

MID-OHIO PSYCHOLOGICAL SERVICES, INC.

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Bradley A. Hedges, Ph.D.
Executive Director

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Stephanie L. Miller, Ph. D.
Psychologist

QA REPORT

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

FROM: Shawna Watts, MBA
Quality Assurance Coordinator

SUBJECT: Quality Assurance Activities for December 2003

SUBMITTED: March 26, 2004

I: MAJOR UNUSUAL INCIDENTS

There were three major unusual incidents for the month of December. The first MUI occurred on 12/11/2003 and involved the suicide attempt of client #02062101. The client was removed from agency premises by their spouse and taken to Fairfield Medical Center. The incident was reported to the Board within 24 hours. The second MUI occurred on 12/16/2003 and involved the abuse of client #99010802 by a non staff person off of agency premises. A foster child reported an incident involving this client; the incident was reported to Fairfield County CSB. The incident was reported to the board within 48 hours, as a clinician signature was missing from the form. The third MUI occurred on 12/20/2003 and involved the sexual abuse of client #03102702 by a non staff person off of agency premises. The incident was reported to Fairfield County CSB and the Board within 24 hours.

II: TRANSFERS FROM STATE HOSPITALS

There were no transfers from the state hospital in December. There were two clients who were hospitalized in community hospitals for psychiatric care. Client #02112005 was taken to Oblyness Hospital on 12/10/2003.

The client's father picked the child up from Oblyness and took her to a psychiatric hospital in Columbus. The client was sent to detention from the hospital, so Tonya Kraner has not seen her since her hospitalization. Client#02062101 was admitted to



Adena on 12/11/2003 and discharged on 12/14/2003. Bonnie Pearse saw the client on 12/15/2003.

III: PLANT/PHYSICAL HEALTH AND SAFETY

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

IV: RECORDS COMPLETENESS REVIEW

| Clinicians | % Compliance With Standard | Chart Included AOD Services | Chart Included CSP Services |
|-------------------|----------------------------|-----------------------------|-----------------------------|
| Dr. Brad Hedges | 96 | NO | NO |
| Dr. Robin Rippeth | 100 | NO | NO |
| Dr. Chris Ray | 95 | NO | NO |
| Tonya Kraner* | 84 | NO | YES |
| Dr. Scott Craft* | 90 | NO | YES |
| Dean Bachelor* | 93 | NO | NO |
| Claire Robitaille | 95 | NO | YES |
| Joni Grim | 95 | NO | YES |
| Chris Johnson | 95 | NO | YES |
| Steve Ford | 97 | NO | YES |
| Amanda Moore* | 90 | NO | YES |
| Joe Dunson* | 93 | NO | YES |
| Mike Selegue | 99 | NO | YES |
| Karis Mason | 100 | NO | NO |
| Jodi Frazier | 97 | NO | YES |
| A.J. Bierly* | 92 | YES | YES |
| Kelly Kleimeyer | 98 | NO | YES |
| Rick Gehlbach | 100 | NO | NO |
| Dawn McCoy* | 94 | NO | NO |
| Misty Coleman | 100 | NO | YES |
| Bonnie Pearse | 100 | NO | YES |
| Leasa Mowery | 98 | NO | NO |
| Hugh Boggs | 97 | NO | NO |
| Tricia Ostrander | 98 | NO | NO |
| Adrienne Harris | 97 | NO | NO |

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

Twenty-eight 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:

- Forty percent of the records reviewed were missing a copy of the current medical card.
- Sixty 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 no of the clinicians.
- In 8% of the records reviewed there was at least one session recorded that did not match the billing record.

- Twenty-four percent of the records reviewed had an Individual Service Plan on the chart that needed to be updated.
- Four percent of the records reviewed did not have a reviewed health assessment.
- Sixteen 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 | 97 | NO | NO |
| Dr. Chris Ray | 100 | NO | NO |
| Dr. Robin Rippeth | 100 | NO | NO |
| Tonya Kraner | 96 | NO | YES |
| Steve Ford | 100 | NO | YES |
| Mike Selegue | 98 | NO | YES |
| Joni Grim | 95 | NO | YES |
| Dr. Scott Craft* | 84 | NO | YES |
| Chris Johnson | 99 | NO | YES |
| Claire Robitaille | 95 | NO | YES |
| Kelly Kleimeyer | 100 | NO | YES |
| Bonnie Pearse | 100 | NO | YES |
| Dawn McCoy | 99 | NO | NO |
| Dean Bachelor* | 84 | NO | NO |
| Misty Coleman | 100 | NO | YES |
| Rick Gehlbach | 100 | NO | NO |
| Joe Dunson | 99 | NO | YES |
| Karis Mason | 100 | NO | NO |
| A.J. Bierly | 95 | YES | YES |
| Jodi Frazier | 99 | NO | YES |
| Amanda Moore | 93 | NO | YES |
| Leasa Mowery | 99 | NO | NO |
| Hugh Boggs | 97 | NO | NO |
| Tricia Ostrander | 100 | NO | NO |
| Adrienne Harris | 99 | NO | NO |

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

Eight percent of the clinicians did not meet the 90% threshold for peer review for the month of December.

- Twenty-eight percent of the records reviewed for peer review showed that the clinician did not complete the required forms, or make the necessary referrals.
- Twenty 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 | 14 | 11 | 1.5 |
| Dr. Brad Hedges | 62 | 13 | 1.2 |
| Dr. Chris Ray | 84 | 23 | 1.5 |
| Tonya Kraner | 29 | 14 | 1.5 |
| Dr. Robin Rippeth | 32 | 20 | 1.4 |
| Dawn McCoy | 80 | 49 | 1.5 |
| Dr. Scott Craft | 77 | 32 | 1.4 |
| Steve Ford | 67 | 44 | 2.0 |
| Bonnie Pearse | 92 | 61 | 2.5 |
| Joni Grim | 68 | 38 | 2.2 |
| Chris Johnson | 126 | 23 | 2.2 |
| Claire Robitaille | 55 | 33 | 1.6 |
| Rick Gehlbach | 62 | 39 | 2.0 |
| Mike Selegue | 90 | 46 | 1.5 |
| Kelly Kleimeyer | 50 | 45 | 2.7 |
| Joe Dunson | 28 | 17 | 7.3 |
| Misty Coleman | 69 | 35 | 2.3 |
| A.J. Bierly | 29 | 17 | 4.6 |
| Jodi Frazier | 34 | 21 | 2.7 |
| Amanda Moore | 35 | 21 | 5 |
| Tricia Ostrander | 29 | 11 | 1.3 |
| Leasa Mowery | 5 | 5 | 1.6 |
| Paula Moreland | 20 | 15 | 3.7 |
| Karis Mason | 10 | 5 | 2.2 |
| Adrienne Harris | 9 | 5 | 1.8 |
| Hugh Boggs | 5 | 1 | 3 |

* Dr. Miller saw no clients during this review period as she was out on medical leave.

The No Show rate for November was 17%. When considering both the no show rate and the cancellation rate, this figure is 34%.

VII: AOD UTILIZATION REVIEW

AOD Womens Group sessions in the month of December 2003 showed that the average attendance at each session was 62.5%. Overall, three women utilized the AOD Womens Group during the month of December, and attended an average of 2 of 4 sessions.

| Sessions Offered | 12/1/2003 | 12/8/2003 | 12/15/2003 | 12/22/2003 | 12/29/2003 |
|------------------|-----------|-----------|------------|------------|------------|
| 3 Females | 2 | 2 | 3 | 0 | 3 |

VIII: INVOLUNTARY TERMINATIONS

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

IX: PROFESSIONAL STAFF ORGANIZATION

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

| Clinician | Workshop Name | Dates Attended | # of CEU's |
|------------------|-----------------------------------|-----------------------|-------------------|
| Kelly Kleimeyer | Ethics Workshop | 12/01/2003 | 3 |
| Dawn McCoy | Ethics Workshop | 12/01/2003 | 3 |
| Dawn McCoy | ABC's of Psychotropic Medications | 12/05/2003 | 6 |

X: REVIEW OF WAITING LIST

There were a total of 76 new clients seen in the MOPS General Program enrollment this month. Eighty percent of these new clients were from Fairfield County. The total number of clients seen in the month of December 2003 was 644

XI: REVIEW OF SERVICES UNDER CONTRACT

Currently no services are provided under contract to this agency.

XII: FOCUSED REVIEW AREA

The focused area of review for December is to review the policy and procedure manual for the agency. There have been many changes to the policies and procedures of the agency during the past few months.

As part of the ODADAS certification, there were many additions to the policies and procedures for the agency, including a sexual harassment policy, a standards of acceptable behavior policy for clinical staff, a nepotism policy, procedures for waitlist management, and satisfaction survey procedures.

Updates to ODMH rules required the addition of a consumer outcomes and research activities policy and procedures.

The agency's plans to become CARF certified have also resulted in additions to the policy and procedures. These additions include a substance testing policy, background check policy, and conflict of interest policy. CARF will require additional policy changes. A disaster planning policy is currently being drafted. Other additional policies

may include a policy on physical restraint or seclusion in a case of emergency involving the life and safety of staff, additions to medication management service policies, additions to client rights and safety procedures, and additions to personnel procedures.

XIII: RESPONSE TO LAST MONTHS FOCUS REVIEW

No action needed.

XIV: CLIENT RIGHTS AND GRIEVANCES

There was one client grievance made during the month of December. The grievance involved client #01122001, client#02103003, client#02070202, client#02102301 and the guardian responsible for these clients. A meeting was held to address issues raised with all clinical staff involved in the case, the guardian, and the client's rights officer. The main issue raised was the staff's inability to provide medically necessary services because collateral information could not be obtained. This issue has not been resolved at this time and is currently been referred to the Fairfield County ADAMH Board to help with a resolution.

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

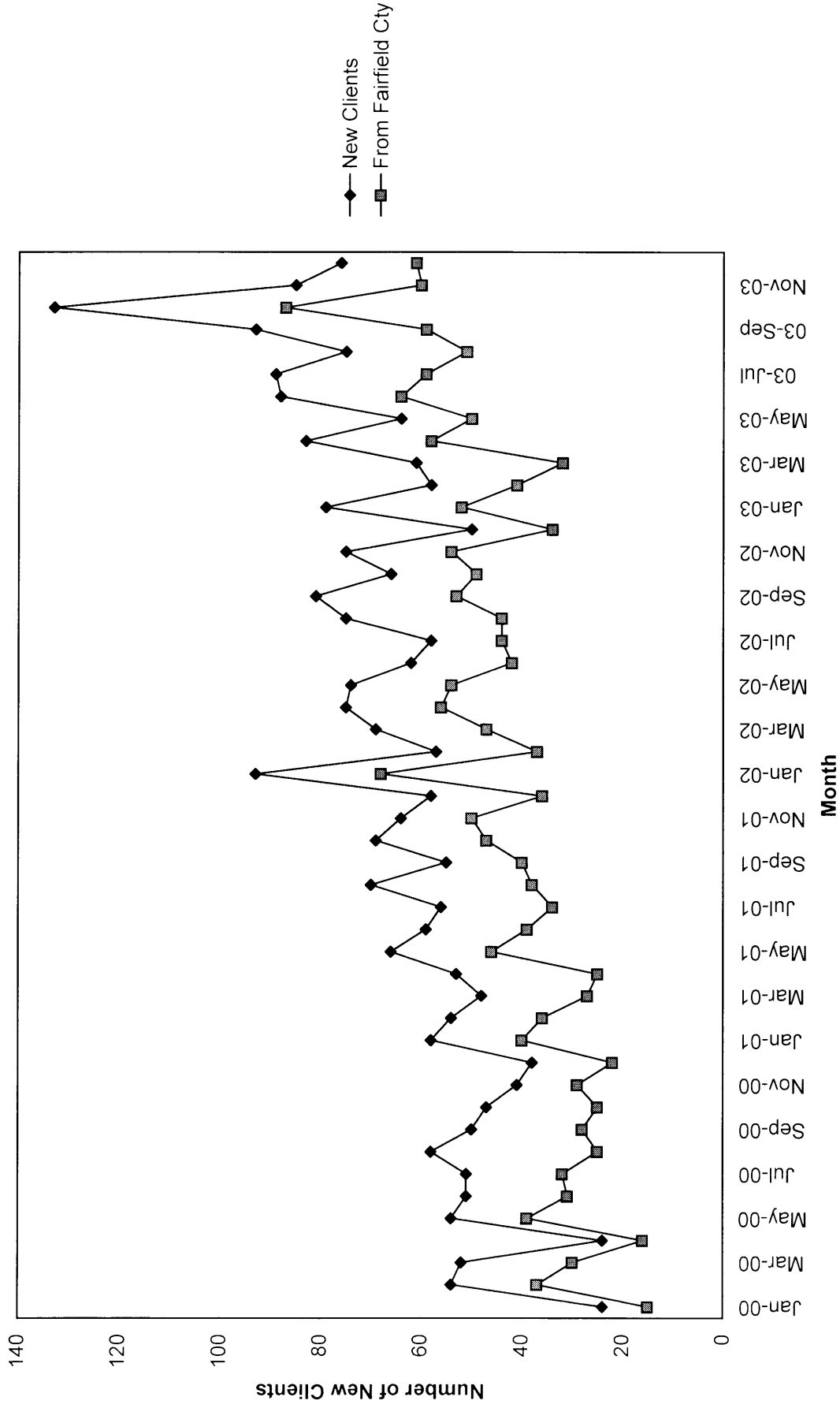
Agency Service Budget Month of December 2003

| | Service Provided for Month | | Budgeted for Month | | Fiscal Y-T-D Provided | | Fiscal Y-T-D Budgeted | | Variance between Budgeted and Provided Y-T-D | |
|-----------------------|----------------------------|---------------------------|-----------------------|---------------------------|-----------------------|---------------------------|-----------------------|---------------------------|--|---------------------------|
| | Total For All of MOPS | Fairfield County Medicaid | Total For All of MOPS | Fairfield County Medicaid | Total For All of MOPS | Fairfield County Medicaid | Total For All of MOPS | Fairfield County Medicaid | Total For All of MOPS | Fairfield County Medicaid |
| | | | | | | | | | | |
| Diagnostic/Assessment | 158 | 73 | 108 | 54 | 909 | 470 | 648 | 324 | | |
| | \$20,499 | \$9,476 | \$14,039 | \$7,019 | \$118,161 | \$61,095 | \$84,234 | \$42,117 | \$33,927 | \$18,979 |
| Individual Counseling | 747 | 474 | 458 | 183 | 4,613 | 2,857 | 2,749 | 1,098 | | |
| | \$67,203 | \$42,678 | \$41,220 | \$16,470 | \$415,170 | \$257,130 | \$247,410 | \$98,820 | \$167,760 | \$158,310 |
| Individual CSP | 479 | 369 | 319 | 175 | 2,981 | 2,212 | 1,914 | 1,050 | | |
| | \$31,142 | \$24,005 | \$20,735 | \$11,375 | \$193,765 | \$143,780 | \$124,410 | \$68,250 | \$69,355 | \$75,530 |
| Group CSP | 0 | 0 | 42 | 38 | 0 | 0 | 252 | 228 | | |
| | \$0 | \$0 | \$1,648 | \$1,491 | \$0 | \$0 | \$9,888 | \$8,947 | (\$1,648) | (\$8,947) |
| Group | 113 | 31 | 104 | 67 | 765 | 273 | 624 | 402 | | |
| | \$4,461 | \$1,224 | \$4,106 | \$2,645 | \$30,202 | \$10,778 | \$24,636 | \$15,871 | \$5,567 | (\$5,093) |
| Medication | 41 | 32 | 42 | 19 | 268 | 189 | 520 | 114 | | |
| | \$8,490 | \$6,615 | \$8,655 | \$3,915 | \$55,224 | \$38,945 | \$107,151 | \$23,491 | (\$51,927) | \$15,455 |
| AOD Assessment | 0 | 0 | 1 | 0 | 2 | 2 | 6 | 0 | | |
| | \$0 | \$0 | \$96 | \$0 | \$192 | \$192 | \$577 | \$0 | (\$385) | \$192 |
| AOD Individual | 0 | 0 | 1 | 1 | 0 | 0 | 6 | 6 | | |
| | \$0 | \$0 | \$87 | \$87 | \$0 | \$0 | \$524 | \$524 | (\$524) | (\$524) |
| AOD Group | 12 | 12 | 21 | 17 | 103 | 93 | 126 | 102 | | |
| | \$457 | \$457 | \$800 | \$647 | \$3,922 | \$3,541 | \$4,798 | \$3,884 | (\$876) | (\$343) |
| Jail Based | 75 | 0 | 75 | 0 | 450 | 0 | 450 | 0 | | |
| | \$2,625 | \$0 | \$2,625 | \$0 | \$15,750 | \$0 | \$15,750 | \$0 | \$0 | \$0 |
| Court Diversion | 100 | 0 | 100 | 0 | 600 | 0 | 600 | 0 | | |
| | \$3,500 | \$0 | \$3,500 | \$0 | \$21,000 | \$0 | \$21,000 | \$0 | \$0 | \$0 |
| Sum \$ | \$138,377 | \$84,454 | \$97,511 | \$43,651 | \$853,387 | \$515,463 | \$640,378 | \$261,903 | \$213,009 | \$253,559 |

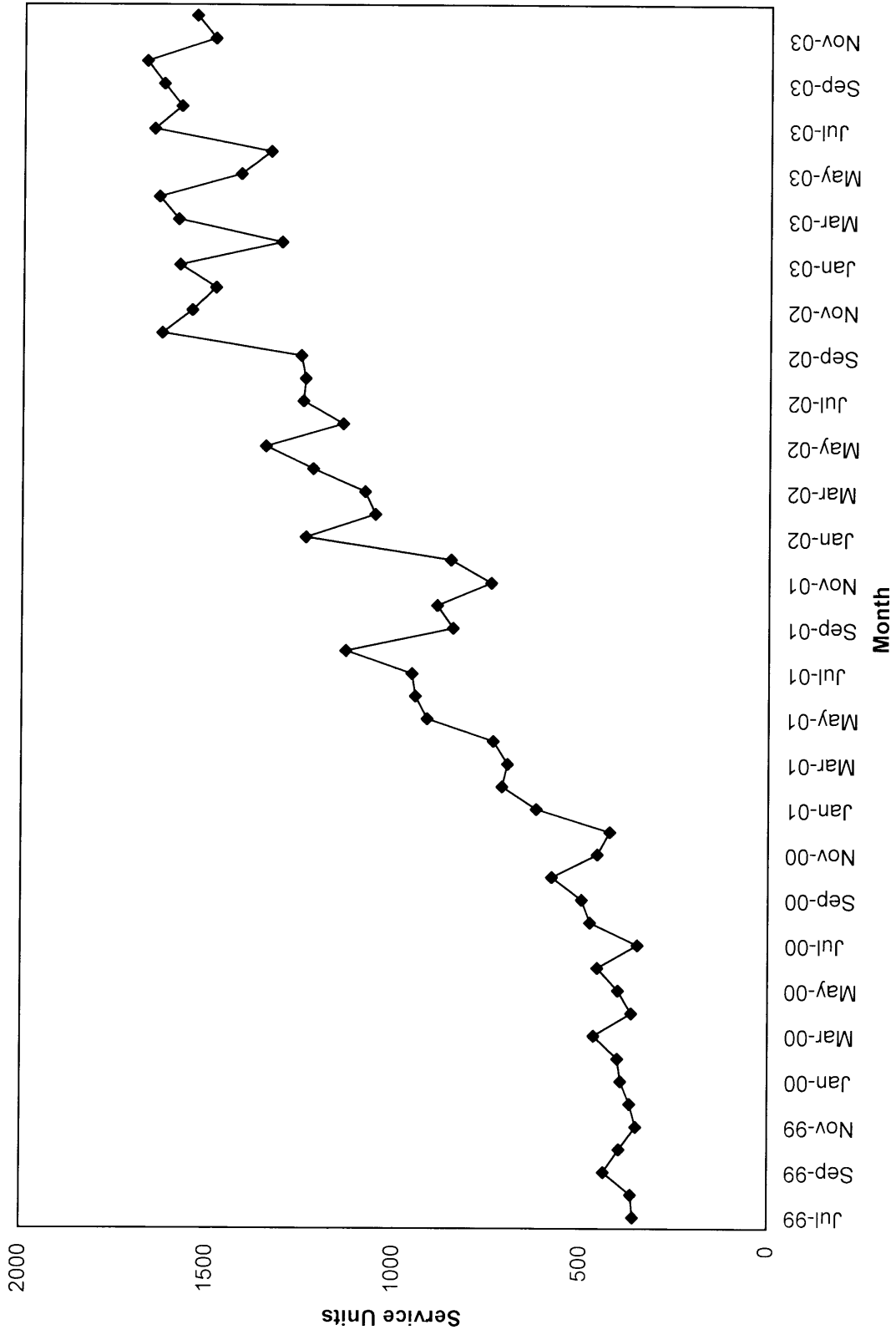
* () figures indicate that MOPS provided fewer services in this category than budgeted.

61% Percent of Services for Fairfield County
 43% Percent Over Overall MOPS Budget
 96% Percent Over Fairfield County Medicaid

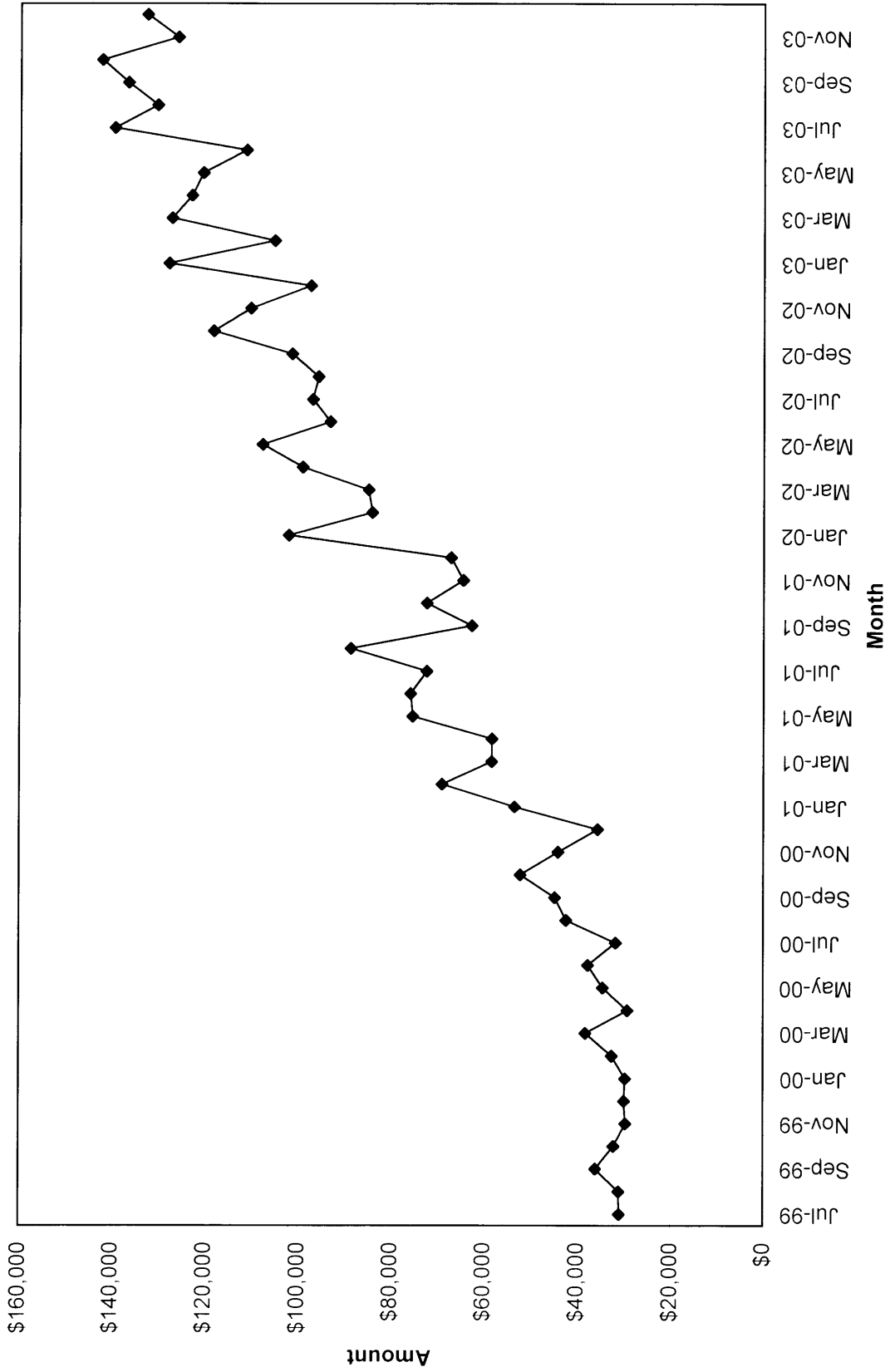
New Clients



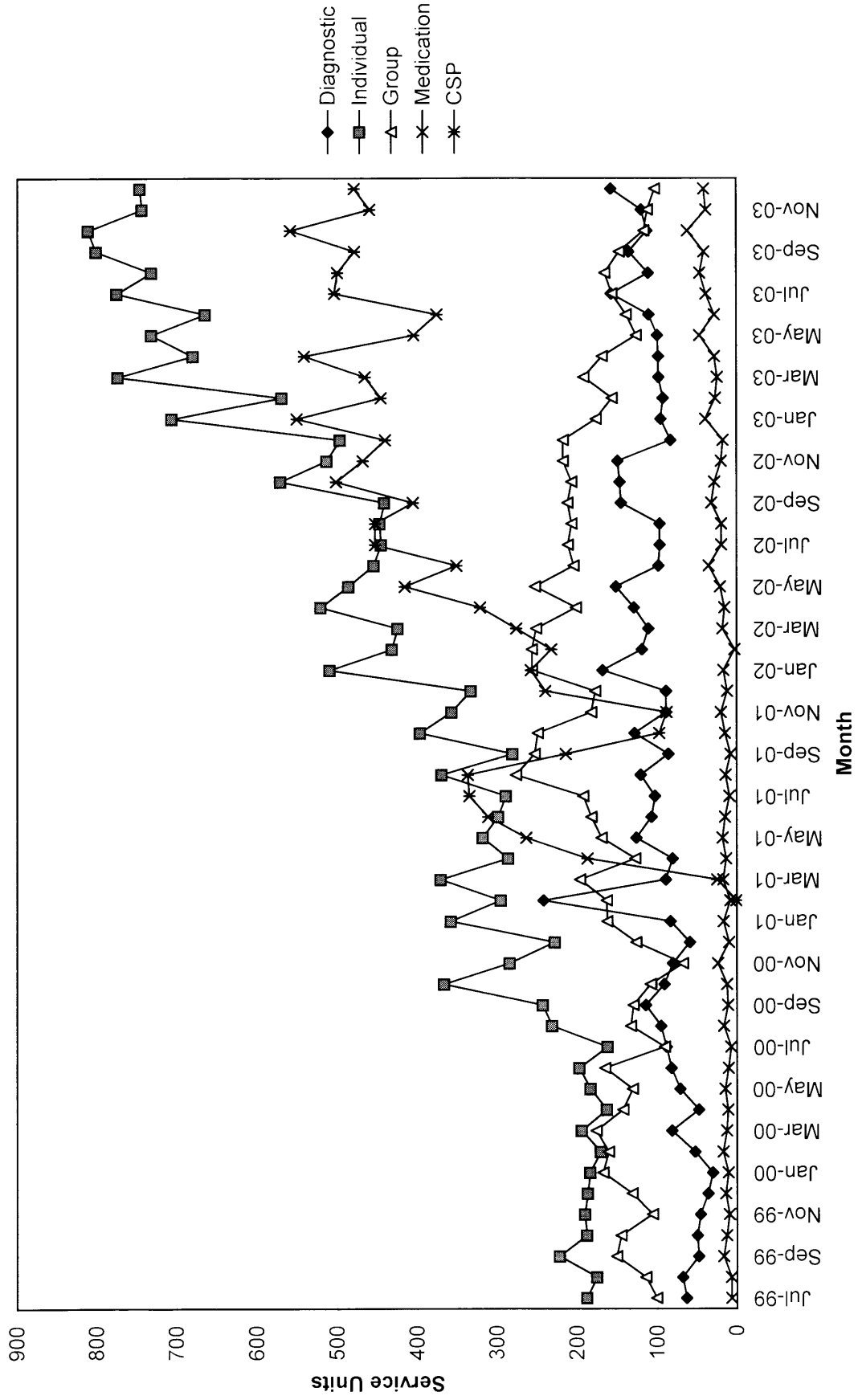
Total Units of Service



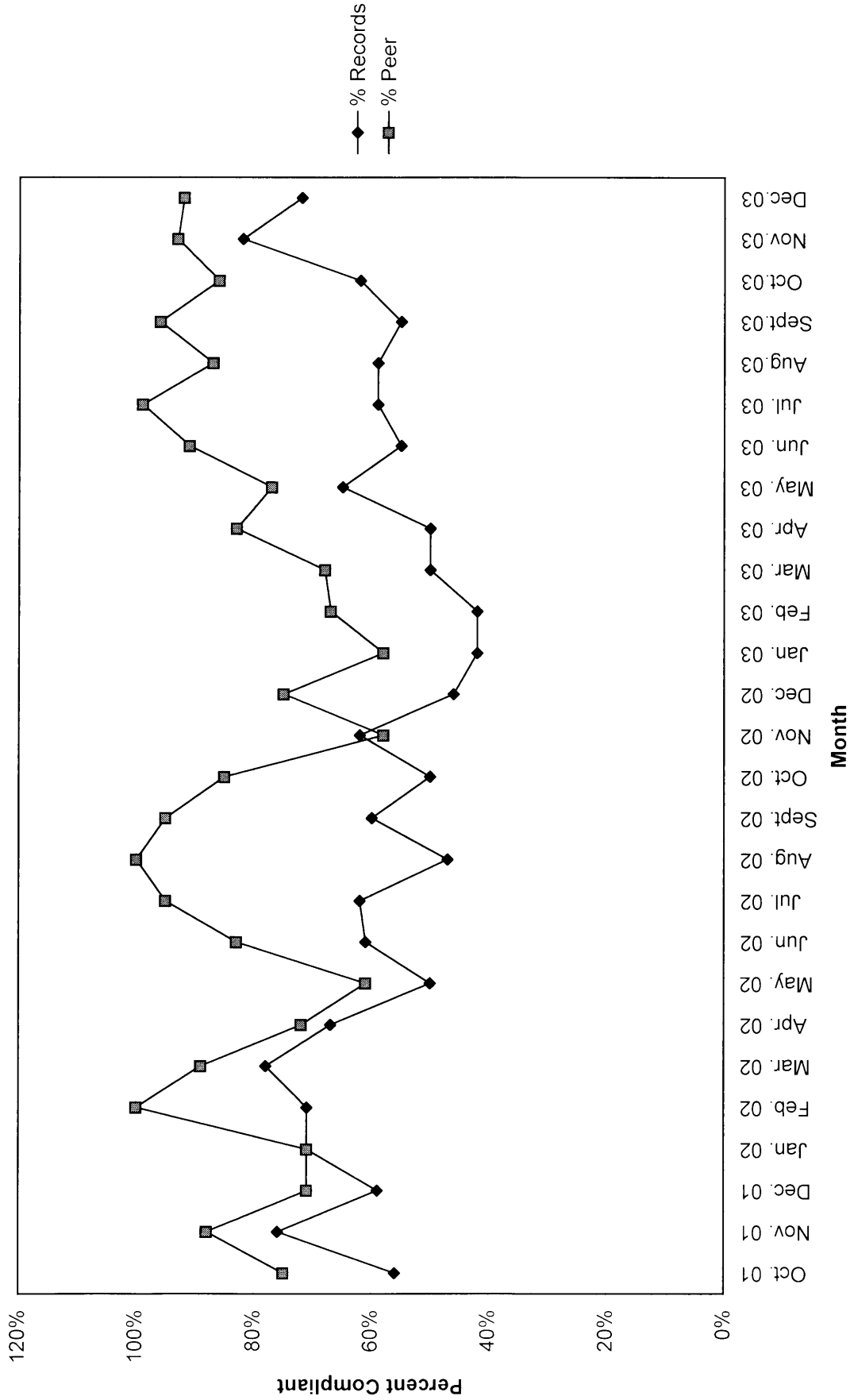
Total Units \$



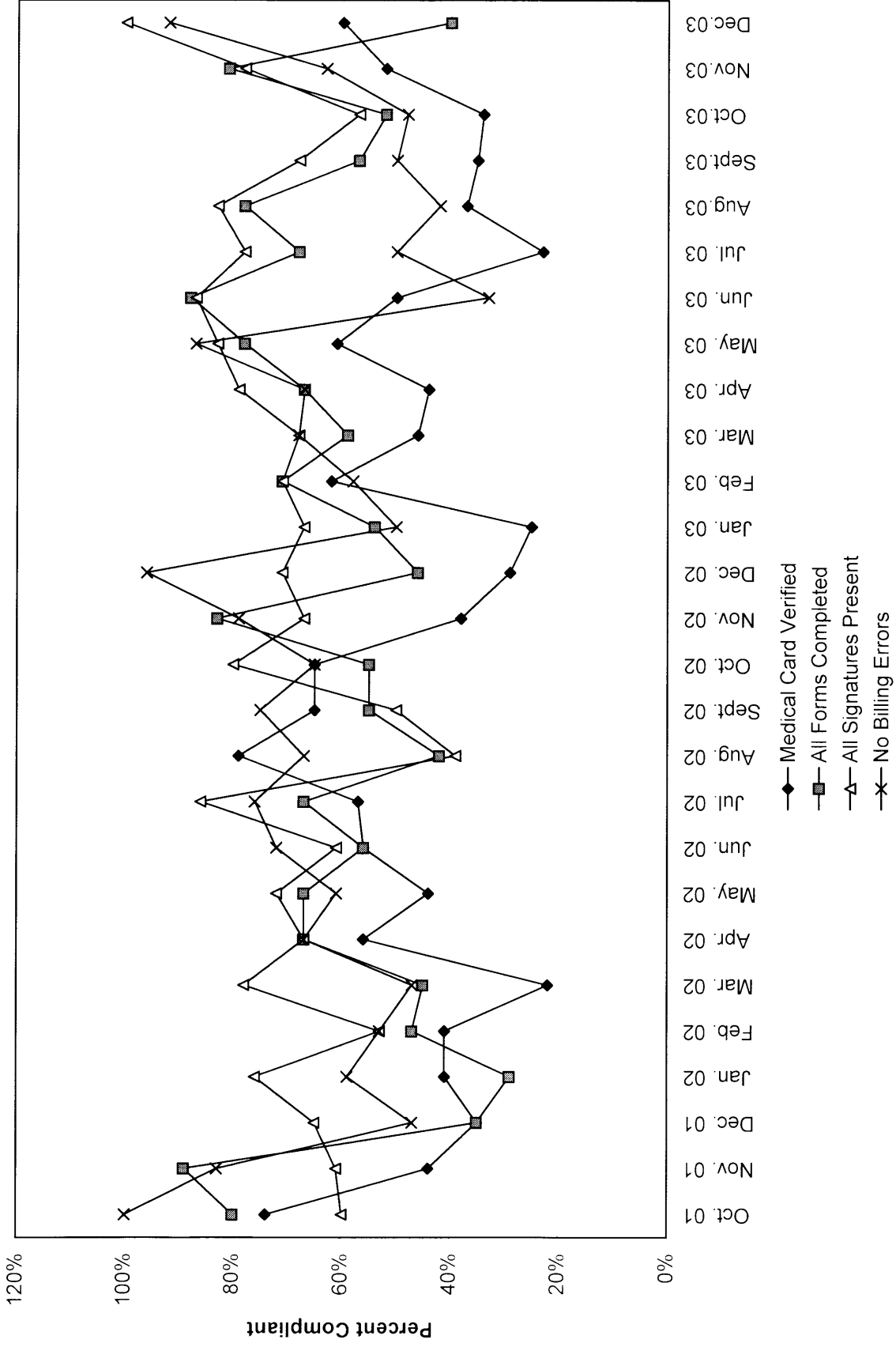
Units of Service



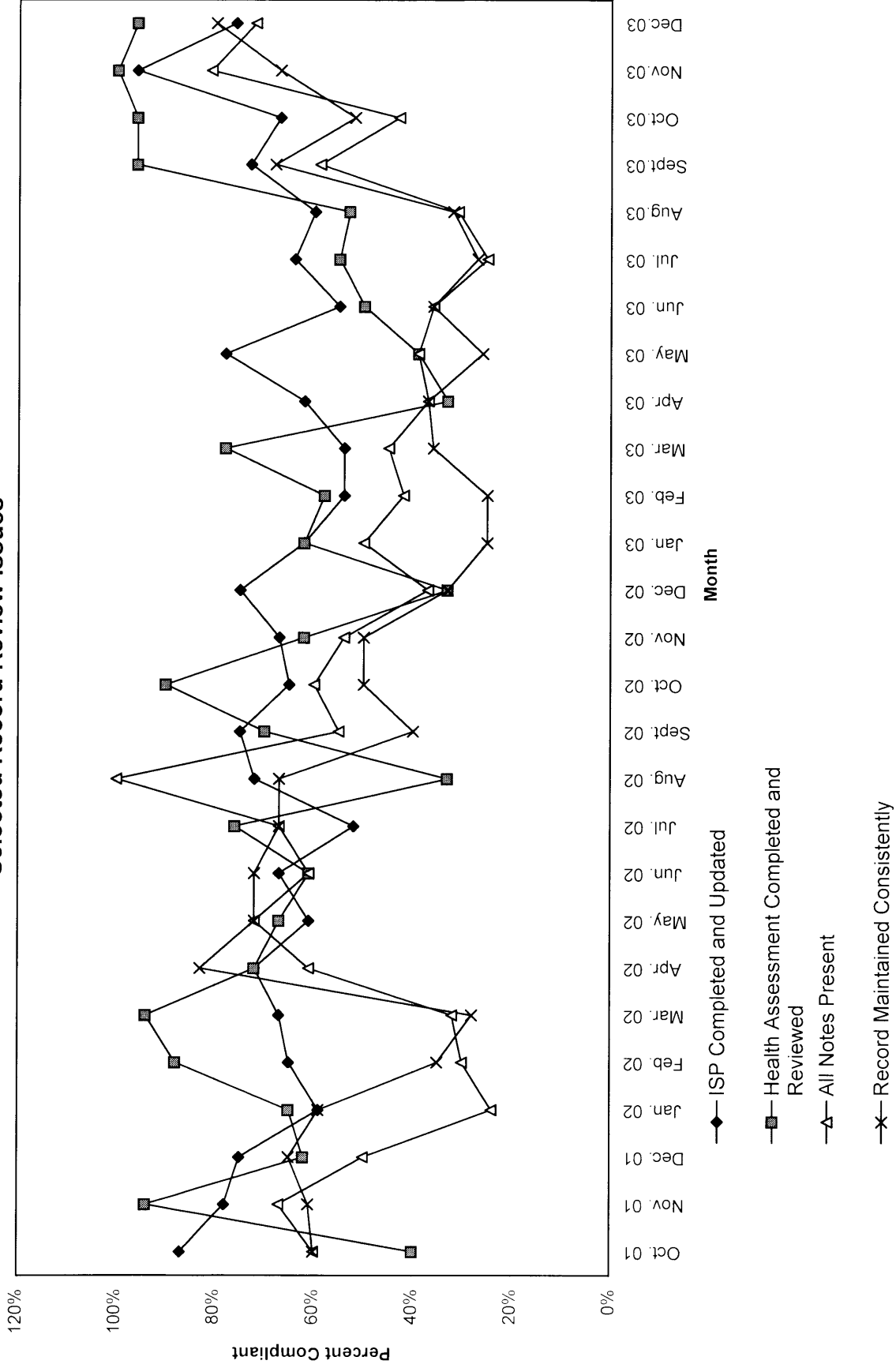
Compliance Review



Selected Record Review Issues



Selected Record Review Issues



% of Agency \$ Billed by Clinician

| December | 2003 | | | | | | | Tot Units | % of Tot |
|-------------------|-------------|------------|-------------|------------|-------------|------------|------------|--------------|----------|
| | DA | Eval | IND | Group | CSP | MED | Other | | |
| Unit Rate | \$ 135 | \$ 135 | \$ 90 | \$ 40 | \$ 65 | \$ 195 | \$ 35 | | |
| Dean Bachelor | 0.00 | 0.00 | 3.00 | 12.00 | 0.00 | 0.0 | 0.0 | | |
| | \$0 | \$0 | \$270 | \$480 | \$0 | \$0 | \$0 | \$ 750.00 | 1% |
| A.J. Bierly | 0.00 | 0.00 | 0.00 | 0.00 | 75.80 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$4,927.00 | \$0.00 | \$0.00 | \$ 4,927.00 | 4% |
| Hugh Boggs | 0.00 | 0.00 | 3.00 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$270.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 270.00 | 0% |
| Misty Coleman | 3.00 | 0.00 | 68.50 | 8.00 | 3.00 | 0.00 | 0.00 | | |
| | \$405.00 | \$0.00 | \$6,165.00 | \$320.00 | \$195.00 | \$0.00 | \$0.00 | \$ 7,085.00 | 5% |
| Scott Craft | 1.00 | 0.00 | 28.60 | 12.00 | 0.00 | 0.0 | 24.0 | | |
| | \$135.00 | \$0.00 | \$2,574.00 | \$480.00 | \$0.00 | \$0.00 | \$840.00 | \$ 4,029.00 | 3% |
| Jodie Frazier | 0.00 | 0.00 | 0.00 | 0.00 | 48.20 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$3,133.00 | \$0.00 | \$0.00 | \$ 3,133.00 | 2% |
| Steve Ford | 0.00 | 0.00 | 75.10 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$6,759.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 6,759.00 | 5% |
| Rick Gehlbach | 6.80 | 4.80 | 57.40 | 6.00 | 1.20 | 0.00 | 0.00 | | |
| | \$918.00 | \$648.00 | \$5,166.00 | \$240.00 | \$78.00 | \$0.00 | \$0.00 | \$ 7,050.00 | 5% |
| Joni Grim | 0.00 | 0.00 | 57.20 | 54.00 | 0.60 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$5,148.00 | \$2,160.00 | \$39.00 | \$0.00 | \$0.00 | \$ 7,347.00 | 6% |
| Adrienne Harris | 0.00 | 0.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$810.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 810.00 | 1% |
| Brad Hedges | 1.00 | 9.00 | 7.00 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | \$135.00 | \$1,215.00 | \$630.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 1,980.00 | 1% |
| Chris Johnson | 1.00 | 0.00 | 32.10 | 11.00 | 0.00 | 0.00 | 75.00 | | |
| | \$135.00 | \$0.00 | \$2,889.00 | \$440.00 | \$0.00 | \$0.00 | \$2,625.00 | \$ 6,089.00 | 5% |
| Kelly Kleimeyer | 1.00 | 0.00 | 58.60 | 0.00 | 31.60 | 0.00 | 0.00 | | |
| | \$135.00 | \$0.00 | \$5,274.00 | \$0.00 | \$2,054.00 | \$0.00 | \$0.00 | \$ 7,463.00 | 6% |
| Tonya Kraner | 0.00 | 0.00 | 20.50 | 0.00 | 2.80 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$1,845.00 | \$0.00 | \$182.00 | \$0.00 | \$0.00 | \$ 2,027.00 | 2% |
| Karis Mason | 0.00 | 0.00 | 10.50 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$945.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 945.00 | 1% |
| Dawn McCoy | 14.00 | 0.00 | 62.10 | 0.00 | 0.50 | 0.00 | 0.00 | | |
| | \$1,890.00 | \$0.00 | \$5,589.00 | \$0.00 | \$32.50 | \$0.00 | \$0.00 | \$ 7,511.50 | 6% |
| Paula Moreland | 11.00 | 0.00 | 8.90 | 0.00 | 28.80 | 0.0 | 0.0 | | |
| | \$1,485.00 | \$0.00 | \$801.00 | \$0.00 | \$1,872.00 | \$0.00 | \$0.00 | \$ 4,158.00 | 3% |
| Leasa Mowery | 0.00 | 0.00 | 8.30 | 0.00 | 0.00 | 0.0 | 0.0 | | |
| | \$0.00 | \$0.00 | \$747.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 747.00 | 1% |
| Tricia Ostrander | 3.80 | 17.10 | 8.60 | 0.00 | 0.00 | 0.0 | 0.0 | | |
| | \$513.00 | \$2,308.50 | \$774.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 3,595.50 | 3% |
| Bonnie Pearse | 18.00 | 0.00 | 89.50 | 3.00 | 15.90 | 0.00 | 0.00 | | |
| | \$2,430.00 | \$0.00 | \$8,055.00 | \$120.00 | \$1,033.50 | \$0.00 | \$0.00 | \$ 11,638.50 | 9% |
| Chris Ray | 5.60 | 9.00 | 25.50 | 0.00 | 2.40 | 0.00 | 0.00 | | |
| | \$756.00 | \$1,215.00 | \$2,295.00 | \$0.00 | \$156.00 | \$0.00 | \$0.00 | \$ 4,422.00 | 3% |
| Robin Rippeth | 15.40 | 1.50 | 14.90 | 0.00 | 0.50 | 0.00 | 0.00 | | |
| | \$2,079.00 | \$202.50 | \$1,341.00 | \$0.00 | \$32.50 | \$0.00 | \$0.00 | \$ 3,655.00 | 3% |
| Claire Robitaille | 2.00 | 0.00 | 46.70 | 0.00 | 0.00 | 0.00 | 0.00 | | |
| | \$270.00 | \$0.00 | \$4,203.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$4,473.00 | 3% |
| Mike Selegue | 12.20 | 0.00 | 51.70 | 0.00 | 1.70 | 0.00 | 0.00 | | |
| | \$1,647.00 | \$0.00 | \$4,653.00 | \$0.00 | \$110.50 | \$0.00 | \$0.00 | \$6,410.50 | 5% |
| Charles Snyder | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 41.40 | 0.00 | | |
| | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$8,073.00 | \$0.00 | \$8,073.00 | 6% |
| Amanda Moore | 0.00 | 0.00 | 0.00 | 0.00 | 189.00 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$12,285.00 | \$0.00 | \$0.00 | \$12,285.00 | 9% |
| Joe Dunson | 0.00 | 0.00 | 0.00 | 0.00 | 67.90 | 0.00 | 0.00 | | |
| | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$4,413.50 | \$0.00 | \$0.00 | \$4,413.50 | 3% |
| Sum Totals | \$12,933.00 | \$5,589.00 | \$67,203.00 | \$4,240.00 | \$30,543.50 | \$8,073.00 | \$3,465.00 | \$132,046.50 | |

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

**Unit Production & Scheduling Proficiency by Clinician
Mid Ohio Psychological Services**

December

2003

| | Cancellations | Missed | Diagnostics | Evaluations | Individual | Group | Community Support | Medication | Other Units | Total Units | Billable Units | Units Billed+ Missed | Schedule Proficiency | % Canceled | % Missed |
|-------------------|---------------|------------|---------------|--------------|---------------|---------------|-------------------|-------------|-------------|----------------|----------------|----------------------|----------------------|------------|------------|
| Unit Rate | | | 135 | 135 | 90 | 40 | 65 | 195 | 35 | | | | | | |
| Dean Bachelor | 11 | 4 | 0.00 | | 3.00 | 12.00 | 0.00 | | | 30.00 | 15.00 | 19.00 | 79% | 37% | 13% |
| A. J. Bierly* | | | | | | | 75.80 | | | 75.80 | 75.80 | | | | |
| Hugh Boggs Jr | | | | | 3.00 | | | | | 3.00 | 3.00 | 3.00 | 100% | 0% | 0% |
| Scott Craft | 23 | 18 | 1.00 | 0.00 | 28.60 | 12.00 | 0.00 | | 24.0 | 106.60 | 65.60 | 83.60 | 62% | 22% | 17% |
| Misty Coleman | 33 | 23 | 3.00 | | 68.50 | 8.00 | 3.00 | | | 138.50 | 82.50 | 105.50 | 60% | 24% | 17% |
| Steve Ford | 23 | 23 | 10.80 | | 75.10 | 0.00 | 7.40 | | | 139.30 | 93.30 | 116.30 | 67% | 17% | 17% |
| Jodie Frazier* | | | | | | | 48.20 | | | 48.20 | 48.20 | | | | |
| Rick Gehlbach | 19 | 46 | 6.80 | 0.00 | 57.40 | 6.00 | 1.20 | | | 136.40 | 71.40 | 117.40 | 52% | 14% | 34% |
| Joni Grim | 52 | 31 | | | 57.20 | 54.00 | 0.60 | | | 194.80 | 111.80 | 142.80 | 57% | 27% | 16% |
| Adrienne Harris | 4 | | | | 9.00 | | | | | 13.00 | 9.00 | 9.00 | 69% | 31% | 0% |
| Brad Hedges | 2 | 5 | 1.00 | 9.00 | 7.00 | | | | | 24.00 | 17.00 | 22.00 | 71% | 8% | 21% |
| Chris Johnson | 13 | 12 | 1.00 | | 32.10 | 11.00 | | | 75.0 | 144.10 | 119.10 | 131.10 | 83% | 9% | 8% |
| Tonya Kraner | 9 | 4 | | | 20.50 | | | | | 33.50 | 20.50 | 24.50 | 61% | 27% | 12% |
| Karis Mason | 5 | 7 | | | 10.50 | | | | | 22.50 | 10.50 | 17.50 | 47% | 22% | 31% |
| Dawn McCoy | 40 | 35 | 14.00 | | 62.10 | 0.00 | 0.50 | | | 151.60 | 76.60 | 111.60 | 51% | 26% | 23% |
| Paula Moreland | | 5 | 11.00 | | 8.90 | | 28.80 | | | 53.70 | 48.70 | 53.70 | 91% | 0% | 9% |
| Leasa Mowery | | | | | 8.30 | | | | | 8.30 | 8.30 | 8.30 | 100% | 0% | 0% |
| Tricia Ostrander | 4 | 2 | 3.80 | 17.10 | 8.60 | | | | | 35.50 | 29.50 | 31.50 | 83% | 11% | 6% |
| Bonnie Pearse | 19 | 53 | 18.00 | | 89.50 | 12.00 | 19.00 | | | 210.50 | 138.50 | 191.50 | 66% | 9% | 25% |
| Chris Ray | 26 | 17 | 5.60 | 9.00 | 25.50 | | 2.40 | | | 85.50 | 42.50 | 59.50 | 50% | 30% | 20% |
| Robin Rippeth | 2 | 9 | 14.90 | 1.50 | 14.90 | | 2.00 | | | 44.30 | 33.30 | 42.30 | 75% | 5% | 20% |
| Claire Robitaille | 17 | 22 | 17.00 | | 46.70 | | | | | 102.70 | 63.70 | 85.70 | 62% | 17% | 21% |
| Mike Selegue * | 13 | 35 | 12.20 | | 51.70 | | 1.70 | | | 113.60 | 65.60 | 100.60 | | 11% | 31% |
| Charles Snyder | 34 | 52 | | | | | | 41.2 | | 127.20 | 41.20 | 93.20 | 32% | 27% | 41% |
| Amanda Moore* | | | | | | | 189.00 | | | 189.00 | 189.00 | | | | |
| Kelly Kleimeyer | | 2 | 1.00 | | 58.60 | | 31.60 | | | 93.20 | 91.20 | 93.20 | 98% | 15% | 2% |
| Joe Dunson * | | | | | | | 67.90 | | | 67.90 | 67.90 | | | | |
| Sum Totals | 349 | 405 | 121.10 | 36.60 | 746.70 | 115.00 | 479.10 | 41.2 | 99.0 | 2392.70 | 1638.70 | 1662.80 | 69% | 17% | 17% |
| Average | | | | | | | | | | | | | | | |

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