Pathways Inc.
Greenwich, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	67	67	0%
	Admits	4		
	Discharges	3	7	-57% ▼
	Service Hours	1,159	1,134	2%
	Bed Days	1,084	1,204	-10%
	S.Rehab/PHP/IOP	2,033	2,161	-6%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	48	48.0%
	Residential Services	41	41.0%
	Case Management	11	11.0%

Consumer Satisfaction Survey (Based on 91 FY15 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✔ Access		97%	80%	88%
✔ Quality and Appropriateness		97%	80%	93%
✔ General Satisfaction		96%	80%	92%
✔ Participation in Treatment		94%	80%	92%
✔ Respect		94%	80%	91%
✔ Overall		93%	80%	91%
✔ Outcome		88%	80%	83%
✔ Recovery		82%	80%	79%

▮ Satisfied %		Goal %	0-80%	80-100%	✔ Goal Met	● Under Goal

Client Demographics

Age

Age	#	%	State Avg
18-25			13% ▼
26-34	5	7%	22% ▼
35-44	12	18%	19%
45-54	15	22%	24%
55-64	23	34%	17% ▲
65+	12	18%	5% ▲

Gender

Gender	#	%	State Avg
Male	44	66%	58%
Female	23	34%	42%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	64	96%	75% ▲
Hispanic-Other	3	4%	6%
Hispanic-Cuban			0%
Hispanic-Mexican			1%
Hisp-Puerto Rican			12% ▼
Unknown			5%

Race

Race	#	%	State Avg
White/Caucasian	56	84% ▲	66%
Black/African American	6	9%	16%
Other	3	4%	13%
Asian	1	1%	1%
Unknown	1	1%	3%
Am. Indian/Native Alaskan			0%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%

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

175 Milbank Ave.GrpRes 116-240
Pathways Inc.
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	8	8	0%
Admits	-	-	
Discharges	1	-	
Bed Days	716	736	-3%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		0	0%	80%	74%	-80%	▼
✓	No Re-admit within 30 Days of Discharge		1	100%	85%	73%	15%	▲
	Follow-up within 30 Days of Discharge		N/A	N/A	90%	71%	N/A	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
	6 Month Updates	83%	93%

Cooccurring		Actual	State Avg
	MH Screen Complete	0%	97%
	SA Screen Complete	0%	97%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	98%
✓	Valid Axis V GAF Score	100%	94%

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Stable Living Situation		8	100%	90%	98%	10%	
✓	Social Support		5	62%	60%	75%	2%	
🔴	Improved/Maintained Axis V GAF Score		5	71%	95%	64%	-24%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		8	2,911 days	1.0	97%	90%	97%	7%

▢ < 90%	▢ 90-110%	▢ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				33%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

▢ Actual		Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 24 Active Group Home Programs

258 Davis Ave.SupRes 116-250
Pathways Inc.
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	6	-33%	▼
Admits	-	-		
Discharges	-	2	-100%	▼
Bed Days	368	468	-21%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	97%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	76%
SA Screen Complete		N/A	76%

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				0%
Discharges				0%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	63%	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%	81%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		4	100%	60%	86%	40%	▲
✔ Stable Living Situation		4	100%	95%	97%	5%	
✔ Employed		1	25%	25%	8%	0%	
🔴 Improved/Maintained Axis V GAF Score		0	0%	95%	66%	-95%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Avg Utilization Rate		8	1,135 days	2.0	50%	90%	91%	-40%	▼

< 90%	90-110%	>110%

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 72 Active Supervised Apartments Programs

50 Brookside Dr.ResSup 116-260
Pathways Inc.
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	29	29	0%
Admits	1	-	
Discharges	1	-	
Service Hours	687	804	-15% ▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		96%	91%

Cooccurring		Actual	State Avg
MH Screen Complete		0%	90%
SA Screen Complete		0%	87%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	97%
✔ Valid Axis V GAF Score		100%	96%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions		■		33%
Discharges		■		33%
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		0	0%	50%	72%	-50% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Social Support		26	90%	60%	87%	30% ▲
✔ Stable Living Situation		29	100%	85%	92%	15% ▲
🔴 Employed		7	24%	25%	13%	-1%
🔴 Improved/Maintained Axis V GAF Score		5	19%	95%	70%	-76% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		28	100%	90%	95%	10%

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal ✔ Goal Met 🔴 Below Goal

* State Avg based on 51 Active Residential Support Programs

8 Sinawoy Road SR Clbhse 116-280
Pathways Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	48	52	-8%	
Admits	2	-		
Discharges	-	5	-100%	▼
Service Hours	-	-		
Social Rehab/PHP/IOP Days	2,033	2,161	-6%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		44	92%	90%	57%	2%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions		▢	▢	67%
Discharges				0%
Services	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS
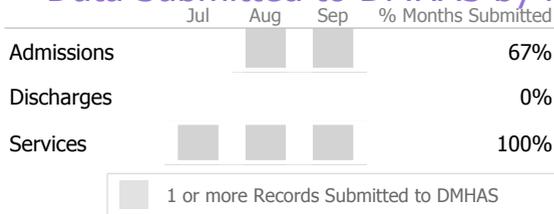
▲ > 10% Over   ▼ < 10% Under

▢ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 39 Active Social Rehabilitation Programs

Suppv Housing PILOTS 116-551
Pathways Inc.
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2015 - September 2015 (Data as of Jan 05, 2016)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	11	9	22%	▲
Admits	1	-		
Discharges	1	-		
Service Hours	473	330	43%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Stable Living Situation		11	100%	85%	82%	15%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		10	100%	90%	86%	10%

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	80%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions			▪	33%
Discharges			▪	33%
Services	▪	▪	▪	100%

▪ 1 or more Records Submitted to DMHAS
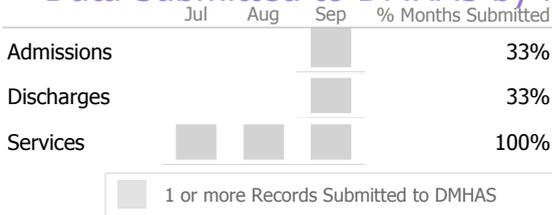
▲ > 10% Over   ▼ < 10% Under

▪ Actual		Goal	✔ Goal Met	● Below Goal

* State Avg based on 70 Active Supportive Housing – Scattered Site Programs