Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2016 - September 2016   (Data as of Jan 06, 2017)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	150	153	-2%	
	Admits	8	11	-27%	▼
	Discharges	19	12	58%	▲
	Service Hours	354	469	-24%	▼
	Bed Days	2,183	2,290	-5%	
	S.Rehab/PHP/IOP	2,538	2,471	3%	

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

Consumer Satisfaction Survey   (Based on 121 FY16 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	Overall		98%	80%	91%
✓	General Satisfaction		96%	80%	92%
✓	Access		96%	80%	88%
✓	Quality and Appropriateness		96%	80%	93%
✓	Respect		95%	80%	91%
✓	Participation in Treatment		93%	80%	92%
✓	Outcome		92%	80%	83%
✓	Recovery		90%	80%	79%

Legend: ▮ 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	112	56.9%
	Community Support	37	18.8%
	Residential Services	27	13.7%
	Case Management	21	10.7%

Client Demographics

Age

	#	%		State Avg
18-25	5	3%		12%
26-34	16	11%	▼	22%
35-44	15	10%		19%
45-54	44	29%		23%
55-64	49	33%	▲	18%
65+	21	14%		6%

Gender

	#	%	State Avg
Male	85	57%	58%
Female	65	43%	42%
Transgender			0%

Ethnicity

	#	%		State Avg
Non-Hispanic	133	89%	▲	75%
Hispanic-Other	7	5%		7%
Hisp-Puerto Rican	6	4%		12%
Hispanic-Mexican	2	1%		1%
Unknown	2	1%		6%
Hispanic-Cuban				0%

Race

	#	%		State Avg
White/Caucasian	97	65%		65%
Black/African American	42	28%	▲	16%
Other	10	7%		13%
Hawaiian/Other Pacific Islander	1	1%		0%
Am. Indian/Native Alaskan				1%
Asian				1%
Multiple Races				1%
Unknown				3%

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

137 E Ave-PilotsSupHsng112-551
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 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	21	22	-5%
Admits	-	-	
Discharges	-	-	
Service Hours	130	181	-28% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Stable Living Situation		21	100%	85%	79%	15% ▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		21	100%	90%	92%	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 71 Active Supportive Housing – Scattered Site Programs

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 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	112	110	2%	
Admits	4	7	-43%	▼
Discharges	10	6	67%	▲
Service Hours	-	-		
Social Rehab/PHP/IOP Days	2,538	2,471	3%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		103	99%	90%	58%	9%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions			▢	33%
Discharges	▢	▢	▢	100%
Services	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▮ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 38 Active Social Rehabilitation Programs

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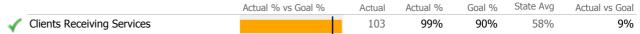Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
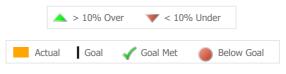Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	12	12	0%
Admits	2	-	
Discharges	3	4	-25% ▼
Service Hours	81	115	-29% ▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		86%	88%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	87%
✓ SA Screen Complete		100%	86%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	98%
✓ Valid Axis V GAF Score		100%	92%

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Treatment Completed Successfully		0	0%	65%	74%	-65% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		11	92%	60%	79%	32% ▲
✓ Stable Living Situation		12	100%	80%	92%	20% ▲
✓ Improved/Maintained Axis V GAF Score		10	100%	95%	58%	5%
● Employed		1	8%	20%	12%	-12% ▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		9	100%	90%	94%	10%

▲ > 10% Over   ▼ < 10% Under

Actual		Goal	✓ Goal Met	● Below Goal

* State Avg based on 47 Active CSP Programs

CSP-ISAP 112-250
Keystone House Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	29	24	21%	▲
Admits	1	1	0%	
Discharges	3	-		
Service Hours	143	173	-17%	▼

Data Submission Quality

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

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

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	87%
✓ SA Screen Complete		100%	86%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	98%
✓ Valid Axis V GAF Score		100%	92%

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		2	67%	65%	74%	2%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Social Support		28	97%	60%	79%	37%	▲
✓ Stable Living Situation		29	100%	80%	92%	20%	▲
🔴 Employed		4	14%	20%	12%	-6%	
🔴 Improved/Maintained Axis V GAF Score		23	85%	95%	58%	-10%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		27	100%	90%	94%	10%

▲ > 10% Over   ▼ < 10% Under

🟧 Actual	❘ Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 47 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 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

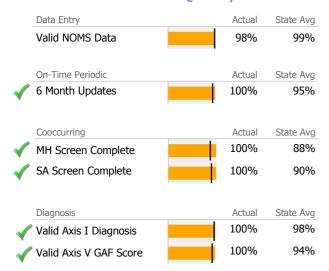| Measure	Actual	1 Yr Ago	Variance %
Unique Clients	13	12	8%
Admits	1	1	0%
Discharges	2	-	
Bed Days	986	1,063	-7%

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	95%

Cooccurring		Actual	State Avg
✔ MH Screen Complete		100%	88%
✔ SA Screen Complete		100%	90%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	98%
✔ Valid Axis V GAF Score		100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions		■		33%
Discharges	■	■		67%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		2	100%	80%	92%	20%	▲
✔	No Re-admit within 30 Days of Discharge		2	100%	85%	91%	15%	▲
✔	Follow-up within 30 Days of Discharge		2	100%	90%	78%	10%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		12	92%	60%	80%	32%	▲
✔	Stable Living Situation		13	100%	90%	98%	10%	
●	Improved/Maintained Axis V GAF Score		2	17%	95%	62%	-78%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
●	Avg Utilization Rate		12	699 days	0.9	89%	90%	95%	-1%

< 90%	90-110%	>110%

▲ > 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
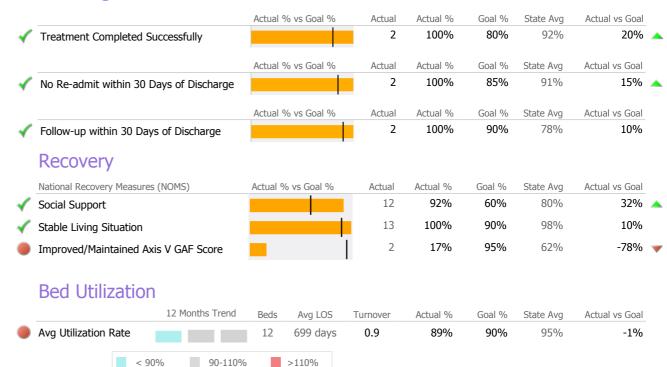Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	7	-14%	▼
Admits	-	1	-100%	▼
Discharges	-	1	-100%	▼
Bed Days	552	499	11%	▲

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		N/A	99%

On-Time Periodic		Actual	State Avg
6 Month Updates		83%	91%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	90%
SA Screen Complete		N/A	89%

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

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	60%	73%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	81%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		6	100%	60%	85%	40%	▲
✔ Stable Living Situation		6	100%	95%	97%	5%	
● Employed		0	0%	25%	7%	-25%	▼
● Improved/Maintained Axis V GAF Score		3	50%	95%	66%	-45%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		6	2,656 days	1.0	100%	90%	91%	10%

	< 90%		90-110%		>110%

▲ > 10% Over   ▼ < 10% Under

■ Actual		Goal	✔ Goal Met	● Below Goal

* State Avg based on 74 Active Supervised Apartments Programs

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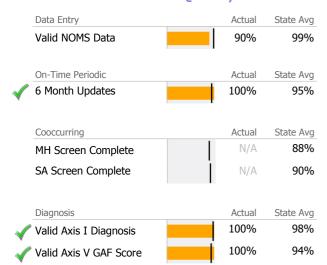Keystone House Inc.
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
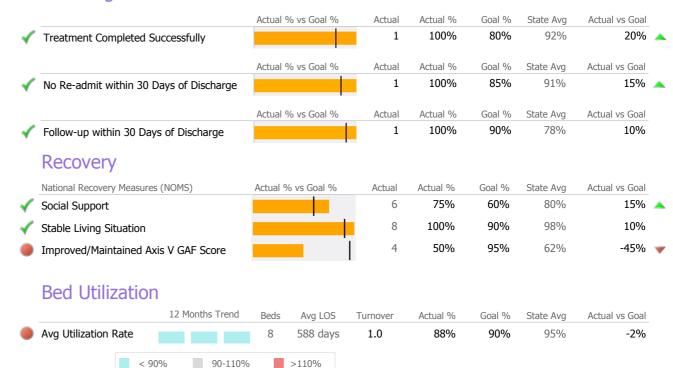Reporting Period: July 2016 - September 2016 (Data as of Jan 06, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	9	-11%	▼
Admits	-	1	-100%	▼
Discharges	1	1	0%	
Bed Days	645	728	-11%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		90%	99%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	95%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	88%
SA Screen Complete		N/A	90%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	98%
✔ Valid Axis V GAF Score		100%	94%

Data Submitted to DMHAS by Month

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

1 or more Records Submitted to DMHAS

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Treatment Completed Successfully		1	100%	80%	92%	20%	▲
✔	No Re-admit within 30 Days of Discharge		1	100%	85%	91%	15%	▲
✔	Follow-up within 30 Days of Discharge		1	100%	90%	78%	10%	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		6	75%	60%	80%	15%	▲
✔	Stable Living Situation		8	100%	90%	98%	10%	
●	Improved/Maintained Axis V GAF Score		4	50%	95%	62%	-45%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
●	Avg Utilization Rate		8	588 days	1.0	88%	90%	95%	-2%

■ < 90%   ■ 90-110%   ■ >110%

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 24 Active Group Home Programs