

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	4	5	-20%	▼
	Admits		1	-100%	▼
	Discharges	1	1	0%	
	Service Hours	23	45	-49%	▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health	Case Management	4	100.0%

Client Demographics

Age	#	%	State Avg
18-25			8%
26-34			19%
35-44	1	25%	24%
45-54	1	25%	18%
55-64	1	25%	19%
65+	1	25%	10%

Ethnicity	#	%	State Avg
Non-Hispanic	4	100%	65%
Hispanic-Cuban			0%
Hispanic-Mexican			1%
Hispanic-Other			10%
Hisp-Puerto Rican			10%
Unknown			14%

Gender	#	%	State Avg
Male	3	75%	59%
Female	1	25%	41%
Transgender			0%

Race	#	%	State Avg
Black/African American	2	50%	17%
White/Caucasian	2	50%	60%
Am. Indian/Native Alaskan			1%
Asian			1%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%
Other			12%
Unknown			8%

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

Survey Data Not Available

Next Steps SupportiveHsg414551

ACCESS Agency

Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services

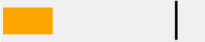
Program Quality Dashboard

Reporting Period: July 2023 - December 2023 (Data as of Mar 26, 2024)

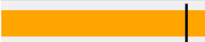
Program Activity

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Admits	-	1	-100% ▼
Discharges	1	1	0%
Service Hours	23	45	-49% ▼



Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		1	25%	85%	86%	-60% ▼

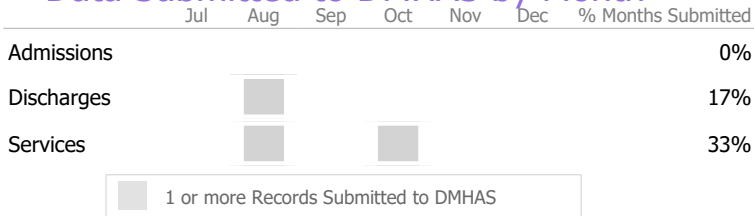
Service Utilization



National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		3	100%	90%	91%	10%

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data		98%
On-Time Periodic	Actual	State Avg
6 Month Updates		86%

Data Submitted to DMHAS by Month



 > 10% Over  < 10% Under

 Actual  Goal  Goal Met  Below Goal

* State Avg based on 118 Active Supportive Housing – Scattered Site Programs

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