Pacific House (formerly Shelter for the Homeless)
Stamford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - September 2021   (Data as of Feb 01, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	40	37	8%	
	Admits	5	3	67%	▲
	Discharges	5	6	-17%	▼
	Service Hours	115	85	36%	▲
	Bed Days	560	419	34%	▲

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Case Management	31	77.5%
	Residential Services	9	22.5%

Client Demographics

Age

	#	%		State Avg
18-25	1	3%		9%
26-34	8	20%		20%
35-44	3	8%	▼	23%
45-54	7	18%		19%
55-64	17	43%	▲	20%
65+	4	10%		9%

Gender

	#	%		State Avg
Male	31	78%	▲	58%
Female	9	23%	▼	42%
Transgender				0%

Ethnicity

	#	%		State Avg
Non-Hispanic	28	70%		69%
Hispanic-Other	8	20%	▲	8%
Hisp-Puerto Rican	4	10%		12%
Hispanic-Cuban				0%
Hispanic-Mexican				0%
Unknown			▼	11%

Race

	#	%		State Avg
Black/African American	18	45%	▲	17%
White/Caucasian	17	43%	▼	63%
Multiple Races	4	10%		1%
Other	1	3%	▼	13%
Am. Indian/Native Alaskan				1%
Asian				1%
Hawaiian/Other Pacific Islander				0%
Unknown				5%

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

Survey Data Not Available

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

ODFC 0285
Pacific House (formerly Shelter for the Homeless)
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	31	29	7%	
Admits	2	1	100%	▲
Discharges	2	2	0%	
Service Hours	56	46	23%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Stable Living Situation	[bar]	26	81%	85%	88%	-4%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services	[bar]	29	97%	90%	90%	7%

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data	[bar]	98%	96%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates	[bar]	78%	81%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions		▢		33%
Discharges	▢			33%
Services		▢		33%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

▮ Actual	❘ Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 108 Active Supportive Housing – Scattered Site Programs

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

ODFC 0324
Pacific House (formerly Shelter for the Homeless)
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Stable Living Situation		N/A	N/A	85%	88%	-85% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		N/A	N/A	90%	90%	N/A ▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	96%

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	81%

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 108 Active Supportive Housing – Scattered Site Programs

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

Parkview South
Pacific House (formerly Shelter for the Homeless)
Mental Health - Residential Services - Transitional

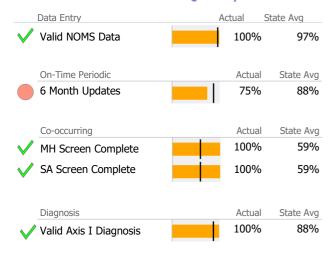Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - September 2021 (Data as of Feb 01, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	8	13%	▲
Admits	3	2	50%	▲
Discharges	3	4	-25%	▼
Service Hours	59	39	51%	▲
Bed Days	560	419	34%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		1	33%	95%	82%	-62%	▼
✅	No Re-admit within 30 Days of Discharge		3	100%	85%	95%	15%	▲
✅	Follow-up within 30 Days of Discharge		1	100%	90%	78%	10%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✅	Clients Receiving Services		6	100%	90%	68%	10%

Data Submission Quality

	Data Entry		Actual	State Avg
✅	Valid NOMS Data		100%	97%

	On-Time Periodic		Actual	State Avg
🔴	6 Month Updates		75%	88%

	Co-occurring		Actual	State Avg
✅	MH Screen Complete		100%	59%
✅	SA Screen Complete		100%	59%

	Diagnosis		Actual	State Avg
✅	Valid Axis I Diagnosis		100%	88%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		8	251 days	0.9	76%	90%	71%	-14%	▼

☐ < 90%   ☐ 90-110%   🟥 >110%

Data Submitted to DMHAS by Month

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

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✅ Goal Met   🔴 Below Goal

* State Avg based on 7 Active Transitional Programs

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