Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	142	157	-10%
	Admits	5	8	-38% ▼
	Discharges	9	7	29% ▲
	Service Hours	367	861	-57% ▼
	Bed Days	3,714	4,467	-17% ▼
	S.Rehab/PHP/IOP	179	3,338	-95% ▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	111	60.0%
	Community Support	29	15.7%
	Residential Services	23	12.4%
	Case Management	22	11.9%

Consumer Satisfaction Survey

(Based on 116 FY20 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Overall		100%	80%	91%
✓ Access		100%	80%	88%
✓ General Satisfaction		99%	80%	92%
✓ Quality and Appropriateness		99%	80%	93%
✓ Participation in Treatment		97%	80%	92%
✓ Outcome		97%	80%	83%
✓ Respect		95%	80%	91%
✓ Recovery		87%	80%	79%

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

Client Demographics

Age	#	%	State Avg
18-25	3	2%	9%
26-34	12	8%	▼ 21%
35-44	22	15%	22%
45-54	31	22%	19%
55-64	50	35%	▲ 20%
65+	24	17%	8%

Gender	#	%	State Avg
Male	72	51%	58%
Female	70	49%	42%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	123	87%	▲ 70%
Hisp-Puerto Rican	9	6%	12%
Hispanic-Other	7	5%	8%
Unknown	3	2%	10%
Hispanic-Cuban			0%
Hispanic-Mexican			0%

Race	#	%	State Avg
White/Caucasian	84	59%	62%
Black/African American	45	32%	▲ 17%
Other	10	7%	13%
Asian	2	1%	1%
Hawaiian/Other Pacific Islander	1	1%	0%
Am. Indian/Native Alaskan			1%
Multiple Races			1%
Unknown			6%

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

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

141 East Ave. Soc.Res 112-280
Keystone House Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	111	122	-9%	
Admits	1	4	-75%	▼
Discharges	-	1	-100%	▼
Service Hours	-	-		
Social Rehab/PHP/IOP Days	179	3,338	-95%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		40	36%	90%	57%	-54%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							17%
Discharges							0%
Services							17%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 34 Active Social Rehabilitation Programs

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

CSP
Keystone House Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	29	30	-3%	
Admits	1	-		
Discharges	5	2	150%	▲
Service Hours	209	619	-66%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	80%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	81%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	80%
✓ SA Screen Complete	100%	61%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	98%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions				■			17%
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		4	80%	65%	59%	15%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		28	97%	60%	82%	37%	▲
✓ Stable Living Situation		29	100%	80%	88%	20%	▲
✓ Employed		10	34%	20%	13%	14%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		24	100%	90%	97%	10%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 36 Active CSP Programs

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

Elmcrest 1 112-241
Keystone House Inc.
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	13	-31%	▼
Admits	2	1	100%	▲
Discharges	4	1	300%	▲
Bed Days	1,228	2,192	-44%	▼

Data Submission Quality

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

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Co-occurring	Actual	State Avg
MH Screen Complete	50%	80%
SA Screen Complete	50%	91%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							33%
Discharges							50%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		4	100%	80%	94%	20%	▲
✓ No Re-admit within 30 Days of Discharge		4	100%	85%	97%	15%	▲
✓ Follow-up within 30 Days of Discharge		4	100%	90%	91%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		9	100%	60%	90%	40%	▲
✓ Stable Living Situation		9	100%	90%	100%	10%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		12	931 days	0.8	56%	90%	90%	-34%	▼

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 24 Active Group Home Programs

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

Genoa 1 112251
Keystone House Inc.
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	5	20%	▲
Admits	-	-		
Discharges	-	-		
Bed Days	1,104	920	20%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	75%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	87%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	84%
SA Screen Complete	N/A	69%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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%	79%	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%	75%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		6	100%	60%	83%	40%	▲
✓ Stable Living Situation		6	100%	95%	93%	5%	
● Employed		1	17%	25%	9%	-8%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	3,359 days	0.5	100%	90%	93%	10%

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 79 Active Supervised Apartments Programs

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

Pilots Sup Hsng 112-551
Keystone House Inc.
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	25	-12%	▼
Admits	-	2	-100%	▼
Discharges	-	2	-100%	▼
Service Hours	158	242	-35%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Stable Living Situation		22	100%	85%	90%	15%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		21	95%	90%	95%	5%

Data Submission Quality

	Data Entry	Actual	State Avg
✓	Valid NOMS Data	100%	96%

	On-Time Periodic	Actual	State Avg
✓	6 Month Updates	100%	88%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
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 101 Active Supportive Housing – Scattered Site Programs

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

St. John's 1 112240
Keystone House Inc.
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	9	-11%	▼
Admits	1	1	0%	
Discharges	-	1	-100%	▼
Bed Days	1,382	1,355	2%	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	95%	99%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	84%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	80%
✓ SA Screen Complete	100%	91%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							17%
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	80%	94%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	97%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	91%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		8	100%	90%	100%	10%
✓ Social Support		5	62%	60%	90%	2%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		8	924 days	0.5	94%	90%	90%	4%

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 24 Active Group Home Programs

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