

MID-OHIO PSYCHOLOGICAL SERVICES, INC.

624 East Main Street
Lancaster, Ohio 43130

Voice (740) 687-0042

Fax (740) 687-0024

Bradley A. Hedges, Ph.D.
Executive Director

Stephanie L. Miller, Ph.D.
Clinical Director

QA REPORT

TO: Bradley A. Hedges, Ph.D.
Executive Director
FROM: Bonnie Pearse, MSW, LSW
QA Coordinator
SUBJECT: Quality Assurance Activities for December 2001

SUBMITTED: June 4, 2002

I: MAJOR UNUSUAL INCIDENTS

There were no major unusual incidents in the month of December 2001.

II: TRANSFERS FROM STATE HOSPITALS

There were no clients discharged from State Hospitals in the month of December. There were no clients discharged from psychiatric units in area hospitals

III: PLANT/PHYSICAL HEALTH AND SAFETY

No health or safety issues were identified by the building inspection.



IV: RECORDS COMPLETENESS REVIEW

Clinicians	Percentage Passed	Percentage Failed
Dr. Brad Hedges	100	
Robin Murphy		88
Dr. Chris Ray		89
Tonya Kraner		89
Scott Craft	96	
Dean Bachelor		87
Dr. Stephanie Miller		91
Claire Robitaille	95	
Joni Grim		86
Chris Johnson	98	
Steve Ford	98	
Kristin Taylor	98	
Dr. Suzanne Wing		92
Miriam Murray	96	
Paula Roberts	99	
Cassie Dille	99	
Bonnie Pearse	98	

Forty one percent of the clinicians failed the record completeness review. The reasons for the failure and the percentage of records reviewed are as follows:

Sixty five percent of the records reviewed were missing a copy of Decembers medical card.
 Sixty five percent of records reviewed were missing forms or had incomplete forms.
 Thirty five percent of the records reviewed were missing signatures on required documentation.
 At least one session did not match the billing record in 53% of the records reviewed.

V: PEER REVIEW

Clinicians	Percentage Passed	Percentage Failed
Dr. Brad Hedges	100	
Robin Murphy	95	
Dr. Chris Ray		76
Tonya Kraner	100	
Scott Craft		82
Dean Bachelor		81
Dr. Stephanie Miller	91	
Claire Robitaille	99	
Joni Grim		87
Chris Johnson		72
Steve Ford	97	
Kristin Taylor	100	
Dr. Suzanne Wing	91	
Miriam Murray	97	
Paula Roberts	98	
Cassie Dille	96	
Bonnie Pearse	100	

Twenty nine percent of the clinicians failed the peer review. Reason for failures is as follows:

Twelve percent of the records reviewed did not have education documented pertaining to medications.

Thirty five percent of the records reviewed did not address issues pertaining to transfers and referrals. Also, the records were not maintained consistently in that they had case notes that were not completed or were not billed for.

VI: UTILIZATION REVIEW

Clinician	Total number of clients
Dean Bachelor, M.Div.	14
Joni Grim, M.Ed., LSW	29
Dr. Bradley Hedges, Ph.D.	8
Dr. Suzanne Wing	17
Chris Johnson, M.Ed.	55
Dr. Chris Ray, Ph.D.	47
Dr. Stephanie Miller, Ph.D.	2
Tonya Kraner, LISW	28
Robin Murphy, M.Ed., LPCC	30
Scott Craft, M.A.	51
Steve Ford, M.A., LPC	41
Bonnie Pearse	25
Paula Roberts	10
Claire Robitaille	25
Miriam Murray	8
Kristin Taylor, M.Ed	17
Cassie Dille	18

The "No Show" rate for December was 13.5%. When considering both the "no show" rate and the cancellation rate, this figure is 23%.

Service Area	Total Number of Units This Month (All of MOPS)	Medicaid Units Billed for Month for Fairfield County	Monthly Allocated Medicaid Units	Year to Date Total Units for MOPS	Year to Date Medicaid Units Billed for Fairfield County	Year to Date Allocated Medicaid Units
Diagnostic Assessment	89.1	52.7	21.42	618.99	309.85	107.1
Individual Counseling	332.75	142.15	86.25	2035.18	699.95	431.25
Group Counseling	177.3	90.8	27.25	1336.59	256.4	136.25
Medication/somatic Services	12.3	9.7	22.08	78.8	27.5	110.4
Community Support Program (CSP)	239.5	207	433.40	1310.52	446.2	997
Alcohol and Other Drug (AOD) - Group	0	0	65	40	0	210

VII: AOD UTILIZATION REVIEW

As noted in last months QA report we will continue to monitor the need for AOD services.

VIII: INVOLUNTARY TERMINATIONS

No involuntary terminations were conducted during the month of December.

IX: PROFESSIONAL STAFF ORGANIZATION

Clinical staff maintains current licensure requirements. The following table reflects the workshops staff attended in the month of December.

Dean Bachelor	Mental Health Conference	11/01/01	No CEU's
Dr. Brad Hedges	ODMH Audit Survey	12/07/01	No CEU's
Bonnie Pearse	ODMH Audit Survey	12/07/01	No CEU's
Bonnie Pearse	ODADAS Core Training	12/19/01 & 12/20/01	9 CEU's

X: REVIEW OF WAITING LIST

There continues to be no waiting list. The average time elapsed between initial phone contact and first offered session will be added once our new management information system is up and running in July. Our intent will be to re-run these numbers once the new management information system is in place.

There were 19 new clients seen this month. Total of clients seen in the month of December was 302. Forty two percent of the new clients were from Fairfield County. For the month of December 78% of the sessions conducted were with clients from Fairfield County.

XI: REVIEW OF SERVICES UNDER CONTRACT

No changes are noted regarding the services under contract.

XII: FOCUSED REVIEW AREA

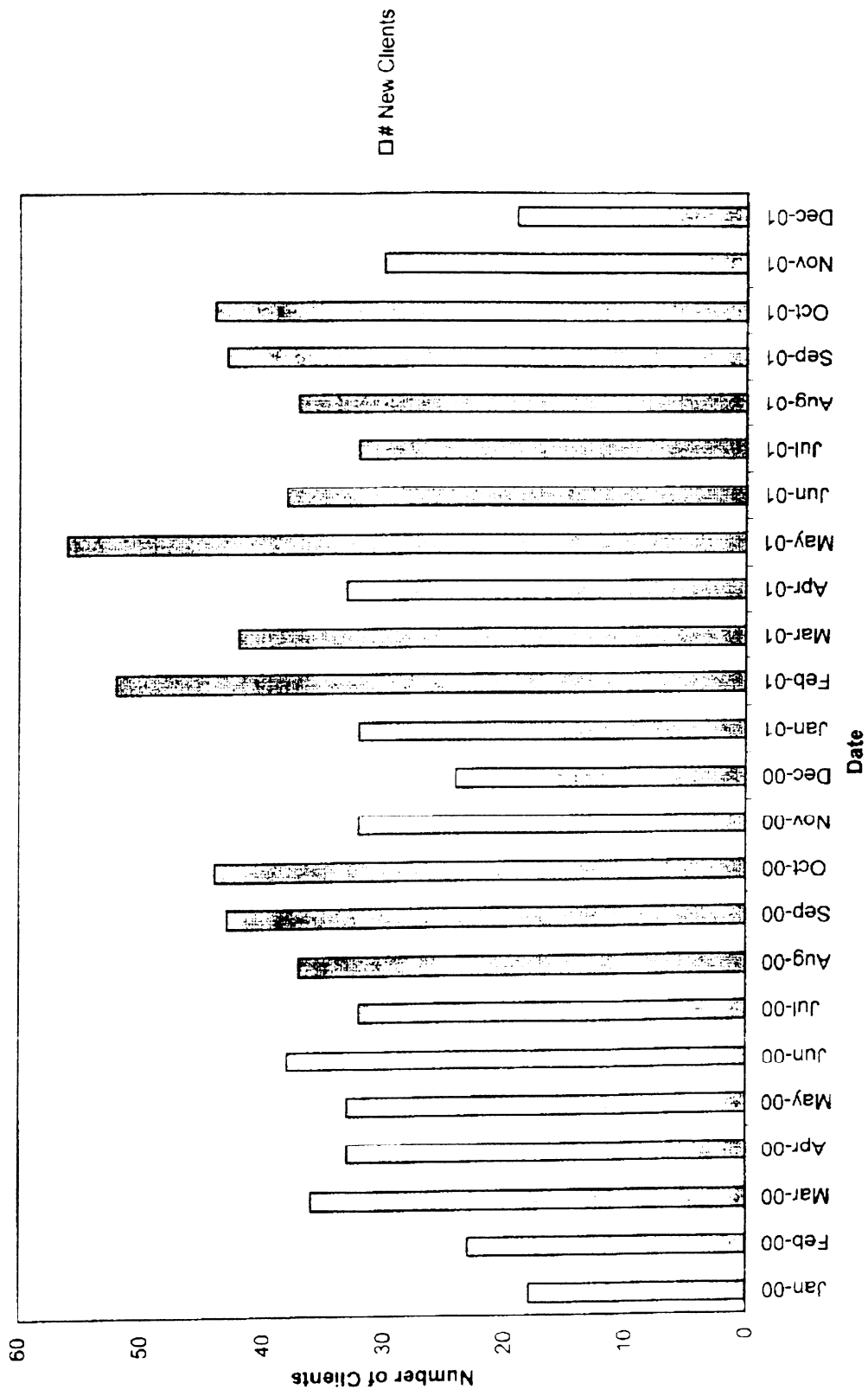
The issues that were covered in the month of December include reviewing the Policy and Procedure Manual and sending the quarterly report to the Board. The policy and Procedure Manual is currently being reviewed and policies and procedures are being updated before sending recommendations to the Board. Specific issues reviewed include: Internet, Seclusion and Restraint, and Travel Policies. The quarterly report is currently being completed. Once completed, it will be forwarded to the board.

XIII: RESPONSE TO LAST MONTH'S FOCUS REVIEW

In response to last month's review, Janet Galligan Executive Director of Our Place is under contract with Mid Ohio Psychological Services to do supervision. Our Place and Mid Ohio Psychological Services dually employ Miriam Murray. Regular meetings with Janet Galligan and Chris Ray are scheduled to address the needs of the consumers.

cc: Fairfield County Mental Health and Recovery Services Board
MOPS Board of Directors
MOPS Staff
QA Minutes Logbook

Number of New Clients by Month FY 01/02



FY 00/01/02 Units of Service

