Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2020 - June 2021   (Data as of Sep 20, 2021)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	154	163	-6%	
	Admits	23	17	35%	▲
	Discharges	13	33	-61%	▼
	Service Hours	1,665	1,351	23%	▲
	Bed Days	7,577	8,602	-12%	▼
	S.Rehab/PHP/IOP	180	5,081	-96%	▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	116	57.1%
	Community Support	31	15.3%
	Residential Services	30	14.8%
	Case Management	26	12.8%

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 %	ǀ Goal %	▬ 0-80%	▬ 80-100%	✓ Goal Met	⬤ Under Goal

Client Demographics

Age

Age		#	%		State Avg
18-25		4	3%		10%
26-34		14	9%	▼	22%
35-44		24	16%		23%
45-54		36	23%		19%
55-64		52	34%	▲	18%
65+		24	16%		7%

Gender

Gender		#	%		State Avg
Male		80	52%		59%
Female		74	48%		41%
Transgender					0%

Ethnicity

Ethnicity		#	%		State Avg
Non-Hispanic		134	87%	▲	68%
Hisp-Puerto Rican		9	6%		11%
Hispanic-Other		8	5%		8%
Unknown		3	2%		12%
Hispanic-Cuban					0%
Hispanic-Mexican					0%

Race

Race		#	%		State Avg
White/Caucasian		89	58%		61%
Black/African American		51	33%	▲	17%
Other		10	6%		13%
Asian		2	1%		1%
Hawaiian/Other Pacific Islander		1	1%		0%
Unknown		1	1%		6%
Am. Indian/Native Alaskan					0%
Multiple Races					1%

▬ Unique Clients	ǀ 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

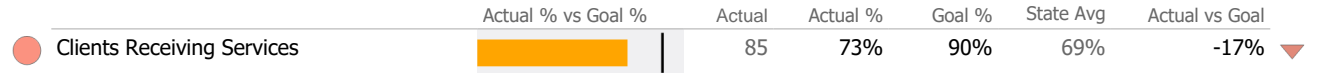Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2020 - June 2021 (Data as of Sep 20, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	116	124	-6%	
Admits	6	6	0%	
Discharges	-	14	-100%	▼
Service Hours	913	14		
Social Rehab/PHP/IOP Days	180	5,081	-96%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		85	73%	90%	69%	-17%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions				▪		▪	▪		▪		▪		42%
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 - June 2021 (Data as of Sep 20, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	31	32	-3%	
Admits	3	2	50%	▲
Discharges	5	4	25%	▲
Service Hours	449	896	-50%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	81%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		96%	86%

Co-occurring		Actual	State Avg
MH Screen Complete		33%	87%
SA Screen Complete		67%	77%

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

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		4	80%	65%	56%	15%	▲

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		30	97%	60%	81%	37%	▲
✔	Stable Living Situation		31	100%	80%	88%	20%	▲
✔	Employed		12	39%	20%	13%	19%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		26	100%	90%	98%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions				▣								▣	17%
Discharges			▣	▣									17%
Services	▣	▣	▣	▣	▣	▣	▣	▣	▣	▣	▣	▣	100%

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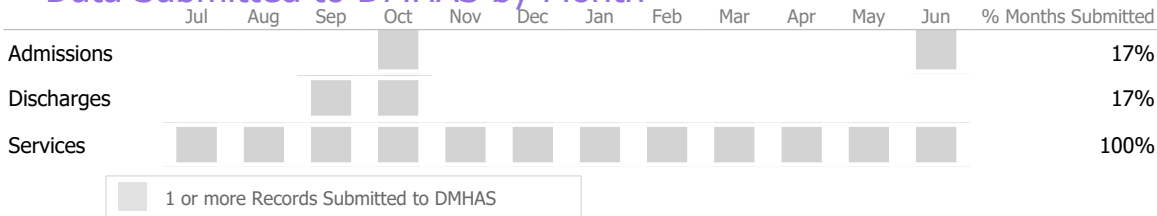
▲ > 10% Over   ▼ < 10% Under

■ 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 - June 2021 (Data as of Sep 20, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	16	13	23%	▲
Admits	9	1	800%	▲
Discharges	5	6	-17%	▼
Bed Days	2,755	3,961	-30%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		5	100%	80%	86%	20%	▲
✓	No Re-admit within 30 Days of Discharge		5	100%	85%	94%	15%	▲
✓	Follow-up within 30 Days of Discharge		5	100%	90%	90%	10%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	0%	83%

Co-occurring		Actual	State Avg
	MH Screen Complete	78%	82%
	SA Screen Complete	89%	93%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		15	94%	60%	83%	34%	▲
✓	Stable Living Situation		16	100%	90%	97%	10%	

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Avg Utilization Rate		12	802 days	0.3	63%	90%	90%	-27%	▼
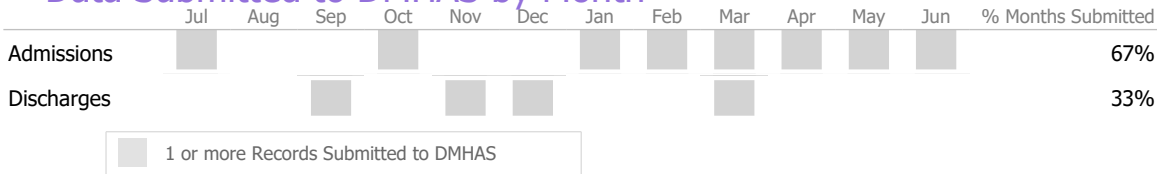
	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▢			▢			▢	▢	▢	▢	▢		67%
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

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 - June 2021 (Data as of Sep 20, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	-	1	-100% ▼
Discharges	-	-	
Bed Days	2,190	2,005	9%

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%	79%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		6	100%	60%	84%	40% ▲
✓ Stable Living Situation		6	100%	95%	94%	5%
🔴 Employed		1	17%	25%	12%	-8%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	76%

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

Co-occurring		Actual	State Avg
MH Screen Complete		N/A	91%
SA Screen Complete		N/A	77%

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

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	3,540 days	0.3	100%	90%	94%	10%

	< 90%	90-110%	>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges													0%

1 or more Records Submitted to DMHAS

▲ > 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 - June 2021 (Data as of Sep 20, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	29	-10%	▼
Admits	4	6	-33%	▼
Discharges	1	7	-86%	▼
Service Hours	303	441	-31%	▼

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Stable Living Situation		25	96%	85%	89%	11%	▲

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services		24	96%	90%	97%	6%

Data Submission Quality

	Data Entry		Actual	State Avg
✓	Valid NOMS Data		98%	96%

	On-Time Periodic		Actual	State Avg
✓	6 Month Updates		95%	87%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions				▪			▪	▪				▪	33%
Discharges										▪			8%
Services		▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%

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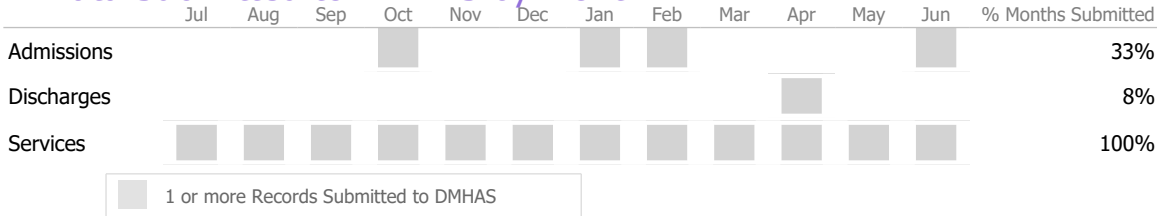
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 106 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 - June 2021 (Data as of Sep 20, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	9	-11%	▼
Admits	1	1	0%	
Discharges	2	2	0%	
Bed Days	2,632	2,636	0%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		2	100%	80%	86%	20%	▲
✓	No Re-admit within 30 Days of Discharge		2	100%	85%	94%	15%	▲
✓	Follow-up within 30 Days of Discharge		2	100%	90%	90%	10%	

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		94%	99%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		17%	83%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	82%
✓ SA Screen Complete		100%	93%

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

Recovery

National Recovery Measures (NOMS)

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		8	100%	90%	97%	10%
✓	Social Support		5	62%	60%	83%	2%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		8	1,068 days	0.3	90%	90%	90%	0%

☐ < 90%	☐ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions			☐										8%
Discharges									☐	☐			17%

☐ 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

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