**Bridges Healthcare Inc.**
Milford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2025 -September 2025   (Data as of Dec 17, 2025)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|---|
| | Unique Clients | 1,251 | 1,181 | 6% | |
| | Admits | 105 | 123 | -15% | ▼ |
| | Discharges | 160 | 111 | 44% | ▲ |
| | Service Hours | 4,574 | 5,036 | -9% | |
| | Bed Days | 358 | 368 | -3% | |
| | S.Rehab/PHP/IOP | 534 | 740 | -28% | ▼ |

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

## Consumer Satisfaction Survey   (Based on 293 FY25 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|
| ✓ Participation in Treatment | | 94% | 80% | 92% |
| ✓ Respect | | 94% | 80% | 91% |
| ✓ Quality and Appropriateness | | 94% | 80% | 93% |
| ✓ Overall | | 92% | 80% | 91% |
| ✓ General Satisfaction | | 91% | 80% | 92% |
| ✓ Access | | 90% | 80% | 88% |
| ● Outcome | | 76% | 80% | 83% |

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

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Outpatient | 1,019 | 63.5% |
| | Community Support | 181 | 11.3% |
| | Social Rehabilitation | 82 | 5.1% |
| | Case Management | 39 | 2.4% |
| | Employment Services | 38 | 2.4% |
| | ICS | 30 | 1.9% |
| | Residential Services | 4 | 0.2% |
| **Forensic MH** | | | |
| | Forensics Community-based | 151 | 9.4% |
| **Addiction** | | | |
| | Outpatient | 35 | 2.2% |
| | Medication Assisted Treatment | 26 | 1.6% |

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 123 | 10% | 9% |
| 26-34 | 207 | 17% | 18% |
| 35-44 | 224 | 18% | 25% |
| 45-54 | 195 | 16% | 18% |
| 55-64 | 238 | 19% | 19% |
| 65+ | 260 | 21% | 11% |

### Gender

| | # | % | State Avg |
|---|---|---|---|
| Male | 638 | 51% | 58% |
| Female | 614 | 49% | 41% |
| Transgender/Other | | | 0% |

### Ethnicity

| | # | % | State Avg |
|---|---|---|---|
| Non-Hispanic | 1,032 | 82% ▲ | 64% |
| Hispanic-Other | 84 | 7% | 12% |
| Unknown | 76 | 6% | 13% |
| Hisp-Puerto Rican | 52 | 4% | 10% |
| Hispanic-Cuban | 4 | 0% | 0% |
| Hispanic-Mexican | 4 | 0% | 1% |

### Race

| | # | % | State Avg |
|---|---|---|---|
| White/Caucasian | 986 | 79% ▲ | 59% |
| Black/African American | 128 | 10% | 17% |
| Other | 78 | 6% | 12% |
| Unknown | 28 | 2% | 8% |
| Asian | 20 | 2% | 1% |
| Am. Indian/Native Alaskan | 10 | 1% | 1% |
| Hawaiian/Other Pacific Islander | 2 | 0% | 0% |
| Multiple Races | | | 1% |

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

**Addiction Outpatient 988200**
Bridges Healthcare Inc.
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 20 | 23 | -13% | ▼ |
| Admits | - | - | | |
| Discharges | 1 | 1 | 0% | |
| Service Hours | 8 | 23 | -65% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 40% | 92% |
| Valid TEDS Data | | 50% | 47% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 0% | 7% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 95% | 99% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 0 | 0% | 50% | 54% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Improved/Maintained Function Score | | 17 | 85% | 75% | 16% | 10% | |
| 🔴 Employed | | 0 | 0% | 50% | 20% | -50% | ▼ |
| 🔴 Abstinence/Reduced Drug Use | | 0 | 0% | 55% | 19% | -55% | ▼ |
| 🔴 Self Help | | 0 | 0% | 60% | 11% | -60% | ▼ |
| Social Support | | 0 | 0% | N/A | 28% | N/A | |
| 🔴 Not Arrested | | 0 | 0% | 75% | 37% | -75% | ▼ |
| 🔴 Stable Living Situation | | 1 | 5% | 95% | 36% | -90% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 18 | 90% | 90% | 50% | 0% | |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | N/A | N/A | 75% | 63% | N/A | ▼ |

## Data Submitted to DMHAS for 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 107 Active Standard Outpatient Programs

**Bettor Choice**
Bridges Healthcare Inc.
Addiction - Outpatient - Gambling Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 15 | 10 | 50% | ▲ |
| Admits | 1 | - | | |
| Discharges | 2 | 1 | 100% | ▲ |
| Service Hours | 48 | 57 | -16% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 1 | 50% | 75% | 60% | -25% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Clients Receiving Services | | 7 | 50% | 90% | 88% | -40% | ▼ |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 1 | 100% | 75% | 68% | 25% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 63% | 94% |
| Valid TEDS Data | | 0% | 25% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 67% | 70% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 93% | 99% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | ■ | 33% |
| Discharges | ■ | ■ | | 67% |
| Services | ■ | ■ | ■ | 100% |

1 or more Records Submitted to DMHAS
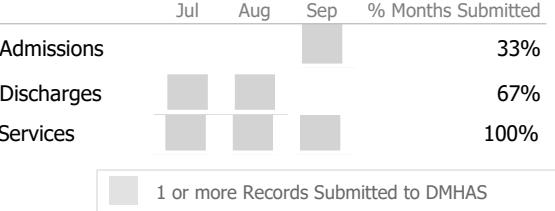
▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 8 Active Gambling Outpatient Programs

**CSP 230**
Bridges Healthcare Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 181 | 179 | 1% |
| Admits | 10 | 10 | 0% |
| Discharges | 11 | 11 | 0% |
| Service Hours | 830 | 871 | -5% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 81% | 92% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 64% | 90% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 98% | 100% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 4 | 36% | 65% | 54% | -29% ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Social Support | | 124 | 69% | 60% | 81% | 9% |
| ✓ Improved/Maintained Function Score | | 118 | 75% | 65% | 58% | 10% |
| ✓ Stable Living Situation | | 145 | 80% | 80% | 90% | 0% |
| ● Employed | | 34 | 19% | 20% | 20% | -1% |
| Self Help | | 11 | 6% | N/A | 45% | N/A |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 162 | 95% | 90% | 98% | 5% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over  ▼ < 10% Under

Actual | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on 33 Active CSP Programs

**Jail Diversion 309-341**
Bridges Healthcare Inc.
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 151 | 131 | 15% | ▲ |
| Admits | 7 | 4 | 75% | ▲ |
| Discharges | 75 | 2 | 3650% | ▲ |
| Service Hours | 23 | 9 | 166% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | ▬ | 52 | 36% | 90% | 87% | -54% | ▼ |

## Jail Diversion

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Follow-up Service within 48 hours | ▬ | 1 | 50% | 0% | 71% | 50% | ▲ |

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

| ▬ Actual | | Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|---|
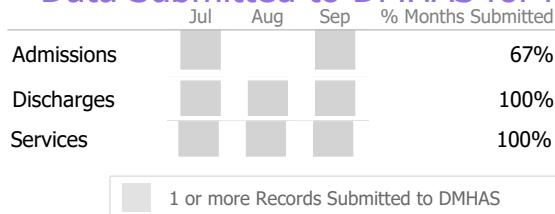
\* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | | ▢ | 67% |
| Discharges | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | 100% |

| ▢ | 1 or more Records Submitted to DMHAS |
|---|---|

**Mental Health Outpatient309210**
Bridges Healthcare Inc.
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 1,018 | 986 | 3% | |
| Admits | 62 | 88 | -30% | ▼ |
| Discharges | 62 | 74 | -16% | ▼ |
| Service Hours | 2,087 | 2,468 | -15% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 91% | 89% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 12% | 50% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 99% | 98% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Treatment Completed Successfully | | 5 | 8% | 50% | 45% | -42% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 Employed | | 182 | 18% | 30% | 28% | -12% | ▼ |
| 🔴 Improved/Maintained Function Score | | 587 | 63% | 75% | 34% | -12% | ▼ |
| 🔴 Social Support | | 348 | 34% | 60% | 55% | -26% | ▼ |
| Self Help | | 31 | 3% | N/A | 21% | N/A | |
| 🔴 Stable Living Situation | | 386 | 38% | 95% | 69% | -57% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 778 | 81% | 90% | 88% | -9% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| 🔴 2 or more Services within 30 days | | 20 | 32% | 75% | 75% | -43% | ▼ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

🟧 Actual     | Goal     ✓ Goal Met     🔴 Below Goal

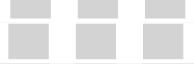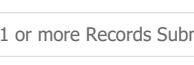* State Avg based on 76 Active Standard Outpatient Programs
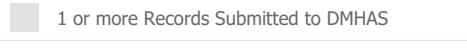
**Senior Outreach and Engagement**
Bridges Healthcare Inc.
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 39 | 28 | 39% | ▲ |
| Admits | 5 | 1 | 400% | ▲ |
| Discharges | 3 | 1 | 200% | ▲ |
| Service Hours | 58 | 43 | 36% | ▲ |

## Service Engagement

| Homeless Outreach | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | at least 1 Service within 180 days | | 4 | 80% | 50% | 91% | 30% | ▲ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    ⬤ Below Goal
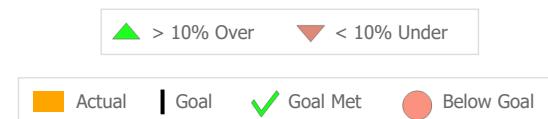
* State Avg based on 53 Active Outreach & Engagement Programs

**Social Rehab 309-280**
Bridges Healthcare Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 82 | 80 | 3% | |
| Admits | 1 | 1 | 0% | |
| Discharges | - | - | | |
| Service Hours | - | 83 | -100% | ▼ |
| Social Rehab/PHP/IOP Days | 534 | 740 | -28% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 42 | 52% | 90% | 83% | -38% | ▼ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | ▮ | | 33% |
| Discharges | | | | 0% |
| Services | ▮ | ▮ | ▮ | 100% |

▮ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

**SOR-Mobile MAT**
Bridges Healthcare Inc.
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 26 | 23 | 13% | ▲ |
| Admits | 11 | 9 | 22% | ▲ |
| Discharges | 3 | 6 | -50% | ▼ |
| Service Hours | 29 | 13 | 121% | ▲ |

## Data Submission Quality

| Data Entry | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 90% | 96% |
| Valid TEDS Data | | 79% | 74% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 0% | 79% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 100% | 99% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Treatment Completed Successfully | | 0 | 0% | 50% | 43% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| Social Support | | 16 | 62% | N/A | 77% | N/A | |
| ● Abstinence/Reduced Drug Use | | 13 | 50% | 55% | 67% | -5% | |
| ● Employed | | 9 | 35% | 50% | 42% | -15% | ▼ |
| ● Not Arrested | | 15 | 58% | 75% | 86% | -17% | ▼ |
| ● Stable Living Situation | | 17 | 65% | 95% | 83% | -30% | ▼ |
| ● Self Help | | 5 | 19% | 60% | 50% | -41% | ▼ |
| ● Improved/Maintained Function Score | | 0 | 0% | 75% | 28% | -75% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 7 | 47% | 90% | 85% | -43% | ▼ |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS
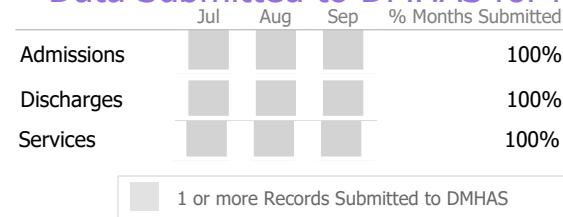
▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 21 Active Buprenorphine Maintenance Programs

**Vocational Services**
Bridges Healthcare Inc.
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 38 | 43 | -12% | ▼ |
| Admits | 4 | 8 | -50% | ▼ |
| Discharges | 3 | 8 | -63% | ▼ |
| Service Hours | 194 | 220 | -12% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Employed | | 11 | 29% | 35% | 42% | -6% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 33 | 97% | 90% | 98% | 7% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 69% | 91% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 59% | 96% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 67% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS
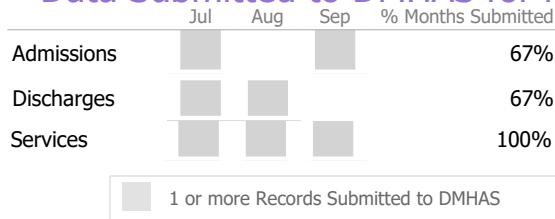
▲ > 10% Over     ▼ < 10% Under

■ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 36 Active Employment Services Programs

**YAS 309-220**
Bridges Healthcare Inc.
Mental Health - ICS - Intensive Community Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 30 | 32 | -6% | |
| Admits | 3 | 2 | 50% | ▲ |
| Discharges | - | 7 | -100% | ▼ |
| Service Hours | 1,091 | 961 | 14% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 99% | 88% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 78% | 86% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid MH/SU Diagnosis | | 97% | 99% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 47% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 28 | 93% | 60% | 91% | 33% | ▲ |
| ✓ Social Support | | 27 | 90% | 60% | 82% | 30% | ▲ |
| ✓ Employed | | 17 | 57% | 30% | 34% | 27% | ▲ |
| ✓ Improved/Maintained Function Score | | 20 | 87% | 75% | 49% | 12% | ▲ |
| Self Help | | 4 | 13% | N/A | 73% | N/A | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 24 | 89% | 90% | 98% | -1% |

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 67% |
| Discharges | | | | 0% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on 19 Active Intensive Community Services Programs

**YAS Supervised Apt**
Bridges Healthcare Inc.
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2025 - September 2025  (Data as of Dec 17, 2025)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 4 | 4 | 0% |
| Admits | 1 | - | |
| Discharges | - | - | |
| Service Hours | 206 | 289 | -29% ▼ |
| Bed Days | 358 | 368 | -3% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 90% | 86% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | 33% | 95% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 60% | 60% | N/A |

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 83% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✅ Social Support | | 3 | 75% | 60% | 86% | 15% ▲ |
| 🔴 Stable Living Situation | | 3 | 75% | 95% | 95% | -20% ▼ |
| 🔴 Employed | | 0 | 0% | 25% | 16% | -25% ▼ |
| Self Help | | 1 | 25% | N/A | 58% | N/A |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ✅ Avg Utilization Rate | | 4 | 506 days | 1.0 | 97% | 90% | 91% | 7% |

| | < 90% | | 90-110% | | >110% |
|---|---|---|---|---|---|

## Data Submitted to DMHAS for Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| Discharges | | | | 0% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

| | Actual | | Goal | ✅ Goal Met | 🔴 Below Goal |
|---|---|---|---|---|---|

* State Avg based on 63 Active Supervised Apartments Programs