

Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

### Provider Activity

| Monthly Trend | Measure        | Actual | 1 Yr Ago | Variance % |   |
|---------------|----------------|--------|----------|------------|---|
| ↘             | Unique Clients | 8      | 7        | 14%        | ▲ |
|               | Admits         |        |          |            |   |
| ↗             | Discharges     | 1      |          |            |   |
|               | Service Hours  | 42     | 27       | 55%        | ▲ |

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

### Consumer Satisfaction Survey (Based on 4 FY22 Surveys)

| Question Domain               | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|-------------------------------|----------------------|-------------|--------|-----------|
| ✓ Quality and Appropriateness |                      | 100%        | 80%    | 93%       |
| ✓ Participation in Treatment  |                      | 100%        | 80%    | 92%       |
| ✓ General Satisfaction        |                      | 100%        | 80%    | 92%       |
| ✓ Overall                     |                      | 100%        | 80%    | 91%       |
| ● Access                      |                      | 75%         | 80%    | 88%       |

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

### Clients by Level of Care

| Program Type         | Level of Care Type | # | %      |
|----------------------|--------------------|---|--------|
| <b>Mental Health</b> | Case Management    | 8 | 100.0% |

### Client Demographics

| Age   | # | %   | State Avg |
|-------|---|-----|-----------|
| 18-25 |   |     | 10%       |
| 26-34 | 1 | 13% | 21%       |
| 35-44 |   |     | ▼ 23%     |
| 45-54 | 2 | 25% | 19%       |
| 55-64 | 2 | 25% | 20%       |
| 65+   | 3 | 38% | ▲ 8%      |

| Gender      | # | %   | State Avg |
|-------------|---|-----|-----------|
| Male        | 4 | 57% | 58%       |
| Female      | 3 | 43% | 42%       |
| Transgender |   |     | 0%        |

| Ethnicity         | # | %    | State Avg |
|-------------------|---|------|-----------|
| Non-Hispanic      | 8 | 100% | ▲ 69%     |
| Hispanic-Cuban    |   |      | 0%        |
| Hispanic-Mexican  |   |      | 1%        |
| Hispanic-Other    |   |      | 8%        |
| Hisp-Puerto Rican |   |      | ▼ 11%     |
| Unknown           |   |      | ▼ 12%     |

| Race                            | # | %   | State Avg |
|---------------------------------|---|-----|-----------|
| White/Caucasian                 | 5 | 63% | 62%       |
| Black/African American          | 2 | 25% | 17%       |
| Am. Indian/Native Alaskan       | 1 | 13% | ▲ 1%      |
| Asian                           |   |     | 1%        |
| Multiple Races                  |   |     | 1%        |
| Hawaiian/Other Pacific Islander |   |     | 0%        |
| Other                           |   |     | ▼ 12%     |
| Unknown                         |   |     | 6%        |

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

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

## BOS 193 Units New London

Alliance For Living

Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

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### Program Activity

| Measure        | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 8      | 7        | 14% ▲      |
| Admits         | -      | -        |            |
| Discharges     | 1      | -        |            |
| Service Hours  | 42     | 27       | 55% ▲      |

### Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Stable Living Situation         |                    | 8      | 100%     | 85%    | 88%       | 15% ▲          |

### Service Utilization

|                              | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services |                    | 7      | 100%     | 90%    | 91%       | 10%            |

### Data Submission Quality

| Data Entry        | Actual | State Avg |
|-------------------|--------|-----------|
| Valid NOMS Data   |        | 97%       |
| On-Time Periodic  | Actual | State Avg |
| ✓ 6 Month Updates |        | 84%       |

### Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

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

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