**LifeBridge Community Services (formerly FSW Inc)**
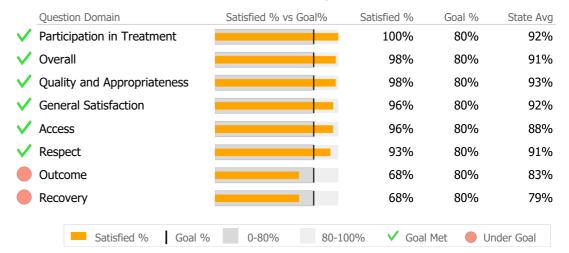Bridgeport, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - September 2020   (Data as of Feb 01, 2021)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|---|
| | Unique Clients | 113 | 149 | -24% ▼ |
| | Admits | 7 | 13 | -46% ▼ |
| | Discharges | 5 | 23 | -78% ▼ |
| | Service Hours | 708 | 1,168 | -39% ▼ |

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

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Community Support | 101 | 89.4% |
| **Addiction** | | | |
| | Outpatient | 12 | 10.6% |

## Consumer Satisfaction Survey   (Based on 47 FY20 Surveys)

| Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|
| ✓ Participation in Treatment | | 100% | 80% | 92% |
| ✓ Overall | | 98% | 80% | 91% |
| ✓ Quality and Appropriateness | | 98% | 80% | 93% |
| ✓ General Satisfaction | | 96% | 80% | 92% |
| ✓ Access | | 96% | 80% | 88% |
| ✓ Respect | | 93% | 80% | 91% |
| ● Outcome | | 68% | 80% | 83% |
| ● Recovery | | 68% | 80% | 79% |

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

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 11 | 10% | 8% |
| 26-34 | 20 | 18% | 21% |
| 35-44 | 24 | 21% | 22% |
| 45-54 | 21 | 19% | 20% |
| 55-64 | 30 | 27% | 20% |
| 65+ | 7 | 6% | 9% |

### Gender

| | # | % | State Avg |
|---|---|---|---|
| Male | 58 | 51% | 58% |
| Female | 55 | 49% | 42% |
| Transgender | | | 0% |

### Ethnicity

| | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 63 | 56% | ▼ | 69% |
| Hisp-Puerto Rican | 28 | 25% | ▲ | 12% |
| Unknown | 15 | 13% | | 11% |
| Hispanic-Other | 7 | 6% | | 8% |
| Hispanic-Cuban | | | | 0% |
| Hispanic-Mexican | | | | 1% |

### Race

| | # | % | | State Avg |
|---|---|---|---|---|
| White/Caucasian | 46 | 41% | ▼ | 63% |
| Black/African American | 39 | 35% | ▲ | 16% |
| Other | 20 | 18% | | 13% |
| Unknown | 6 | 5% | | 5% |
| Asian | 1 | 1% | | 1% |
| Multiple Races | 1 | 1% | | 1% |
| Am. Indian/Native Alaskan | | | | 1% |
| Hawaiian/Other Pacific Islander | | | | 0% |

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

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

**370 Beach Road OP -100210**
LifeBridge Community Services (formerly FSW Inc)
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - September 2020  (Data as of Feb 01, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 12 | 29 | -59% | ▼ |
| Admits | 1 | 5 | -80% | ▼ |
| Discharges | 2 | 12 | -83% | ▼ |
| Service Hours | 46 | 59 | -21% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 100% | 87% |
| ✔ | Valid TEDS Data | 100% | 87% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ | 6 Month Updates | 88% | 17% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✔ | MH Screen Complete | 100% | 91% |
| ✔ | SA Screen Complete | 100% | 96% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid Axis I Diagnosis | 100% | 99% |
| ✔ | Valid Axis V GAF Score | 100% | 96% |

## Data Submitted to DMHAS by Month

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

▫ 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% | 50% | 46% | -50% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Employed | | 10 | 83% | 50% | 26% | 33% | ▲ |
| ✔ | Not Arrested | | 11 | 92% | 75% | 68% | 17% | ▲ |
| ✔ | Stable Living Situation | | 12 | 100% | 95% | 66% | 5% | |
| ✔ | Abstinence/Reduced Drug Use | | 7 | 58% | 55% | 41% | 3% | |
| ● | Self Help | | 1 | 8% | 60% | 17% | -52% | ▼ |
| ● | Improved/Maintained Axis V GAF Score | | 2 | 20% | 75% | 34% | -55% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 10 | 100% | 90% | 45% | 10% | |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | 2 or more Services within 30 days | | 1 | 100% | 75% | 58% | 25% | ▲ |

▲ > 10% Over    ▼ < 10% Under

▬ Actual    | Goal    ✔ Goal Met    ● Below Goal

* State Avg based on 105 Active Standard Outpatient Programs

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

**Community Supp Prog107280**
LifeBridge Community Services (formerly FSW Inc)
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - September 2020  (Data as of Feb 01, 2021)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 101 | 120 | -16% | ▼ |
| Admits | 6 | 8 | -25% | ▼ |
| Discharges | 3 | 11 | -73% | ▼ |
| Service Hours | 662 | 1,109 | -40% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 95% | 80% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 95% | 85% |

| Co-occurring | | Actual | State Avg |
|---|---|---|---|
| ✓ | MH Screen Complete | 100% | 78% |
| ✓ | SA Screen Complete | 100% | 61% |

| 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 | | | | 100% |
| 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 | 33% | 65% | 61% | -32% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 97 | 96% | 80% | 89% | 16% | ▲ |
| ✓ Social Support | | 71 | 70% | 60% | 81% | 10% | |
| ✓ Employed | | 20 | 20% | 20% | 13% | 0% | |
| ● Improved/Maintained Axis V GAF Score | | 41 | 44% | 65% | 56% | -21% | ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 95 | 95% | 90% | 94% | 5% |

▲ > 10% Over   ▼ < 10% Under

☐ Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 36 Active CSP Programs

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