

### Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	5	5	0%
	Admits	1	1	0%
	Discharges	2	1	100% ▲
	Service Hours	23	69	-67% ▼

▲ > 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	5	100.0%

### Client Demographics

Age	#	%	State Avg
18-25			9%
26-34	1	20%	20%
35-44	1	20%	25%
45-54	1	20%	18%
55-64	1	20%	19%
65+	1	20%	10%

Ethnicity	#	%	State Avg
Non-Hispanic	5	100% ▲	64%
Hispanic-Cuban			0%
Hispanic-Mexican			1%
Hispanic-Other			10%
Hisp-Puerto Rican			10%
Unknown			14% ▼

Gender	#	%	State Avg
Male	4	80% ▲	59%
Female	1	20% ▼	40%
Transgender			0%

Race	#	%	State Avg
Black/African American	3	60% ▲	17%
White/Caucasian	2	40% ▼	59%
Am. Indian/Native Alaskan			1%
Asian			1%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%
Other			12% ▼
Unknown			9%

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

Survey Data Not Available

# Next Steps SupportiveHsg414551

ACCESS Agency

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

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## Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		2	40%	85%	86%	-45% ▼

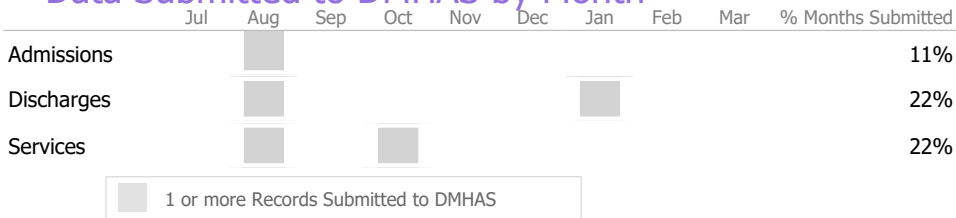
## Service Utilization

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		2	67%	90%	94%	-23% ▼

## 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



▲ > 10% Over    ▼ < 10% Under

Actual    | Goal    Goal Met    Below Goal

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

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