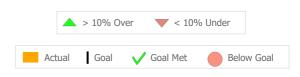| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 7 | | |
| Admits | 7 | - | |
| Discharges | - | - | |
| Service Hours | 37 | - | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Stable Living Situation | | 7 | 100% | 85% | 86% | 15% ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 7 | 100% | 90% | 97% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 100% | 97% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| 6 Month Updates | N/A | 81% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | ▩ | ▩ | | | | 17% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | | | | | | | | | | ▩ | | | 8% |

▩ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 118 Active Supportive Housing – Scattered Site Programs

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

**Bridgeport Housing First**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023  (Data as of Sep 25, 2023)

## Program Activity

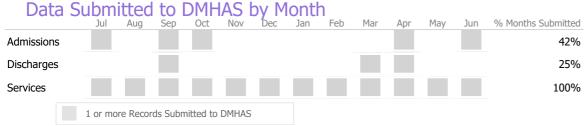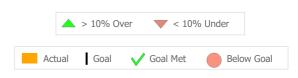| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 7 | 6 | 17% | ▲ |
| Admits | 2 | 2 | 0% | |
| Discharges | 4 | 1 | 300% | ▲ |
| Service Hours | 18 | 35 | -48% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 6 | 86% | 85% | 86% | 1% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 3 | 100% | 90% | 97% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 100% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 81% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | ▩ | | ▩ | | | | 17% |
| Discharges | ▩ | | ▩ | | | | ▩ | | | | | | 25% |
| Services | | | ▩ | ▩ | | | ▩ | | ▩ | ▩ | ▩ | ▩ | 58% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

▩ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 118 Active Supportive Housing – Scattered Site Programs

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

**Crescent Apartments**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023  (Data as of Sep 25, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 23 | 24 | -4% | |
| Admits | 6 | 5 | 20% | ▲ |
| Discharges | 4 | 7 | -43% | ▼ |
| Service Hours | 355 | 354 | 0% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 23 | 100% | 85% | 94% | 15% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 19 | 100% | 90% | 98% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 85% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ▇ | | ▇ | ▇ | | | | | | ▇ | | ▇ | 42% |
| Discharges | | | ▇ | | | | | | ▇ | ▇ | | | 25% |
| Services | | ▇ | ▇ | ▇ | ▇ | ▇ | ▇ | ▇ | ▇ | ▇ | ▇ | ▇ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual   | Goal   ✓ Goal Met   ● Below Goal

\* State Avg based on 66 Active Supportive Housing – Development Programs

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

**Fairfield Apartments**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023  (Data as of Sep 25, 2023)
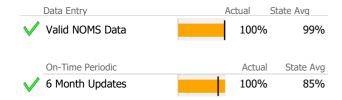
## Program Activity

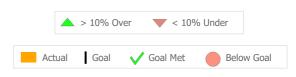| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 22 | 21 | 5% | |
| Admits | 5 | 4 | 25% | ▲ |
| Discharges | 5 | 4 | 25% | ▲ |
| Service Hours | 326 | 329 | -1% | |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 22 | 100% | 85% | 94% | 15% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 17 | 100% | 90% | 98% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 85% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | ▨ | | | | ▨ | | | ▨ | | | ▨ | 33% |
| Discharges | ▨ | | | | ▨ | | | ▨ | ▨ | | | | 33% |
| Services | ▨ | ▨ | ▨ | ▨ | ▨ | ▨ | ▨ | ▨ | ▨ | ▨ | ▨ | ▨ | 100% |

▨ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▨ Actual | ▎ Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on 66 Active Supportive Housing – Development Programs

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

**Franklin Apartments**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023  (Data as of Sep 25, 2023)

## Program Activity

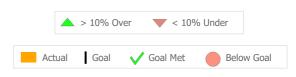| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 28 | 29 | -3% | |
| Admits | 5 | 7 | -29% | ▼ |
| Discharges | 5 | 6 | -17% | ▼ |
| Service Hours | 421 | 276 | 52% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 27 | 96% | 85% | 94% | 11% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 23 | 100% | 90% | 98% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 95% | 85% |

## Data Submitted to DMHAS by Month

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

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 66 Active Supportive Housing – Development Programs

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

**ODFC 0285**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023  (Data as of Sep 25, 2023)

## Program Activity

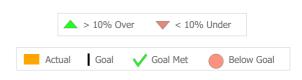| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 9 | 7 | 29% | ▲ |
| Admits | 2 | 5 | -60% | ▼ |
| Discharges | 6 | - | | |
| Service Hours | 34 | 48 | -29% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Stable Living Situation | | 7 | 78% | 85% | 86% | -7% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 3 | 100% | 90% | 97% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 100% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 100% | 81% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | ■ | | | | | | | | | | | | 8% |
| Discharges | | | ■ | ■ | | | ■ | | | | | | 25% |
| Services | | ■ | ■ | | ■ | | ■ | | ■ | | | | 42% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

■ Actual     | Goal     ✔ Goal Met     🔴 Below Goal

* State Avg based on 118 Active Supportive Housing – Scattered Site Programs

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

**ODFC 0324**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023  (Data as of Sep 25, 2023)

## Program Activity

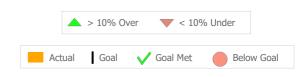| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 1 | 1 | 0% | |
| Admits | - | 1 | -100% | ▼ |
| Discharges | - | - | | |
| Service Hours | 7 | 5 | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 1 | 100% | 85% | 86% | 15% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 1 | 100% | 90% | 97% | 10% |

## Data Submission Quality

| | Data Entry | | Actual | State Avg |
|---|---|---|---|---|
| ✓ | Valid NOMS Data | | 100% | 97% |

| | On-Time Periodic | | Actual | State Avg |
|---|---|---|---|---|
| ✓ | 6 Month Updates | | 100% | 81% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | | | | 0% |
| Services | | | | | | | | | ▪ | | | | 8% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

◼ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 118 Active Supportive Housing – Scattered Site Programs

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

**Tax Credit Apartments**
Central CT Coast YMCA
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
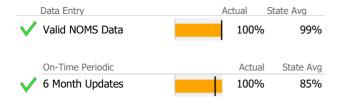Reporting Period: July 2022 - June 2023  (Data as of Sep 25, 2023)

## Program Activity

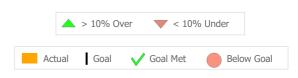| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 32 | 33 | -3% | |
| Admits | 2 | 6 | -67% | ▼ |
| Discharges | 2 | 3 | -33% | ▼ |
| Service Hours | 472 | 441 | 7% | |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 32 | 100% | 85% | 94% | 15% | ▲ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 30 | 100% | 90% | 98% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 100% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 85% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | % Months Submitted |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Admissions | | | | | | | | | ▪ | | | | 8% |
| Discharges | | | | | ▪ | | | | | | ▪ | | 17% |
| Services | | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

☐ Actual     | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on 66 Active Supportive Housing – Development Programs

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