Goodwill of Western and Northern CT Inc.

Bridgeport, CT

Connecticut Dept of Mental Health and Addiction Services Provider Quality Dashboard

Reporting Period: July 2018 - December 2018 (Data as of Mar 20, 2019)

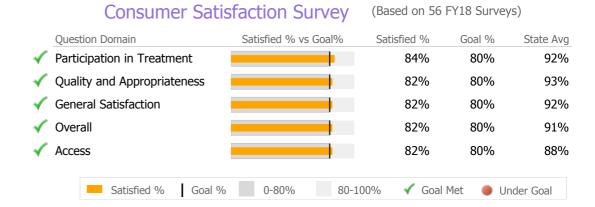
Provider Activity





Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---------------|----------------------|----|-------|
| Mental Healtl | h | | |
| | Employment Services | 66 | 82.5% |
| | Residential Services | 14 | 17.5% |



Client Demographics

| Age | # | % | State Avg | Gender | # | % | State Avg | | |
|-------------------|----|-----|-----------|---------------------------------|----|-----|--------------|--|--|
| 18-25 | 2 | 3% | 11% | Male | 51 | 64% | 59% | | |
| 26-34 | 15 | 19% | 23% | Female 📒 | 29 | 36% | 41% | | |
| 35-44 | 23 | 29% | 21% | Transgender | | | 0% | | |
| 45-54 | 19 | 24% | 21% | | | | | | |
| 55-64 | 16 | 20% | 18% | | | | | | |
| 65+ | 5 | 6% | 6% | Race | # | % | State Avg | | |
| | | | | Black/African American | 37 | 46% | 16% | | |
| Ethnicity | # | % | State Avg | White/Caucasian 📙 📗 | 22 | 28% | ▼ 63% | | |
| Non-Hispanic | 61 | 76% | 71% | Other 📙 | 17 | 21% | 13% | | |
| Hisp-Puerto Rican | 9 | 11% | 13% | Asian | 1 | 1% | 1% | | |
| Hispanic-Other | 7 | 9% | 7% | Multiple Races | 1 | 1% | 1% | | |
| Unknown | 3 | 4% | 9% | Hawaiian/Other Pacific Islander | 1 | 1% | 0% | | |
| , I | | 170 | | Unknown | 1 | 1% | 5% | | |
| Hispanic-Cuban | | | 0% | Am. Indian/Native Alaskan | | | 1% | | |
| Hispanic-Mexican | | | 1% | , | | | | | |
| Unique Clients | | | | | | | | | |

165 Ocean Tr.SupvApts 109-250

Goodwill of Western and Northern CT Inc.

Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - December 2018 (Data as of Mar 20, 2019)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 4 | 5 | -20% | • |
| Admits | - | - | | |
| Discharges | - | 1 | -100% | • |
| Bed Days | 736 | 768 | -4% | |

Data Submission Quality

| Data Entry | Actual | State Avg |
|--------------------------|------------|------------|
| Valid NOMS Data | N/A | 99% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 81% |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | N/A | 89% |
| SA Screen Complete | N/A | 88% |
| Discussion | A adv. a l | Chaha Assa |
| Diagnosis | Actual | State Avg |
| √ Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 50% | 94% |

Discharge Outcomes

< 90%

90-110%

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---------------------------------------|--------------------|----------|----------|--------|-----------|----------------|
| | Treatment Completed Successfully | | N/A | N/A | 60% | 66% | N/A |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| | Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 74% | N/A |
| | Recovery | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| 1 | Stable Living Situation | | 4 | 100% | 95% | 95% | 5% |
| | Social Support | | 2 | 50% | 60% | 83% | -10% |
| | Employed | 1 | 0 | 0% | 25% | 12% | -25% |
| | Improved/Maintained Axis V GAF Score | · | 0 | 0% | 95% | 63% | -95% |
| | Bed Utilization | | | | | | |
| | 12 Months Trend | Beds Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
| | Avg Utilization Rate | 4 2,019 days | 0.5 | 100% | 90% | 95% | 10% |
| | | | | | | | |

Data Submitted to DMHAS by Month Jul Aug Sep Oct Nov Dec % Months Submitted

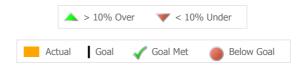
Admissions

Discharges

Oct Nov Dec % Months Submitted

0%

0%



^{*} State Avg based on 62 Active Supervised Apartments Programs

>110%

ABI/TBI Manchester House109165

Goodwill of Western and Northern CT Inc.

Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - December 2018 (Data as of Mar 20, 2019)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 2 | 2 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Bed Davs | 368 | 368 | 0% |

Data Submission Quality

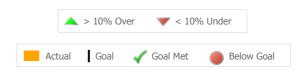
| Data Entry | Actual | State Avg |
|--------------------------|--------|-----------|
| Valid NOMS Data | N/A | 99% |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 88% |
| | | |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | N/A | 87% |
| SA Screen Complete | N/A | 94% |
| | | |
| Diagnosis | Actual | State Avg |
| √ Valid Axis I Diagnosis | 100% | 100% |
| ✓ Valid Axis V GAF Score | 100% | 100% |

Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|----------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 80% | 85% | N/A |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 90% | N/A |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 88% | N/A |
| Recovery | | | | | | |
| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Stable Living Situation | | 2 | 100% | 90% | 99% | 10% |
| Social Support | | 1 | 50% | 60% | 81% | -10% |
| Improved/Maintained Axis V GAF Score | · | 0 | 0% | 95% | 69% | -95% |
| Bed Utilization | | | | | | |
| 12 Months Trend | Beds Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
| Avg Utilization Rate | 2 3,088 days | 0.5 | 100% | 90% | 96% | 10% |
| < 90% 90-110% | >110% | | | | | |



Data Submitted to DMHAS by Month
Jul Aug Sep Oct Nov Dec % Months Submitted Admissions Discharges 0% 1 or more Records Submitted to DMHAS



^{*} State Avg based on 24 Active Group Home Programs

Cheshire House-Marion Rd109165

Goodwill of Western and Northern CT Inc.

Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - December 2018 (Data as of Mar 20, 2019)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 7 | 6 | 17% | • |
| Admits | 1 | 1 | 0% | |
| Discharges | - | 1 | -100% | • |
| Bed Days | 1,133 | 921 | 23% | • |

Data Submission Quality

| Data Entry | Actual | State Avg |
|--------------------------|--------|-----------|
| Valid NOMS Data | N/A | 99% |
| | | |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 88% |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | N/A | 87% |
| SA Screen Complete | N/A | 94% |
| | - | |
| Diagnosis | Actual | State Avg |
| √ Valid Axis I Diagnosis | 100% | 100% |
| Valid Axis V GAF Score | 86% | 100% |

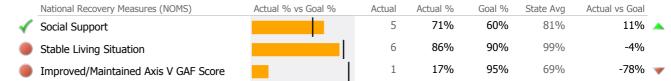
Data Submitted to DMHAS by Month

| Date | d D | ubiii | IILLEU | ιO | חויוט | 1A5 | | IOHUH | |
|------------|-----|---------|------------|--------|-----------|-------|-----|--------------|---------|
| | | Jul | Aug | Sep | Oct | Nov | Dec | % Months Sul | bmitted |
| Admissions | 5 | | | | | | | | 17% |
| Discharges | 6 | | | | | | | | 0% |
| | | 1 or mo | ore Record | ls Sub | mitted to | DMHAS | 5 | | |

Discharge Outcomes

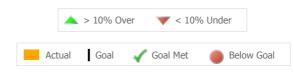
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|--------------------|--------|----------|--------|-----------|----------------|
| Treatment Completed Successfully | | N/A | N/A | 80% | 85% | N/A |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 90% | N/A |
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 88% | N/A |

Recovery



Bed Utilization





^{*} State Avg based on 24 Active Group Home Programs

Goodwill Employment Services 109-271

Goodwill of Western and Northern CT Inc.

Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - December 2018 (Data as of Mar 20, 2019)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|----------------|--------|----------|------------|---|
| Unique Clients | 66 | 63 | 5% | |
| Admits | 14 | 8 | 75% 🔺 | |
| Discharges | 12 | 18 | -33% | 7 |
| Service Hours | 2,775 | 2,664 | 4% | |

Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|--------------|-----------------------------------|--------------------|--------|----------|--------|-----------|----------------|
| \checkmark | Employed | | 29 | 44% | 35% | 45% | 9% |
| | Service Utilization | | | | | | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
| 1 | Clients Receiving Services | | 55 | 100% | 90% | 95% | 10% |

Data Submission Quality

| Data Entry | Actua | I State Avg |
|-------------------|-------|--------------|
| Valid NOMS Data | 92% | 97% |
| On-Time Periodic | Actua | al State Avg |
| √ 6 Month Updates | 100% | 6 92% |

Data Submitted to DMHAS by Month

| | Jul | Aug | Sep C | ct Nov | Dec | % Months Submitted |
|------------|--------|------------|-------------|-----------|-----|--------------------|
| Admissions | | | | | | 100% |
| Discharges | | | | | | 100% |
| Services | | | | | | 100% |
| | 1 or m | ore Record | ds Submitte | d to DMHA | AS | |



^{*} State Avg based on 41 Active Employment Services Programs

The Wellness Program

Goodwill of Western and Northern CT Inc.

Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2018 - December 2018 (Data as of Mar 20, 2019)

Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|----------------|--------|----------|------------|
| Unique Clients | 1 | 1 | 0% |
| Admits | - | - | |
| Discharges | - | - | |
| Bed Davs | 184 | 184 | 0% |

Data Submission Quality

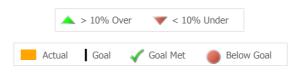
| Data Entry | Actual | State Avg |
|------------------------|--------|-----------|
| Valid NOMS Data | N/A | 99% |
| | | |
| On-Time Periodic | Actual | State Avg |
| 6 Month Updates | 0% | 81% |
| | | |
| Cooccurring | Actual | State Avg |
| MH Screen Complete | N/A | 89% |
| SA Screen Complete | N/A | 88% |
| | | |
| Diagnosis | Actual | State Avg |
| Valid Axis I Diagnosis | 100% | 97% |
| Valid Axis V GAF Score | 100% | 94% |

Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|----------|---------------------------------------|--------------------|----------|----------|--------|-----------|----------------|---|
| | Treatment Completed Successfully | | N/A | N/A | 60% | 66% | N/A | |
| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| | Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 74% | N/A | |
| | Recovery | | | | | | | |
| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
| 1 | Social Support | | 1 | 100% | 60% | 83% | 40% | _ |
| √ | Stable Living Situation | • | 1 | 100% | 95% | 95% | 5% | |
| | Employed | | 0 | 0% | 25% | 12% | -25% | 7 |
| | Improved/Maintained Axis V GAF Score | | 0 | 0% | 95% | 63% | -95% | - |
| | Bed Utilization | | | | | | | |
| | 12 Months Trend | Beds Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
| 1 | Avg Utilization Rate | 1 1,644 days | 0.5 | 100% | 90% | 95% | 10% | |
| | < 90% 90-110% | >110% | | | | | | |







^{*} State Avg based on 62 Active Supervised Apartments Programs