Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	156	153	2%	
	Admits	2	3	-33%	▼
	Discharges	28	2	1300%	
	Service Hours	134	2,501	-95%	▼
	Bed Days	2,296	2,067	11%	▲
	S.Rehab/PHP/IOP	882	806	9%	

▲ > 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	61.8%
	Residential Services	26	13.6%
	Community Support	24	12.6%
	Case Management	23	12.0%

Consumer Satisfaction Survey (Based on 94 FY22 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Participation in Treatment		96%	80%	92%
✓	Access		95%	80%	88%
✓	Respect		95%	80%	91%
✓	Quality and Appropriateness		94%	80%	93%
✓	General Satisfaction		94%	80%	92%
✓	Overall		94%	80%	91%
✓	Outcome		92%	80%	83%
✓	Recovery		91%	80%	79%

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

Client Demographics

Age

	#	%	State Avg
18-25	3	2%	10%
26-34	17	11%	21%
35-44	24	15%	23%
45-54	35	22%	19%
55-64	52	33% ▲	20%
65+	25	16%	8%

Gender

	#	%	State Avg
Male	84	54%	58%
Female	72	46%	42%
Transgender			0%

Ethnicity

	#	%	State Avg
Non-Hispanic	135	87% ▲	69%
Hispanic-Other	9	6%	8%
Hisp-Puerto Rican	8	5%	11%
Unknown	4	3%	12%
Hispanic-Cuban			0%
Hispanic-Mexican			1%

Race

	#	%	State Avg
White/Caucasian	88	56%	62%
Black/African American	52	33% ▲	17%
Other	10	6%	12%
Asian	2	1%	1%
Am. Indian/Native Alaskan	1	1%	1%
Multiple Races	1	1%	1%
Hawaiian/Other Pacific Islander	1	1%	0%
Unknown	1	1%	6%

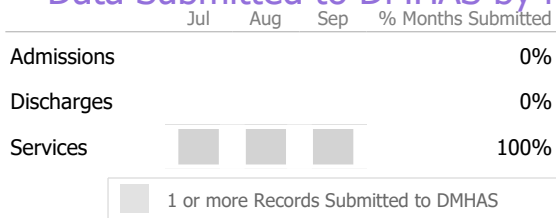Unique Clients ▮ State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

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 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	118	118	0%	
Admits	-	2	-100%	▼
Discharges	-	-		
Service Hours	-	2,301	-100%	▼
Social Rehab/PHP/IOP Days	882	806	9%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Clients Receiving Services		47	40%	90%	64%	-50%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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
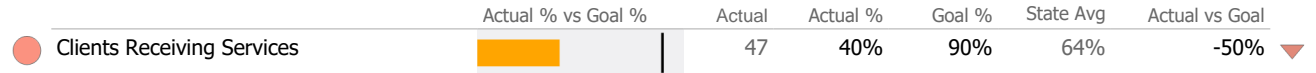
* State Avg based on Active Social Rehabilitation Programs

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

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	24	26	-8%
Admits	-	-	
Discharges	24	-	
Service Hours	45	104	-57% ▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Treatment Completed Successfully		18	75%	65%	57%	10% ▲

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Social Support		24	100%	60%	77%	40% ▲
✔	Stable Living Situation		24	100%	80%	86%	20% ▲
✔	Employed		9	38%	20%	14%	18% ▲

Data Submission Quality

Data Entry		Actual	State Avg
✔	Valid NOMS Data	99%	87%

On-Time Periodic		Actual	State Avg
	6 Month Updates	N/A	83%

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

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Clients Receiving Services		N/A	N/A	90%	94%	N/A ▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges		▓	▓	67%
Services	▓	▓		67%

▓ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual		Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 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 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	12	11	9%
Admits	1	-	
Discharges	1	2	-50% ▼
Bed Days	1,032	941	10%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Treatment Completed Successfully		1	100%	80%	64%	20% ▲
✓	No Re-admit within 30 Days of Discharge		1	100%	85%	93%	15% ▲
✓	Follow-up within 30 Days of Discharge		1	100%	90%	67%	10%

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
🔴	6 Month Updates	67%	89%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Social Support		12	100%	60%	84%	40% ▲
✓	Stable Living Situation		12	100%	90%	98%	10%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		12	667 days	1.0	93%	90%	88%	3%
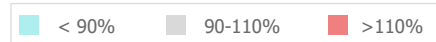
▢ < 90%	▢ 90-110%	🔴 >110%

Data Submitted to DMHAS by Month

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

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual	▏ Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 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 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	-	-	
Discharges	-	-	
Bed Days	552	552	0%

Data Submission Quality

Data Entry	Actual % vs Goal	Actual	State Avg
Valid NOMS Data		N/A	84%

On-Time Periodic	Actual % vs Goal	Actual	State Avg
✓ 6 Month Updates		100%	90%

Diagnosis	Actual % vs Goal	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		N/A	N/A	60%	72%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	74%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		5	83%	60%	85%	23% ▲
✓ Stable Living Situation		6	100%	95%	93%	5%
● Employed		1	17%	25%	11%	-8%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	3,997 days	1.0	100%	90%	95%	10%

< 90%	90-110%	>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% 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 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 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	23	25	-8%
Admits	1	-	
Discharges	1	-	
Service Hours	88	96	-8%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Stable Living Situation		18	78%	85%	88%	-7%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		22	100%	90%	91%	10%

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		95%	84%

Data Submitted to DMHAS by Month

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

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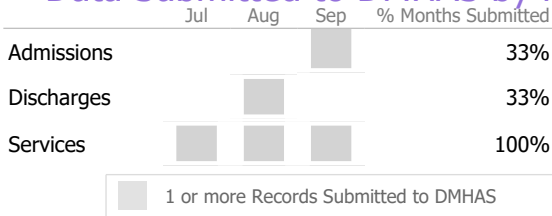
▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✔ Goal Met   🔴 Below Goal

* State Avg based on 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 2022 - September 2022 (Data as of Dec 16, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	7	14%	▲
Admits	-	1	-100%	▼
Discharges	2	-		
Bed Days	712	574	24%	▲

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		1	50%	80%	64%	-30%	▼
✓	No Re-admit within 30 Days of Discharge		2	100%	85%	93%	15%	▲
🔴	Follow-up within 30 Days of Discharge		0	0%	90%	67%	-90%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		90%	97%

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		83%	89%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Social Support		5	62%	60%	84%	2%
🔴	Stable Living Situation		7	88%	90%	98%	-2%

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		8	1,202 days	1.0	97%	90%	88%	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 Active Group Home Programs

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