Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2017 - September 2017   (Data as of Dec 13, 2017)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	143	150	-5%	
	Admits	4	8	-50%	▼
	Discharges	2	19	-89%	▼
	Service Hours	568	354	60%	▲
	Bed Days	2,283	2,183	5%	
	S.Rehab/PHP/IOP	1,832	2,538	-28%	▼

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	104	56.8%
	Community Support	31	16.9%
	Residential Services	25	13.7%
	Case Management	23	12.6%

Consumer Satisfaction Survey   (Based on 111 FY17 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Respect		98%	80%	91%
✓ Overall		96%	80%	91%
✓ General Satisfaction		95%	80%	92%
✓ Quality and Appropriateness		95%	80%	93%
✓ Recovery		94%	80%	79%
✓ Participation in Treatment		94%	80%	92%
✓ Outcome		93%	80%	83%
✓ Access		93%	80%	88%

Satisfied % | Goal %   ▮ 0-80%   ▮ 80-100%   ✓ Goal Met   ⬤ Under Goal

Client Demographics

Age

	#	%		State Avg
18-25	7	5%		11%
26-34	10	7%	▼	22%
35-44	18	13%		19%
45-54	39	27%		22%
55-64	51	36%	▲	19%
65+	18	13%		6%

Gender

	#	%	State Avg
Male	78	55%	58%
Female	65	45%	41%
Transgender			0%

Ethnicity

	#	%		State Avg
Non-Hispanic	124	87%	▲	74%
Hisp-Puerto Rican	9	6%		13%
Hispanic-Other	7	5%		7%
Unknown	2	1%		6%
Hispanic-Mexican	1	1%		1%
Hispanic-Cuban				0%

Race

	#	%		State Avg
White/Caucasian	89	62%		65%
Black/African American	39	27%	▲	16%
Other	12	8%		13%
Asian	1	1%		1%
Multiple Races	1	1%		1%
Hawaiian/Other Pacific Islander	1	1%		0%
Am. Indian/Native Alaskan				1%
Unknown				3%

▮ 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
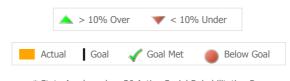Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	104	112	-7%	
Admits	2	4	-50%	▼
Discharges	-	10	-100%	▼
Service Hours	-	-		
Social Rehab/PHP/IOP Days	1,832	2,538	-28%	▼

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		104	100%	90%	65%	10%

Data Submitted to DMHAS by 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 36 Active Social Rehabilitation Programs

CSP - 1
Keystone House Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	23	29	-21%	▼
Admits	-	1	-100%	▼
Discharges	-	3	-100%	▼
Service Hours	282	143	98%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	92%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	84%
SA Screen Complete		N/A	83%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	98%
✔ Valid Axis V GAF Score		100%	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
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		N/A	N/A	65%	65%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		22	96%	60%	82%	36%	▲
✔ Improved/Maintained Axis V GAF Score		20	91%	65%	58%	26%	▲
✔ Stable Living Situation		23	100%	80%	93%	20%	▲
🔴 Employed		4	17%	20%	12%	-3%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		23	100%	90%	98%	10%

▲ > 10% Over	▼ < 10% Under	

Actual	| Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 48 Active CSP Programs

CSP - 2
Keystone House Inc.
Mental Health - Community Support - CSP

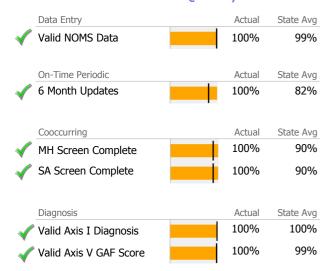Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	12	-33%	▼
Admits	-	2	-100%	▼
Discharges	-	3	-100%	▼
Service Hours	131	81	62%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	92%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	84%
SA Screen Complete		N/A	83%

Diagnosis		Actual	State Avg
✔ Valid Axis I Diagnosis		100%	98%
✔ Valid Axis V GAF Score		100%	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				0%
Discharges				0%
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		N/A	N/A	65%	65%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		8	100%	60%	82%	40%	▲
✔ Improved/Maintained Axis V GAF Score		8	100%	65%	58%	35%	▲
✔ Stable Living Situation		8	100%	80%	93%	20%	▲
✔ Employed		2	25%	20%	12%	5%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		8	100%	90%	98%	10%

▲ > 10% Over	▼ < 10% Under

☐ Actual	│ Goal	✔ Goal Met	⬤ Below Goal

* State Avg based on 48 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 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	11	13	-15%	▼
Admits	1	1	0%	
Discharges	1	2	-50%	▼
Bed Days	995	986	1%	

Data Submission Quality

Data Entry	Actual % vs	Actual	State Avg
✔ Valid NOMS Data		100%	99%

On-Time Periodic		Actual	State Avg
✔ 6 Month Updates		100%	82%

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

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	% Months Submitted
Admissions				33%
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		0	0%	80%	90%	-80%	▼
✔	No Re-admit within 30 Days of Discharge		1	100%	85%	100%	15%	▲
	Follow-up within 30 Days of Discharge		N/A	N/A	90%	84%	N/A	

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔	Social Support		11	100%	60%	85%	40%	▲
✔	Stable Living Situation		11	100%	90%	99%	10%	
🔴	Improved/Maintained Axis V GAF Score		4	57%	95%	62%	-38%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔	Avg Utilization Rate		12	414 days	1.1	90%	90%	96%	0%

< 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 2017 - September 2017 (Data as of Dec 13, 2017)

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		100%	99%

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	81%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	85%
SA Screen Complete		N/A	83%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	99%
✓ 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%	77%	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	
✓ Social Support		6	100%	60%	85%	40%	▲
✓ Stable Living Situation		6	100%	95%	98%	5%	
● Employed		0	0%	25%	6%	-25%	▼
● Improved/Maintained Axis V GAF Score		4	67%	95%	66%	-28%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	3,021 days	1.0	100%	90%	95%	10%

☐ < 90%	☐ 90-110%	☐ >110%

▲ > 10% Over   ▼ < 10% Under

☐ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 70 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 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	23	21	10%	
Admits	1	-		
Discharges	1	-		
Service Hours	154	130	19%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Stable Living Situation		22	96%	85%	87%	11%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		22	100%	90%	92%	10%

Data Submission Quality

Data Entry		Actual	State Avg
✔ Valid NOMS Data		100%	99%

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

Data Submitted to DMHAS by 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 69 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 2017 - September 2017 (Data as of Dec 13, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	8	8	0%	
Admits	-	-		
Discharges	-	1	-100%	▼
Bed Days	736	645	14%	▲

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	80%	90%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	100%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	84%	N/A

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		63%	82%

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

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		8	100%	90%	99%	10%	
✔ Social Support		5	62%	60%	85%	2%	
🔴 Improved/Maintained Axis V GAF Score		3	38%	95%	62%	-57%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✔ Avg Utilization Rate		8	680 days	1.0	100%	90%	96%	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 24 Active Group Home Programs