Keystone House Inc.
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2018 - December 2018 (Data as of Mar 19, 2019)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %	
	Unique Clients	153	148	3%	
	Admits	14	11	27%	▲
	Discharges	14	8	75%	▲
	Service Hours	859	979	-12%	▼
	Bed Days	4,176	4,558	-8%	
	S.Rehab/PHP/IOP	3,799	3,473	9%	

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	113	58.9%
	Community Support	29	15.1%
	Residential Services	27	14.1%
	Case Management	23	12.0%

Consumer Satisfaction Survey   (Based on 99 FY18 Surveys)

	Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓	General Satisfaction		97%	80%	92%
✓	Access		97%	80%	88%
✓	Respect		97%	80%	91%
✓	Overall		96%	80%	91%
✓	Recovery		95%	80%	79%
✓	Quality and Appropriateness		94%	80%	93%
✓	Participation in Treatment		93%	80%	92%
✓	Outcome		91%	80%	83%

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

Client Demographics

Age

Age	#	%		State Avg
18-25	6	4%		11%
26-34	13	8%	▼	23%
35-44	20	13%		21%
45-54	40	26%		21%
55-64	50	33%	▲	18%
65+	24	16%		6%

Gender

Gender	#	%	State Avg
Male	83	54%	59%
Female	70	46%	41%
Transgender			0%

Ethnicity

Ethnicity	#	%		State Avg
Non-Hispanic	133	87%	▲	71%
Hisp-Puerto Rican	10	7%		13%
Hispanic-Other	8	5%		7%
Unknown	2	1%		9%
Hispanic-Cuban				0%
Hispanic-Mexican				1%

Race

Race	#	%		State Avg
White/Caucasian	92	60%		63%
Black/African American	44	29%	▲	16%
Other	14	9%		13%
Asian	1	1%		1%
Multiple Races	1	1%		1%
Hawaiian/Other Pacific Islander	1	1%		0%
Am. Indian/Native Alaskan				1%
Unknown				5%

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
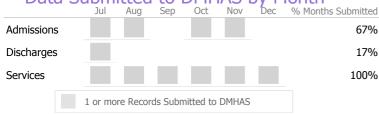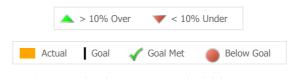Reporting Period: July 2018 - December 2018 (Data as of Mar 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	113	106	7%	
Admits	4	3	33%	▲
Discharges	2	-		
Service Hours	1	-		
Social Rehab/PHP/IOP Days	3,799	3,473	9%	

Service Utilization

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔	Clients Receiving Services		111	100%	90%	69%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▨	▨		▨	▨		67%
Discharges	▨						17%
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
Keystone House Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - December 2018 (Data as of Mar 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	26	4%	
Admits	5	2	150%	▲
Discharges	-	3	-100%	▼
Service Hours	567	511	11%	▲

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		9%	93%

Cooccurring		Actual	State Avg
MH Screen Complete		38%	91%
SA Screen Complete		38%	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	Oct	Nov	Dec	% Months Submitted
Admissions			▢	▢	▢		50%
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%	67%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		26	96%	60%	82%	36%	▲
✔ Stable Living Situation		27	100%	80%	93%	20%	▲
✔ Employed		6	22%	20%	13%	2%	
🔴 Improved/Maintained Axis V GAF Score		0	0%	65%	63%	-65%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		27	100%	90%	99%	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
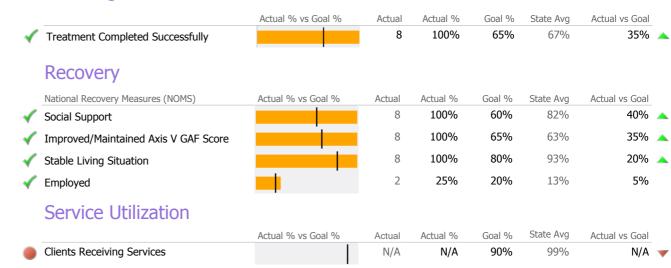Reporting Period: July 2018 - December 2018 (Data as of Mar 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	8	8	0%
Admits	-	-	
Discharges	8	-	
Service Hours	61	190	-68% ▼

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		N/A	93%

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	91%
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	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges			☐	☐			33%
Services		☐	☐	☐	☐		67%

☐ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Treatment Completed Successfully		8	100%	65%	67%	35% ▲

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%	63%	35% ▲
✔ Stable Living Situation		8	100%	80%	93%	20% ▲
✔ Employed		2	25%	20%	13%	5%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴 Clients Receiving Services		N/A	N/A	90%	99%	N/A ▼

▲ > 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.
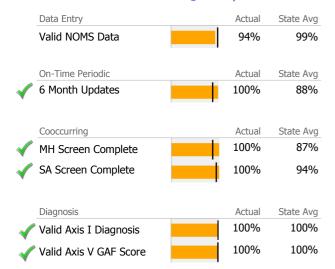Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
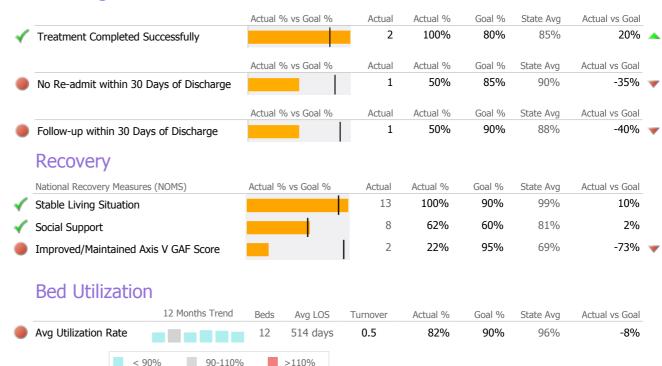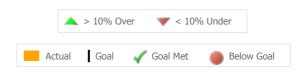Reporting Period: July 2018 - December 2018 (Data as of Mar 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	13	0%	
Admits	4	3	33%	▲
Discharges	2	2	0%	
Bed Days	1,805	1,985	-9%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		2	100%	80%	85%	20%	▲
🔴	No Re-admit within 30 Days of Discharge		1	50%	85%	90%	-35%	▼
🔴	Follow-up within 30 Days of Discharge		1	50%	90%	88%	-40%	▼

Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		94%	99%

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

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	87%
✓ SA Screen Complete		100%	94%

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

Recovery

National Recovery Measures (NOMS)		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓	Stable Living Situation		13	100%	90%	99%	10%
✓	Social Support		8	62%	60%	81%	2%
🔴	Improved/Maintained Axis V GAF Score		2	22%	95%	69%	-73% ▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Avg Utilization Rate		12	514 days	0.5	82%	90%	96%	-8%

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		▪	▪		▪		50%
Discharges	▪					▪	33%

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.
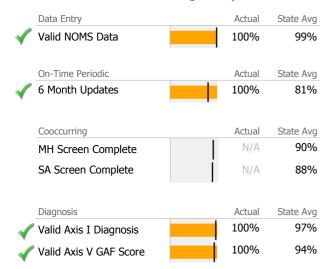Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2018 - December 2018 (Data as of Mar 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	6	6	0%
Admits	-	-	
Discharges	-	-	
Bed Days	1,104	1,104	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	90%
SA Screen Complete		N/A	88%

Diagnosis		Actual	State Avg
✓ Valid Axis I Diagnosis		100%	97%
✓ Valid Axis V GAF Score		100%	94%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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%	66%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	74%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		6	100%	60%	83%	40% ▲
✓ Stable Living Situation		6	100%	95%	95%	5%
🔴 Employed		1	17%	25%	12%	-8%
🔴 Improved/Maintained Axis V GAF Score		4	67%	95%	63%	-28% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		6	3,478 days	0.5	100%	90%	95%	10%

	< 90%		90-110%		>110%

▲ > 10% Over   ▼ < 10% Under

🟧 Actual		Goal	✓ Goal Met	🔴 Below Goal

* State Avg based on 62 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 2018 - December 2018 (Data as of Mar 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	23	25	-8%	
Admits	-	3	-100%	▼
Discharges	1	2	-50%	▼
Service Hours	231	278	-17%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Stable Living Situation		23	100%	85%	85%	15%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		22	100%	90%	95%	10%

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
6 Month Updates		50%	88%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							0%
Discharges				▢			17%
Services	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

▭ Actual	│ Goal	✔ Goal Met	● Below Goal

* State Avg based on 74 Active Supportive Housing – Scattered Site Programs

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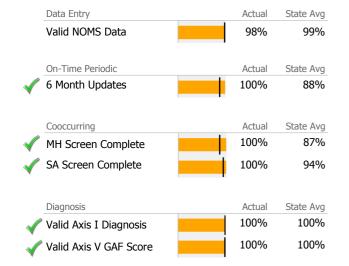Mental Health - Residential Services - Group Home

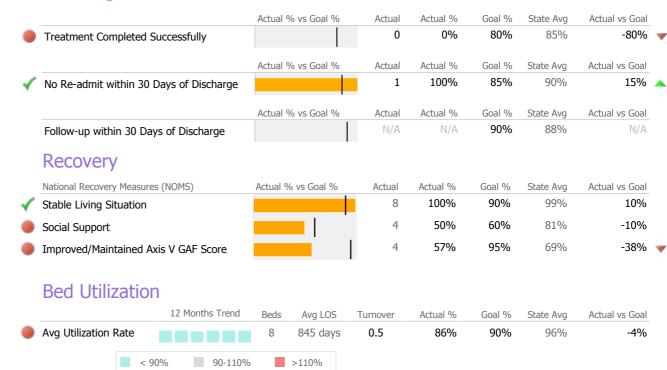Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
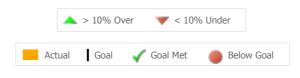Reporting Period: July 2018 - December 2018 (Data as of Mar 19, 2019)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	8	8	0%
Admits	1	-	
Discharges	1	1	0%
Bed Days	1,267	1,469	-14% ▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Treatment Completed Successfully		0	0%	80%	85%	-80% ▼
✓	No Re-admit within 30 Days of Discharge		1	100%	85%	90%	15% ▲
	Follow-up within 30 Days of Discharge		N/A	N/A	90%	88%	N/A

Data Submission Quality

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

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

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	87%
✓ SA Screen Complete		100%	94%

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

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		4	50%	60%	81%	-10%
🔴	Improved/Maintained Axis V GAF Score		4	57%	95%	69%	-38% ▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Avg Utilization Rate		8	845 days	0.5	86%	90%	96%	-4%

■ < 90%   ▢ 90-110%   🔴 >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▢						17%
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