

QA REPORT

May 25, 2001

TO: Bradley A. Hedges, Ph.D.
Executive Director

FROM: *Robin Murphy MEd, LPCC*
Robin Murphy, M.Ed., LPCC
Professional Clinical Counselor
QA Coordinator

SUBJECT: Quality Assurance Activities for January, 2001

Those present in the meeting include: Alice Grant and Robin Murphy. The following Quality Assurance Issues were addressed in this meeting:

I: MAJOR UNUSUAL INCIDENTS

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

II: TRANSFERS FROM STATE HOSPITALS

There were no transfers from state hospitals. One client seen by Tonya Kraner was referred to Bethesda Hospital on 1/31/01. This client was not released from psychiatric hospitalization during the month of January.

III: PLANT/PHYSICAL HEALTH AND SAFETY

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

IV: RECORDS COMPLETENESS REVIEW

Clinicians Passed	Percentage
Dr. Bradley Hedges	98%
Joni Grim	100%
Robin Murphy	96%
Dr. Suzanne Wing	98%

Clinicians Failed	Percentage
Dr. Chris Ray	77%
Dr. Stephanie Miller	91%
Chris Johnson	59%
Steve Ford	87%
Scott Craft	69%
Tony Kraner	93%
Dean Bachelor	86%

V: PEER REVIEW

Clinicians Passed	Percentage
Dr. Bradley Hedges	100%
Dr. Suzanne Wing	96%
Robin Murphy	97%
Joni Grim	98%
Dr. Stephanie Miller	91%
Tonya Kraner	97%
Steve Ford	94%

Clinicians Failed	Percentage
Dean Bachelor	85%
Scott Craft	46%
Dr. Chris Ray	89%
Chris Johnson	32%

Due to the backlog of quality assurance activities, one chart for each therapist continues to be reviewed on a monthly basis; however, the focused reviews for therapists whose charts fail to meet passing criteria are not being conducted.

VI: UTILIZATION REVIEW

Clinician	Number of clients seen	Total number of clients
Dean Bachelor, M.Div.	8	14
Joni Grim, M.Ed., LSW	41	66
Dr. Bradley Hedges, Ph.D.	8	31
Dr. Suzanne Wing	3	14
Chris Johnson, M.Ed.	20	59
Dr. Chris Ray, Ph.D.	23	45
Dr. Stephanie Miller, Ph.D.	2	8
Tonya Kraner, LISW	18	66
Robin Murphy, M.Ed.,LPCC	24	29
Scott Craft, M.A.	25	37
Steve Ford, M.A.	27	29

The “No Show” rate for January was 10.2%. When considering both the “no show” rate and the cancellation rate, this figure increases to 22.4%.

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	78.35	24.6	21.42	608.15	193.45	150.26
Individual Counseling	358.78	107.5	86.25	1873.86	711.1	603.75
Group Counseling	162.5	16.0	27.25	728.7	70.5	190.75
Medication/somatic Services	16.9	2.3	22.08	98.55	30.5	154.24

Number of Service Units by Type of Disorder from 1/1/01 to 1/31/01				
Type of Disorder	Service Type			
	Individual Counseling	Group Counseling	Medication/Somatic	Diagnostic Assessment
Adjustment	66.85	40.0	1.8	10.75
Anxiety	29.0	20.0	3.6	0
Behavioral	210.5	108.5	2.9	45.1
Cognitive/Organic	27.0	0	1.5	8.0
Mood	64.25	16.0	7.7	3.5
Other V-Codes	59.8	8.0	0	14.5
Paraphilias	65.6	52.0	0	10.5
Personality	3.0	0	0	0
Psychosis	4.0	0	1.3	0
Sleep Disorders	0	0	0	0
Substance Use	14.88	0	0.5	2.5

It should be noted that the sum of each category (Individual, Group, Medication/somatic, and Diagnostic Assessment) does not reflect the same values reported in the preceding chart (Total number of units billed this month by service area). These differences reflect differences between clients scheduled versus clients seen. This chart is based on clients that were scheduled this month. The preceding chart is based only on those clients seen and billed.

VII: INVOLUNTARY TERMINATIONS

No involuntary terminations were conducted during January, 2001

VIII: PROFESSIONAL STAFF ORGANIZATION

Clinical staff maintain current licensure requirements. No staff report attending workshops to obtain continuing education credits during the month of January.

IX: REVIEW OF WAITING LIST

There continues to be no waiting list. The average time elapsed between initial phone contact and first offered session was 13.48 days. Average time elapsed between initial phone contact and first scheduled session was 20.84 days for the month of January. The time elapsed between initial contact and time seen was somewhat higher (23.97 days).

There were 32 new clients seen this month; 46.9% of the new clients seen were from Fairfield county. The total number of clients seen during January was 214. For the month of January, 53.3% of the sessions conducted were with clients from Fairfield county.

X: REVIEW OF SERVICES UNDER CONTRACT

No changes are noted regarding the services under contract.

XI: FOCUSED REVIEW AREA

The issues that were covered in the month of January include reviewing trends and patterns of service, highlighting gaps and conducting the fire drill.

One service that is identified as missing is case management services. The agency is currently in the process of becoming certified to provide case management services. The

Policy and Procedure Manual has been updated to include provisions for these services. Having the ability to provide case management services will increase continuity of care for many of the clients served at this agency. It will also provide another option to consumers regarding agencies that are capable of providing case management.

The fire drill was not conducted this month. It will be conducted sometime during this quarter.

XII: RESPONSE TO LAST MONTH'S FOCUS REVIEW

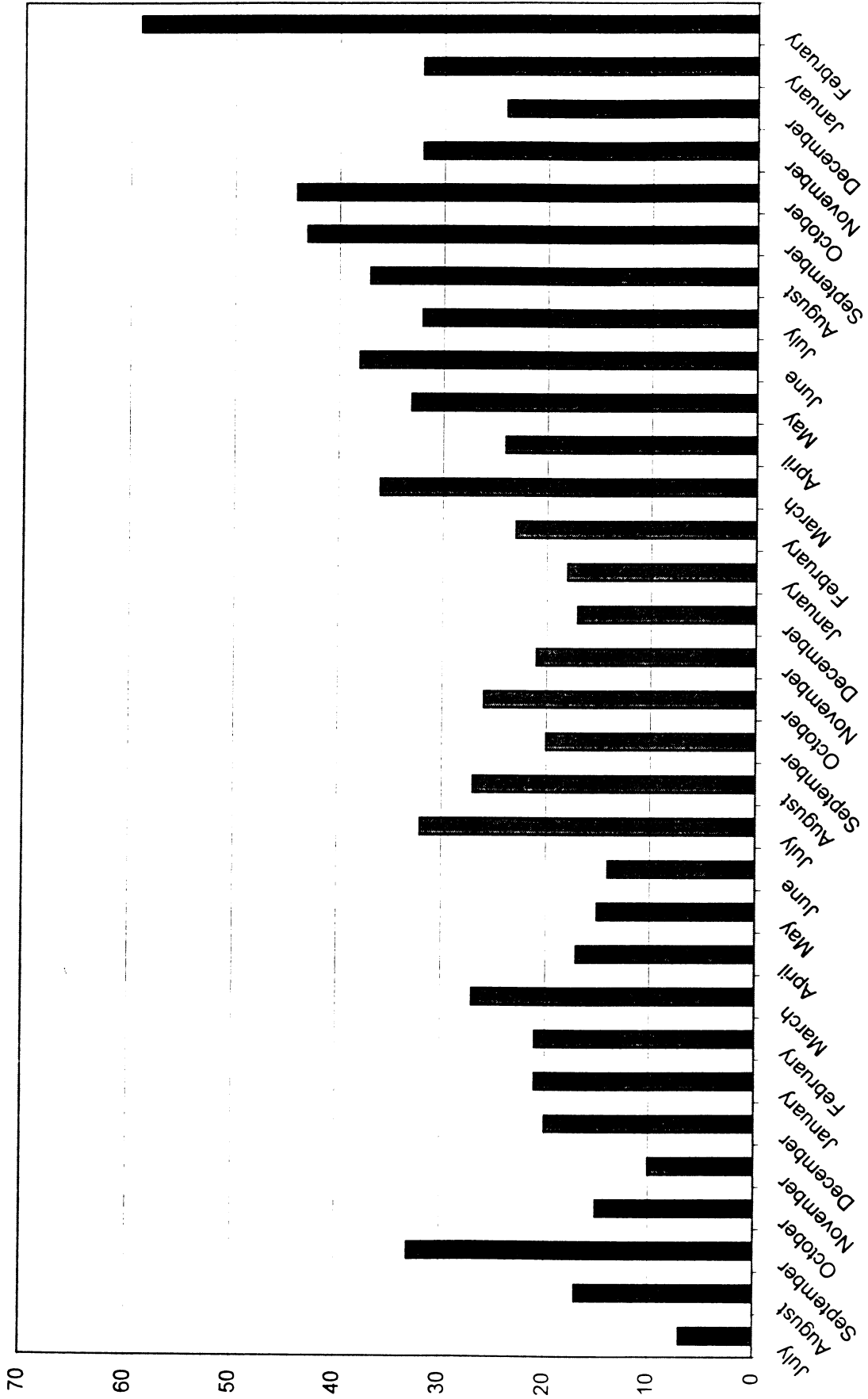
In response to last month's review, the *Policy and Procedure Manual* has been updated to include provisions for both alcohol and other drug services and case management services.

The quarterly report remains in progress. Upon completion it will be forwarded to the board.

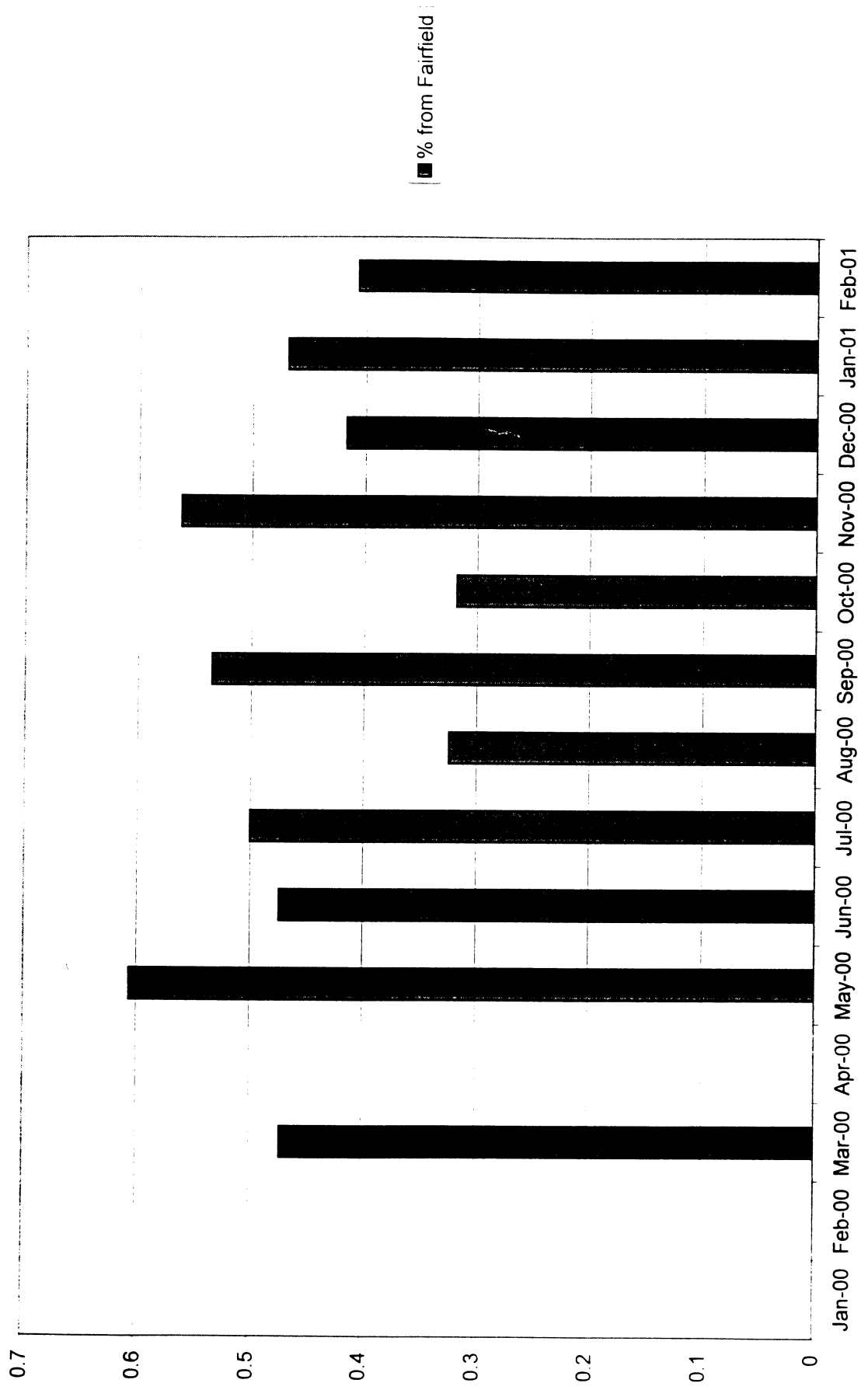
cc: Fairfield County Mental Health and Recovery Services Board
MOPS Board of Directors
MOPS Staff
QA Minutes Logbook

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Number of New Clients by Month--FY99/00/01

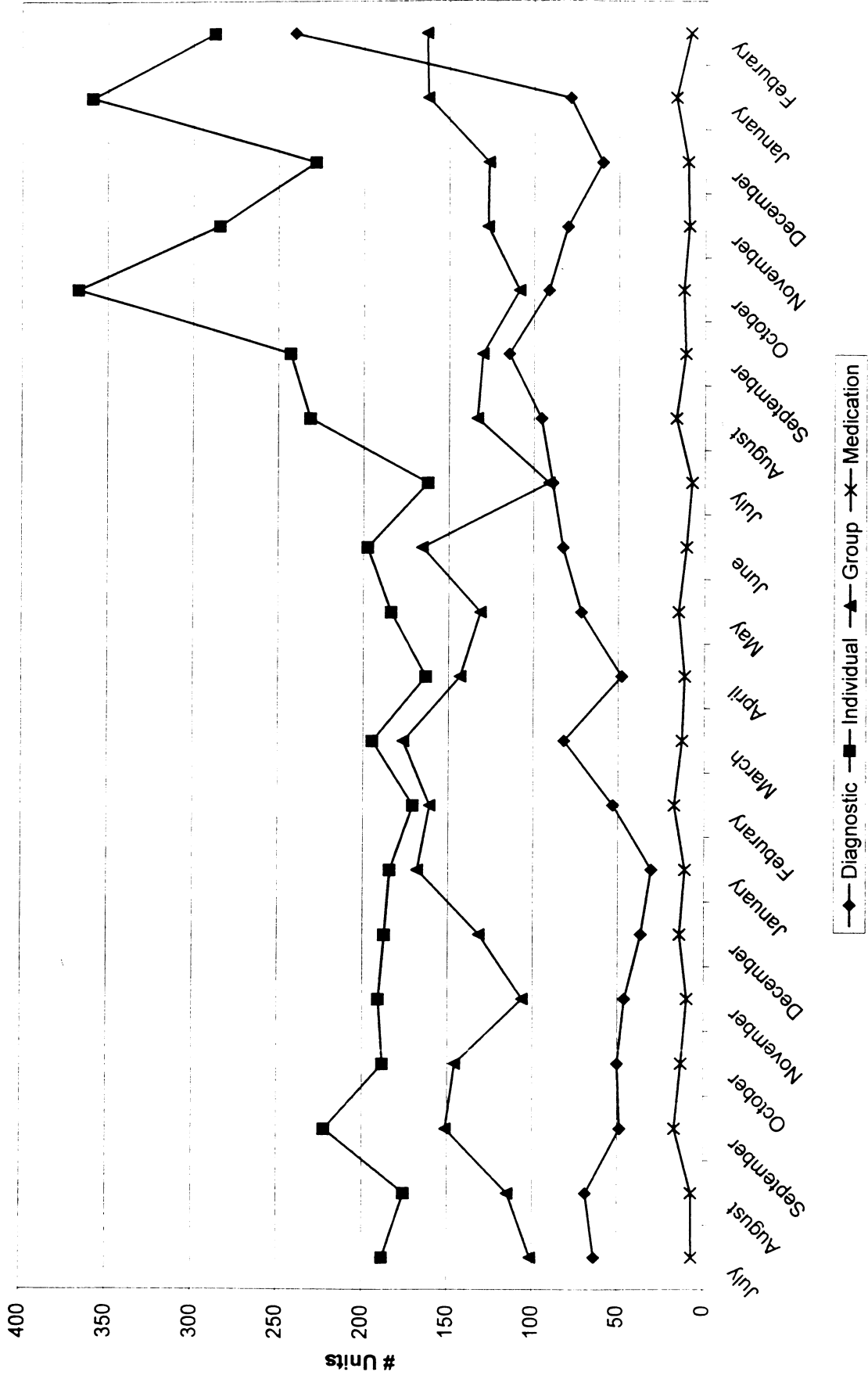


% from Fairfield



■ % from Fairfield

FY 00/01 Units of Service



FY 00/01 No-Show Rate

