Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2024 - September 2024   (Data as of Dec 17, 2024)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	90	144	-38%	▼
	Admits	3	9	-67%	▼
	Discharges	1	16	-94%	▼
	Service Hours	4,290	6,379	-33%	▼
	Bed Days	2,186	2,044	7%	
	S.Rehab/PHP/IOP	2,774	4,974	-44%	▼

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

Consumer Satisfaction Survey   (Based on 62 FY24 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Participation in Treatment		98%	80%	92%
✓	Overall		97%	80%	91%
✓	Access		97%	80%	88%
✓	Respect		96%	80%	91%
✓	Quality and Appropriateness		95%	80%	93%
✓	General Satisfaction		94%	80%	92%
✓	Outcome		93%	80%	83%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	65	58.0%
	Residential Services	24	21.4%
	Case Management	23	20.5%

Client Demographics

Age

	#	%		State Avg
18-25	1	1%		8%
26-34	6	7%	▼	18%
35-44	16	18%		24%
45-54	17	19%		18%
55-64	27	30%		20%
65+	23	26%	▲	12%

Gender

	#	%		State Avg
Male	53	59%		58%
Female	37	41%		42%
Transgender/Other				0%

Ethnicity

	#	%		State Avg
Non-Hispanic	76	84%	▲	64%
Hisp-Puerto Rican	9	10%		10%
Hispanic-Other	3	3%		11%
Unknown	2	2%	▼	14%
Hispanic-Cuban				0%
Hispanic-Mexican				1%

Race

	#	%		State Avg
White/Caucasian	45	50%		59%
Black/African American	31	34%	▲	17%
Other	7	8%		12%
Multiple Races	3	3%		1%
Unknown	2	2%		9%
Am. Indian/Native Alaskan	1	1%		1%
Asian	1	1%		1%
Hawaiian/Other Pacific Islander				0%

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

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 2024 - September 2024 (Data as of Dec 17, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	65	117	-44%	▼
Admits	1	4	-75%	▼
Discharges	-	14	-100%	▼
Service Hours	4,212	6,301	-33%	▼
Social Rehab/PHP/IOP Days	2,774	4,974	-44%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services	[bar]	58	89%	90%	66%	-1%

Data Submitted to DMHAS for Month

	Jul	Aug	Sep	% Months Submitted
Admissions	▪			33%
Discharges				0%
Services	▪	▪	▪	100%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal
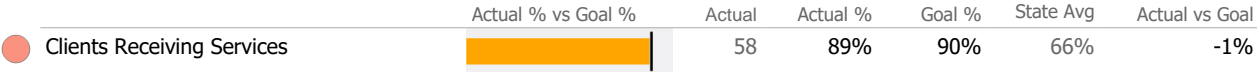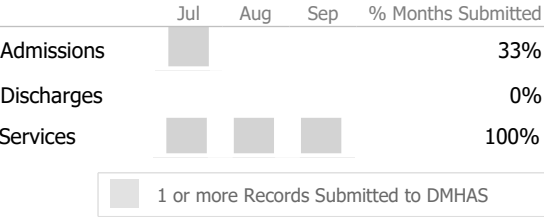
* State Avg based on 34 Active Social Rehabilitation Programs

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 2024 - September 2024 (Data as of Dec 17, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	12	12	0%	
Admits	-	2	-100%	▼
Discharges	-	2	-100%	▼
Bed Days	1,104	907	22%	▲

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	96%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	91%

Diagnosis		Actual	State Avg
✓ Valid MH/SU Diagnosis		100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	80%	82%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	70%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	56%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		12	100%	60%	82%	40%	▲
✓ Stable Living Situation		12	100%	90%	98%	10%	
🔴 Improved/Maintained Function Score		9	75%	95%	67%	-20%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		12	928 days	1.0	100%	90%	85%	10%

	< 90%	90-110%	>110%

Data Submitted to DMHAS for 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
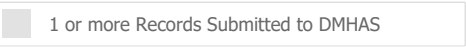
* State Avg based on 22 Active Group Home Programs

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 2024 - September 2024 (Data as of Dec 17, 2024)

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	87%

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

Diagnosis		Actual	State Avg
✓ Valid MH/SU 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%	78%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		5	83%	60%	86%	23% ▲
✓ Improved/Maintained Function Score		6	100%	95%	63%	5%
✓ Stable Living Situation		6	100%	95%	97%	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	4,728 days	1.0	100%	90%	88%	10%

⬛ < 90%	⬛ 90-110%	⬛ >110%

Data Submitted to DMHAS for 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 83 Active Supervised Apartments Programs

Pilots Program
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 2024 - September 2024 (Data as of Dec 17, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	23	22	5%
Admits	1	-	
Discharges	1	-	
Service Hours	78	78	0%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		20	87%	85%	84%	2%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		22	100%	90%	86%	10%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	98%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	77%

Data Submitted to DMHAS for 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
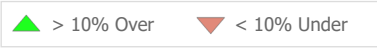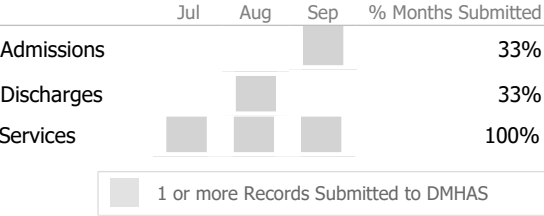
* State Avg based on 119 Active Supportive Housing – Scattered Site Programs

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 2024 - September 2024 (Data as of Dec 17, 2024)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	7	-14%	▼
Admits	1	3	-67%	▼
Discharges	-	-		
Bed Days	530	585	-9%	

Data Submission Quality

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

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

Diagnosis		Actual	State Avg
✓ Valid MH/SU 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%	78%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Stable Living Situation		6	100%	95%	97%	5%	
✓ Improved/Maintained Function Score		5	100%	95%	63%	5%	
● Employed		0	0%	25%	11%	-25%	▼
● Social Support		2	33%	60%	86%	-27%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		8	692 days	1.3	72%	90%	88%	-18%	▼

☐ < 90%	☐ 90-110%	☐ >110%

Data Submitted to DMHAS for Month

	Jul	Aug	Sep	% Months Submitted
Admissions	☐			33%
Discharges				0%

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

☐ Actual		Goal	✓ Goal Met	● Below Goal

* State Avg based on 83 Active Supervised Apartments Programs