Pathways Inc.
Greenwich, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2019 - September 2019   (Data as of Dec 27, 2019)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	76	78	-3%	
	Admits	3	6	-50%	▼
	Discharges	7	4	75%	▲
	Service Hours	1,082	971	11%	▲
	Bed Days	1,432	1,408	2%	
	S.Rehab/PHP/IOP	1,840	1,777	4%	

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	47	43.1%
	Community Support	36	33.0%
	Residential Services	16	14.7%
	Case Management	10	9.2%

Consumer Satisfaction Survey   (Based on 59 FY19 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Access		97%	80%	88%
✓	General Satisfaction		93%	80%	92%
✓	Overall		93%	80%	91%
✓	Respect		91%	80%	91%
✓	Quality and Appropriateness		88%	80%	93%
✓	Participation in Treatment		85%	80%	92%
✓	Outcome		85%	80%	83%
✓	Recovery		80%	80%	79%

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

Client Demographics

Age

Age	#	%	State Avg
18-25	1	1%	9%
26-34	9	12%	22%
35-44	9	12%	21%
45-54	15	20%	20%
55-64	25	33% ▲	20%
65+	17	22% ▲	7%

Gender

Gender	#	%	State Avg
Male	57	75% ▲	59%
Female	19	25% ▼	41%
Transgender			0%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	68	89% ▲	71%
Unknown	6	8%	9%
Hispanic-Other	2	3%	7%
Hispanic-Cuban			0%
Hispanic-Mexican			1%
Hisp-Puerto Rican		▼	12%

Race

Race	#	%	State Avg
White/Caucasian	65	86% ▲	64%
Black/African American	6	8%	16%
Unknown	2	3%	5%
Asian	1	1%	1%
Multiple Races	1	1%	1%
Other	1	1% ▼	13%
Am. Indian/Native Alaskan			1%
Hawaiian/Other Pacific Islander			0%

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

175 Milbank Ave.GrpRes 116-240
Pathways Inc.
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	8	9	-11% ▼
Admits	-	2	-100% ▼
Discharges	1	2	-50% ▼
Bed Days	704	690	2%

Data Submission Quality

Data Entry	Actual % vs	Actual	State Avg
✓ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	96%

Co-occurring		Actual	State Avg
MH Screen Complete		N/A	87%
SA Screen Complete		N/A	100%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	99%
✓ Valid Axis V GAF Score		100%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				33%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Treatment Completed Successfully		0	0%	80%	89%	-80% ▼
🔴 No Re-admit within 30 Days of Discharge		0	0%	85%	89%	-85% ▼
Follow-up within 30 Days of Discharge		N/A	N/A	90%	84%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		6	75%	60%	83%	15% ▲
🔴 Stable Living Situation		7	88%	90%	99%	-2%
🔴 Improved/Maintained Axis V GAF Score		3	43%	95%	66%	-52% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		8	1,822 days	1.0	96%	90%	93%	6%

■ < 90%   ■ 90-110%   ■ >110%

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 24 Active Group Home Programs

258 Davis Ave.SupRes 116-250
Pathways Inc.
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	8	0%	
Admits	1	1	0%	
Discharges	-	-		
Service Hours	34	18	86%	▲
Bed Days	728	718	1%	

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	51%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	87%

Co-occurring		Actual	State Avg
MH Screen Complete		0%	26%
SA Screen Complete		0%	26%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	98%
✓ Valid Axis V GAF Score		100%	93%

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	63%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	76%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		8	100%	60%	82%	40%	▲
✓ Stable Living Situation		8	100%	95%	91%	5%	
🔴 Employed		1	12%	25%	10%	-13%	▼
🔴 Improved/Maintained Axis V GAF Score		0	0%	95%	58%	-95%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		8	1,139 days	1.0	99%	90%	92%	9%

■ < 90%	■ 90-110%	■ >110%

Legend:
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

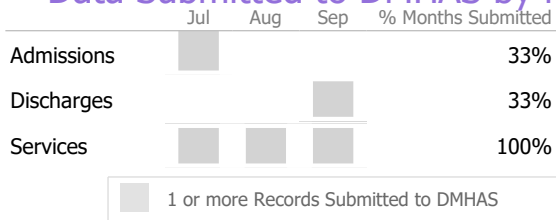**8 Sinawoy Road SR Clbhse 116-280**
Pathways Inc.

Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	47	54	-13%	▼
Admits	1	2	-50%	▼
Discharges	2	-		
Social Rehab/PHP/IOP Days	1,840	1,777	4%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		43	96%	90%	61%	6%

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 33 Active Social Rehabilitation Programs

CSP 116-260
Pathways Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	36	32	13%	▲
Admits	1	1	0%	
Discharges	4	2	100%	▲
Service Hours	605	617	-2%	

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	73%

On-Time Periodic		Actual	State Avg
● 6 Month Updates		81%	85%

Co-occurring		Actual	State Avg
MH Screen Complete		0%	25%
SA Screen Complete		0%	25%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	98%
✓ Valid Axis V GAF Score		100%	96%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions			▪	33%
Discharges		▪	▪	67%
Services	▪	▪	▪	100%

▫ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		1	25%	65%	57%	-40%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		31	86%	60%	82%	26%	▲
✓ Stable Living Situation		34	94%	80%	88%	14%	▲
● Employed		6	17%	20%	13%	-3%	
● Improved/Maintained Axis V GAF Score		4	12%	65%	60%	-53%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		33	100%	90%	98%	10%

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 36 Active CSP Programs

Suppv Housing PILOTS 116-551
Pathways Inc.
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - September 2019 (Data as of Dec 27, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10	10	0%
Admits	-	-	
Discharges	-	-	
Service Hours	443	336	32% ▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Stable Living Situation		10	100%	85%	90%	15% ▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		10	100%	90%	93%	10%

Data Submission Quality

Data Entry	Actual	State Avg
✔ Valid NOMS Data	100%	93%

On-Time Periodic	Actual	State Avg
✔ 6 Month Updates	100%	88%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
Services				100%

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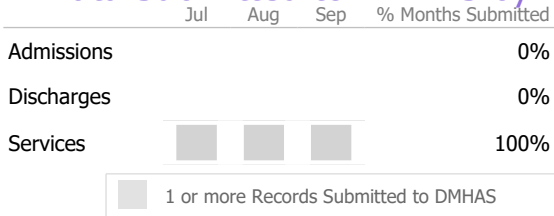
▲ > 10% Over   ▼ < 10% Under

Actual | Goal ✔ Goal Met ● Below Goal

* State Avg based on 98 Active Supportive Housing – Scattered Site Programs