Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2019 - June 2020   (Data as of Oct 19, 2020)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	163	169	-4%	
	Admits	17	36	-53%	▼
	Discharges	33	29	14%	▲
	Service Hours	1,337	1,951	-31%	▼
	Bed Days	8,602	8,831	-3%	
	S.Rehab/PHP/IOP	5,081	8,057	-37%	▼

▲ > 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	58.5%
	Community Support	32	15.1%
	Case Management	29	13.7%
	Residential Services	27	12.7%

Consumer Satisfaction Survey   (Based on 78 FY19 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ General Satisfaction		99%	80%	92%
✓ Participation in Treatment		96%	80%	92%
✓ Overall		95%	80%	91%
✓ Access		95%	80%	88%
✓ Respect		93%	80%	91%
✓ Quality and Appropriateness		90%	80%	93%
✓ Outcome		87%	80%	83%
✓ Recovery		85%	80%	79%

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

Client Demographics

Age		#	%	State Avg
18-25		3	2%	11%
26-34		13	8% ▼	23%
35-44		24	15%	22%
45-54		38	23%	20%
55-64		59	36% ▲	18%
65+		26	16%	6%

Gender		#	%	State Avg
Male		85	52%	60%
Female		78	48%	40%
Transgender				0%

Ethnicity		#	%	State Avg
Non-Hispanic		140	86% ▲	69%
Hisp-Puerto Rican		11	7%	11%
Hispanic-Other		8	5%	8%
Unknown		4	2%	11%
Hispanic-Cuban				0%
Hispanic-Mexican				1%

Race		#	%	State Avg
White/Caucasian		98	60%	62%
Black/African American		48	29% ▲	17%
Other		12	7%	13%
Asian		2	1%	1%
Hawaiian/Other Pacific Islander		2	1%	0%
Multiple Races		1	1%	1%
Am. Indian/Native Alaskan				1%
Unknown				6%

Legend: ▮ 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
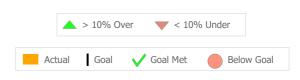Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	124	129	-4%	
Admits	6	15	-60%	▼
Discharges	14	11	27%	▲
Social Rehab/PHP/IOP Days	5,081	8,057	-37%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services	▰▰▰▰▰	101	92%	90%	75%	2%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions		▢		▢	▢	▢	▢	▢					50%
Discharges				▢			▢	▢	▢				33%
Services	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢			83%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▰ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 33 Active Social Rehabilitation Programs

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

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
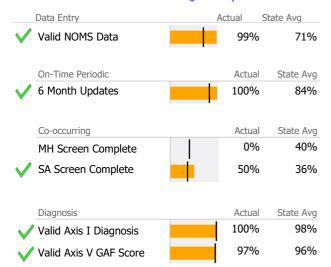Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	32	31	3%	
Admits	2	9	-78%	▼
Discharges	4	1	300%	▲
Service Hours	896	1,398	-36%	▼

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		99%	71%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	84%

Co-occurring		Actual	State Avg
MH Screen Complete		0%	40%
✔ SA Screen Complete		50%	36%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	98%
✔ Valid Axis V GAF Score		97%	96%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		2	50%	65%	62%	-15%	▼

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		30	94%	60%	81%	34%	▲
✔	Stable Living Situation		31	97%	80%	87%	17%	▲
✔	Employed		9	28%	20%	13%	8%	
🔴	Improved/Maintained Axis V GAF Score		6	20%	65%	66%	-45%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		28	100%	90%	99%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions								▪			▪		17%
Discharges				▪			▪	▪					25%
Services	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	▪	100%

▪ 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

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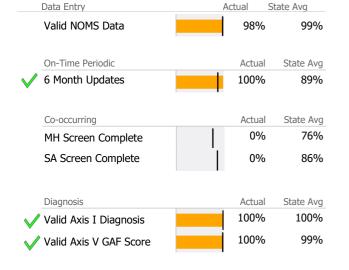Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
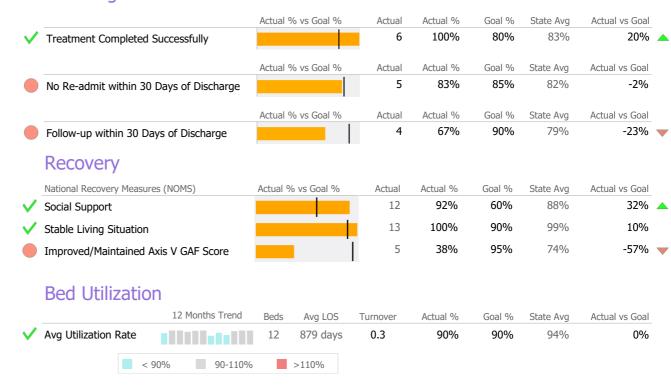Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)
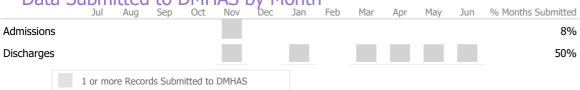
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	14	-7%	
Admits	1	5	-80%	▼
Discharges	6	2	200%	▲
Bed Days	3,961	3,866	2%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		6	100%	80%	83%	20%	▲
●	No Re-admit within 30 Days of Discharge		5	83%	85%	82%	-2%	
●	Follow-up within 30 Days of Discharge		4	67%	90%	79%	-23%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		98%	99%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	89%

Co-occurring		Actual	State Avg
MH Screen Complete		0%	76%
SA Screen Complete		0%	86%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	100%
✓ Valid Axis V GAF Score		100%	99%

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		12	92%	60%	88%	32%	▲
✓	Stable Living Situation		13	100%	90%	99%	10%	
●	Improved/Maintained Axis V GAF Score		5	38%	95%	74%	-57%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		12	879 days	0.3	90%	90%	94%	0%

■ < 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					■								8%
Discharges					■		■		■	■	■	■	50%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 24 Active Group Home Programs

Genoa 1 112251
Keystone House Inc.
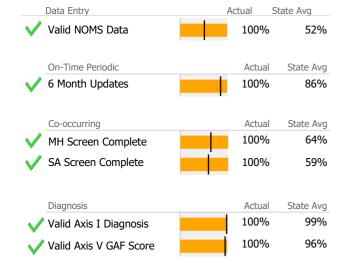Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	1	-	
Discharges	-	1	-100% ▼
Bed Days	2,005	2,161	-7%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	52%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	86%

Co-occurring		Actual	State Avg
✓ MH Screen Complete		100%	64%
✓ SA Screen Complete		100%	59%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	99%
✓ Valid Axis V GAF Score		100%	96%

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%	82%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		6	100%	60%	86%	40% ▲
✓ Stable Living Situation		6	100%	95%	94%	5%
🔴 Employed		1	17%	25%	9%	-8%
🔴 Improved/Maintained Axis V GAF Score		4	80%	95%	64%	-15% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	3,448 days	0.3	91%	90%	97%	1%

▢ < 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							▇						8%
Discharges													0%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▇ Actual	▏ Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 80 Active Supervised Apartments Programs

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 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	29	27	7%	
Admits	6	4	50%	▲
Discharges	7	4	75%	▲
Service Hours	441	492	-10%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		27	93%	85%	89%	8%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		23	100%	90%	97%	10%

Data Submission Quality

Data Entry		Actual	State Avg
✓ Valid NOMS Data		100%	90%

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions		▢				▢				▢		▢	33%
Discharges	▢					▢	▢	▢	▢	▢		▢	58%
Services	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢	▢		100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 99 Active Supportive Housing – Scattered Site Programs

St. John's 1 112240
Keystone House Inc.
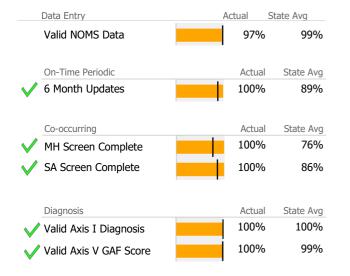Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
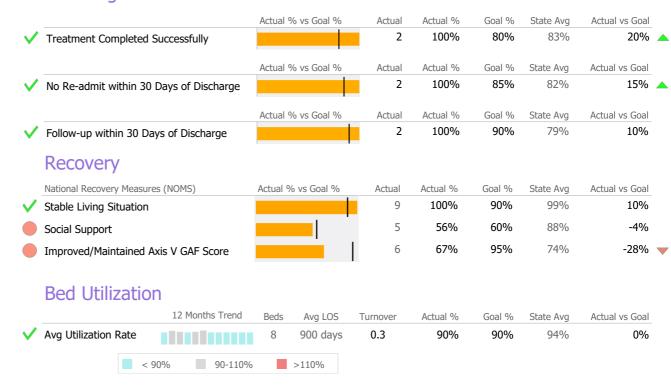Reporting Period: July 2019 - June 2020 (Data as of Oct 19, 2020)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	9	10	-10%
Admits	1	3	-67% ▼
Discharges	2	2	0%
Bed Days	2,636	2,804	-6%

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		2	100%	80%	83%	20%	▲
✓	No Re-admit within 30 Days of Discharge		2	100%	85%	82%	15%	▲
✓	Follow-up within 30 Days of Discharge		2	100%	90%	79%	10%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓	6 Month Updates	100%	89%

Co-occurring		Actual	State Avg
✓	MH Screen Complete	100%	76%
✓	SA Screen Complete	100%	86%

Diagnosis		Actual	State Avg
✓	Valid Axis I Diagnosis	100%	100%
✓	Valid Axis V GAF Score	100%	99%

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Stable Living Situation		9	100%	90%	99%	10%	
🔴	Social Support		5	56%	60%	88%	-4%	
🔴	Improved/Maintained Axis V GAF Score		6	67%	95%	74%	-28%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓	Avg Utilization Rate		8	900 days	0.3	90%	90%	94%	0%

	< 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						▪							8%
Discharges		▪					▪						17%

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

Actual	Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 24 Active Group Home Programs