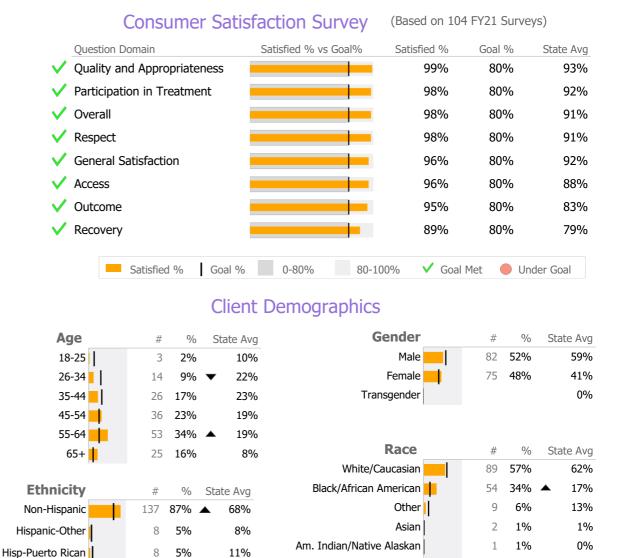
Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

### **Provider Activity** Monthly Trend Measure Actual 1 Yr Ago Variance % **Unique Clients** 157 148 6% Admits 7 14 -50% ▼ 10 11 -9% Discharges Service Hours 3,651 746 **Bed Days** 5,911 5,605 5% 179 1114% 2,173 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 118 59.9% Residential Services 27 13.7% Case Management 26 13.2% Community Support 26 13.2%



Hawaiian/Other Pacific Islander

▲ > 10% Over State Avg

Unknown

Multiple Races

1%

1%

▼ > 10% Under State Avg

0%

6%

1%

Unknown

Hispanic-Cuban

Hispanic-Mexican

3%

Unique Clients | State Avg

4

12%

0%

1%

### 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 2021 - March 2022 (Data as of Jun 27, 2022)

#### **Program Activity** Service Utilization State Avg Actual % vs Goal % Actual vs Goal Actual Actual % Goal % Measure 1 Yr Ago Variance % Actual Clients Receiving Services 79 67% 90% 72% -23% -**Unique Clients** 118 113 4% 2 3 -33% 🔻 Admits Discharges 3,120 Service Hours 195 Social Rehab/PHP/IOP 2,173 179 1114%

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

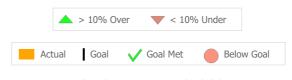
Admissions

11%

Discharges

Services

1 or more Records Submitted to DMHAS



<sup>\*</sup> State Avg based on 34 Active Social Rehabilitation Programs

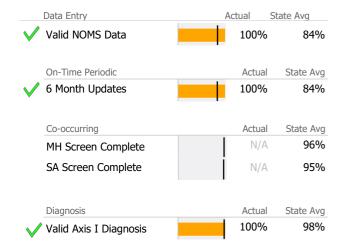
Keystone House Inc.

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	29	-10%	▼
Admits	-	1	-100%	•
Discharges	1	5	-80%	•
Service Hours	260	323	-20%	•

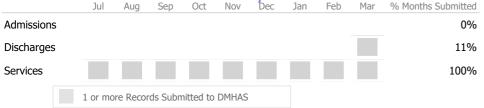
# **Data Submission Quality**

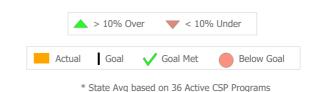


### Discharge Outcomes



## Data Submitted to DMHAS by Month

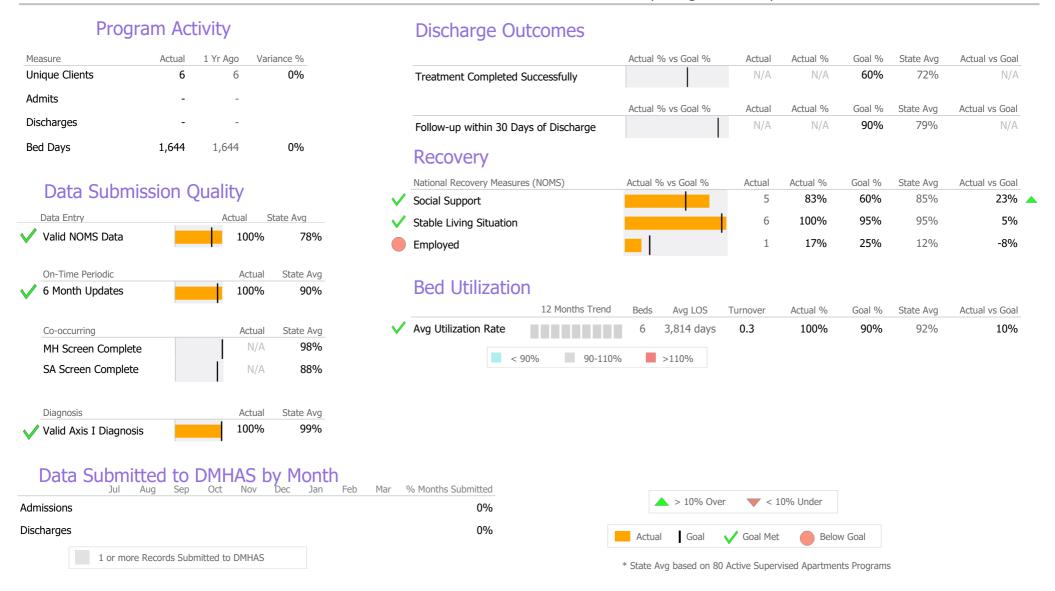




Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

#### **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% 3 75% 80% 72% -5% Treatment Completed Successfully 2 6 -67% **~** Admits Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % 5 Discharges -20% No Re-admit within 30 Days of Discharge 100% 85% 88% 15% 2,428 29% 🔺 **Bed Days** 1,889 Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge 67% 90% 67% -23% -**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% 82% 25% Social Support 13 100% 90% 98% 10% Stable Living Situation On-Time Periodic Actual State Avg 6 Month Updates 86% 89% **Bed Utilization** Co-occurring Actual State Avg 12 Months Trend Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal 100% 86% MH Screen Complete Avg Utilization Rate 723 days 0.4 74% 90% 87% -16% **T** SA Screen Complete 100% 95% < 90% 90-110% >110% Diagnosis State Avg Actual 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 22% Discharges 44% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS \* State Avg based on 24 Active Group Home Programs

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)



### 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 2021 - March 2022 (Data as of Jun 27, 2022)

Actual %

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	26	24	8%	
Admits	1	3	-67%	•
Discharges	4	-		
Service Hours	271	229	19%	<b>_</b>

## Recovery

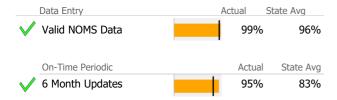
National Recovery Measures (NOMS)

<b>V</b> :	Stable Living Situation		22	85%	85%	88%	0%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
<b>V</b>	Clients Receiving Services		22	100%	90%	97%	10%

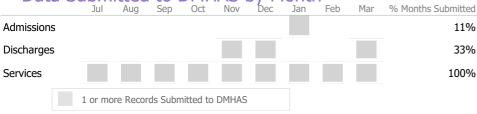
Actual

Actual % vs Goal %

### **Data Submission Quality**



Data Submitted to DMHAS by Month





<sup>\*</sup> State Avg based on 109 Active Supportive Housing – Scattered Site Programs

Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

#### **Program Activity Discharge Outcomes** Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 8 0% 0 0% 80% 72% -80% Treatment Completed Successfully 100% Admits 1 Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % 0% Discharges 1 1 No Re-admit within 30 Days of Discharge 1 100% 85% 88% 15% **Bed Days** 1.839 2,072 -11% Actual % Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge N/A N/A 90% 67% N/A **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% 8 100% 90% 98% 10% Stable Living Situation 5 62% 60% 82% 2% Social Support On-Time Periodic Actual State Avg 6 Month Updates 100% 89% **Bed Utilization** Co-occurring Actual State Avg 12 Months Trend Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal 100% 86% MH Screen Complete Avg Utilization Rate 1,220 days 0.4 84% 90% 87% -6% SA Screen Complete 100% 95% < 90% 90-110% >110% Diagnosis State Avg Actual 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 22% Discharges 11% ✓ Goal Met Actual Goal Below Goal 1 or more Records Submitted to DMHAS \* State Avg based on 24 Active Group Home Programs