

Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---------------|----------------|--------|----------|------------|
| | Unique Clients | 36 | 40 | -10% |
| | Admits | 8 | 11 | -27% ▼ |
| | Discharges | 7 | 11 | -36% ▼ |
| | Service Hours | 154 | 190 | -19% ▼ |
| | Bed Days | 1,530 | 1,727 | -11% ▼ |

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

Consumer Satisfaction Survey

(Based on 13 FY23 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ Quality and Appropriateness | | 100% | 80% | 93% |
| ✓ Participation in Treatment | | 100% | 80% | 92% |
| ✓ General Satisfaction | | 100% | 80% | 92% |
| ✓ Overall | | 100% | 80% | 91% |
| ✓ Respect | | 100% | 80% | 91% |
| ✓ Access | | 100% | 80% | 88% |
| ✓ Outcome | | 100% | 80% | 83% |
| ✓ Recovery | | 100% | 80% | 79% |

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

Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|----------------------|----------------------|----|-------|
| Mental Health | Case Management | 23 | 63.9% |
| | Residential Services | 13 | 36.1% |

Client Demographics

| Age | # | % | State Avg |
|-------|----|-----|-----------|
| 18-25 | 1 | 3% | 9% |
| 26-34 | 3 | 8% | 20% ▼ |
| 35-44 | 6 | 17% | 25% |
| 45-54 | 6 | 17% | 18% |
| 55-64 | 14 | 39% | 19% ▲ |
| 65+ | 6 | 17% | 10% |

| Gender | # | % | State Avg |
|-------------|----|-----|-----------|
| Male | 31 | 86% | 59% ▲ |
| Female | 5 | 14% | 40% ▼ |
| Transgender | | | 0% |

| Ethnicity | # | % | State Avg |
|-------------------|----|-----|-----------|
| Non-Hispanic | 23 | 64% | 64% |
| Hispanic-Other | 13 | 36% | 10% ▲ |
| Hispanic-Cuban | | | 0% |
| Hispanic-Mexican | | | 1% |
| Hisp-Puerto Rican | | | 10% |
| Unknown | | | 14% ▼ |

| Race | # | % | State Avg |
|---------------------------------|----|-----|-----------|
| Black/African American | 16 | 44% | 17% ▲ |
| White/Caucasian | 14 | 39% | 59% ▼ |
| Multiple Races | 3 | 8% | 1% |
| Asian | 2 | 6% | 1% |
| Other | 1 | 3% | 12% |
| Am. Indian/Native Alaskan | | | 1% |
| Hawaiian/Other Pacific Islander | | | 0% |
| Unknown | | | 9% |

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

ODFC 0285

Pacific House (formerly Shelter for the Homeless)

Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2023 - March 2024 (Data as of Jun 10, 2024)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 21 | 23 | -9% |
| Admits | - | 2 | -100% ▼ |
| Discharges | - | 2 | -100% ▼ |
| Service Hours | 12 | 60 | -80% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Stable Living Situation | | 19 | 90% | 85% | 86% | 5% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 19 | 90% | 90% | 94% | 0% |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------|--------|-----------|
| Valid NOMS Data | 91% | 98% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 84% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |
| Services | | | | | | | | | | 22% |

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

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

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

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 2 | 2 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | | 5 | -92% ▼ |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ● Stable Living Situation | | 0 | 0% | 85% | 86% | -85% ▼ |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 2 | 100% | 90% | 94% | 10% |

Data Submission Quality

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

| On-Time Periodic | Actual | State Avg |
|-------------------|--------|-----------|
| ● 6 Month Updates | | 84% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | | | | | | | | | | 0% |
| Discharges | | | | | | | | | | 0% |
| Services | | | | | | | | | | 22% |

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.

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 13 | 15 | -13% ▼ |
| Admits | 8 | 9 | -11% ▼ |
| Discharges | 7 | 9 | -22% ▼ |
| Service Hours | 142 | 125 | 13% ▲ |
| Bed Days | 1,530 | 1,727 | -11% ▼ |

Data Submission Quality

| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | 100% | 96% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 100% | 95% |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 90% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| ● Treatment Completed Successfully | | 6 | 86% | 95% | 74% | -9% |
| ✓ No Re-admit within 30 Days of Discharge | | 7 | 100% | 85% | 93% | 15% ▲ |
| ✓ Follow-up within 30 Days of Discharge | | 6 | 100% | 90% | 81% | 10% |

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Improved/Maintained Function Score | | 7 | 78% | 75% | 47% | 3% |

Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | | 6 | 100% | 90% | 76% | 10% |

Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------|-----------------|------|----------|----------|----------|--------|-----------|----------------|
| ● Avg Utilization Rate | | 8 | 237 days | 0.3 | 70% | 90% | 73% | -20% ▼ |

Legend: ■ < 90% ■ 90-110% ■ > 110%

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | % Months Submitted |
|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|
| Admissions | ■ | | ■ | ■ | | ■ | ■ | ■ | ■ | 78% |
| Discharges | ■ | | | ■ | ■ | | ■ | ■ | ■ | 67% |
| Services | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | 100% |

Legend: ■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 8 Active Transitional Programs