## Operation Hope of Fairfield Inc.

Fairfield, C
Provider Quality Dashboard
Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)
Mrovider Activity

A > $10 \%$ Over 1 Yr Ago $\quad>10 \%$ Under 1Yr Ago
Clients by Level of Care
Program Type
Level of Care Type \# \%

## Mental Health

Case Management
Community Support

Consumer Satisfaction Survey (Based on 41 FY15 Surveys)

| Question Domain | Satisfied \% vs Goal\% | Satisfied \% | Goal \% | State Avg |
| :---: | :---: | :---: | :---: | :---: |
| $\checkmark$ Participation in Treatment |  | 100\% | 80\% | 92\% |
| $\checkmark$ Overall |  | 100\% | 80\% | 91\% |
| $\checkmark$ Quality and Appropriateness |  | 98\% | 80\% | 93\% |
| $\checkmark$ General Satisfaction |  | 98\% | 80\% | 92\% |
| $\checkmark$ Access | - | 95\% | 80\% | 88\% |
| $\checkmark$ Recovery | - | 95\% | 80\% | 79\% |
| $\checkmark$ Respect | , | 95\% | 80\% | 91\% |
| $\checkmark$ Outcome | 1 | 89\% | 80\% | 83\% |
| - Satisfied \% \\| Goal \% | 0-80\% - 80 | $\% \quad \checkmark$ Go | et | er Goal |

Client Demographics

| Gender | $\#$ | $\%$ | State Avg |
| ---: | ---: | ---: | ---: |
| Male | 76 | $54 \%$ | $60 \%$ |
| Female |  | 64 | $46 \%$ |
| Transgender |  |  |  |


| Race | \# | \% | State Avg |  |
| :---: | :---: | :---: | :---: | :---: |
| White/Caucasian | 68 | 49\% | - | 65\% |
| Black/African American | 58 | 41\% | - | 16\% |
| Other | 10 | 7\% |  | 13\% |
| Unknown | 2 | 1\% |  | 3\% |
| Multiple Races | 1 | 1\% |  | 1\% |
| Hawaiian/Other Pacific Islander | 1 | 1\% |  | 0\% |
| Am. Indian/Native Alaskan |  |  |  | 1\% |
| Asian |  |  |  | 1\% |


| Program Activity |  |  |  |  | Recovery |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Measure | Actual | 1 Yr Ago | Variance \% |  | National Recovery Measures (NOMS) | Actual \% vs Goal \% | Actual | Actual \% | Goal \% | State Avg | Actual vs Goal |
| Unique Clients | 12 | 12 | 0\% |  | Stable Living Situation |  | 10 | 83\% | 85\% | 90\% | -2\% |
| Admits | 2 | 3 | -33\% | $\nabla$ | Service Utilization |  |  |  |  |  |  |
| Discharges | 2 | 2 | 0\% |  |  | Actual \% vs Goal \% | Actual | Actual \% | Goal \% | State Avg | Actual vs Goal |
| Service Hours | 598 | 260 | 130\% | - | Clients Receiving Services |  | 10 | 100\% | 90\% | 90\% | 10\% |

## Data Submission Quality

| Data Entry | Actual | State Avg |
| :--- | ---: | ---: |
| Valid NOMS Data | $99 \%$ | $97 \%$ |
| On-Time Periodic |  |  |
| 6 Month Updates | Actual | State Avg |

Data Submitted to DMHAS by Month



* State Avg based on 54 Active Supportive Housing - Development Programs

Program Activity

| Measure | Actual | 1 Yr Ago | Variance $\%$ |  |
| :--- | ---: | ---: | ---: | :--- |
| Unique Clients | 50 | 26 | $92 \%$ | - |
| Admits | 33 | 11 | $200 \%$ | - |
| Discharges | 33 | 9 | $267 \%$ | - |
| Service Hours | 569 | 929 | $-39 \%$ | マ |

Data Submission Quality

| Data Entry | Actual | State Avg |
| :--- | ---: | ---: |
| Valid NOMS Data | $99 \%$ | $97 \%$ |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | $100 \%$ | $89 \%$ |


| Cooccurring |  | Actual | State Avg |
| :--- | :--- | ---: | ---: |
| MH Screen Complete |  | $70 \%$ | $83 \%$ |
| SA Screen Complete |  | $70 \%$ | $81 \%$ |


| Diagnosis | Actual | State Avg |
| :--- | ---: | ---: |
| Valid Axis I Diagnosis | $96 \%$ | $99 \%$ |
| Valid Axis V GAF Score |  | $98 \%$ |

Discharge Outcomes

|  | Actual \% vs Goal \% | Actual | Actual \% | Goal \% | State Avg | Actual vs Goal |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Treatment Completed Successfully |  | 14 | 42\% | 65\% | 69\% | -23\% | $\nabla$ |
| Recovery |  |  |  |  |  |  |  |
| National Recovery Measures (NOMS) | Actual \% vs Goal \% | Actual | Actual \% | Goal \% | State Avg | Actual vs Goal |  |
| Employed |  | 23 | 46\% | 20\% | 12\% | 26\% | - |
| Social Support |  | 42 | 84\% | 60\% | 80\% | 24\% | $\Delta$ |
| Stable Living Situation |  | 42 | 84\% | 80\% | 92\% | 4\% |  |
| Improved/Maintained Axis V GAF Score |  | 32 | 94\% | 95\% | 60\% | -1\% |  |
| Service Utilization |  |  |  |  |  |  |  |
|  | Actual \% vs Goal \% | Actual | Actual \% | Goal \% | State Avg | Actual vs Goal |  |
| Clients Receiving Services |  | 17 | 100\% | 90\% | 98\% | 10\% |  |



[^0]
## Next Steps Jarvis

Operation Hope of Fairfield Inc.

## Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard
Mental Health - Case Management - Supportive Housing - Development Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)


## Data Submission Quality

| Data Entry | Actual | State Avg |
| :--- | ---: | ---: |
| Valid NOMS Data | $100 \%$ | $97 \%$ |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | $100 \%$ | $71 \%$ |




* State Avg based on 54 Active Supportive Housing - Development Programs


## Next Steps SupportiveHsg135551

Operation Hope of Fairfield Inc.
Mental Health - Case Management - Supportive Housing - Scattered Site

# Connecticut Dept of Mental Health and Addiction Services 

Program Quality Dashboard


## Data Submission Quality



Data Submitted to DMHAS by Month


* State Avg based on 71 Active Supportive Housing - Scattered Site Programs

| Program Activity |  |  |  |  | Recovery |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Measure | Actual | 1 Yr Ago | Variance \% |  | National Recovery Measures (NOMS) | Actual \% vs Goal \% | Actual | Actual \% | Goal \% | State Avg | Actual vs Goal |
| Unique Clients | 13 | 12 | 8\% |  | Stable Living Situation |  | 13 | 100\% | 85\% | 90\% | 15\% |
| Admits | 2 | 1 | 100\% |  | Service Utilization |  |  |  |  |  |  |
| Discharges | 5 | 1 | 400\% |  |  | Actual \% vs Goal \% | Actual | Actual \% | Goal \% | State Avg | Actual vs Goal |
| Service Hours | 212 | 187 | 13\% |  | Clients Receiving Services |  | 8 | 100\% | 90\% | 90\% | 10\% |

## Data Submission Quality

| Data Entry |  | Actual | State Avg |
| :--- | ---: | ---: | ---: |
| Valid NOMS Data | $100 \%$ | $97 \%$ |  |
|  |  |  |  |
| On-Time Periodic |  | Actual | State Avg |
| 6 Month Updates | $67 \%$ | $71 \%$ |  |

Data Submitted to DMHAS by Month


* State Avg based on 54 Active Supportive Housing - Development Programs



## Data Submission Quality

| Data Entry | Actual | State Avg |
| :--- | ---: | ---: | ---: |
| Valid NOMS Data | $98 \%$ | $98 \%$ |
|  |  |  |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | $50 \%$ | $80 \%$ |




* State Avg based on 71 Active Supportive Housing - Scattered Site Programs


## Social Innovation Fund

Operation Hope of Fairfield Inc.

## Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard
Mental Health - Case Management - Supportive Housing - Scattered Site Reporting Period: July 2015 - June 2016 (Data as of Sep 12, 2016)

| Program Activity |  |  |  | Recovery |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Measure | Actual | 1 Yr Ago | Variance \% | National Recovery Measures (NOMS) | Actual \% vs Goal \% | Actual | Actual \% | Goal \% | State Avg | Actual vs Goal |
| Unique Clients | 13 |  |  | Stable Living Situation |  | 13 | 100\% | 85\% | 79\% | 15\% |
| Admits | 13 | - |  | Service Utilization |  |  |  |  |  |  |
| Discharges | - | - |  |  | Actual \% vs Goal \% | Actual | Actual \% | Goal \% | State Avg | Actual vs Goal |
| Service Hours | 19 | - |  | Clients Receiving Services |  | 11 | 85\% | 90\% | 95\% | -5\% |

## Data Submission Quality

| Data Entry | Actual | State Avg |  |
| :--- | ---: | ---: | ---: |
| Valid NOMS Data | $100 \%$ | $98 \%$ |  |
|  |  |  |  |
| On-Time Periodic | Actual | State Avg |  |
| 6 Month Updates |  | N/A | $80 \%$ |

## Data Submitted to DMHAS by Month


$\Delta>10 \%$ Over $\quad \nabla<10 \%$ Under
$\square$ Actual $\mid$ Goal Goal Met $\quad$ Below Goal

1 or more Records Submitted to DMHAS


[^0]:    * State Avg based on 44 Active CSP Programs

