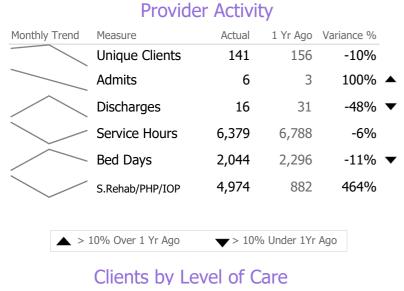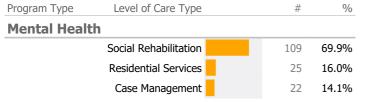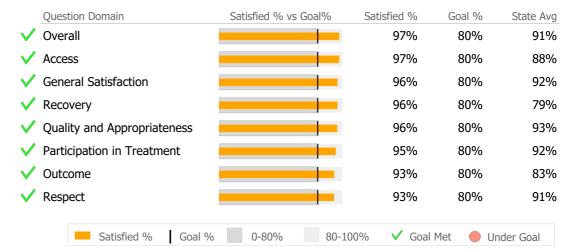**Keystone House Inc.**
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2023 - September 2023   (Data as of Dec 26, 2023)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	141	156	-10%	
	Admits	6	3	100%	▲
	Discharges	16	31	-48%	▼
	Service Hours	6,379	6,788	-6%	
	Bed Days	2,044	2,296	-11%	▼
	S.Rehab/PHP/IOP	4,974	882	464%	

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	109	69.9%
	Residential Services	25	16.0%
	Case Management	22	14.1%

Consumer Satisfaction Survey   (Based on 77 FY23 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Overall		97%	80%	91%
✓	Access		97%	80%	88%
✓	General Satisfaction		96%	80%	92%
✓	Recovery		96%	80%	79%
✓	Quality and Appropriateness		96%	80%	93%
✓	Participation in Treatment		95%	80%	92%
✓	Outcome		93%	80%	83%
✓	Respect		93%	80%	91%

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

Client Demographics

Age

Age	#	%	State Avg	
18-25	2	1%	8%	
26-34	12	9%	18%	
35-44	22	16%	24%	
45-54	27	19%	19%	
55-64	46	33%	20%	▲
65+	32	23%	11%	▲

Gender

Gender	#	%	State Avg	
Male	80	57%	58%	
Female	61	43%	42%	
Transgender			0%	

Ethnicity

Ethnicity	#	%	State Avg	
Non-Hispanic	119	84%	66%	▲
Hisp-Puerto Rican	10	7%	11%	
Hispanic-Other	8	6%	10%	
Unknown	4	3%	13%	
Hispanic-Cuban			0%	
Hispanic-Mexican			1%	

Race

Race	#	%	State Avg	
White/Caucasian	78	55%	60%	
Black/African American	46	33%	17%	▲
Other	11	8%	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%	8%	

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 2023 - September 2023 (Data as of Dec 26, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	109	120	-9%	
Admits	1	1	0%	
Discharges	14	3	367%	▲
Service Hours	6,301	6,655	-5%	
Social Rehab/PHP/IOP Days	4,974	882	464%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services		71	75%	90%	67%	-15%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions		▪		33%
Discharges		▪	▪	67%
Services	▪	▪	▪	100%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▪ Actual	ǀ 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.

Elmcrest 1 112-241
Keystone House Inc.
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
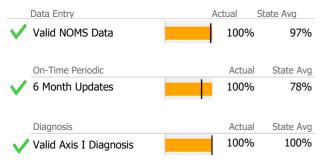Reporting Period: July 2023 - September 2023 (Data as of Dec 26, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	12	0%	
Admits	2	1	100%	▲
Discharges	2	1	100%	▲
Bed Days	907	1,032	-12%	▼

Data Submission Quality

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

On-Time Periodic	Actual % vs Goal %	Actual	State Avg
✓ 6 Month Updates		100%	78%

Diagnosis	Actual % vs Goal %	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		1	50%	80%	79%	-30%	▼
✓	No Re-admit within 30 Days of Discharge		2	100%	85%	72%	15%	▲
✓	Follow-up within 30 Days of Discharge		1	100%	90%	80%	10%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		11	92%	60%	86%	32%	▲
✓	Stable Living Situation		12	100%	90%	96%	10%	
🔴	Improved/Maintained Function Score		2	20%	95%	46%	-75%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Avg Utilization Rate		12	796 days	1.0	82%	90%	80%	-8%

🟦 < 90%	⬜ 90-110%	🟥 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions			⬜	67%
Discharges	⬜	⬜		67%

⬜ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under	

🟧 Actual	❘ Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 22 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 2023 - September 2023 (Data as of Dec 26, 2023)

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	State Avg
Valid NOMS Data		N/A	89%

On-Time Periodic		Actual	State Avg
6 Month Updates		0%	89%

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		N/A	N/A	60%	70%	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%	80%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		5	83%	60%	84%	23%	▲
✓ Stable Living Situation		6	100%	95%	93%	5%	
● Employed		1	17%	25%	13%	-8%	
● Improved/Maintained Function Score		0	0%	95%	51%	-95%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	4,362 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 84 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
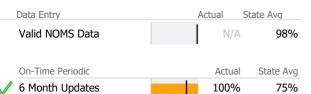
Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2023 - September 2023 (Data as of Dec 26, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	22	23	-4%	
Admits	-	1	-100%	▼
Discharges	-	1	-100%	▼
Service Hours	78	88	-12%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		19	86%	85%	85%	1%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		22	100%	90%	87%	10%

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	98%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	75%

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 118 Active Supportive Housing – Scattered Site Programs
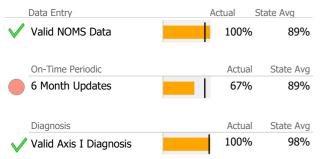
Variances in data may be indicative of operational adjustments related to the pandemic.

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 2023 - September 2023 (Data as of Dec 26, 2023)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	7	8	-13%	▼
Admits	3	-		
Discharges	-	2	-100%	▼
Bed Days	585	712	-18%	▼

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	70%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	80%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Stable Living Situation		7	100%	95%	93%	5%	
● Social Support		3	43%	60%	84%	-17%	▼
● Employed		0	0%	25%	13%	-25%	▼
● Improved/Maintained Function Score		0	0%	95%	51%	-95%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	89%

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

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

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		8	401 days	1.1	79%	90%	95%	-11%	▼

☐ < 90%	☐ 90-110%	☐ >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions	☐	☐		67%
Discharges				0%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over	▼ < 10% Under

☐ Actual		Goal	✓ Goal Met	● Below Goal

* State Avg based on 84 Active Supervised Apartments Programs

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