



QA REPORT

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

FROM: Shawna Watts-Shumaker, MBA
Quality Assurance Coordinator

SUBJECT: Quality Assurance Activities for November 2005
Chart Reviews for September 2005

SUBMITTED: April 11, 2006

I: MAJOR UNUSUAL INCIDENTS

There were three major unusual incidents for the month of November.

The first incident occurred on 11/04/2005. Staff became aware that client # 03090206 had passed away in their sleep. The cause of death is unknown.

The second incident occurred on 11/28/2005. The Lancaster Police were contacted to assist in locating client # 02110703 due to concerns of how well the client was doing psychiatrically in the community due to the client not being seen for many weeks. The client was hospitalized at Fairfield Medical Center on 12/01/2005 and transferred to Twin Valley on 12/08/2005. The client was discharged from Twin Valley on 01/13/2006. Joe Dunson saw the client on 01/13/2006.

The third incident occurred on 11/29/2005. The emergency squad was called after client #02021101 collapsed. The client was transported to Fairfield Medical Center. The client was treated and released from the emergency room. Dr. Snyder saw the client on 12/1/2005.

II: TRANSFERS FROM STATE HOSPITALS

There was one release from a state hospital in November. Client # 02112006 was admitted to Twin Valley on 11/07/2005 and discharged on 11/15/2005. Bonnie Daniels saw the client on 11/22/2005.



There were three clients released from community hospitalization in November. Client #05091405 was admitted to Columbus Community Hospital on 11/01/05 and discharged on 11/11/2005. There was no follow up by this agency due to the client relocating. The client was relocated to Mansfield, aftercare was coordinated by the foster care agency New Leaf.

Client # 04061702 was admitted to Columbus Community Hospital on 11/07/2005 and discharged on 11/11/2005. Paula Moreland saw the client on 11/22/2005, at an appointment time chosen by the client's parents.

Client # 01021902 was admitted 11/22/2005 to Berger Hospital and discharged on 11/23/2005. AJ Bierly saw the client on 11/23/2005.

III: PLANT/PHYSICAL HEALTH AND SAFETY

There were no health and safety issues identified.

IV: RECORDS COMPLETENESS REVIEW (September)

Clinicians	Percent Compliant With Standard	Chart Included AOD Services	Chart Included CSP Services
Chris Ray's Team			
Dr. Chris Ray	88*	NO	YES
Bonnie Daniels	97	NO	NO
Rick Gehlbach	98	NO	NO
Chris Johnson	96	NO	YES
Tricia Ostrander	100	NO	NO
Team Score	96		
Robin Rippeth's Team			
Dr. Robin Rippeth	100	NO	NO
Steve Ford	95	NO	NO
Mike Selegue	98	NO	YES
Paula Moreland	96	NO	NO
Karis Mason	99	NO	NO
Misty Coleman	92*	NO	YES
Jessica Mitchell	98	NO	YES
Ellen Marshall	99	NO	NO
Kimberly Rugg	97	NO	YES
Team Score	97		
Scott Craft's Team			
Dr. Scott Craft	98	NO	YES
Joe Dunson	99	NO	NO
A.J. Bierly	95	NO	YES
Amanda Moore	96	NO	YES
Team Score	97		

Brad Hedges' Team			
Dr. Brad Hedges	99	NO	NO
Claire Robitaille	97	NO	NO
Dean Bachelor	96	NO	NO
Team Score	97		
Franklin County Team			
Joni Grim	98	NO	YES
Team Score	98		

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

Ninety percent of the clinicians met the 95% threshold for the record review.

Reasons that clinicians did not meet the threshold and the percentage of records reviewed are as follows:

- Forty eight percent of the records reviewed were missing a copy of the current medical card.
- Fourteen 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 33% of the clinicians.
- In forty- three percent 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.
- Ten percent of the records reviewed did not have a reviewed health assessment.
- Fourteen percent of clinicians were missing case notes for billed services.

V: PEER REVIEW (September)

Clinicians	Percent Compliant With Standard	Chart Included AOD Services	Chart Included CSP Services
Chris Ray's Team			
Dr. Chris Ray	95	NO	YES
Bonnie Daniels	96	NO	NO
Rick Gehlbach	100	NO	NO
Chris Johnson	99	NO	YES
Tricia Ostrander	100	NO	NO
Team Score	98		
Robin Rippeth's Team			
Dr. Robin Rippeth	100	NO	NO
Steve Ford	96	NO	NO
Mike Selegue	94	NO	YES
Paula Moreland	98	NO	NO
Karis Mason	89*	NO	NO
Misty Coleman	84*	NO	YES
Jessica Mitchell	97	NO	YES
Ellen Marshall	83*	NO	NO

Kimberly Rugg	88*	NO	YES
Team Score	92		
Scott Craft's Team			
Dr. Scott Craft	80*	NO	NO
Joe Dunson	97	NO	NO
A.J. Bierly	93	NO	YES
Amanda Moore	96	NO	YES
Team Score	91		
Brad Hedges' Team			
Dr. Brad Hedges	96	NO	NO
Claire Robitaille	93	NO	NO
Dean Bachelor	95	NO	NO
Team Score	95		
Franklin County Team			
Joni Grim	100	NO	YES
Team Score	100		

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

Seventy-six percent of the clinicians met the 90% threshold for peer review.

- Five percent of the records reviewed for peer review showed that the clinician did not complete the required forms, or make the necessary referrals.
- Nineteen 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 (November)

Clinician	Number of Clients Assigned	Number of Clients Seen	Average Number of Contacts Per Client Seen
Dean Bachelor	36	10	1.70
A.J. Bierly	46	32	3.12
Misty Coleman	64	35	3.54
Dr. Scott Craft	81	23	2.89
Bonnie Daniels	60	39	1.69
Joe Dunson	25	25	4.16
Steve Ford	72	50	2.10
Rick Gehlbach	55	43	1.74
Dr. Joni Grim	84	26	3.58
Dr. Brad Hedges	67	14	1.29
Chris Johnson	92	46	1.74
Ellen Marshall	112	48	2.60
Karis Mason	69	26	1.81
Jessica Mitchell	28	23	1.61
Amanda Moore	45	36	2.94
Paula Moreland	75	36	2.19
Tricia Ostrander	74	33	1.73
Dr. Chris Ray	34	24	1.17

Dr. Robin Rippeth	24	19	1.68
Claire Robitaille	42	30	1.70
Kimberly Rugg	51	47	3.23
Mike Selegue	91	43	1.74
Heather Stevens	20	27	2.19
Average	59	31.96	2.27

The No Show rate for November was 17%. When considering both the no show rate and the cancellation rate, this figure is 31%.

VII: AOD UTILIZATION REVIEW

There are currently no AOD groups active within the agency.

VIII: INVOLUNTARY TERMINATIONS

No involuntary terminations were conducted during the month of November 2005.

IX: PROFESSIONAL STAFF ORGANIZATION

The clinical staff maintains current licensure requirements.

X: REVIEW OF WAITING LIST

There were a total of 86 new clients seen in the month of November. Fifty nine percent of these new clients were from Fairfield County. The total number of clients seen in the month of November was 735.

The average time between phone intake and completion of intakes for new clients was 26 days. The agency strives to see new clients within 30 days of initial contact.

XI: REVIEW OF SERVICES UNDER CONTRACT

Currently no services are provided under contract to this agency.

XII: FOCUSED REVIEW AREA

The Administrative Coordinator and an agency intern conducted a focus group with consumers of mental health services at Our Place. Listed below are the questions asked and the consumer responses. This information will be reviewed by the Quality Assurance Committee for possible improvements in agency services.

- If you could change anything about the current mental health system in Fairfield County, what would you change?

Quicker access to doctors, counselors, and psychiatrist.
Faster access to medications

Services for people without Medicaid or insurance
More treatment options within the community
More local resources for inpatient care

- What additional mental health services does the community need? What needs are currently not being met?

Better follow-up care after inpatient stays
Better medication assistance services
Resource coordination to meet needs such as housing, clothing, food, etc too spread out
More transportation services
Expanding the beds at Fairfield Medical Center

- What services should Mid-Ohio add/get rid of?

Services for people without insurance, including medication services
Expanded case management services for coordination of care issues

- How can Mid-Ohio improve the services we currently provide?

Treatment providers need to have more interaction and contact with consumers.

XIII: RESPONSE TO LAST MONTHS FOCUS REVIEW

There was no response to last month's focused review.

XIV: CLIENT RIGHTS AND GRIEVANCES

There were no client rights or grievance issues for November 2005.

XV: TREATMENT OUTCOMES REPORTING

The agency continues to submit outcomes at a higher rate than the other local systems agencies. We are continuing to work on developing reports to be used to improve client outcomes at the agency level.

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

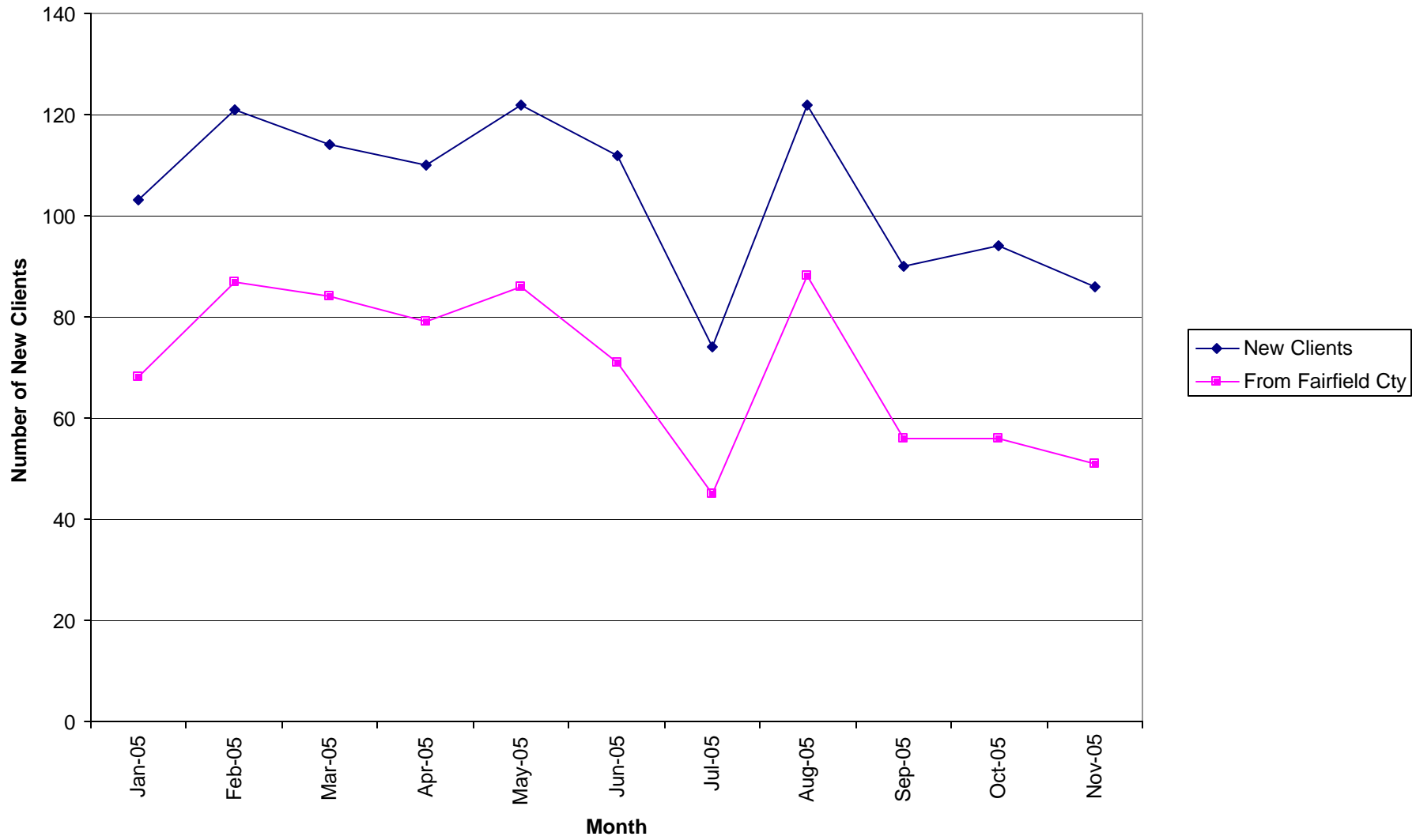
Agency Service Budget Month of December 2005

	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	90	81	200	83	1,058	572	1,200	498		
	\$11,660	\$10,464	\$25,998	\$10,789	\$137,477	\$74,289	\$155,988	\$64,735	(\$18,511)	\$9,554
Individual Counseling	953	610	962	510	5,569	3,470	5,772	3,060		
	\$85,734	\$54,864	\$86,580	\$45,900	\$501,192	\$312,300	\$519,480	\$275,400	(\$18,288)	\$36,900
Individual CSP	0	216	302	208	1,052	1,236	1,812	1,248		
	\$0	\$18,438	\$25,767	\$17,747	\$89,714	\$105,490	\$154,600	\$106,479	(\$64,886)	(\$990)
Group CSP	0	0	0	0	0	0	0	0		
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Group	163	22	208	26	1,184	183	1,248	156		
	\$6,435	\$869	\$8,212	\$1,026	\$46,744	\$7,225	\$49,271	\$6,159	(\$2,527)	\$1,066
Medication	59	43	53	34	311	224	318	204		
	\$12,526	\$9,088	\$11,176	\$7,170	\$65,644	\$47,214	\$67,057	\$43,017	(\$1,413)	\$4,196
AOD Assessment	0	0	2	2	0	0	12	12		
	\$0	\$0	\$192	\$192	\$0	\$0	\$1,155	\$1,155	(\$1,155)	(\$1,155)
AOD Individual	0	0	2	1	0	0	12	6		
	\$0	\$0	\$131	\$87	\$0	\$0	\$1,047	\$523	(\$1,047)	(\$523)
AOD Group	0	0	12	6	0	0	72	36		
	\$0	\$0	\$457	\$228	\$0	\$0	\$2,742	\$1,371	(\$2,742)	(\$1,371)
Court Diversion	146	0	196	0	342	148	1,176	0		
	\$5,114	\$0	\$6,860	\$0	\$11,974	\$5,177	\$41,160	\$0	(\$29,187)	\$5,177
Forensic Evaluations	7	0	2	0	9	2	12	0		
	\$3,500	\$0	\$1,000	\$0	\$4,500	\$1,000	\$6,000	\$0	(\$1,500)	\$1,000
Other	0	0	8	0	0	0	48	0		
	\$0	\$0	\$280	\$0	\$0	\$0	\$1,680	\$0	(\$1,680)	\$0
Sum \$	\$121,469	\$93,723	\$165,373	\$83,140	\$852,745	\$551,694	\$992,499	\$498,840	(\$139,754)	\$52,854

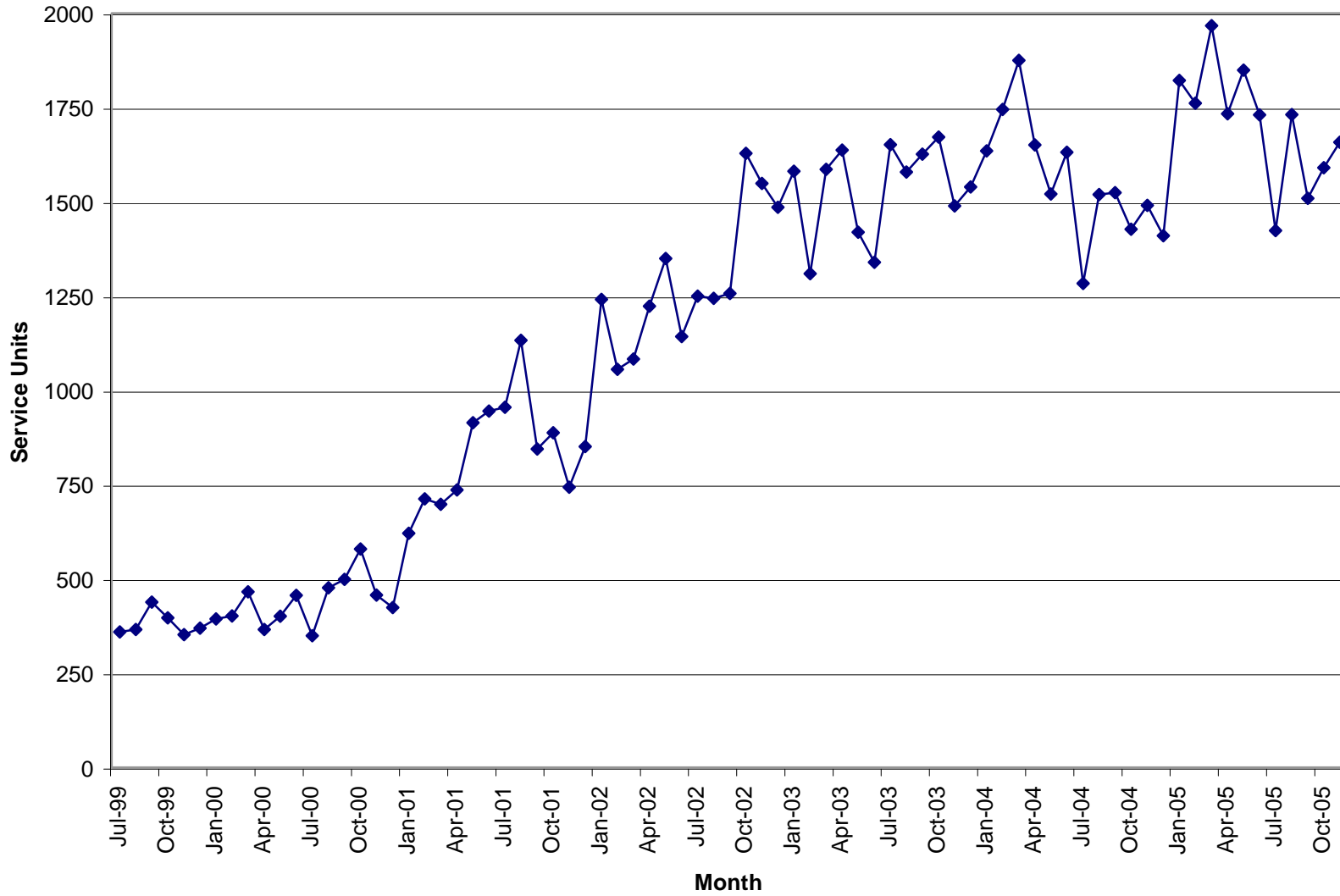
* () figures indicate that MOPS provided fewer services in this category than budgeted.

77% Percent of Services for Fairfield County
 14.10% Percent Below Overall MOPS Budget
 10.60% Percent Over Fairfield County Medicaid

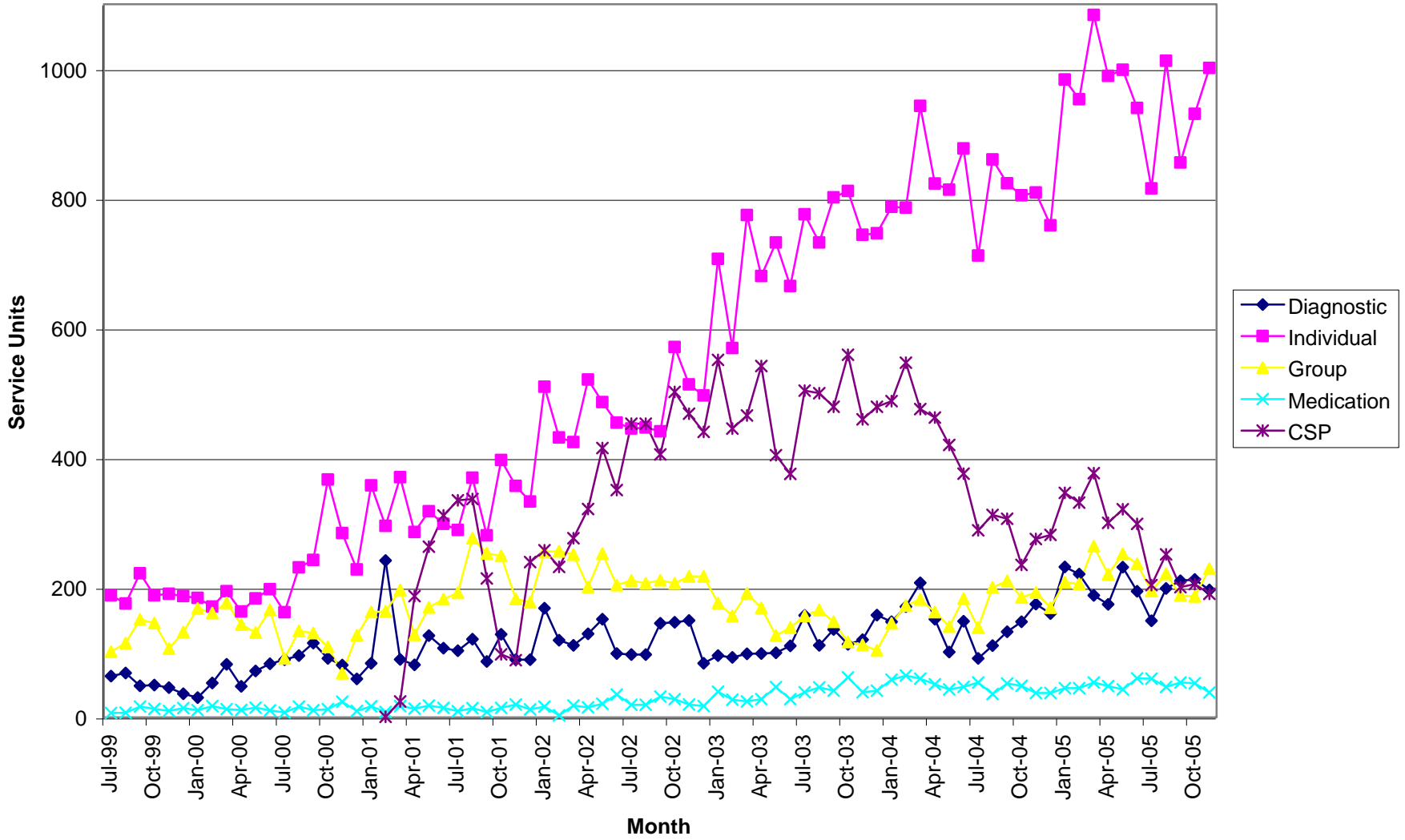
New Clients



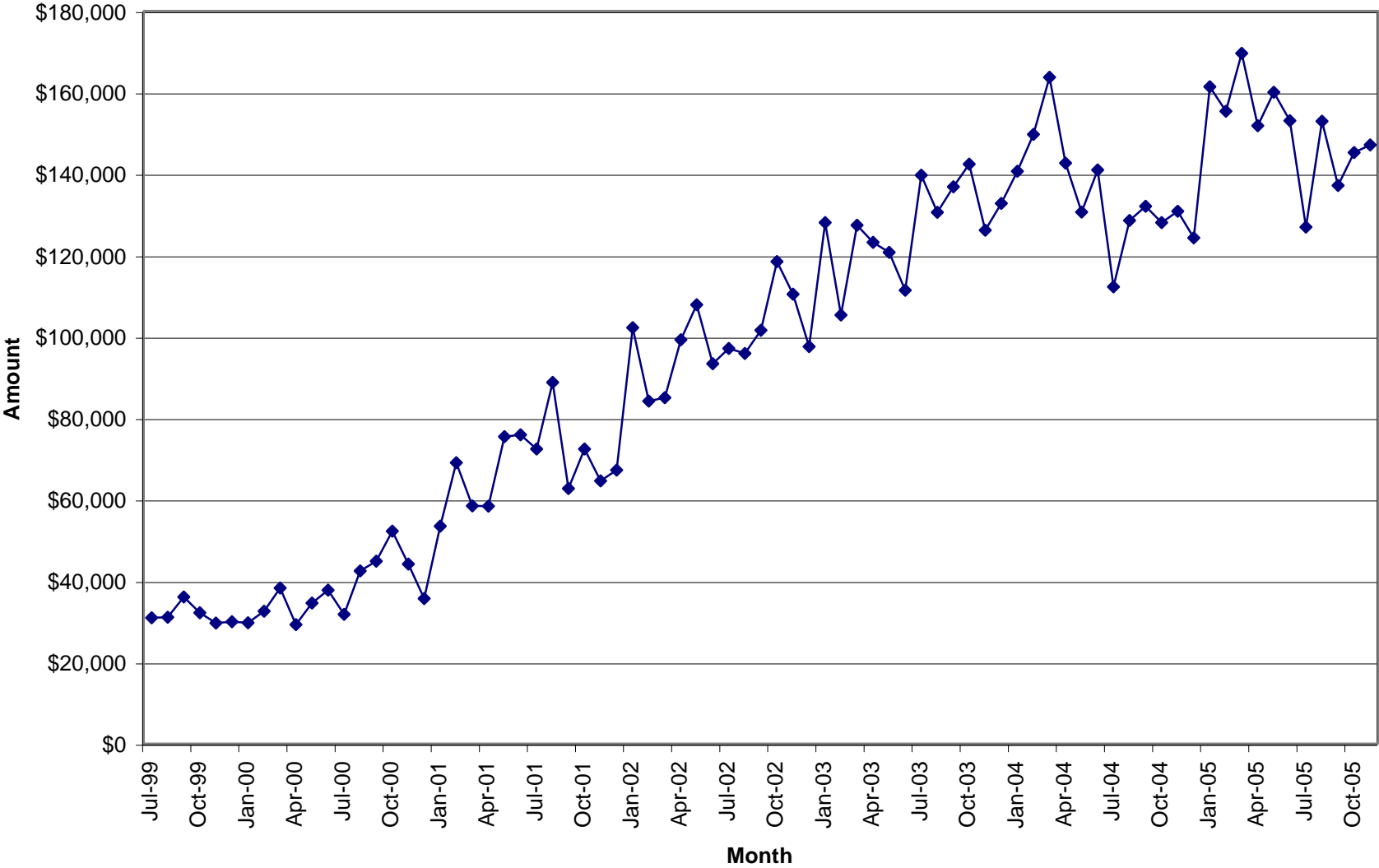
Total Units of Service



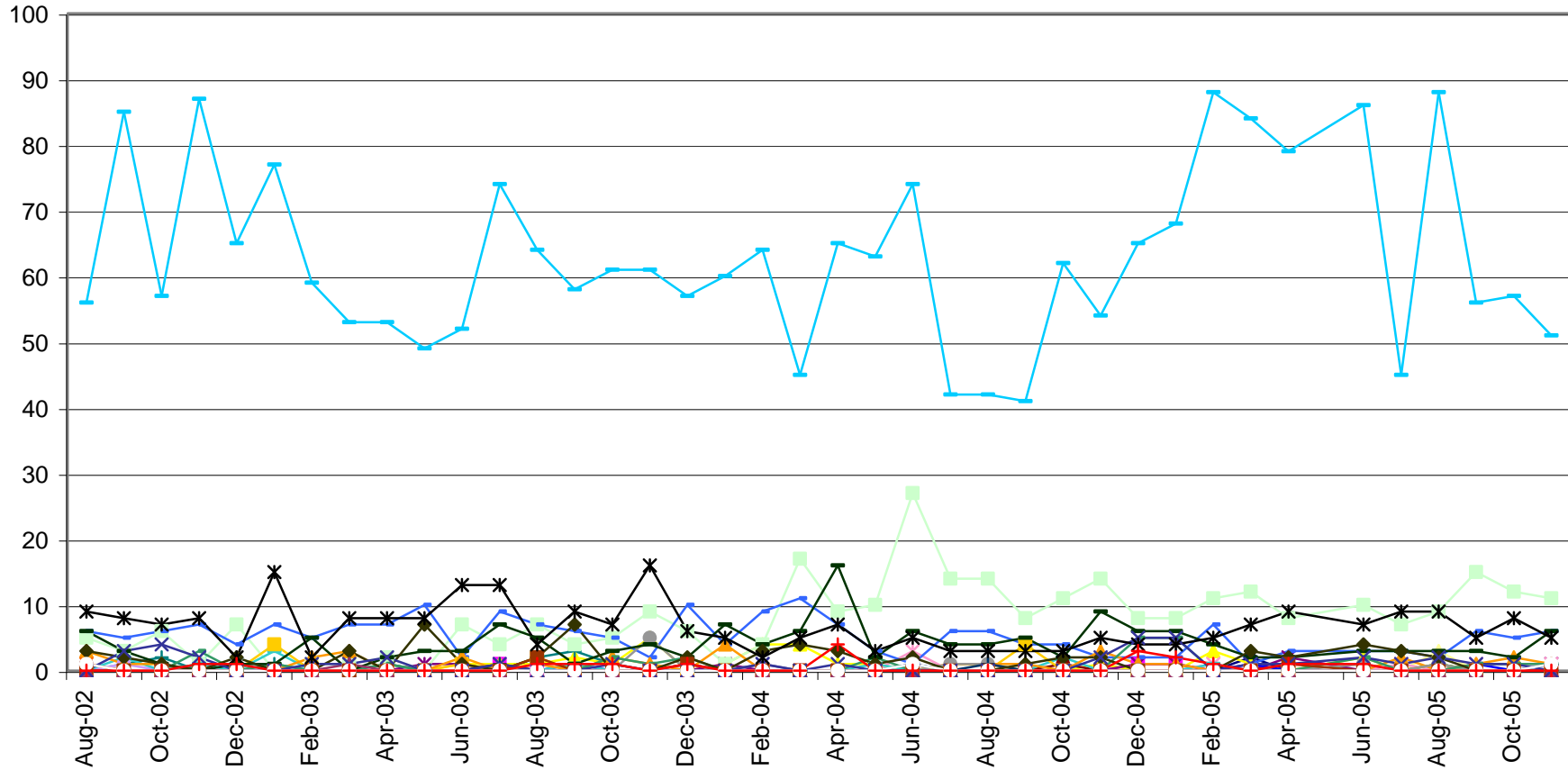
Units of Service



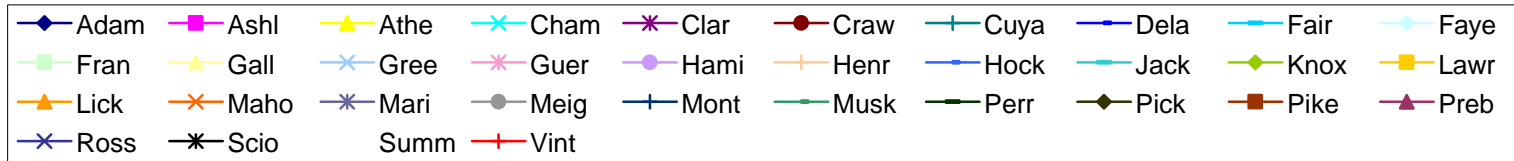
Total Units \$



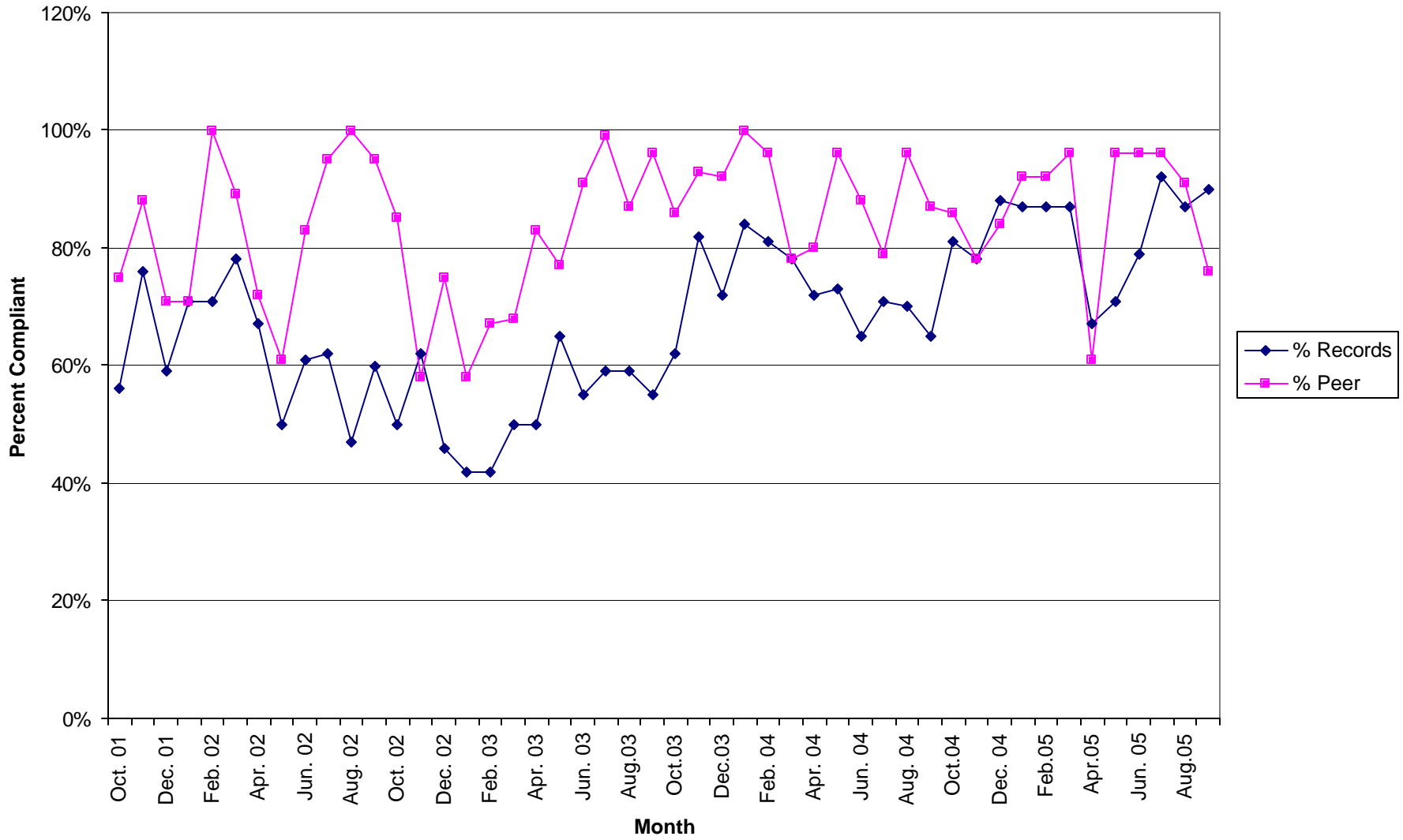
Number of Intakes by County



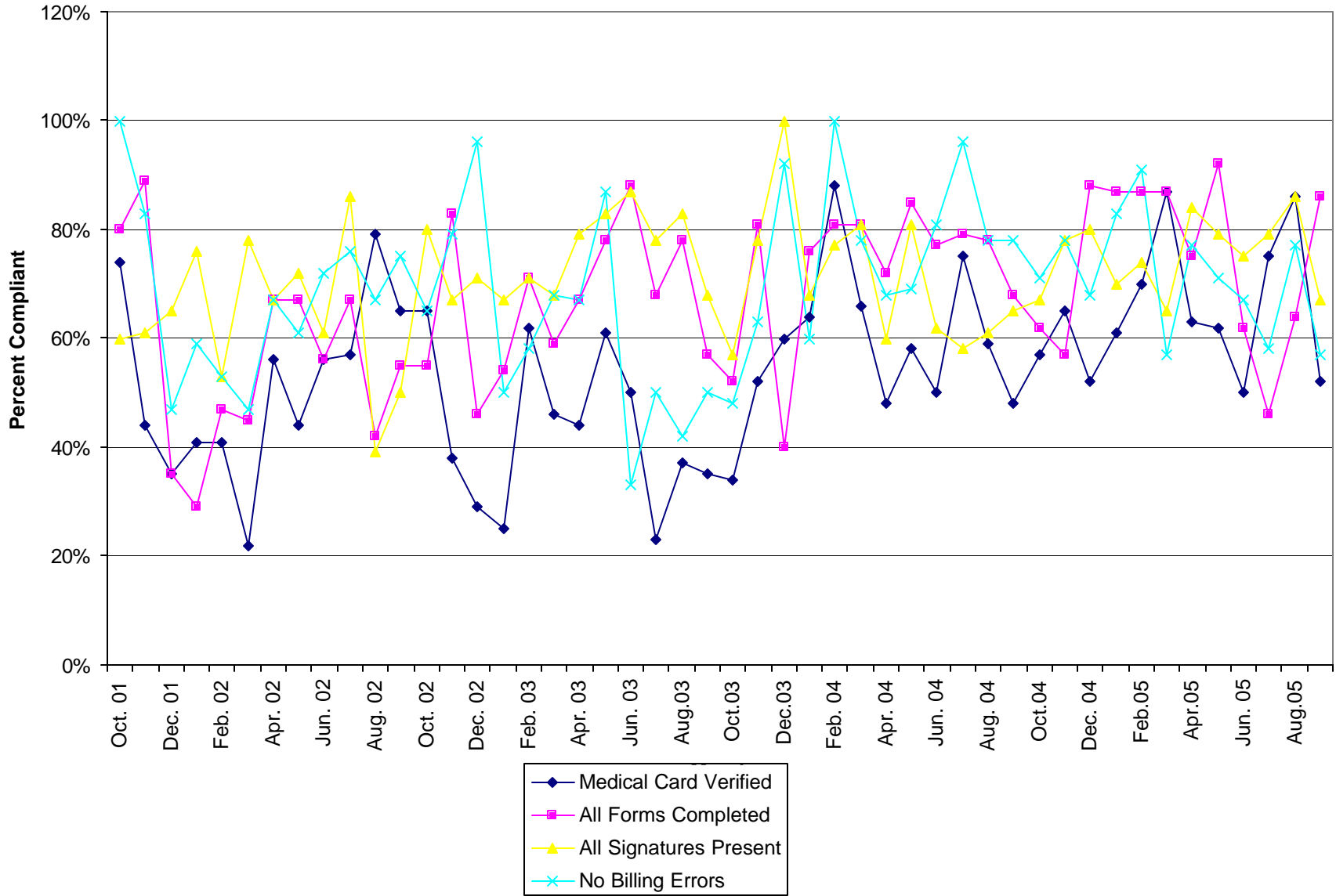
Prior to 9/05 the numbers reported were somewhat inflated due to a report issue that has been corrected.



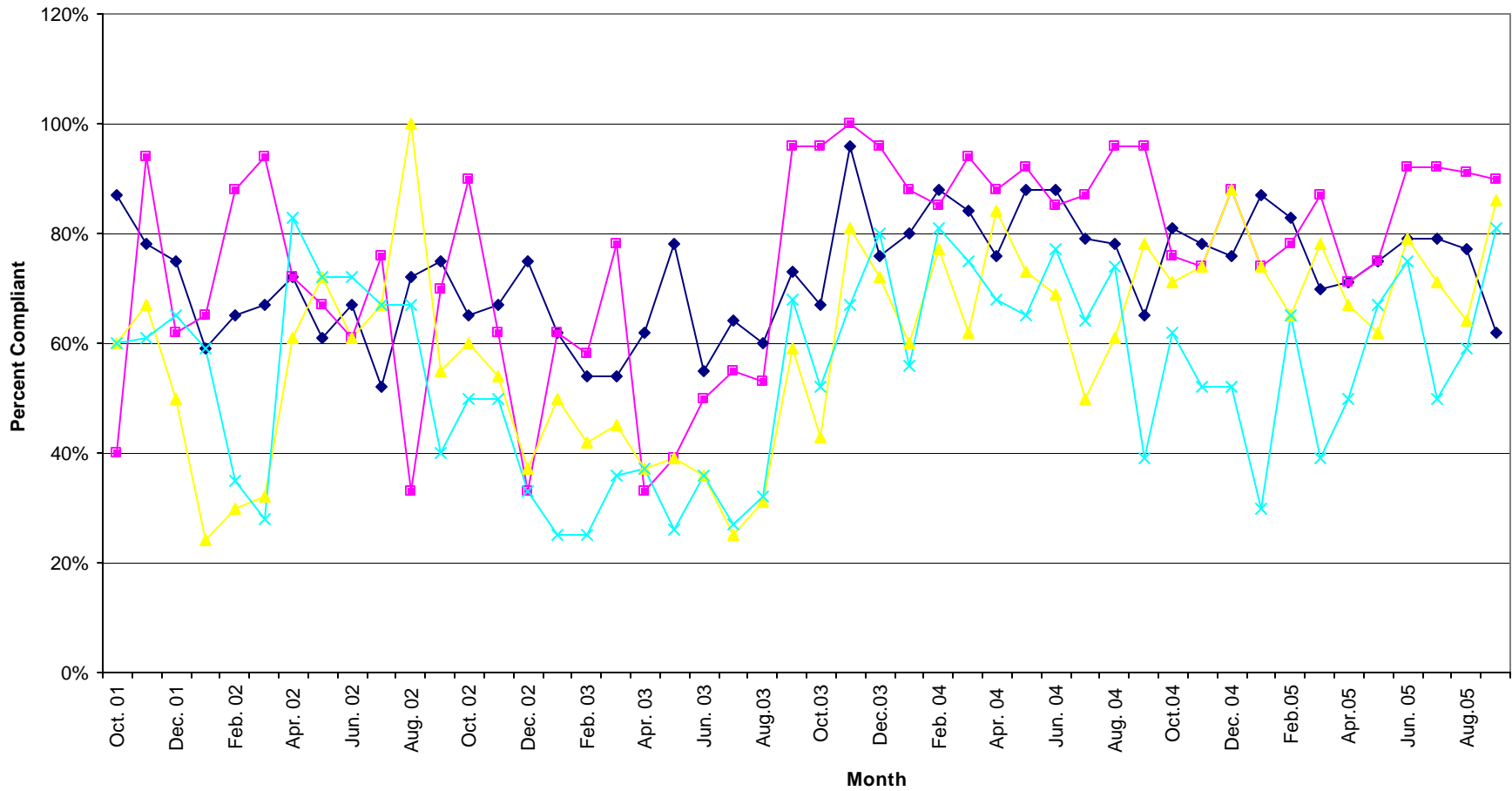
Compliance Review



Selected Record Review Issues



Selected Record Review Issues



- ◆ ISP Completed and Updated
- Health Assessment Completed and Reviewed
- ▲ All Notes Present
- × Record Maintained Consistently

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

December 2005

	Cancellations	Missed	Diagnostics	Evaluations	AOD Assessments	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
Unit Rate			129.99	129.99	96.24	90	39.48	65	195	35								
Dean Bachelor	22	21	1.00	0.00	0.00	5.50	13.00	0.00	0.0		62.50	19.50	40.50	48%	35%	34%	69%	1%
A. J. Bierly*	0	0	0.00	0.00	0.00	0.00	0.00	91.50	0.0		91.50	91.50	91.50	100%	0%	0%	0%	6%
Misty Coleman	40	19	3.50	0.00	0.00	56.10	43.50	2.00	0.0		164.10	105.10	124.10	64%	24%	12%	36%	7%
Scott Craft	2	13	5.30	0.00	0.00	24.30	38.00	1.30	0.0	80.0	163.90	148.90	161.90	91%	1%	8%	9%	9%
Bonnie Daniels	16	21	0.00	0.00	0.00	66.50	0.00	8.30	0.0		111.80	74.80	95.80	67%	14%	19%	33%	5%
Joe Dunson *	0	0	0.00	0.00	0.00	0.00	0.00	3.10	0.0	66.1	69.20	69.20	69.20	100%	0%	0%	0%	4%
Steve Ford	10	36	2.00	0.00	0.00	87.40	0.00	0.50	0.0		135.90	89.90	125.90	66%	7%	26%	34%	6%
Rick Gehlbach	10	44	7.70	2.80	0.00	51.50	0.00	2.40	0.0		118.40	64.40	108.40	54%	8%	37%	46%	4%
Joni Grim	7	10	3.60	0.00	0.00	37.30	0.00	3.30	0.0		61.20	44.20	54.20	72%	11%	16%	28%	3%
Brad Hedges	5	2	0.00	8.80	0.00	5.50	0.00	0.00	0.0		21.30	14.30	16.30	67%	23%	9%	33%	1%
Chris Johnson	15	35	4.00	0.00	0.00	46.00	0.00	6.70	0.0		106.70	56.70	91.70	53%	14%	33%	47%	4%
Ellen Marshall	17	48	8.90	0.00	0.00	78.70	0.00	4.70	0.0		157.30	92.30	140.30	59%	11%	31%	41%	6%
Karis Mason	15	21	1.00	12.30	0.00	37.40	17.00	0.00	0.0		103.70	67.70	88.70	65%	14%	20%	35%	4%
Jessica Mitchell	15	16	2.30	0.00	0.00	43.60	0.00	1.00	0.0		77.90	46.90	62.90	60%	19%	21%	40%	3%
Amanda Moore	13	17	0.00	0.00	0.00	83.40	0.00	41.40	0.0		154.80	124.80	141.80	81%	8%	11%	19%	8%
Paula Moreland	37	18	5.80	0.00	0.00	54.40	0.00	0.80	0.0		116.00	61.00	79.00	53%	32%	16%	47%	4%
Tricia Ostrander	23	17	8.30	0.00	0.00	23.60	0.00	2.30	0.0		74.20	34.20	51.20	46%	31%	23%	54%	2%
Chris Ray	4	0	0.00	0.00	0.00	1.00	0.00	0.00	0.0		5.00	1.00	1.00	20%	80%	0%	80%	0%
Robin Rippeth	0	5	8.60	0.00	0.00	19.50	0.00	1.10	0.0		34.20	29.20	34.20	0%	0%	0%	0%	2%
Claire Robitaille	16	21	3.00	0.00	0.00	63.30	0.00	0.00	0.0		103.30	66.30	87.30	64%	15%	20%	36%	4%
Kimberly Rugg	36	30	4.00	0.00	0.00	81.20	0.00	9.80	0.0		161.00	95.00	125.00	59%	22%	19%	41%	6%
Mike Selegue	14	37	6.50	0.00	0.00	54.10	0.00	0.00	0.0		111.60	60.60	97.60	54%	13%	33%	46%	4%
Charles Snyder	114	88	0.00	0.00	0.00	0.00	0.00	0.00	59.4		261.40	59.40	147.40	23%	44%	34%	77%	4%
Heather Stevens	3	28	14.20	0.00	0.00	32.30	51.50	1.90	0.0		130.90	99.90	127.90	0%	0%	0%	0%	6%
Sum Totals	434	547	89.70	23.90	0.00	952.60	163.00	182.10	59.4	146.1	2597.80	1616.80	2163.80					
Average														57%	18%	18%	35%	4%

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

% of Agency \$ Billed by Clinician

December	2005		Weighted							
	DA	EVAL	AOD	IND	Group	CSP	MED	Other	Tot Units	% of Tot
Unit Rate	\$ 129.99	\$ 129.99	\$ 96.24	\$ 90	\$ 39.48	\$ 65	\$ 195	\$ 35		
Dean Bachelor	0.00	0.00	0.00	3.00	12.00	1.00	0.0	0.0		
	\$0	\$0	\$0	\$270	\$474	\$65	\$0	\$0	\$ 808.76	0.58%
A.J. Bierly	0.00	0.00	0.00	0.00	0.00	79.60	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,174.00	\$0.00	\$0.00	\$ 5,174.00	3.73%
Misty Coleman	0.00	0.00	0.00	75.80	83.70	0.00	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$6,822.00	\$3,304.48	\$0.00	\$0.00	\$0.00	\$ 10,126.48	7.31%
Scott Craft	4.30	0.00	0.00	24.10	55.10	0.80	0.0	80.0		
	\$558.96	\$0.00	\$0.00	\$2,169.00	\$2,175.35	\$52.00	\$0.00	\$2,800.00	\$ 7,755.31	5.60%
Bonnie Daniels	0.00	0.00	0.00	58.50	0.00	4.00	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$5,265.00	\$0.00	\$260.00	\$0.00	\$0.00	\$ 5,525.00	3.99%
Joe Dunson	0.00	0.00	0.00	0.00	0.00	7.50	0.00	67.90		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$487.50	\$0.00	\$2,376.50	\$2,864.00	2.07%
Steve Ford	10.50	0.00	0.00	100.30	0.00	2.00	0.00	0.00		
	\$1,364.90	\$0.00	\$0.00	\$9,027.00	\$0.00	\$130.00	\$0.00	\$0.00	\$ 10,521.90	7.59%
Rick Gehlbach	11.00	10.50	0.00	52.50	0.00	3.30	0.00	0.00		
	\$1,429.89	\$1,364.90	\$0.00	\$4,725.00	\$0.00	\$214.50	\$0.00	\$0.00	\$ 7,734.29	5.58%
Joni Grim	1.00	0.00	0.00	57.80	30.00	6.60	0.00	0.00		
	\$129.99	\$0.00	\$0.00	\$5,202.00	\$1,184.40	\$429.00	\$0.00	\$0.00	\$ 6,945.39	5.01%
Brad Hedges	0.00	14.20	0.00	8.90	2.00	0.00	0.00	0.00		
	\$0.00	\$1,845.86	\$0.00	\$801.00	\$78.96	\$0.00	\$0.00	\$0.00	\$ 2,725.82	1.97%
Chris Johnson	14.00	0.00	0.00	59.30	0.00	5.40	0.00	0.00		
	\$1,819.86	\$0.00	\$0.00	\$5,337.00	\$0.00	\$351.00	\$0.00	\$0.00	\$ 7,507.86	5.42%
Ellen Marshall	22.60	0.00	0.00	87.80	0.00	7.60	0.00	0.00		
	\$2,937.77	\$0.00	\$0.00	\$7,902.00	\$0.00	\$494.00	\$0.00	\$0.00	\$11,333.77	8.18%
Karis Mason	7.60	9.60	0.00	31.80	9.00	0.80	0.00	0.00		
	\$987.92	\$1,247.90	\$0.00	\$2,862.00	\$355.32	\$52.00	\$0.00	\$0.00	\$ 5,505.15	3.97%
Jessica Mitchell	8.00	0.00	0.00	30.00	3.00	0.00	0.00	0.00		
	\$1,039.92	\$0.00	\$0.00	\$2,700.00	\$118.44	\$0.00	\$0.00	\$0.00	\$3,858.36	2.78%
Amanda Moore	1.50	0.00	0.00	46.20	0.00	42.40	0.00	0.00		
	\$194.99	\$0.00	\$0.00	\$4,158.00	\$0.00	\$2,756.00	\$0.00	\$0.00	\$7,108.99	5.13%
Paula Moreland	14.00	0.00	0.00	46.80	0.00	7.50	0.0	0.0		
	\$1,819.86	\$0.00	\$0.00	\$4,212.00	\$0.00	\$487.50	\$0.00	\$0.00	\$ 6,519.36	4.71%
Tricia Ostrander	16.30	0.00	0.00	45.50	0.00	1.30	0.0	0.0		
	\$2,118.84	\$0.00	\$0.00	\$4,095.00	\$0.00	\$84.50	\$0.00	\$0.00	\$ 6,298.34	4.55%
Chris Ray	3.00	1.00	0.00	21.60	0.00	0.00	0.00	0.00		
	\$389.97	\$129.99	\$0.00	\$1,944.00	\$0.00	\$0.00	\$0.00	\$0.00	\$ 2,463.96	1.78%
Robin Rippeth	12.60	4.80	0.00	15.30	0.00	0.00	0.00	0.00		
	\$1,637.87	\$623.95	\$0.00	\$1,377.00	\$0.00	\$0.00	\$0.00	\$0.00	\$ 3,638.83	2.63%
Claire Robitaille	5.00	0.00	0.00	48.50	0.00	0.00	0.00	0.00		
	\$649.95	\$0.00	\$0.00	\$4,365.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,014.95	3.62%
Kimberly Rugg	11.50	0.00	0.00	93.40	0.00	9.80	0.00	0.00		
	\$1,494.89	\$0.00	\$0.00	\$8,406.00	\$0.00	\$637.00	\$0.00	\$0.00	\$10,537.89	7.61%
Mike Selegue	5.50	0.00	0.00	68.30	0.00	0.00	0.00	0.00		
	\$714.95	\$0.00	\$0.00	\$6,147.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6,861.95	4.95%
Charles Snyder	0.00	0.00	0.00	0.00	0.00	0.00	38.40	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,488.00	\$0.00	\$7,488.00	5.40%
Heather Stevens	7.80	0.00	0.00	26.00	34.30	0.90	0.00	0.00		
	\$1,013.92	\$0.00	\$0.00	\$2,340.00	\$1,354.16	\$58.50	\$0.00	\$0.00	\$4,766.59	3.44%
Sum Totals	\$18,809.55	\$5,212.60	\$0.00	\$81,720.00	\$9,044.87	\$11,095.50	\$7,488.00	\$5,176.50	\$138,547.02	

This chart represents the percentage of the total dollars billed by clinician in September 2005.