Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	163	162	1%
	Admits	13	14	-7%
	Discharges	53	14	279% ▲
	Service Hours	26,401	3,924	
	Bed Days	8,136	8,152	0%
	S.Rehab/PHP/IOP	8,803	3,137	181% ▲

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	124	61.4%
	Residential Services	31	15.3%
	Community Support	24	11.9%
	Case Management	23	11.4%

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%

Legend: Satisfied % | Goal % | 0-80% | 80-100% | ✓ Goal Met | ● Under Goal

Client Demographics

Age

Age	#	%	State Avg
18-25	3	2%	10%
26-34	16	10% ▼	21%
35-44	25	15%	24%
45-54	36	22%	18%
55-64	55	34% ▲	18%
65+	28	17%	9%

Gender

Gender	#	%	State Avg
Male	88	54%	59%
Female	75	46%	41%
Transgender			0%

Ethnicity

Ethnicity	#	%	State Avg
Non-Hispanic	140	86% ▲	67%
Hisp-Puerto Rican	10	6%	10%
Hispanic-Other	9	6%	9%
Unknown	4	2% ▼	13%
Hispanic-Cuban			0%
Hispanic-Mexican			1%

Race

Race	#	%	State Avg
White/Caucasian	92	56%	60%
Black/African American	53	33% ▲	18%
Other	12	7%	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%	7%

Legend: 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 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	124	119	4%	
Admits	5	3	67%	▲
Discharges	16	-		
Service Hours	25,999	3,180		
Social Rehab/PHP/IOP Days	8,803	3,137	181%	▲

Service Utilization
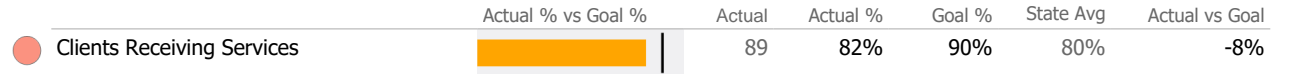
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Clients Receiving Services	▮▮▮▮▮▮	89	82%	90%	80%	-8%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	▮			▮		▮		▮					33%
Discharges		▮	▮					▮					25%
Services	▮	▮	▮	▮				▮	▮	▮	▮	▮	75%

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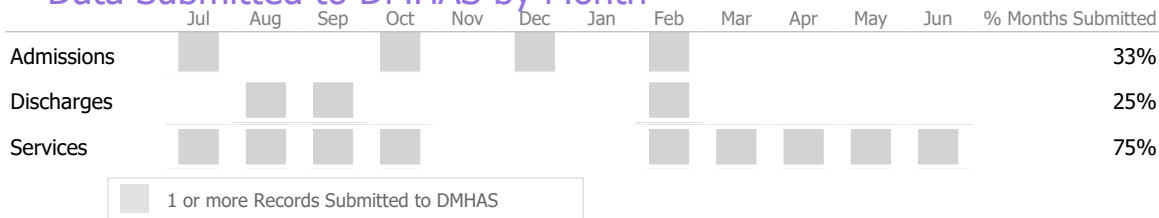
▲ > 10% Over	▼ < 10% Under

| ▮ 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 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	24	26	-8%	
Admits	-	-		
Discharges	24	2	1100%	▲
Service Hours	45	403	-89%	▼

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		18	75%	65%	53%	10%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		24	100%	60%	79%	40%	▲
✓ Stable Living Situation		24	100%	80%	88%	20%	▲
✓ Employed		9	38%	20%	15%	18%	▲
● Improved/Maintained Function Score		0	0%	65%	44%	-65%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		99%	89%

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

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	97%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		N/A	N/A	90%	97%	N/A	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													0%
Discharges			▪	▪									17%
Services		▪	▪										17%

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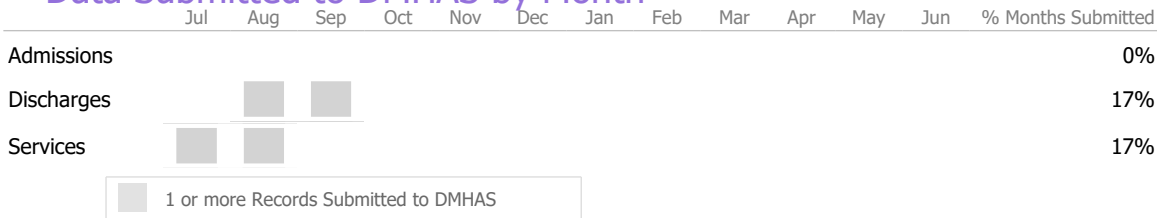
▲ > 10% Over   ▼ < 10% Under

■ 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 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	14	16	-13%	▼
Admits	3	5	-40%	▼
Discharges	4	5	-20%	▼
Bed Days	3,869	3,476	11%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
🔴 6 Month Updates		30%	66%

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

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		4	100%	80%	78%	20%	▲
✓ No Re-admit within 30 Days of Discharge		4	100%	85%	86%	15%	▲
✓ Follow-up within 30 Days of Discharge		4	100%	90%	77%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		14	100%	60%	89%	40%	▲
✓ Stable Living Situation		14	100%	90%	100%	10%	
🔴 Improved/Maintained Function Score		0	0%	95%	43%	-95%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Avg Utilization Rate		12	817 days	0.3	88%	90%	85%	-2%

	< 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	▪			▪		▪							25%
Discharges		▪		▪	▪			▪					33%

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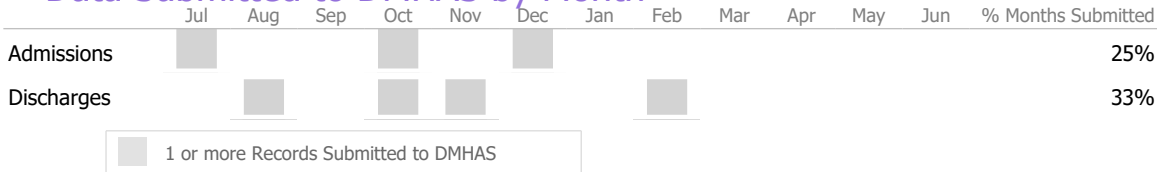
▲ > 10% Over   ▼ < 10% Under

🟧 Actual   ┃ Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 23 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 - June 2023 (Data as of Sep 25, 2023)

Program Activity

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

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	87%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	85%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	97%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	67%	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%	77%	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%	94%	5%	
● Employed		1	17%	25%	14%	-8%	
● Improved/Maintained Function Score		0	0%	95%	47%	-95%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	4,270 days	0.3	100%	90%	95%	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 85 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 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	23	28	-18%	▼
Admits	1	3	-67%	▼
Discharges	1	6	-83%	▼
Service Hours	356	341	4%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
⬤ Stable Living Situation		19	83%	85%	86%	-2%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		22	100%	90%	97%	10%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		98%	97%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions			▪										8%
Discharges		▪											8%
Services		▪	▪	▪	▪	▪	▪	▪	▪	▪		▪	92%

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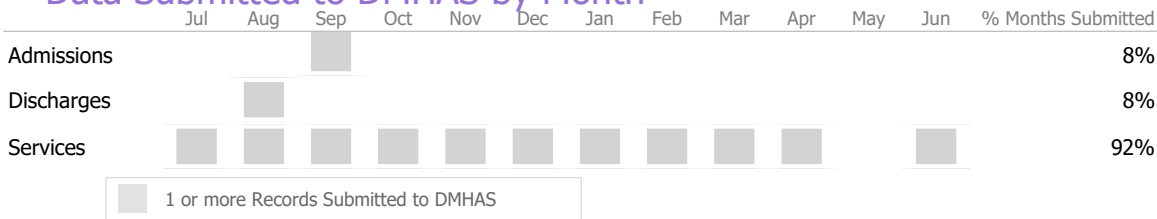
▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ⬤ Below Goal

* State Avg based on 118 Active Supportive Housing – Scattered Site Programs

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

St. John's
Keystone House Inc.
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - June 2023 (Data as of Sep 25, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	9	33%	▲
Admits	4	3	33%	▲
Discharges	8	1	700%	▲
Bed Days	2,077	2,486	-16%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		98%	87%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	85%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	97%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		7	88%	60%	67%	28%	▲
🔴 Follow-up within 30 Days of Discharge		4	57%	90%	77%	-33%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		8	67%	60%	85%	7%	
🔴 Stable Living Situation		11	92%	95%	94%	-3%	
🔴 Employed		0	0%	25%	14%	-25%	▼
🔴 Improved/Maintained Function Score		1	11%	95%	47%	-84%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
🔴 Avg Utilization Rate		8	1,074 days	0.3	71%	90%	95%	-19%	▼

🟦 < 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								▪			▪		17%
Discharges			▪			▪		▪	▪	▪			42%

⬜ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

🟧 Actual | Goal   ✓ Goal Met   🔴 Below Goal

* State Avg based on 85 Active Supervised Apartments Programs

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