

MID-OHIO PSYCHOLOGICAL SERVICES, INC.

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Bradley A. Hedges, Ph.D.
Executive Director

QA REPORT

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

FROM: Bonnie Pearse, MSW, LISW
QA Coordinator

SUBJECT: Quality Assurance Activities for April 2003

SUBMITTED: July 23, 2003

I: MAJOR UNUSUAL INCIDENTS

There were two major unusual incidents during the month of April. On 04-02-03, client #01082904 called the office threatening to kill herself with a knife. A caseworker talked with her on the phone while another employee called the Lancaster Police. The police arrived while the caseworker was talking to the client. This caseworker filed a report with the police, and the client was transported to Fairfield Medical Center. Client was seen by her caseworker at Twin Valley on 04-07-03. On 04-04-03, a clinician working at Scioto County Children's Services received a telephone call stating that client #02011005 alleged that one of our clinician's touched her inappropriately in the stomach. Scioto County Children's Services conducted an internal investigation into these allegations, and there was found to be no substantiation of these allegations.

II: TRANSFERS FROM STATE HOSPITALS

There were no transfers to state hospitals during the month of April. Client #03010704 was transferred to Fairfield Medical Center on 04-01-03 and released on 04-04-03. This client was seen by Rick Gehlbach on 04-07-03. Client #03040901 was transferred to Adena Hospital on 04-14-03 and released on 0-4-15-03. This client was seen by Rick Gehlbach On 04-16-03. Client #03011302 was transferred to Fairfield Medical Center on 04-29-03 and released on 05-03-03. This client was seen by Bonnie Pearse on 05-13-03.

III: PLANT/PHYSICAL HEALTH AND SAFETY

No health or safety issues were identified by the building inspection in the month of April 2003.

IV: RECORDS COMPLETENESS REVIEW

| Clinicians | % Compliance With Standard | Chart Included AOD Services | Chart Included CSP Services |
|-------------------|----------------------------|-----------------------------|-----------------------------|
| Dr. Brad Hedges* | 93 | NO | NO |
| Robin Rippith | 100 | NO | NO |
| Dr. Chris Ray | 99 | NO | NO |
| Tonya Kraner* | 93 | NO | YES |
| Scott Craft | 97 | NO | NO |
| Dean Bachelor | 98 | NO | NO |
| Stephanie Miller* | 91 | NO | NO |
| Claire Robitaille | 97 | NO | YES |
| Joni Grim | 95 | NO | NO |
| Chris Johnson* | 89 | NO | NO |
| Steve Ford* | 93 | NO | NO |
| Amanda Moore* | 88 | NO | YES |
| Joe Dunson | 98 | NO | YES |
| Dr. David Mahl* | 79 | NO | NO |
| Mike Selegue* | 64 | NO | NO |
| Miriam Murray | 97 | NO | YES |
| Tara Rice* | 93 | NO | YES |
| Jodi Frazier* | 93 | NO | YES |
| A.J. Bierly* | 87 | NO | YES |
| Kelly Kleimeyer | 96 | NO | YES |
| Rick Gehlbach | 96 | NO | NO |
| Dawn McCoy * | 90 | NO | YES |
| Misty Coleman* | 81 | NO | NO |
| Bonnie Pearse | 95 | YES | YES |

*Denotes that the clinician did not meet the target threshold of 95% compliance with the standards.

Fifty percent of the clinicians did not meet the 95% threshold for the record review. Reasons that clinicians did not meet the threshold and the percentage of records reviewed is as follows:

- Fifty-eight percent of the records reviewed were missing a copy of the current medical card.
- Thirty-three percent of the records reviewed were missing forms or had incomplete forms in the chart.
- Signatures were missing on some forms in the chart for 21% of the clinicians.
- In 33% of the records reviewed there was at least one session recorded that did not match the billing record.
- Thirty-eight percent of the records reviewed had an Individual Service Plan on the chart that needed to be updated.
- Sixty-seven percent of the records reviewed did not have a reviewed health assessment.
- Sixty-three percent of clinicians were missing case notes for billed services.

V: PEER REVIEW

| Clinicians | Percent Compliant With Standard | Chart Included AOD Services | Chart Included CSP Services |
|-------------------|---------------------------------|-----------------------------|-----------------------------|
| Dr. Brad Hedges* | 81 | NO | NO |
| Stephanie Miller | 90 | NO | NO |
| Dr. Chris Ray | 95 | NO | NO |
| Dr. David Mahl | 90 | NO | NO |
| Robin Rippeth | 100 | NO | NO |
| Tonya Kraner | 96 | NO | YES |
| Steve Ford* | 89 | NO | NO |
| Mike Selegue* | 47 | NO | NO |
| Joni Grim | 94 | NO | NO |
| Scott Craft | 97 | NO | NO |
| Chris Johnson | 92 | NO | NO |
| Claire Robitaille | 95 | NO | YES |
| Kelly Kleimeyer | 98 | NO | YES |
| Bonnie Pearse | 94 | YES | YES |
| Dawn McCoy* | 88 | NO | YES |
| Dean Bachelor | 100 | NO | NO |
| Misty Coleman | 90 | NO | NO |
| Rick Gehlbach | 94 | NO | NO |
| Joe Dunson | 99 | NO | YES |
| Tara Rice | 98 | NO | YES |
| Miriam Murray | 91 | NO | YES |
| A.J. Bierly | 96 | NO | YES |
| Jodi Frazier | 96 | NO | YES |
| Amanda Moore | 98 | NO | YES |

*Denotes that the clinician did not meet the target threshold of 90% compliance with the standards.

- Seventeen percent of the clinicians did not meet the 90% threshold for peer review for the month of April.
- Forty-six percent of the records reviewed for peer review showed that the clinician did not complete the required forms, or make the necessary referrals.
- Sixty-three percent of the records were not maintained consistently in that case notes were not completed and not billed for. Also, the client, clinician and the supervisor have not signed the progress note or other necessary documentation.

VI: UTILIZATION REVIEW

| Clinician | Number of Clients Assigned | Number of Clients Seen | Average Number of Contacts Per Client Seen |
|-------------------|-----------------------------------|-------------------------------|---|
| Dean Bachelor | 15 | 11 | 3.1 |
| Stephanie Miller | 31 | 12 | 1.3 |
| Brad Hedges | 50 | 19 | 1.6 |
| David Mahl | 24 | 5 | 1 |
| Chris Ray | 59 | 29 | 2 |
| Tonya Kraner | 39 | 36 | 2.7 |
| Robin Rippith | 41 | 34 | 2.1 |
| Dawn McCoy | 71 | 43 | 3 |
| Scott Craft | 128 | 33 | 3.2 |
| Steve Ford | 66 | 64 | 2.9 |
| Bonnie Pearse | 72 | 67 | 3.2 |
| Joni Grim | 71 | 48 | 2.3 |
| Chris Johnson | 120 | 31 | 2.2 |
| Claire Robitaille | 47 | 36 | 3 |
| Rick Gehlbach | 28 | 28 | 2.3 |
| Mike Seleque | 51 | 44 | 2 |
| Debbie Culp | 6 | 2 | 1 |
| Kelly Kleimeyer | 48 | 42 | 4.9 |
| Miriam Murray | 12 | 7 | 1.3 |
| Joe Dunson | 15 | 12 | 7.1 |
| Fara Rice | 30 | 28 | 2.1 |
| Misty Coleman | 28 | 29 | 6.8 |
| A.J. Bierly | 14 | 14 | 3.9 |
| Jodi Frazier | 27 | 27 | 3.4 |
| Amanda Moore | 22 | 19 | 6 |
| Paula Roberts | 2 | 2 | 1 |

The No Show rate for April was 19%. When considering both the no show rate and the cancellation rate, this figure is 37%.

| Service Area | Total Number of Units This Month (All of MOPS) | Monthly Allocated Medicaid Units for Fairfield County | Year to Date Total Units for MOPS | Year to Date Allocated Medicaid Units for Fairfield County |
|--------------------------------------|---|--|--|---|
| Diagnostic Assessment | 98.5 | 54.17 | 1158.4 | 541.7 |
| Individual Counseling | 680.45 | 189.17 | 5687.61 | 1891.7 |
| Group Counseling | 168.7 | 70.83 | 2062.2 | 708.3 |
| Medication/somatic Services | 28.2 | 21 | 256.6 | 210 |
| Community Support Program (CSP) | 541.8 | 433.33 | 4688.4 | 4333.3 |
| Alcohol and Other Drug (AOD) - Group | 20.1 | 65 | 236.6 | 650 |

The Medicaid units billed for the month of April 2003 for Fairfield County totals 1637.35. A total of 15092.25 Medicaid units were billed Year to date for Fairfield County.

VII: AOD UTILIZATION REVIEW

AOD Group Therapy sessions in the month of April 2003 showed that the average attendance at each session was 54%. Overall, 7 women utilized AOD Group services during the month of April, and attended an average of 2.1 of 4 sessions.

| Sessions Offered | 04/07/2003 | 04/14/2003 | 04/21/2003 | 04/28/2003 |
|------------------|------------|------------|------------|------------|
| 7 Females | 4 | 4 | 3 | 4 |

VIII: INVOLUNTARY TERMINATIONS

No involuntary terminations were conducted during the month of April 2003.

IX: PROFESSIONAL STAFF ORGANIZATION

The clinical staff maintains current licensure requirements. The following clinicians attended workshops during the month of April.

| Clinician | Workshop Name | Dates Attended | # of CEU's |
|-------------------|--|----------------|------------|
| Brad Hedges | OPA-HIPAA Training | 4-04-03 | 3 |
| Brad Hedges | ADAMH Board Training- Understanding County Mental Health Funding | 4-22-03 | 0 |
| Claire Robitaille | Treatment of Anxiety Disorders | 4-23-03 | 6 |

X: REVIEW OF WAITING LIST

There were a total of 83 new clients seen this month. Fifty-eight of the new clients were from Fairfield County. The total number of clients seen in the month of April 2003 was 603. Seventy percent of the new clients were from Fairfield County. For the month of April 72% of the sessions conducted were with clients from Fairfield County.

There were some inconsistencies discovered in the new client numbers that have been reported. The reporting discrepancy has been corrected on the New Client Chart and on the Percent of Client Intakes from Fairfield County spreadsheet, both the previous numbers reported and the revised numbers are shown. Internal reports used to collect this information have been corrected.

XI: REVIEW OF SERVICES UNDER CONTRACT

No changes are noted regarding the services under contract.

XII: FOCUSED REVIEW AREA

The focused review for April was a review of referrals to other agencies. Monthly QA reports were reviewed from February 2002 through February 2003. In this one year time span, nine clients were referred to Fairfield Medical Center, one to Riverside, one to Bethesda, two to Adena, one to Fox Run, and one to Talbot Hall.

Clinicians and case managers made referrals for intervention by Children Services in three counties for abuse and neglect. Five referrals were made to Fairfield County Children Services, two were made to Hocking County Children Service, and one to Scioto County Children Services.

Clinicians and case managers utilized services offered by other agencies, by making one referral to The Lighthouse for spousal threats, one to New Horizons for Aftercare program, three referrals to Recovery Center, one for AA, and two for Drug Abuse.

Clinicians and case management staff made many referrals to community support programs for clients in need, including three referrals to Our Place, seven referrals to Community Action for food and utilities bill payment, three to Legal Aid for legal assistance, six referrals to Bureau of Vocational Rehabilitation for vocational and job services, five referrals to Job and Family Services for assistance with transportation, dental assistance, financial support, and programs, one to YMCA summer programs, three to Big Brothers Big Sister for companionship, one to Visitation Center for parenting issues, and three to Charity Newsies for assistance with school clothing.

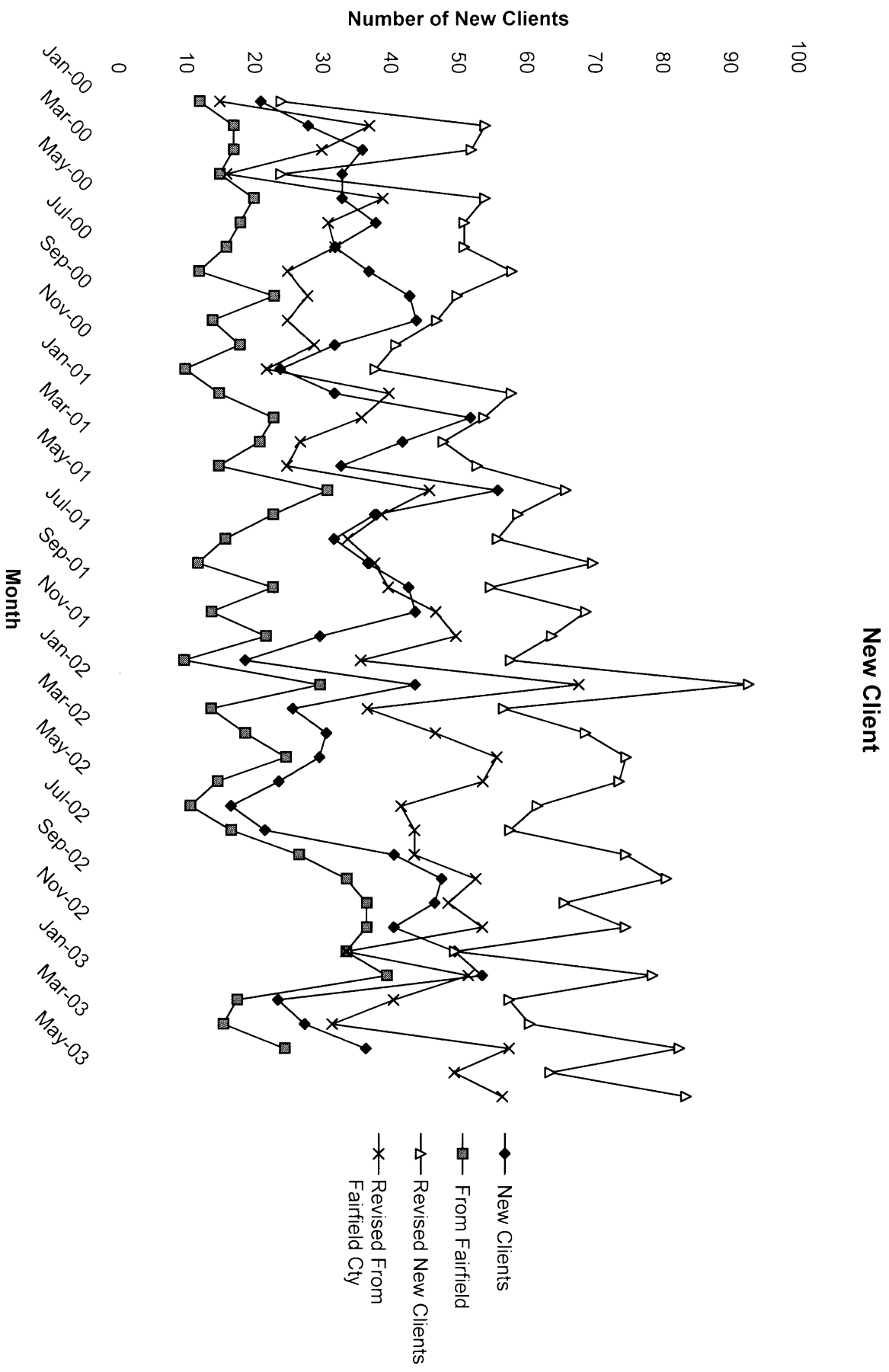
Referrals were made more frequently and for a wider variety of community services by case managers than clinicians.

One problem identified with the review of referral materials was that there is inconsistency with the types of referrals reported by staff and that not all staff respond to the request for referral information.

XIII: RESPONSE TO LAST MONTHS FOCUS REVIEW

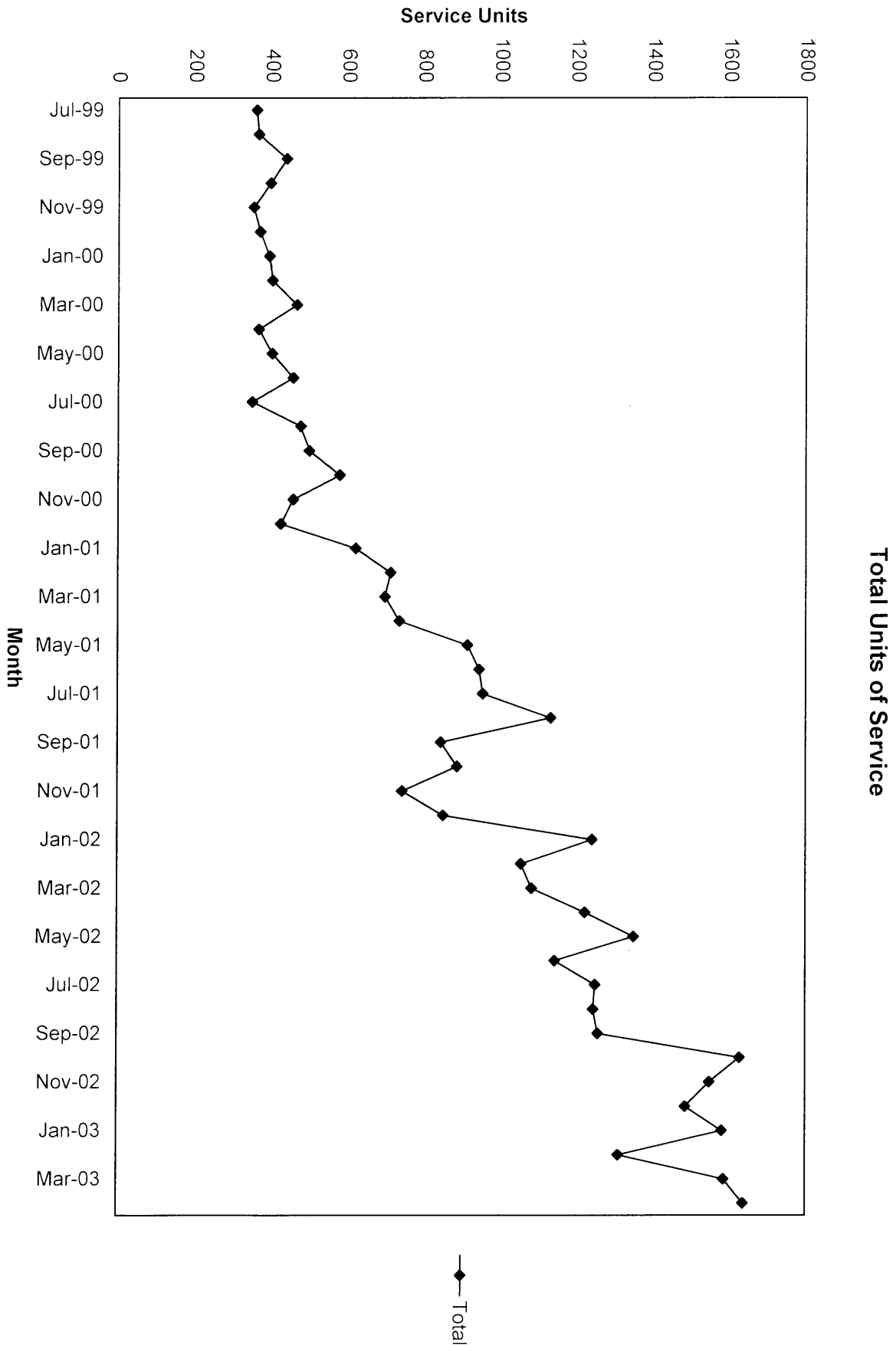
In response to last month's review, accessibility, availability, and appropriateness of services there were no corrective actions needed.

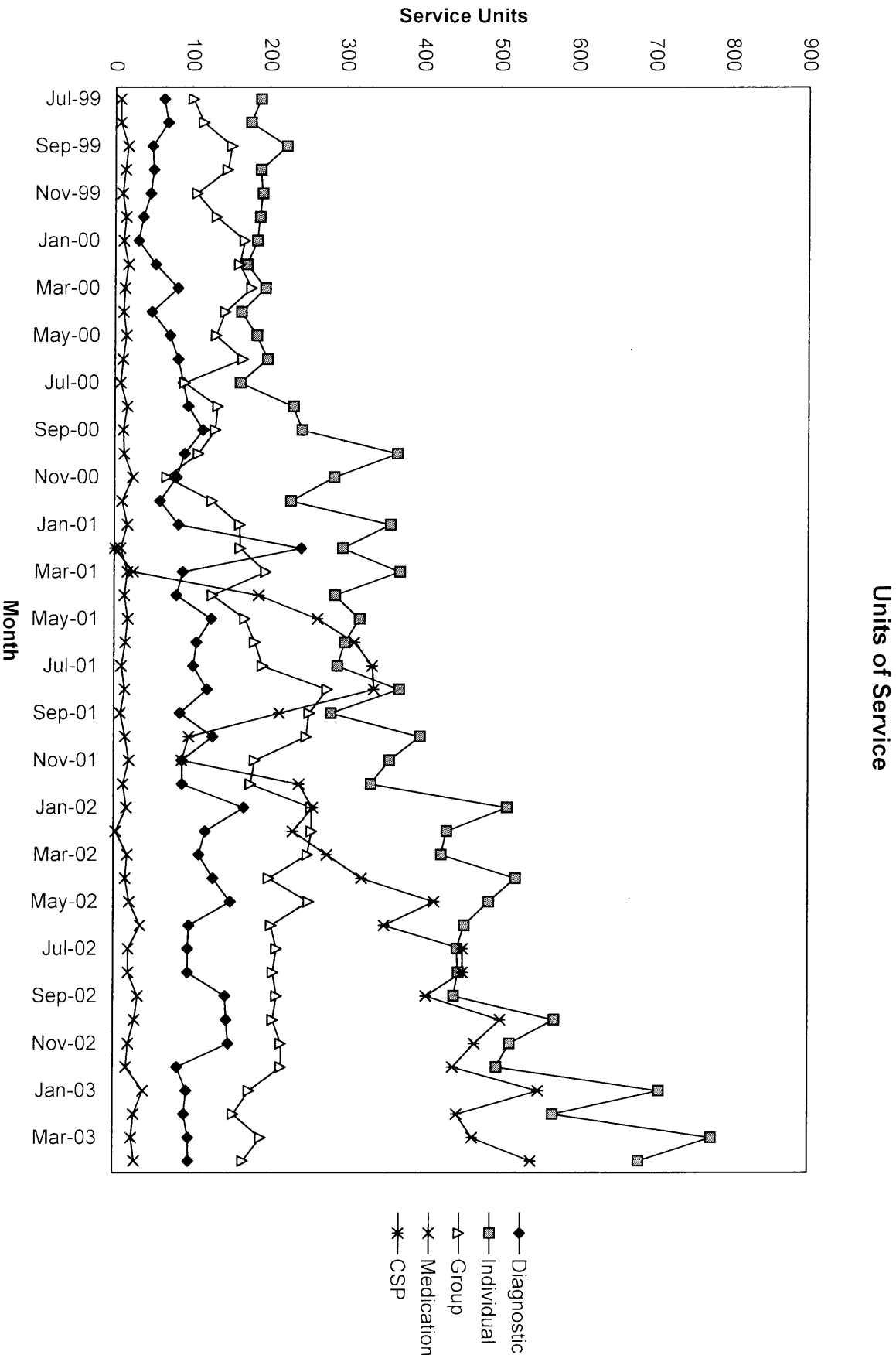
cc: Fairfield County Mental Health and Recovery Services Board
MOPS Board of Directors
MOPS Staff
QA Minutes Logbook



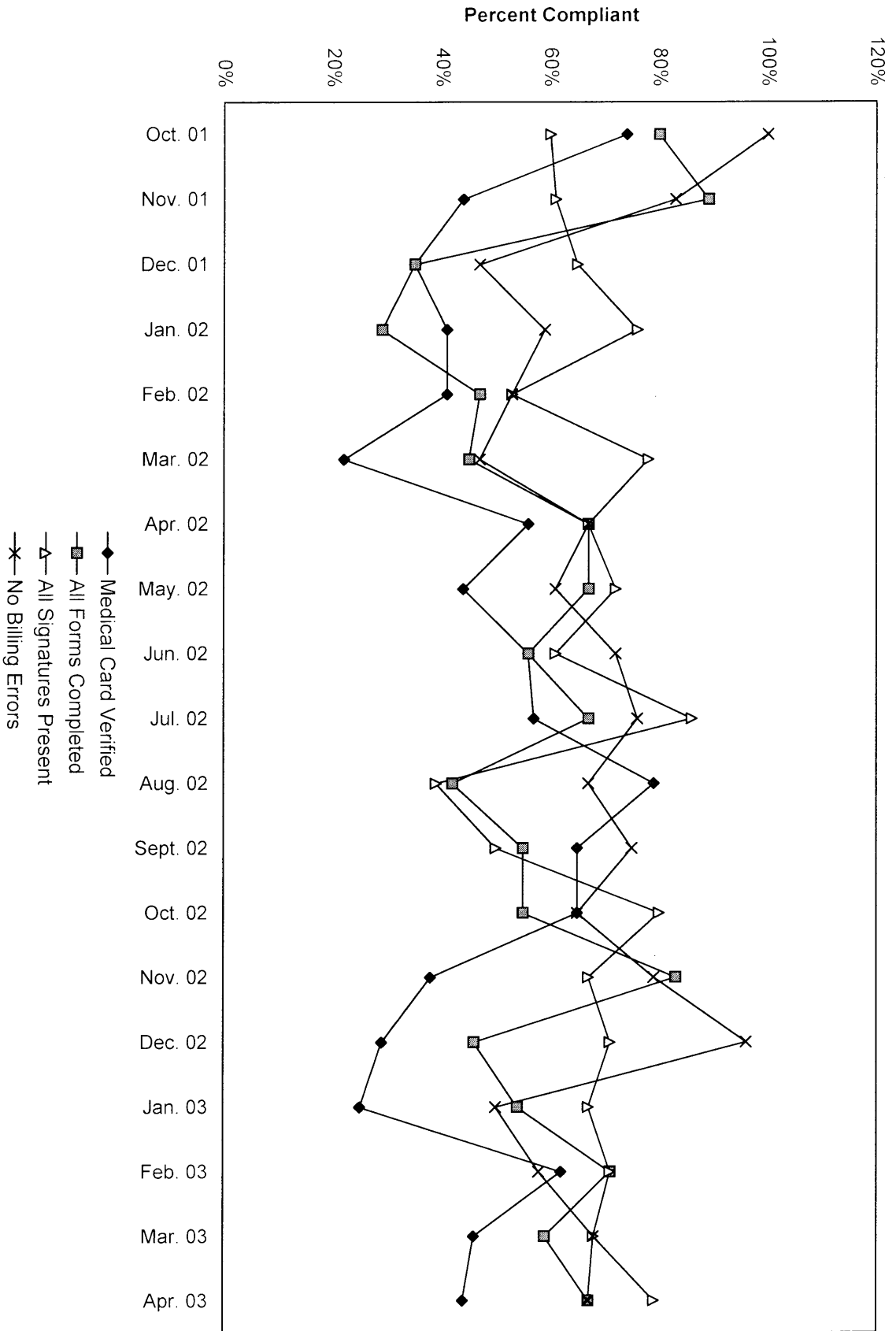
% of Client Intakes from Fairfield County

| Month | New Clients | From Fairfield | % from Fairfield | Revised New Clients | Revised From Fairfield Cty | Revised Percentage |
|--------|-------------|----------------|------------------|---------------------|----------------------------|--------------------|
| Jan-00 | 21 | 12 | 57% | 24 | 15 | 63% |
| Feb-00 | 28 | 17 | 61% | 54 | 37 | 69% |
| Mar-00 | 36 | 17 | 47% | 52 | 30 | 58% |
| Apr-00 | 33 | 15 | 45% | 24 | 16 | 67% |
| May-00 | 33 | 20 | 61% | 54 | 39 | 72% |
| Jun-00 | 38 | 18 | 47% | 51 | 31 | 61% |
| Jul-00 | 32 | 16 | 50% | 51 | 32 | 63% |
| Aug-00 | 37 | 12 | 32% | 58 | 25 | 43% |
| Sep-00 | 43 | 23 | 53% | 50 | 28 | 56% |
| Oct-00 | 44 | 14 | 32% | 47 | 25 | 53% |
| Nov-00 | 32 | 18 | 56% | 41 | 29 | 71% |
| Dec-00 | 24 | 10 | 42% | 38 | 22 | 58% |
| Jan-01 | 32 | 15 | 47% | 58 | 40 | 69% |
| Feb-01 | 52 | 23 | 44% | 54 | 36 | 67% |
| Mar-01 | 42 | 21 | 50% | 48 | 27 | 56% |
| Apr-01 | 33 | 15 | 45% | 53 | 25 | 47% |
| May-01 | 56 | 31 | 55% | 66 | 46 | 70% |
| Jun-01 | 38 | 23 | 61% | 59 | 39 | 66% |
| Jul-01 | 32 | 16 | 50% | 56 | 34 | 61% |
| Aug-01 | 37 | 12 | 32% | 70 | 38 | 54% |
| Sep-01 | 43 | 23 | 53% | 55 | 40 | 73% |
| Oct-01 | 44 | 14 | 32% | 69 | 47 | 68% |
| Nov-01 | 30 | 22 | 73% | 64 | 50 | 78% |
| Dec-01 | 19 | 10 | 53% | 58 | 36 | 62% |
| Jan-02 | 44 | 30 | 68% | 93 | 68 | 73% |
| Feb-02 | 26 | 14 | 54% | 57 | 37 | 65% |
| Mar-02 | 31 | 19 | 61% | 69 | 47 | 68% |
| Apr-02 | 30 | 25 | 83% | 75 | 56 | 75% |
| May-02 | 24 | 15 | 63% | 74 | 54 | 73% |
| Jun-02 | 17 | 11 | 65% | 62 | 42 | 68% |
| Jul-02 | 22 | 17 | 77% | 58 | 44 | 76% |
| Aug-02 | 41 | 27 | 66% | 75 | 44 | 59% |
| Sep-02 | 48 | 34 | 71% | 81 | 53 | 65% |
| Oct-02 | 47 | 37 | 79% | 66 | 49 | 74% |
| Nov-02 | 41 | 37 | 90% | 75 | 54 | 72% |
| Dec-02 | 50 | 34 | 68% | 50 | 34 | 68% |
| Jan-03 | 54 | 40 | 74% | 79 | 52 | 66% |
| Feb-03 | 24 | 18 | 75% | 58 | 41 | 71% |
| Mar-03 | 28 | 16 | 57% | 61 | 32 | 52% |
| Apr-03 | 37 | 25 | 68% | 83 | 58 | 70% |
| May-03 | | | | 64 | 50 | 78% |
| Jun-03 | | | | 84 | 57 | 68% |

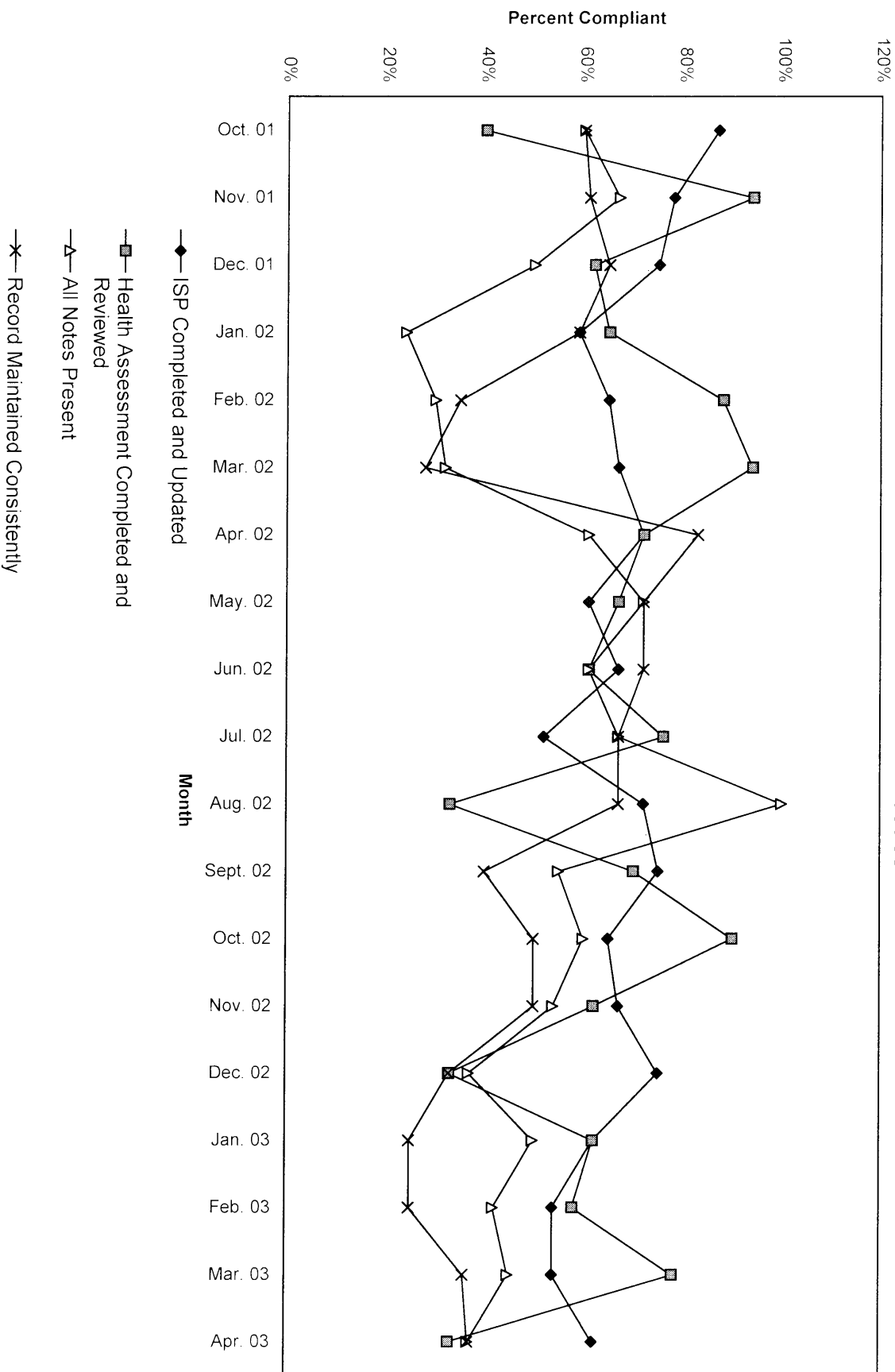




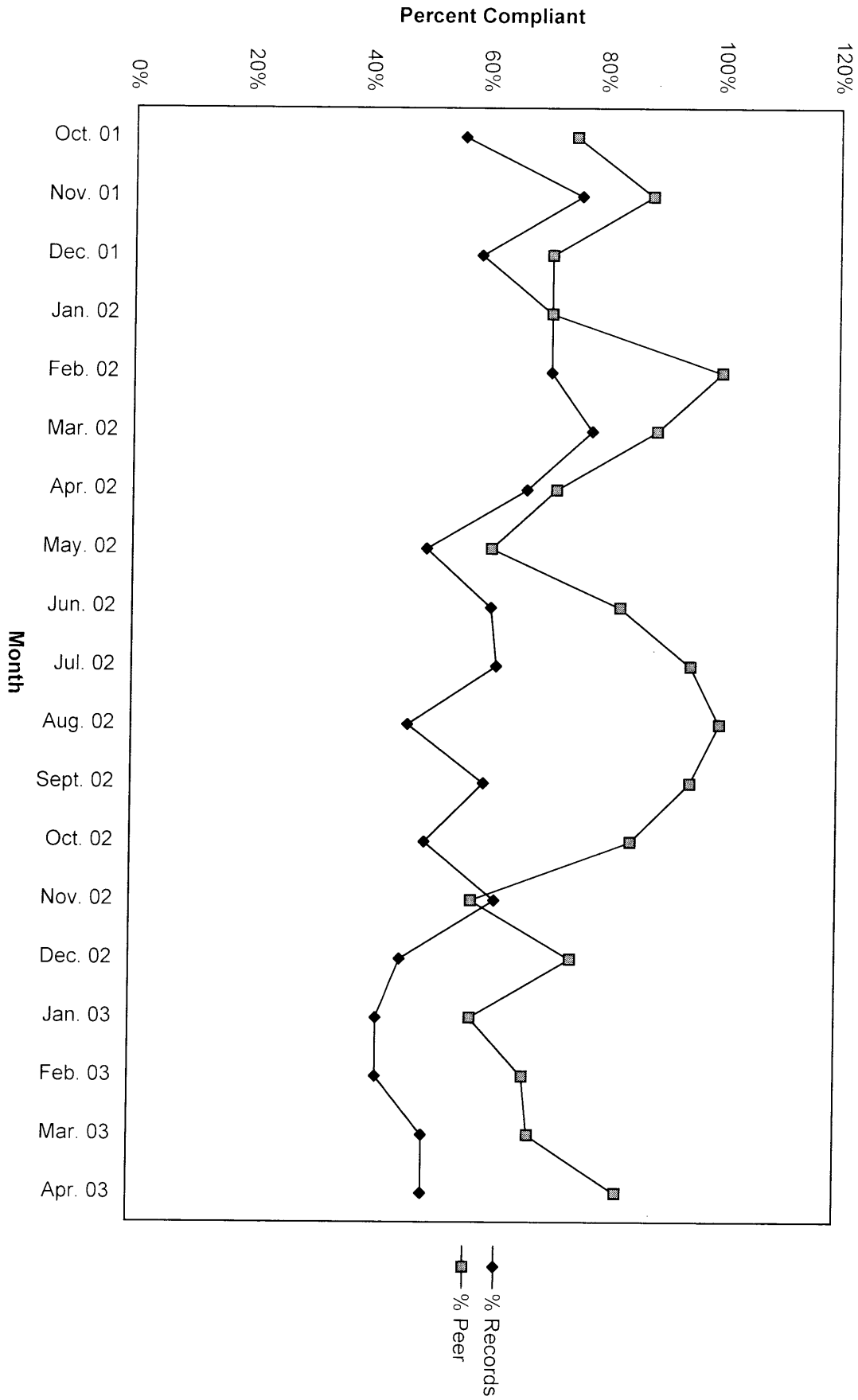
Selected Record Review Issues



Selected Record Review Issues



Compliance Review



| April | 2003 | Weighted | | | | | | | |
|-------------------|----------|----------|----------|---------|----------|---------|---------|-----------|----------|
| | DA | EVAL | IND | Group | CSP | MED | Other | Tot Units | % of Tot |
| Unit Rate | 135 | 135 | 90 | 40 | 65 | 195 | 35 | | |
| Dean Bachelor | 2.00 | 0.00 | 6.00 | 11.00 | 0.00 | 0.0 | 0.0 | | |
| | 270.00 | 0.00 | 540.00 | 440.00 | 0.00 | 0.00 | 0.00 | 1250.00 | 1% |
| A.J. Bierly | 0.00 | 0.00 | 0.00 | 0.00 | 52.40 | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | 0.00 | 0.00 | 3406.00 | 0.00 | 0.00 | 3406.00 | 3% |
| Misty Coleman | 0.00 | 0.00 | 63.30 | 108.00 | 32.90 | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | 5697.00 | 4320.00 | 2138.50 | 0.00 | 0.00 | 12155.50 | 10% |
| Scott Craft | 3.00 | 0.00 | 40.10 | 2.00 | 2.30 | 0.0 | 80.0 | | |
| | 405.00 | 0.00 | 3609.00 | 80.00 | 149.50 | 0.00 | 2800.00 | 7043.50 | 6% |
| Jodie Frazier | 0.00 | 0.00 | 0.00 | 0.00 | 18.00 | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | 0.00 | 0.00 | 1170.00 | 0.00 | 0.00 | 1170.00 | 1% |
| Steve Ford | 17.80 | 0.00 | 71.30 | 0.00 | 17.20 | 0.00 | 0.00 | | |
| | 2403.00 | 0.00 | 6417.00 | 0.00 | 1118.00 | 0.00 | 0.00 | 9938.00 | 8% |
| Rick Gehlbach | 5.80 | 0.00 | 27.00 | 12.60 | 0.00 | 0.00 | 0.00 | | |
| | 783.00 | 0.00 | 2430.00 | 504.00 | 0.00 | 0.00 | 0.00 | 3717.00 | 3% |
| Joni Grim | 5.30 | 0.00 | 39.00 | 10.00 | 4.00 | 0.00 | 0.00 | | |
| | 715.50 | 0.00 | 3510.00 | 400.00 | 260.00 | 0.00 | 0.00 | 4885.50 | 4% |
| Brad Hedges | 3.00 | 14.00 | 9.50 | 0.00 | 0.90 | 0.00 | 0.00 | | |
| | 405.00 | 1890.00 | 855.00 | 0.00 | 58.50 | 0.00 | 0.00 | 3208.50 | 3% |
| Chris Johnson | 0.00 | 0.00 | 16.00 | 0.00 | 0.00 | 0.00 | 80.00 | | |
| | 0.00 | 0.00 | 1440.00 | 0.00 | 0.00 | 0.00 | 2800.00 | 4240.00 | 3% |
| Kelly Kleimeyer | 2.00 | 0.00 | 55.70 | 0.00 | 49.90 | 0.00 | 0.00 | | |
| | 270.00 | 0.00 | 5013.00 | 0.00 | 3243.50 | 0.00 | 0.00 | 8526.50 | 7% |
| Tonya Kraner | 5.50 | 0.00 | 47.30 | 0.00 | 1.90 | 0.00 | 0.00 | | |
| | 742.50 | 0.00 | 4257.00 | 0.00 | 123.50 | 0.00 | 0.00 | 5123.00 | 4% |
| David Mahl | 0.00 | 10.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | 0.00 | 1350.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 1350.00 | 1% |
| Dawn McCoy | 6.00 | 0.00 | 76.60 | 0.00 | 1.20 | 0.00 | 0.00 | | |
| | 810.00 | 0.00 | 6894.00 | 0.00 | 78.00 | 0.00 | 0.00 | 7782.00 | 6% |
| Stephanie Miller | 4.50 | 2.00 | 5.80 | 0.00 | 0.00 | 0.0 | 0.0 | | |
| | 607.50 | 270.00 | 522.00 | 0.00 | 0.00 | 0.00 | 0.00 | 1399.50 | 1% |
| Miriam Murray | 0.00 | 0.00 | 0.00 | 5.00 | 5.00 | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | 0.00 | 200.00 | 325.00 | 0.00 | 0.00 | 525.00 | 0% |
| Bonnie Pearse | 17.30 | 0.00 | 74.00 | 20.10 | 6.20 | 0.00 | 0.00 | | |
| | 2335.50 | 0.00 | 6660.00 | 804.00 | 403.00 | 0.00 | 0.00 | 10202.50 | 8% |
| Chris Ray | 0.00 | 11.80 | 24.70 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | 0.00 | 1593.00 | 2223.00 | 0.00 | 0.00 | 0.00 | 0.00 | 3816.00 | 3% |
| Robin Rippeth | 16.60 | 1.80 | 35.60 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | 2241.00 | 243.00 | 3204.00 | 0.00 | 0.00 | 0.00 | 0.00 | 5688.00 | 5% |
| Paula Roberts | 0.00 | 0.00 | 0.00 | 0.00 | 2.10 | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | 0.00 | 0.00 | 136.50 | 0.00 | 0.00 | 136.50 | 0% |
| Claire Robitaille | 4.00 | 0.00 | 52.95 | 8.00 | 0.00 | 0.00 | 0.00 | | |
| | 540.00 | 0.00 | 4765.50 | 320.00 | 0.00 | 0.00 | 0.00 | 5625.50 | 5% |
| Mike Selegue | 5.70 | 0.00 | 34.60 | 0.00 | 12.00 | 0.00 | 0.00 | | |
| | 769.50 | 0.00 | 3114.00 | 0.00 | 780.00 | 0.00 | 0.00 | 4663.50 | 4% |
| Charles Snyder | 0.00 | 0.00 | 1.00 | 0.00 | 0.00 | 28.20 | 0.00 | | |
| | 0.00 | 0.00 | 90.00 | 0.00 | 0.00 | 5499.00 | 0.00 | 5589.00 | 5% |
| Amanda Moore | 0.00 | 0.00 | 0.00 | 0.00 | 193.00 | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | 0.00 | 0.00 | 12545.00 | 0.00 | 0.00 | 12545.00 | 10% |
| Tara Rice | 0.00 | 0.00 | 0.00 | 0.00 | 79.90 | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | 0.00 | 0.00 | 5193.50 | 0.00 | 0.00 | 5193.50 | 4% |
| Joe Dunson | 0.00 | 0.00 | 0.00 | 0.00 | 58.90 | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | 0.00 | 0.00 | 3828.50 | 0.00 | 0.00 | 3828.50 | 3% |
| Sum Totals | 10665.00 | 3996.00 | 38092.50 | 2244.00 | 15119.00 | 5499.00 | 5600.00 | 123986.00 | 4% |

This chart represents the percentage of the total dollars billed by clinician in April 2003.

April 2003

Mid Ohio Psychological Services

| Unit Rate | Cancellations | Missed | Diagnostics | Evaluations | Individual | Group | Community Support | Medication | Other Units | Total Units | Billable Units | Units Billed+ Missed | Schedule Proficiency | % Canceled | % Missed | Lost Units due to C & M | % of Total Billable Units |
|-------------------|---------------|--------|-------------|-------------|------------|--------|-------------------|------------|-------------|-------------|----------------|----------------------|----------------------|------------|----------|-------------------------|---------------------------|
| Dean Bachelor | 2 | 13 | 135 | 135 | 90 | 40 | 65 | 195 | 35 | 34.00 | 19.00 | 32.00 | 59% | 6% | 38% | 44% | 1% |
| A. J. Bierly* | | | 2.00 | | 6.00 | 11.00 | 52.40 | | | 52.40 | 52.40 | | | | | | 3% |
| Scott Craft | 26 | 30 | 3.00 | | 40.10 | 2.00 | 2.30 | | 80.0 | 183.40 | 127.40 | 157.40 | 69% | 14% | 16% | 31% | 8% |
| Misty Coleman | 28 | 10 | | | 63.30 | 108.00 | 32.90 | | | 242.20 | 204.20 | 214.20 | 84% | 12% | 4% | 16% | 12% |
| Steve Ford | 31 | 39 | 17.80 | | 71.30 | | 17.20 | | | 176.30 | 106.30 | 145.30 | 60% | 18% | 22% | 40% | 6% |
| Jodie Frazier* | | | | | | | 18.00 | | | 18.00 | 18.00 | | | | | | 1% |
| Rick Gehbach | 3 | 19 | 5.80 | | 27.00 | 12.60 | 0.00 | | | 67.40 | 45.40 | 64.40 | 67% | 4% | 28% | 33% | 3% |
| Joni Grim | 29 | 23 | 5.30 | | 39.00 | 10.00 | 4.00 | | | 110.30 | 58.30 | 81.30 | 53% | 26% | 21% | 47% | 4% |
| Brad Hedges | 3 | 3 | 3.00 | 14.00 | 9.50 | | 0.90 | | | 33.40 | 27.40 | 30.40 | 82% | 9% | 9% | 18% | 2% |
| Chris Johnson | 35 | 19 | | | 16.00 | 0.00 | | | 0.1 | 70.10 | 16.10 | 35.10 | 23% | 50% | 27% | 77% | 1% |
| Tonya Kraner | 15 | 21 | 5.50 | | 47.30 | | 1.90 | | | 90.70 | 54.70 | 75.70 | 60% | 17% | 23% | 40% | 3% |
| Dawn McCoy | 26 | 18 | 6.00 | | 76.60 | | 1.20 | | | 127.80 | 83.80 | 101.80 | 66% | 20% | 14% | 34% | 5% |
| Stephanie Miller | 2 | 3 | 4.50 | 2.00 | 5.80 | | 5.00 | | | 17.30 | 12.30 | 15.30 | 71% | 12% | 17% | 29% | 1% |
| Miriam Murray * | | | | | | 5.00 | 5.00 | | | 10.00 | 10.00 | | | | | | 1% |
| Bonnie Pearse | 40 | 58 | 17.30 | | 74.00 | 20.10 | 6.20 | | | 215.60 | 117.60 | 175.60 | 55% | 19% | 27% | 45% | 7% |
| Chris Ray | 11 | 18 | 0.00 | | 11.80 | | 24.70 | | | 65.50 | 36.50 | 54.50 | 56% | 17% | 27% | 44% | 2% |
| Robin Rippeth | 16 | 8 | 16.60 | 1.80 | 35.60 | | 0.00 | | | 78.00 | 54.00 | 62.00 | 69% | 21% | 10% | 31% | 3% |
| Paula Roberts * | | | | | 0.00 | | 2.10 | | | 2.10 | 2.10 | | | | | | 0% |
| Claire Robitaille | 31 | 20 | 4.00 | | 52.95 | | | | | 107.95 | 56.95 | 76.95 | 53% | 29% | 19% | 47% | 3% |
| Mike Selegue * | | | 5.70 | | 34.60 | | 12.00 | | | 52.30 | 52.30 | | | | | | 3% |
| Charles Snyder | 29 | 25 | | | 1.00 | | | 28.2 | | 83.20 | 29.20 | 54.20 | 35% | 35% | 30% | 65% | 2% |
| David Mahl | 1 | 1 | | 10.00 | 0.00 | | 0.00 | | | 12.00 | 10.00 | 11.00 | 83% | 8% | 8% | 17% | 1% |
| Amanda Moore* | | | | | 0.00 | | 193.00 | | | 193.00 | 193.00 | | | | | | 12% |
| Kelly Kleimeyer | | | 2.00 | | 55.70 | | 49.90 | | | 107.60 | 107.60 | 107.60 | 100% | 0% | 0% | 0% | 7% |
| Tara Rice * | | | 0.00 | | | | 79.90 | | | 79.90 | 79.90 | | | | | | 5% |
| Joe Dunson * | | | | | | | 62.90 | | | 62.90 | 62.90 | | | | | | 4% |
| Sum Totals | 328 | 328 | 98.50 | 39.60 | 680.45 | 168.70 | 541.80 | 28.2 | 80.1 | 2293.35 | 1637.35 | 1494.75 | 64% | 18% | 19% | 37% | 4% |
| Average | | | | | | | | | | | | | | | | | |

* These clinicians do not have a daily scheduler therefore their totals are not reported in the missed or cancelled sessions.

| PEER REVIEW | | Apr-03 | pass | fail | Med Somatic | General | DA | CSP | AOD | Utilization | ISP |
|------------------|-----|--------|------|------|-------------|--|----------------------------|-----|-----|-------------|-------------------|
| Dean Bacheior | 100 | | | | | | | | | | |
| A.J. Bierly | 96 | | | | | app. Referral, records incon forms do not meet needs | health assess not review | | | | axis 2 |
| Scott Craft | 97 | | | | | Forms, record inconsistent | health assess not review | | | | axis 2 |
| Misty Coleman | 90 | | | | | Records inconsistent | | | | | |
| Joe Dunson | 99 | | | | | Records inconsistent | psychsoc blanks, ha review | | | | axis 2 |
| Steve Ford | 89 | | | | | Records inconsistent | health assess not review | | | | |
| Jodi Frazier | 96 | | | | | Records inconsistent | health assess not review | | | | |
| Rick Gehbach | 94 | | | | | Records inconsistent | health assess not review | | | | |
| Joni Grimm | 94 | | | | | inappropriate roi | | | | | |
| Brad Hedges | 81 | | | | | forms do not meet needs | health assess not review | | | | axis2, client inv |
| Chris Johnson | 92 | | | | | Forms, record inconsistent | | | | | |
| Tonya Kraner | 96 | | | | | Forms, record inconsistent | health assess not review | | | | axis 2 |
| Dawn McCoy | 88 | | | | | Forms, record inconsistent | health assess not review | | | | |
| Stephanie Miller | 90 | | | | | forms do not meet needs | health assess not review | | | | axis 2 |
| Miriam Murray | 91 | | | | | Records inconsistent | health assess not review | | | | axis 2 |
| Bonnie Pearse | 94 | | | | | Forms, record inconsistent | health assess not review | | | | update, axis 2 |
| Chris Ray | 95 | | | | | Records inconsistent | | | | | axis 2 |
| Robin Rippeth | 100 | | | | | | | | | | axis 2 |
| Claire Robtaille | 95 | | | | | | health assess not review | | | | axis 2 |
| Kelly Kleimeyer | 98 | | | | | Records inconsistent | health assess not review | | | | no initial |
| Amanda Moore | 98 | | | | | Records inconsistent | health assess not review | | | | axis 2 |
| David Mahl | 90 | | | | | roi corr, forms not needs | | | | | |
| Tara Rice | 98 | | | | | Records inconsistent | | | | | |
| Mike Selegue | 47 | | | | | forms do not meet needs | diagnosis inappropriate | | | | |

| RECORDS COMPLETENESS Missing or Incomplete Records | | | | | | | | | |
|--|------|------|----------|--------------|--------------|--------------|--------------------|------------------------|----------------|
| Apr-03 | Pass | Fail | Med Card | ISP | Notes | Health Asses | Signatures Missing | Forms | Billing Record |
| Dean Bacheior | 98 | | update | | missing | reviewed | | poa | |
| A.J. Bierly | | 87 | | | missing | reviewed | | referral-med/somatic | |
| Scott Craft | 97 | | Reviewed | | | | client-poa | | |
| Misty Coleman | | 81 | | upd. axis 2 | missing | reviewed | | | |
| Joe Dunson | 98 | | | | missing | reviewed | | | errors |
| Steve Ford | | 93 | | axis 2 | missing | reviewed | | blanks on psychosocial | errors |
| Jodi Frazier | | 93 | Reviewed | late | missing | reviewed | | | |
| Rick Gebbach | 96 | | Reviewed | | missing | reviewed | | | |
| Joni Grimm | 95 | | missing | update | | | client-roi | | |
| Brad Hedges | | 93 | | axis 2 | | reviewed | client-isp | | errors |
| Chris Johnson | | 89 | Reviewed | init. update | missing | | clinician-note | | |
| Tonya Kraner | | 93 | Reviewed | update | missing | reviewed | | referral- med/somatic | errors |
| Dawn McCoy | | 90 | Reviewed | axis2, nosp | missing | reviewed | health assessment | referral-csp | |
| Stephanie Miller | | 91 | Reviewed | update | | reviewed | | | |
| Miriam Murray | 97 | | Reviewed | | missing | reviewed | | | errors |
| Bonnie Pearse | 95 | | Reviewed | update | missing | | | | errors |
| Chris Ray | 99 | | | | | | | | errors |
| Robin Rippeth | 100 | | | | | | | | |
| Claire Robtaille | 97 | | missing | axis 2 | | reviewed | | | |
| Kelly Kleimeyer | 96 | | Reviewed | | missing | reviewed | | referral- med/somatic | |
| Amanda Moore | | 88 | | | initial miss | | | | |
| David Mahl | | 79 | | | upd. a2 or 4 | reviewed | | roi | |
| Tara Rice | | 93 | Reviewed | update | missing | | | | errors |
| Mike Selegue | | 64 | | missing | | reviewed | | maasis open | |