

MID-OHIO PSYCHOLOGICAL SERVICES, INC.
BRADLEY A. HEDGES, PH.D
PSYCHOLOGIST
EXECUTIVE DIRECTOR

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Pursuant to the laws of the state of Ohio in which this corporation is organized, and its bylaws, a meeting of the Directors of Mid-Ohio Psychological Services, Inc. was held on September 13, 2007 at 5:30 p.m. at 624 East Main Street, Lancaster, Ohio. A quorum of members was present

The following directors were present: Larry Novak, Karen Wolfe, and Rob Libbee. Also present at the meeting were Brad Hedges, Executive Director; Shawna Watts, Administrative Coordinator; Alice Grant, Accounts Payable Manager; and Joe Dunson. The following members were not present: Barbara Salyers and Will Sharp. In the absence of the Board Chair, Larry Novak, called the meeting to order.

Joe Dunson gave a brief presentation of the Anger Management program that has been in existence for the past year. He stated the clients are referred by the court system, Children's Services, and self-referrals. Each client is given a two-hour intake assessment then a series of individual sessions and then a determination is made as to whether keeping the client in individual or placing them in a group would be more appropriate. The manual used for this program is from the Federal Government. He stated this program is funded by the local ADAMH Board and clients are eligible for a sliding fee. He also noted the previous program was closed due to funding cuts but funds are currently available due to the recent passage of the mental health levy.

The minutes of the previous meeting and the financial statements were disseminated prior to the meeting. This information is posted to the MOPS website monthly.

Karen Wolfe motioned and Rob Libbee seconded the following resolution:

Resolution #09-13-07-01

Be it resolved the minutes of the previous meeting be approved. The motion passed unanimously.

A brief discussion was held on board composition issues. There is a need for three more board members with at least one coming from the business community. It was noted that Barbara Salyers has asked to resign from the board due to pressing issues relating to her work.

Rob Libbee motioned and Karen Wolfe seconded the following resolution.

Resolution #09-13-07-02

Be it resolved the resignation of Barbara Salyers be accepted with regret. The motion passed unanimously.

The agency financial situation was discussed. There is concern over the current financial picture due to higher expenses and lower than normal production. It is hoped the production will pick up now that the summer slowdown is over and the schools are back in session. Dr. Hedges noted that he has been working to promote the agency more and that referrals are coming in and the agency appears to be moving in the right direction.

Karen Wolfe motioned and Rob Libbee seconded the following resolution:

Resolution #09-13-07-03

Be it resolved the financial statements for July and August be accepted. The motion passed unanimously.

The following topics were discussed:

1. Engagement letters have been received for the upcoming financial audit. Dr. Hedges noted the cost of this audit has gone up approximately \$6000.00 due to additional auditing requirements from the state. Dr. Hedges asked for board approval to pay this cost since it will now be higher than his approved payment amount. He also stated it is hoped additional funding from the ADAMH Board will be provided to cover this cost.

Rob Libbee motioned and Karen Wolfe seconded the following resolution:

Resolution #09-13-07-04

Be it resolved funds be allocated to cover the cost of the annual financial audit. The motion passed unanimously.

2. Daniel DiSalvo has been hired as a Nurse Practitioner at the Franklin County office. He will be working approximately two hours per week at an annual cost of \$10,400. He has signed a one-year contract. Dr. Hedges stated he is certain this will expand as other agencies learn this service is being provided.

Karen Wolfe motioned and Rob Libbee seconded the following resolution:

Resolution #09-13-07-05

Be it resolved the one-year contract for Daniel DiSalvo be accepted. The motion passed unanimously.

3. Quality Assurance activities are improving. Shawna Watts-Shumaker stated changes have been made that will make it easier to keep the reports more current. She also noted the minutes of the QA committee meetings will be posted on the web site with the reports. She will be posting the minutes of the last meeting this week and will remain current with these and work to also post the old reports.

4. There were several Client Rights and Major Unusual Incidents to report. One involved a client grievance regarding their diagnosis and services. A complaint was made regarding two different adolescent clients by their parents about a diagnostic assessment and treatment recommendations but no formal grievances have been filed. MUI reports regarded the death of a client in an auto accident, a client hospitalized by their caregiver due to increased disruption in behavior, and a client sent to the hospital due to suicidal ideations.

Dr. Hedges noted two of the clients remained with the agency after the grievance and that none of the MUI's were high liability issues for the agency. He also stated that was no actual chain of command for filing a grievance regarding the agency. He noted that each client is given a copy of the procedure but that they can skip any of the listed reporting agencies and go directly to the one they feel would best meet their needs.

5. The recent training on Diagnosis, Assessment and Treatment of Borderline Personality Disorder was a success and well attended. The next training will be a Sex-Offender Symposium and no additional workshops are anticipated until next year.
6. The Care Management System is still in progress.
7. Dr. Hedges noted the web page for standards of care procedure is still being developed. This will gather information to help with resources for the clinical staff and develop a consistent standard of care practice for the agency clients.
8. The CARF Intent To Survey forms have been filed. It is anticipated the certification process will begin in December. The current certification expires in February. The cost has also increase for this certification. The agency manuals have been reviewed and it is possible some minor policy changes will be necessary. Dr. Hedges noted the last certification was for the maximum three-year period. It is hoped the current process will also give the agency the same certification.
9. Board Chair, Will Sharp, has met with staff to review the agency goals. Other Board Members are in the process of scheduling meetings with appropriate staff members regarding their agency focus assignments.
10. Staffing issues included a new program to recruit interns to the clinical staff. An intern is currently coming from Shawnee State University and helping with Quality Assurance issues. Some temporary staff is helping with the archive scanning and transcription. It is anticipated some of these will return during their school breaks and holidays.

11. Due to the current financial situation, no raises are anticipated for staff members at this time.
12. There are no new service program issues.
13. Agency promotion issues include the continued mental health radio spots on the local stations. Rob Libbee suggested considering advertising on the local school network cable station. Dr. Hedges is meeting with local community agencies to inform them of the agency activities.

Dr. Hedges stated the agency is currently planning a 5K run in the spring to bring attention to the local mental health providers. It is anticipated that approximately two hundred runners will participate. It is hoped this will be an annual event and additional sponsors will help to cover any costs involved. Revenues from this event are expected to be low during this first year.

14. Dr. Hedges is still working with the ADAMH Board to provide system-wide trainings and e-trainings. He is hoping other agency will present trainings also.
15. The Medicaid Audit will be done this month. This is to confirm that services are being provided in compliance with Medicaid rules. New staff are trained in these procedures for Medicaid standards. Quality Assurance reviews catch errors that do not meet the Medicaid Audit Standards.

Rob Libbee motioned and Karen Wolfe seconded the following resolution:

Resolution #09/13/07-07

Be it resolved the September meeting be adjourned. The resolution passed unanimously.

The next meeting will be held November 8, 2007 unless otherwise noted.

Respectfully submitted,

Alice J. Grant