

MAGELLAN EXPLORER

QUALITY IMPROVEMENT QUARTERLY NEWSLETTER

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MESSAGE TO PROVIDERS

SAFETY STANDOUTS

ADVERSE INCIDENT REPORTING: ABUSE ALLEGATION



In the last quarter, through routine Treatment Record Review (TRR) activities, Magellan discovered several situations where youth disclosed allegations of abuse and neglect and provider reporting policies were not followed.

Mandated reporters are defined under the <u>Pennsylvania</u>
<u>Child Protective Services Law (CPSL), Section 6311.</u> When a mandated reporter receives information that a youth may be a victim of abuse or neglect, the law requires that a report be made through the <u>Child Welfare Portal</u>.

Additionally, all mandated reporters are responsible to stay apprised of the current requirements for mandated reporting. This can be achieved by attending training programs supported by the Department of Human Services (DHS); a list of the training resources available can be found here.

Magellan requires that any report of Abuse or Neglect be shared with Magellan via Magellan's Incident Reporting process. This means that after a Childline report is filed, regardless of whether the allegation occurred at a provider location, in a youth's home, in the community, an incident report must be submitted to Magellan. For more information about Magellan's incident reporting process, click here. To access Magellan's required incident reporting form, please use this link.

Greetings,

In May, we celebrated Mental Health Awareness Month and the week of May 6th was National Nurses Week. Magellan recognizes that the audience of this newsletter is comprised of mental health wellness professionals in our communities, and likely many nurses. Thank you for your commitment and passion for your work!

This quarter, Magellan will share some findings from our annual member satisfaction survey. Individuals who have utilized HealthChoices funded services within the last year are mailed a survey to share their experience utilizing the program. The survey is comprised of about 50 questions to determine our members' experiences both with Magellan and with service providers. Historically, Magellan has consistently exceeded the targeted goal for overall member satisfaction. Seeking to continually improve, Magellan reviews the survey responses for opportunities via a year-to-year analysis. Additionally, there is an open-comment response question intended to capture any other helpful feedback our members are willing to provide.

The Magellan team in Pennsylvania would like to extend a most sincere thank you to our provider network. In the open-comment section, almost 40% of the member comments strongly praised their providers! We've included a sample of these testimonials for you to share with your teams on page 2.

The last few years have challenged our systems in unanticipated ways. The commitment, dedication, and strength of our network providers has not gone unnoticed by our members or Magellan. When reviewing the comments, we hope that your organization feels wrapped in gratitude and inspired by our shared work. Sharing these member compliments is Magellan's honor and pleasure. Thank you for your efforts, caring, compassion, and empathy. Last year, we shared information with our provider network about the necessity of promoting and instilling hope in treatment for all individuals on their recovery journeys; it's evident through these comments that you have been beacons of support for our membership.

Magellan received such a warm reception to the first newsletter we issued – thank you! Please keep us abreast of what content is most helpful for your organization as we share these quarterly newsletters.

Warm regards,



Maria Brachelli-Pigeon, LMFT, CPHQ, Director, Quality Improvement



SEEKING PANEL PARTICIPANTS!

At certain levels of Magellan's Complaint and Grievance procedures. a Review Committee is assembled to make the decision about the Complaint or Grievance. These reviews include a member, or for reviews involving children, the guardian of a member.



UPCOMING TRAININGS OFFERED BY MAGELLAN



MNC and Length of Stay, September 9, 2022 Location: Zoom, 1:00 pm - 2:00 pm

ASAM Potluck, November 11, 2022

Location: Zoom, 1:00 pm - 2:00 pm

For more information about the above trainings, please email Anita Kelly at ALKelly@magellanhealth.com



August 25, 2022, Location: Zoom, 1:30-4:30 pm

MI for Against Medical Advice Discharge from Detox Services, October 27, 2022 Location: Zoom, 1:30-4:30 pm

For more information about the above trainings, please email Tracy Samuelson at Samuelsont@magellanhealth.com

Patient Safety: Focus on Incident Debriefing, October 19, 2022, Location: Zoom, 1.00-3.00 pm

For more information about the above training, please email Leah Chapman at LChapman1@magellanhealth.com



NEED TO KNOW

SATISFACTION SURVEY

From time to time, providers may receive member questions about being contacted to complete a satisfaction survey from an external company. In case you receive this type of outreach, please note that Magellan and our county partners coordinate with Member (Consumer)/Family Satisfaction Teams, commonly referred to as CFST. The CFST Teams include individuals and families that have experience with services and are contracted either by our county partners or Magellan to interview Magellan members about their services.



Magellan shares member contact information with the county or the CFST vendor so individuals who have recently utilized services can be reached in the community. A sampling of these members are outreached by CFST to inquire about HealthChoices funded services. The satisfaction surveys may be conducted

at the member's home, in the community, by phone or via videoconference. Through the use of multiple contact methods, individuals and their families can voice their praises or identify concerns regarding their behavioral health services.

The information that is gained from these interviews is used to measure the quality of services delivered by providers. This feedback allows providers, counties, and Magellan to develop and implement more effective services.

Member participation is completely voluntary and confidential. Members are contacted directly, and your agency will not be involved in the surveying process. Magellan wants you/your organization to be aware that members will be contacted in case they contact you with any questions or concerns.

IMPROVING CULTURAL COMPETENCE

In so many ways, our digital workplace can offer rich resources to provide information on any topic. When seeking to improve cultural competence and humility within your program, it can be challenging to identify the right resources to address those opportunities.



In this section of the Explorer, the Magellan QI Team will share resources that can assist your organization in making meaningful improvements to impact sensitivity to member preferences and cultural needs.

This month, Magellan is sharing the SAMHSA Behavioral Health **Equity** page. At this link, you'll find recordings of applicable webinars, e-learning programs to support cultural and linguistic competency, articles about disparity data, and resources that are translated into multiple languages that you may choose to share with your patients.



The Importance of Instilling Hope

Last year, when analyzing Member Satisfaction results, Magellan zeroed in on one question in particular: "My (or my child's) Service Providers believe that I (or my child) can grow, change, and recover" We refer to this as "the hope question" because it reveals the member experience with their providers conveying hope about their recovery and future. The overall favorable response rate for this question in the 2020 survey was 87%. Although this response showed that many providers are instilling hope, there is opportunity for improvement to ensure that members feel supported and hopeful about their futures.

Magellan examined the data further for any potential disparities in terms of race. Did members of different races have different experiences with their providers conveying hope? The data concluded that members who identified as Black were less likely to have experienced their providers conveying hope about their future.

As a result of these findings, Magellan decided to increase discussions with providers about the importance of instilling hope, including in the Provider Town Halls and the Provider Quality Advisory Committee (PQAC). These discussions also occurred in Magellan's activities with peer providers in our six counties serviced.

2021

When we examined the responses for 2021, we saw an overall increase in the favorable response to the "hope question:"

Magellan looked at the responses from the different, self-identified race groups. While the experience of members who identified as White remained about the same, the experience of members who identified as Black improved, from 83.8% favorable to 88.6% favorable.

The favorable responses from the Native American and Asian/Pacific Islander race groups went down from 2020 to 2021. This decrease is likely related to the very small populations sizes (so a few neutral or negative responses quickly pull down the average), but the QI team also sees this as another opportunity for improvement for these populations.





(82.4% OF POP)

2020

NATIVE AMERICAN

(0.6% OF POP)

2021

Let's all try to "keep hope on the table" and be mindful to convey hope to our members and clients regularly. Small reminders like "I know you'll be able to achieve this" or "Your child can really succeed on these goals" or even "You've GOT this!" carry a lot of weight with the individuals and families we all serve.

See the Reader's Nook below for some resources that were shared about the importance of hope in the behavioral health recovery process.

BLACK/AFRICAN AMERICAN (13.4% OF POP)



READER'S NOOK

Would you like to increase your "hope-inspiring competence"? Here are some great resources about the central role of HOPE in behavioral health recovery, and tools for actually measuring hope among your clients served:

Acharya, T., & Agius, M. (2017). THE IMPORTANCE OF HOPE AGAINST OTHER FACTORS IN THE RECOVERY OF MENTAL ILLNESS * * * * * . Psychiatria Danubina, 29, 619-622. https://www.psychiatria-danubina.com/UserDocsImages/pdf/dnb_vol29_noSuppl%203/dnb_vol29_noSuppl%203_619.pdf

Hillbrand, M., & Young, J. L. (2008). Instilling hope into forensic treatment: the antidote to despair and desperation. The Journal of the American Academy of Psychiatry and the Law, 36(1), 90-94, https://pubmed.ncbi.nlm.nih.gov/18354129/

Kirkpatrick, H., Landeen, J., Byrne, C., Woodside, H., Pawlick, J., & Bernardo, A. (1995). Hope and Schizophrenia: Clinicians Identify Hope-Instilling Strategies, Journal of Psychosocial Nursing and Mental Health Services, 33(6), 15-19, https://doi.org/10.3928/0279-3695-19950601-04

Snyder, C.R. (2002). Hope theory: Rainbows in the mind. Psychological Inquiry, 13, 249-275. https://psycnet.apa.org/record/2003-01827-001

Snyder, C. R., Harris, C., Anderson, J. R., Holleran, S. A., & et al. (1991). The will and the ways: Development and validation of an individualdifferences measure of hope. Journal of Personality and Social Psychology, 60(4), 570-585. https://doi.org/10.1037//0022-3514.60.4.570

Snyder, C. R., Sympson, S. C., Ybasco, F. C., Borders, T. F., Babyak, M. A., & Higgins, R. L. (1996). Development and validation of the State Hope Scale. Journal of Personality and Social Psychology, 70(2), 321–335. https://doi.org/10.1037//0022-3514.70.2.321





- **KEY PROGRAM ACTIVITIES**
- **FOCUS ON CLAS**
- **CHANGE IN LICENSURE STATUS** NOTIFICATION
- **ADVERSE INCIDENT REPORTING**

OI DEPARTMENT CONTACT LIST

COMPLIMENTS. COMPLAINTS & APPEALS

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- Maria Brachelli-Pigeon Director, Quality Improvement mbrachellipigeon@magellanhealth.com



ASIAN/PAC ISLANDER (3.6% OF POP)

COMING SOON



- **CLINICAL PRACTICE GUIDELINES**
- **MAT FOR ALCOHOL**



A Way to Give Back!

Have you or your child received behavioral health services? Do you care about the quality of the services people receive?

Magellan has an opportunity for you to help improve the behavioral health system. You can serve on a Complaint or Grievance Panel, allowing you to have a voice in the behavioral health system.



As a member of a Complaint or Grievance Panel vou will be:

- An informed and active participant in the complaint and grievance reviews process for HealthChoices members.
- A part of a team that includes Magellan members, providers, Magellan staff and county staff.
- Provided with information about the complaint or grievance, information regarding guidelines and regulations, and presentations from review participants.
- Able to support the team in understanding the member's/representative's perspective.
- Able to participate in a discussion with the other panel members regarding the information shared.
- Asked to help decide the outcome of the complaint or grievance.

Who can serve on a panel?



- Are willing to prepare for a panel and to maintain confidentiality. This may require several hours of preparation.
- Are willing and able to listen to statements and comments about the case, prior to the panel meeting.
- Are willing to process and ask questions about the information presented.
- Are willing to engage in discussion and make a group decision about the information presented.

What will panel members receive?



- Training on the processes and information on how to serve on the panel.
- A travel stipend to cover the cost of getting to and from the reviews.

How do I get involved?

For more information, please contact John Bottger at **1-877-769-9784.**