**St. Vincent's Medical Center**
Bridgeport, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
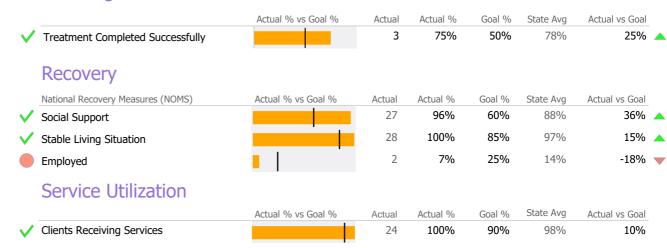Reporting Period: July 2023 - September 2023   (Data as of Dec 26, 2023)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 68 | 75 | -9% | |
| | Admits | 1 | 9 | -89% | ▼ |
| | Discharges | 5 | 10 | -50% | ▼ |
| | Service Hours | 357 | 1,574 | -77% | ▼ |
| | Bed Days | 276 | 466 | -41% | ▼ |

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

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Case Management | 37 | 54.4% |
| | Residential Services | 28 | 41.2% |
| | Inpatient Services | 3 | 4.4% |

## Consumer Satisfaction Survey   (Based on 67 FY23 Surveys)

| Question Domain | | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✔ | Participation in Treatment | | 96% | 80% | 92% |
| ✔ | Respect | | 96% | 80% | 91% |
| ✔ | Quality and Appropriateness | | 95% | 80% | 93% |
| ✔ | General Satisfaction | | 94% | 80% | 92% |
| ✔ | Overall | | 94% | 80% | 91% |
| ✔ | Access | | 91% | 80% | 88% |
| ✔ | Outcome | | 82% | 80% | 83% |
| 🔴 | Recovery | | 79% | 80% | 79% |

| Satisfied % | Goal % | 0-80% | 80-100% | ✔ Goal Met | 🔴 Under Goal |
|---|---|---|---|---|---|

## Client Demographics

### Age

| Age | # | % | State Avg | |
|---|---|---|---|---|
| 18-25 | 1 | 1% | 8% | |
| 26-34 | 6 | 9% | 18% | |
| 35-44 | 8 | 12% | 24% | ▼ |
| 45-54 | 15 | 22% | 19% | |
| 55-64 | 24 | 35% | 20% | ▲ |
| 65+ | 14 | 21% | 11% | |

### Gender

| Gender | # | % | State Avg |
|---|---|---|---|
| Male | 36 | 53% | 58% |
| Female | 32 | 47% | 42% |
| Transgender | | | 0% |

### Ethnicity

| Ethnicity | # | % | State Avg | |
|---|---|---|---|---|
| Non-Hispanic | 64 | 94% | 66% | ▲ |
| Hisp-Puerto Rican | 3 | 4% | 11% | |
| Hispanic-Other | 1 | 1% | 10% | |
| Hispanic-Cuban | | | 0% | |
| Hispanic-Mexican | | | 1% | |
| Unknown | | | 13% | ▼ |

### Race

| Race | # | % | State Avg | |
|---|---|---|---|---|
| Black/African American | 35 | 51% | 17% | ▲ |
| White/Caucasian | 33 | 49% | 60% | ▼ |
| Am. Indian/Native Alaskan | | | 1% | |
| Asian | | | 1% | |
| Multiple Races | | | 1% | |
| Hawaiian/Other Pacific Islander | | | 0% | |
| Other | | | 12% | ▼ |
| Unknown | | | 8% | |

| 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.

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

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - September 2023  (Data as of Dec 26, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 28 | 22 | 27% | ▲ |
| Admits | 1 | - | | |
| Discharges | 4 | - | | |
| Service Hours | 181 | 668 | -73% | ▼ |

## Data Submission Quality

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

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ | 6 Month Updates | 100% | 89% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 3 | 75% | 50% | 78% | 25% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 27 | 96% | 60% | 88% | 36% | ▲ |
| ✔ | Stable Living Situation | | 28 | 100% | 85% | 97% | 15% | ▲ |
| ● | Employed | | 2 | 7% | 25% | 14% | -18% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 24 | 100% | 90% | 98% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % 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 22 Active Residential Support Programs

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

**Intermediate Inpatient Care Services**
St. Vincent's Medical Center
Mental Health - Inpatient Services - Acute Pyschiatric - Intermediate

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - September 2023  (Data as of Dec 26, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 3 | 13 | -77% | ▼ |
| Admits | - | 9 | -100% | ▼ |
| Discharges | - | 10 | -100% | ▼ |
| Bed Days | 276 | 466 | -41% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | NaN |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 0% | 0% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid Axis I Diagnosis | | 100% | 100% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 95% | 100% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 80% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 40% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Improved/Maintained Function Score | | 0 | 0% | 95% | 56% | -95% ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 6 | 256 days | 2.0 | 50% | 90% | 74% | -40% ▼ |

Legend: ▨ < 90%  ▨ 90-110%  🟥 >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |

1 or more Records Submitted to DMHAS

Legend:
▲ > 10% Over   ▼ < 10% Under

🟧 Actual   | Goal   ✓ Goal Met   🔴 Below Goal

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

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

**St. Vincent's Community Residential Support**
St. Vincent's Medical Center
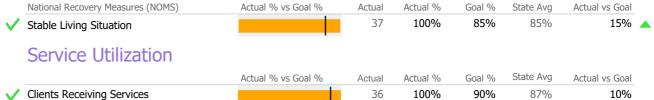Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - September 2023  (Data as of Dec 26, 2023)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 37 | 40 | -8% |
| Admits | - | - | |
| Discharges | 1 | - | |
| Service Hours | 175 | 907 | -81% ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 37 | 100% | 85% | 85% | 15% ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 36 | 100% | 90% | 87% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 98% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 75% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| 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 118 Active Supportive Housing – Scattered Site Programs

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