Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2024 - March 2025 (Data as of Jun 20, 2025)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	93	155	-40%	▼
	Admits	10	28	-64%	▼
	Discharges	12	65	-82%	▼
	Service Hours	10,543	18,750	-44%	▼
	Bed Days	6,609	6,203	7%	
	S.Rehab/PHP/IOP	6,860	15,410	-55%	▼

▲ > 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		66	56.9%
	Residential Services		27	23.3%
	Case Management		23	19.8%

Client Demographics

Age

Age		#	%		State Avg
18-25		1	1%		8%
26-34		6	6%	▼	19%
35-44		19	20%		25%
45-54		17	18%		18%
55-64		27	29%	▲	18%
65+		23	25%	▲	11%

Gender

Gender		#	%	State Avg
Male		56	60%	59%
Female		37	40%	40%
Transgender/Other				0%

Ethnicity

Ethnicity		#	%		State Avg
Non-Hispanic		79	85%	▲	64%
Hisp-Puerto Rican		9	10%		10%
Hispanic-Other		3	3%		11%
Unknown		2	2%	▼	14%
Hispanic-Cuban					0%
Hispanic-Mexican					1%

Race

Race		#	%		State Avg
White/Caucasian		46	49%		58%
Black/African American		33	35%	▲	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 - March 2025 (Data as of Jun 20, 2025)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	66	128	-48%	▼
Admits	2	18	-89%	▼
Discharges	4	58	-93%	▼
Service Hours	10,312	18,514	-44%	▼
Social Rehab/PHP/IOP Days	6,860	15,410	-55%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Clients Receiving Services	▮▮▮	61	98%	90%	81%	8%

Data Submitted to DMHAS for Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▮					▮				22%
Discharges						▮	▮			22%
Services	▮	▮	▮	▮	▮	▮	▮	▮	▮	100%

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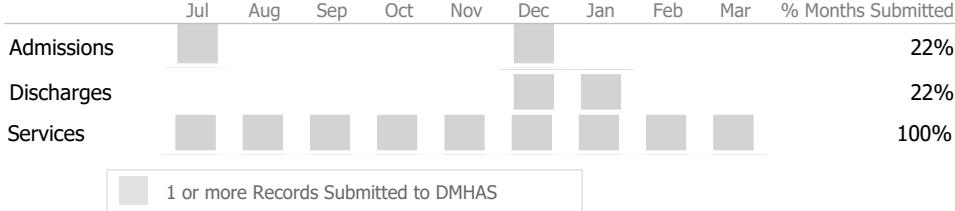
▲ > 10% Over   ▼ < 10% Under

▮ 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 - March 2025 (Data as of Jun 20, 2025)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	14	16	-13%	▼
Admits	2	6	-67%	▼
Discharges	2	4	-50%	▼
Bed Days	3,288	2,703	22%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	94%

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		2	100%	80%	86%	20%	▲
✓ No Re-admit within 30 Days of Discharge		2	100%	85%	89%	15%	▲
✓ Follow-up within 30 Days of Discharge		2	100%	90%	84%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		13	93%	60%	86%	33%	▲
✓ Stable Living Situation		14	100%	90%	99%	10%	
● Improved/Maintained Function Score		11	92%	95%	74%	-3%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		12	1,056 days	0.3	100%	90%	86%	10%

☐ < 90%	☐ 90-110%	☐ >110%

Data Submitted to DMHAS for Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions					☐	☐				22%
Discharges					☐	☐				22%

☐ 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 - March 2025 (Data as of Jun 20, 2025)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	-	-	
Discharges	1	-	
Bed Days	1,612	1,650	-2%

Discharge Outcomes

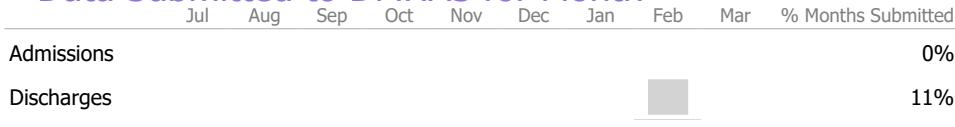|		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		1	100%	60%	71%	40%	▲
●	Follow-up within 30 Days of Discharge		0	0%	90%	74%	-90%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		5	83%	60%	84%	23%	▲
✓ Improved/Maintained Function Score		6	100%	95%	73%	5%	
✓ Stable Living Situation		6	100%	95%	96%	5%	
● Employed		1	17%	25%	13%	-8%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	100%	94%

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

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	4,867 days	0.3	98%	90%	90%	8%

▨ < 90%	▨ 90-110%	▨ >110%

Data Submitted to DMHAS for Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges								▨		11%

▨ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▨ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 62 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 - March 2025 (Data as of Jun 20, 2025)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	23	22	5%
Admits	1	-	
Discharges	1	-	
Service Hours	231	237	-3%

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		20	87%	85%	83%	2%

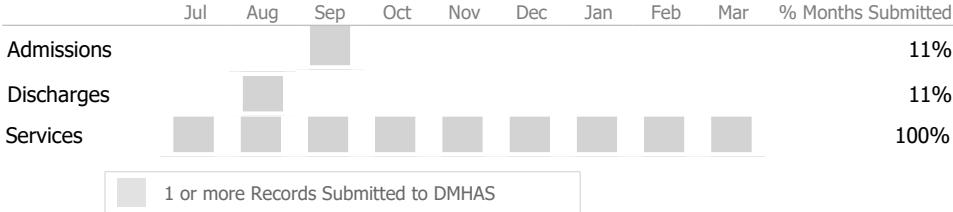## Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		22	100%	90%	94%	10%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	97%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	91%	81%

Data Submitted to DMHAS for Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions			▢							11%
Discharges		▢								11%
Services	▢	▢	▢	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 121 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 - March 2025 (Data as of Jun 20, 2025)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	10	8	25%	▲
Admits	5	4	25%	▲
Discharges	4	3	33%	▲
Bed Days	1,709	1,850	-8%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	94%

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

Discharge Outcomes

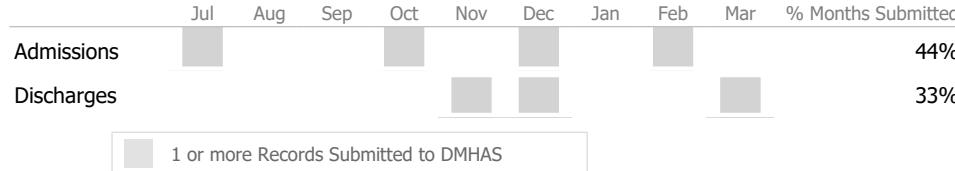|	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		4	100%	60%	71%	40%	▲
✓ Follow-up within 30 Days of Discharge		4	100%	90%	74%	10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Stable Living Situation		10	100%	95%	96%	5%	
● Social Support		5	50%	60%	84%	-10%	
● Employed		0	0%	25%	13%	-25%	▼
✓ Improved/Maintained Function Score		7	100%	95%	73%	5%	

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal	
● Avg Utilization Rate		8	564 days	0.4	78%	90%	90%	-12%	▼

 ▪ < 90%   ▪ 90-110%   ▪ >110%

Data Submitted to DMHAS for Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	▪			▪		▪		▪		44%
Discharges					▪	▪			▪	33%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 62 Active Supervised Apartments Programs