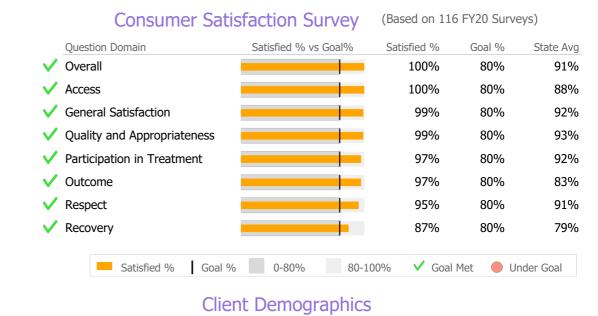
Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Provider Activity 1 Yr Ago Variance % Monthly Trend Measure Actual **Unique Clients** 149 159 -6% 12 12 0% Admits 28 **-61%** ▼ Discharges 11 Service Hours -37% ▼ 745 1,180 **Bed Days** 5,605 6,643 -16% ▼ **-96%** ▼ 179 5,081 S.Rehab/PHP/IOP > 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 57.8% Community Support 29 15.1% Residential Services 14.1% Case Management 25 13.0%



Gender Age # % State Avg % State Avg 2% Male 76 51% 58% 18-25 3 10% Female 73 49% 42% 26-34 13 9% ▼ 22% Transgender 0% 23% 35-44 24 16% 22% 19% 45-54 33 55-64 52 35% 19% **Race** % State Avg 65+ 24 16% 8% White/Caucasian 87 58% 62% **Ethnicity** Black/African American 48 32% 17% State Avg # % Other 10 7% 13% Non-Hispanic 129 87% 69% Asian 2 1% 1% Hisp-Puerto Rican 9 6% 12% Hawaiian/Other Pacific Islander 1% 0% 8% Hispanic-Other 8 5% Unknown 1% 6% Unknown 2% 11% Am. Indian/Native Alaskan 0% Hispanic-Cuban 0% Multiple Races 1% Hispanic-Mexican 0% Unique Clients | State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

141 East Ave. Soc.Res 112-280

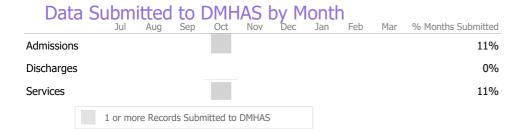
Keystone House Inc.

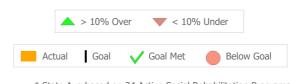
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity Service Utilization State Avg Actual % vs Goal % Actual vs Goal Actual Actual % Goal % Measure Actual 1 Yr Ago Variance % Clients Receiving Services 77 69% 90% 63% -21% **Unique Clients** 111 124 -10% 1 6 Admits -83% 🔻 Discharges 14 -100% Service Hours 195 3 Social Rehab/PHP/IOP 179 5,081 -96%





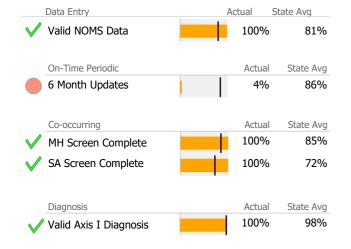
^{*} State Avg based on 34 Active Social Rehabilitation Programs

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

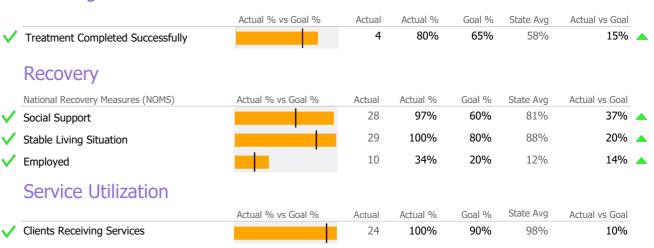
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	29	31	-6%	
Admits	1	1	0%	
Discharges	5	4	25%	•
Service Hours	321	820	-61%	•

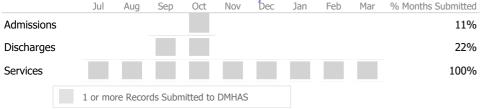
Data Submission Quality

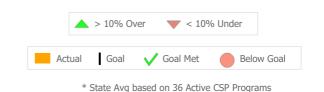


Discharge Outcomes



Data Submitted to DMHAS by Month





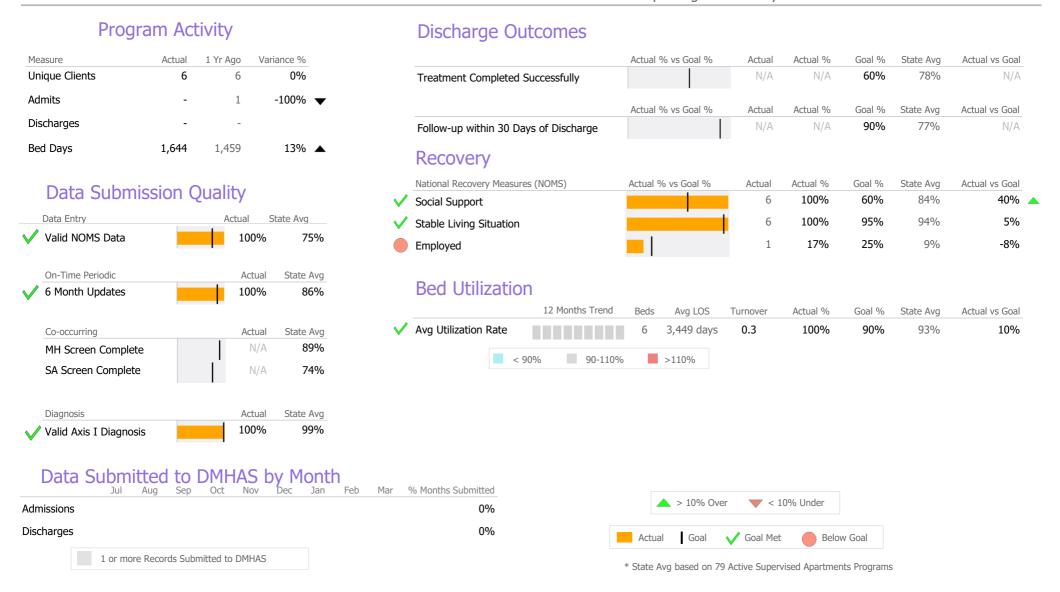
1 or more Records Submitted to DMHAS

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

* State Avg based on 24 Active Group Home Programs

Program Activity Discharge Outcomes Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 13 13 0% 5 100% 80% 90% 20% 🔺 Treatment Completed Successfully 6 500% Admits 1 Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % 5 3 Discharges 67% 5 100% 85% 96% 15% ✓ No Re-admit within 30 Days of Discharge **Bed Days** 1.889 3,185 -41% **T** Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge 5 100% 90% 89% 10% **Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Valid NOMS Data 100% 99% 11 85% 60% 88% 25% Social Support 11 85% 90% 98% -5% Stable Living Situation On-Time Periodic Actual State Avg 6 Month Updates 100% 84% **Bed Utilization** Actual State Avg 12 Months Trend Co-occurring Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal 82% 50% MH Screen Complete Avg Utilization Rate 881 days 0.5 57% 90% 89% -33% 🔻 SA Screen Complete 75% 92% < 90% 90-110% >110% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 56% Discharges 44% ✓ Goal Met Actual Goal Below Goal

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)



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

Goal %

State Avg

Actual vs Goal

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Actual %

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	25	25	0%
Admits	3	2	50% 🔺
Discharges	-	5	-100% 🔻
Service Hours	229	357	-36% ▼

Recovery

National Recovery Measures (NOMS)

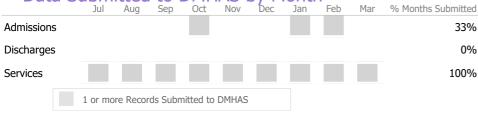
/	Stable Living Situation		23	92%	85%	89%	7%	
	Service Utilization							
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
/	Clients Receiving Services		24	96%	90%	98%	6%	

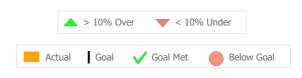
Actual % vs Goal %

Data Submission Quality



Data Submitted to DMHAS by Month





^{*} State Avg based on 104 Active Supportive Housing – Scattered Site Programs

1 or more Records Submitted to DMHAS

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

* State Avg based on 24 Active Group Home Programs

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 9 -11% Treatment Completed Successfully 100% 80% 90% 20% 🔺 0% Admits 1 Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % 2 Discharges 1 -50% 1 100% 85% 96% 15% No Re-admit within 30 Days of Discharge **Bed Days** 2,072 1,999 4% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge 100% 90% 89% 10% **Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 94% Valid NOMS Data 99% 8 100% 90% 98% 10% Stable Living Situation 5 62% 60% 88% 2% Social Support On-Time Periodic Actual State Avg 6 Month Updates 100% 84% **Bed Utilization** Co-occurring Actual State Avg 12 Months Trend Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal 100% 82% MH Screen Complete Avg Utilization Rate 992 days 0.3 95% 90% 89% 5% SA Screen Complete 100% 92% < 90% 90-110% >110% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 11% Discharges 11% ✓ Goal Met Actual Goal Below Goal