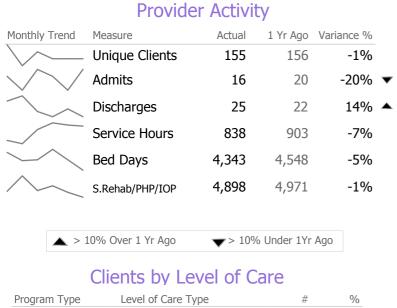**Keystone House Inc.**
Norwalk, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2016 - December 2016   (Data as of Mar 21, 2017)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	155	156	-1%
	Admits	16	20	-20% ▼
	Discharges	25	22	14% ▲
	Service Hours	838	903	-7%
	Bed Days	4,343	4,548	-5%
	S.Rehab/PHP/IOP	4,898	4,971	-1%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Mental Health			
	Social Rehabilitation	117	57.4%
	Community Support	38	18.6%
	Residential Services	28	13.7%
	Case Management	21	10.3%

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%

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

Client Demographics

Age

Age	#	%		State Avg
18-25	6	4%		13%
26-34	17	11%	▼	23%
35-44	17	11%		19%
45-54	44	28%		22%
55-64	50	32%	▲	17%
65+	21	14%		5%

Gender

Gender	#	%		State Avg
Male	87	56%		59%
Female	68	44%		41%
Transgender				0%

Ethnicity

Ethnicity	#	%		State Avg
Non-Hispanic	137	88%	▲	74%
Hispanic-Other	7	5%		7%
Hisp-Puerto Rican	7	5%		12%
Hispanic-Mexican	2	1%		1%
Unknown	2	1%		6%
Hispanic-Cuban				0%

Race

Race	#	%		State Avg
White/Caucasian	100	65%		65%
Black/African American	43	28%	▲	16%
Other	10	6%		13%
Asian	1	1%		1%
Hawaiian/Other Pacific Islander	1	1%		0%
Am. Indian/Native Alaskan				1%
Multiple Races				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 2016 - December 2016   (Data as of Mar 21, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	117	114	3%	
Admits	10	12	-17%	▼
Discharges	10	13	-23%	▼
Service Hours	-	-		
Social Rehab/PHP/IOP Days	4,898	4,971	-1%	

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		108	100%	90%	66%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions			▢	▢	▢	▢	67%
Discharges	▢	▢	▢				50%
Services	▢	▢	▢	▢	▢	▢	100%

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

■ Actual | Goal   ✔ Goal Met   ● Below Goal

* State Avg based on 37 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 2016 - December 2016 (Data as of Mar 21, 2017)

Program Activity

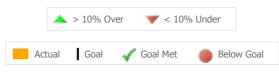| Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	29	25	16%	▲
Admits	1	2	-50%	▼
Discharges	4	-		
Service Hours	394	341	16%	▲

Data Submission Quality

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

On-Time Periodic	Actual % vs Goal %	Actual	State Avg
✔ 6 Month Updates		92%	88%

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

Diagnosis	Actual % vs Goal %	Actual	State Avg
✔ Valid Axis I Diagnosis		100%	97%
✔ Valid Axis V GAF Score		100%	92%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							17%
Discharges							67%
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		3	75%	65%	68%	10%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Social Support		28	97%	60%	80%	37%	▲
✔ Stable Living Situation		29	100%	80%	92%	20%	▲
🔴 Employed		4	14%	20%	12%	-6%	
🔴 Improved/Maintained Axis V GAF Score		23	82%	95%	61%	-13%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✔ Clients Receiving Services		25	100%	90%	98%	10%	

▲ > 10% Over	▼ < 10% Under

▮ Actual	▏ Goal	✔ Goal Met	🔴 Below Goal

* State Avg based on 47 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 2016 - December 2016 (Data as of Mar 21, 2017)

Program Activity

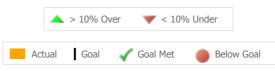| Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	13	0%	
Admits	3	1	200%	▲
Discharges	5	4	25%	▲
Service Hours	168	219	-23%	▼

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
🔴	Treatment Completed Successfully		2	40%	65%	68%	-25%	▼

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%	80%	92%	20%	▲
🔴	Employed		2	15%	20%	12%	-5%	
✔	Improved/Maintained Axis V GAF Score		11	100%	95%	61%	5%	

Data Submission Quality

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

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

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

Diagnosis		Actual	State Avg
✔	Valid Axis I Diagnosis	100%	97%
✔	Valid Axis V GAF Score	100%	92%

Service Utilization

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	▪					▪	33%
Discharges		▪		▪	▪		50%
Services	▪	▪	▪	▪	▪	▪	100%

▫ 1 or more Records Submitted to DMHAS

▲ > 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 - December 2016 (Data as of Mar 21, 2017)

Program Activity
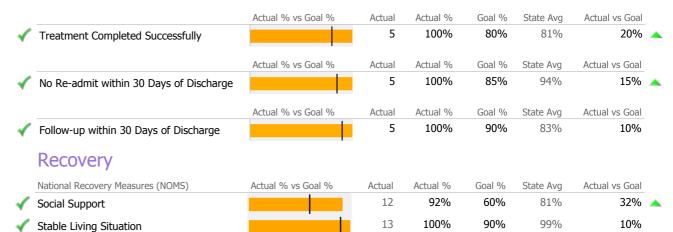
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	13	0%	
Admits	1	2	-50%	▼
Discharges	5	2	150%	▲
Bed Days	1,876	2,082	-10%	

Discharge Outcomes

		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Treatment Completed Successfully		5	100%	80%	81%	20%	▲
✓	No Re-admit within 30 Days of Discharge		5	100%	85%	94%	15%	▲
✓	Follow-up within 30 Days of Discharge		5	100%	90%	83%	10%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	98%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	89%
✓ SA Screen Complete		100%	90%

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

Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	Social Support		12	92%	60%	81%	32%	▲
✓	Stable Living Situation		13	100%	90%	99%	10%	
🔴	Improved/Maintained Axis V GAF Score		10	83%	95%	69%	-12%	▼

Bed Utilization

		12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
🔴	Avg Utilization Rate		12	731 days	0.5	85%	90%	94%	-5%

	< 90%		90-110%		>110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions		▢					17%
Discharges	▢	▢			▢	▢	67%

▢ 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 2016 - December 2016 (Data as of Mar 21, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	6	7	-14%	▼
Admits	-	1	-100%	▼
Discharges	-	1	-100%	▼
Bed Days	1,104	1,051	5%	

Data Submission Quality

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

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

Cooccurring		Actual	State Avg
MH Screen Complete		N/A	86%
SA Screen Complete		N/A	86%

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	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%	72%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	78%	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%	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	2,748 days	0.5	100%	90%	93%	10%

☐ < 90%   ☐ 90-110%   ☐ >110%

▲ > 10% Over   ▼ < 10% Under

☐ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 73 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 2016 - December 2016 (Data as of Mar 21, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	21	22	-5%
Admits	-	-	
Discharges	-	-	
Service Hours	275	343	-20% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Stable Living Situation		21	100%	85%	80%	15% ▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✔ Clients Receiving Services		21	100%	90%	96%	10%

Data Submission Quality

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

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

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% 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

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 - December 2016 (Data as of Mar 21, 2017)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	9	10	-10%	
Admits	1	2	-50%	▼
Discharges	1	2	-50%	▼
Bed Days	1,363	1,415	-4%	

Data Submission Quality

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

On-Time Periodic		Actual	State Avg
✓ 6 Month Updates		100%	98%

Cooccurring		Actual	State Avg
✓ MH Screen Complete		100%	89%
✓ SA Screen Complete		100%	90%

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	Oct	Nov	Dec	% Months Submitted
Admissions				▨			17%
Discharges	▨						17%

▨ 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%	81%	20%	▲
✓ No Re-admit within 30 Days of Discharge		1	100%	85%	94%	15%	▲
✓ Follow-up within 30 Days of Discharge		1	100%	90%	83%	10%	

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		6	67%	60%	81%	7%	
● Improved/Maintained Axis V GAF Score		4	50%	95%	69%	-45%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		8	636 days	0.5	93%	90%	94%	3%

< 90%	90-110%	>110%

▲ > 10% Over   ▼ < 10% Under

▨ Actual | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on 24 Active Group Home Programs