

YES Rights and Resolutions

COMPLAINTS AND APPEALS

OCTOBER 1, 2020 - DECEMBER 31, 2020 (2^{ND} QTR SFY 2021)

Quality Management Improvement and Accountability | Data and Reports ${\rm April}\ 2^{\rm nd},\ 2021$

Table of Contents

Overview of SFY 2020 & 2021	2
2nd Quarter Summary, SFY 2021	3
Division of Behavioral Health (DBH)	4
Early Periodic Screening Diagnosis and Treatment	4
Idaho Department of Juvenile Corrections (IDJC) (YES Class Families/Youth)	5
Idaho State Department of Education (SDE)	6
Quality Management Improvement and Accountability (QMIA)	·····7
The QMIA Family Advisory Subcommittee (Q-FAS)	7
Establishing Centralized Complaints Update	·····7

YES Rights and Resolutions COMPLAINTS AND APPEALS OCTOBER 1, 2020 - DECEMBER 31, 2020 (2ND QTR SFY 2021)

The Youth Empowerment Services (YES) Quality Management Improvement and Accountability (QMIA) Council believes that complaints are a valuable source of information about the YES system of care and that each complaint received offers an opportunity to monitor and improve Idaho's behavioral health system for youth and families.

Each YES system partners' complaints system is one of several mechanisms constructed within the YES system of care to place youth and families at the center of their care. Each YES system partner, including family members, contributes its complaint information individually, each with a shared purpose of quality management and system improvement.

This is the YES Rights and Resolutions report whose purpose is to monitor youth and family concerns or complaints relating but not limited to informing, access, service appropriateness, service effectiveness, and quality. These benchmarks have been identified and adopted by DBH as key to Transformational Collaborative Outcomes Management (TCOM), which is an effective and integrated approach to addressing the needs and strengths of individuals, and facilitating change at all levels of the system.

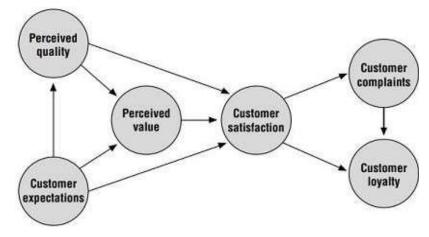
TCOM is grounded in a philosophy of a single shared vision—helping people achieve their health and wellness goals as they navigate healthcare, child welfare, justice, behavioral health, education, and other complex systems.

The report includes an overview of SFY 2020 and the 1st half of SFY 2021.

Overview of SFY 2020 & 2021

A total of sixty-one (61) YES complaints have been tracked since July 2019, averaging 10.2 complaints per quarter. The complaints reported for the past nine (9) months have shown a slight increase starting in the 4th quarter of 2020. Details appear in Figure 1.

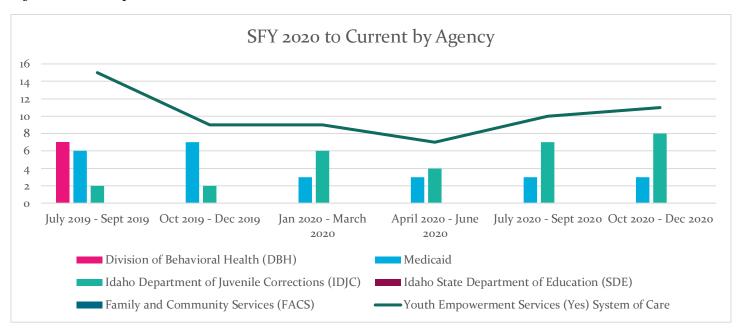
For the past 18 months, complaints have been relatively low in number in relation to reports of challenges from families.



The challenges include but are not limited to wait times to access services, need for more robust crisis stabilization services, and a lack of appropriate service providers.

Our goal is to eliminate barriers to care and increase positive outcomes for Idaho's children and families who experience serious emotional disturbances. We intend to ensure that Idaho's children's mental health services are based on effective assessment methods, and the individual needs of the child/family, amongst other criteria.

Figure 1: YES Complaints Across Time



Note: It is possible that the COVID-19 pandemic of 2020 (starting in Q3 which translates to Jan-March 2020) has likely affected access to care, although there has not been a corresponding increase in complaints related to access. It may be relevant that in response to the resulting emergency declaration, the Idaho Division of Behavioral Health (DBH) partnered with the Idaho Office of Emergency Management (IOEM), the Federal Emergency Management Agency (FEMA) and Substance Abuse and Mental Health Services Administration (SAMHSA) to provide crisis counseling by phone and text, which may field complaints.

2nd Quarter Summary, SFY 2021

In the 2nd guarter of SFY 2021, there were eleven (11) YES-related complaints across all YES partners, and two (2) appeals across the system.

- Of those eleven (11) complaints, seven (7) were submitted by youth, three (3) by parents, and one (1) other.
- Issues were identified in the following categories: Service, Access and Clinical [services].

Table 1: Total Complaints and Appeals in 2nd quarter, State Fiscal Year 2021

	Division of Behavioral Health\ (DBH)	Division of Medicaid1	Division of Medicaid Appeals/EPSDT	Department of Juvenile Corrections (IDJC)	Family and Community Services (FACS)	State Department of Education (SDE) 2	Total
2nd Q	0	3	2	8	0	-	11

¹ Includes information from Optum Idaho, the Medicaid Idaho Behavioral Health Plan.

² Complaints reported by the SDE are not necessarily complaints related to mental health services as their federally required reporting system does not filter complaints based on the child's disability. WEDNESDAY, APRIL 2, 2021 [TYPE HERE]

Division of Behavioral Health (DBH)

DBH received no YES complaints or appeals in the 2nd quarter of SFY 2021.

DBH has increased collaboration between Central Office and the regional office staff identified by program managers. Using SharePoint and adjusting data entry expectations will increase efficiency as well as communication amongst service providers. This adjustment in collecting complaints that relate to YES members can prevent families from having to retell their story in some instances. Improving the families experience will support their overall recovery by reducing unintended traumatization.

Additionally, it has been reported by families that the time it takes to voice their concerns and develop and execute a plan to address the concern is overwhelming. Sometimes complaints aren't submitted because families don't have the energy necessary.

Division of Medicaid

The Division of Medicaid received three (3) total YES complaints. One (1) each related to Service, Access and Clinical [services]. Two (2) were substantiated. The amount of time to resolve complaints ranged from three (3) business days to twenty-four (24) business days. Details appear in Table 2.

Table 2: Medicaid Complaint Detail, Quarter 2, SFY 2021

Date	Region	Type of Complaint	Description Status of Complaint		Decision Summary	Days to Resolution
11/02/2020	1	Member Representative Against Provider	Questionable billing practices	Closed	Substantiated - Provider implemented new policies	10 business days
11/06/2020	5	Staff/Other Against Provider	Allegation of violation of patient/therapist boundaries	Closed	Substantiated - Referred to Peer Review Committee	24 calendar days
12/02/2020	5	Member representative against provider	presentative of Patient Closed Unsubstanti		Unsubstantiated	4 business days

The Division of Medicaid received no Member Appeals in the 2nd guarter of 2021.

Early Periodic Screening Diagnosis and Treatment

Early and Periodic Screening, Diagnostic and Treatment (EPSDT) is a benefit for individuals under the age of 21 who are enrolled with Medicaid, to ensure individuals receive appropriate preventive, dental, mental health, developmental, and specialty services. EPSDT is utilized when other services/supports offered within Idaho's behavioral health system of care, are deemed to be unsuccessful or insufficient.

A Psychiatric Residential Treatment Facility (PRTF) is a type of service covered under EPSDT and is defined by CMS as any non-hospital facility with a provider agreement with a State Medicaid Agency to provide the inpatient services benefit to Medicaid-eligible individuals under the age of 21 (psych under 21 benefit).

EPSDT received zero (o) complaints and two (2) appeals.

Table 3: EPSDT Appeal Detail, Quarter 2 SFY 2021

Date	Region Type of Appeal		Description	Status of Complaint	Decision Summary	Days to Resolution
11/06/2020	7	Standard	tandard Appeal due to PRTF denial		Appellant Withdrew	60
12/28/2020	2	Standard	Appeal due to PRTF denial	Closed	Appellant Withdrew	3

Idaho Department of Juvenile Corrections (IDJC) (YES Class Families/Youth)

There were eight (8) youth and no family complaints during the 2nd quarter of SFY 2021. Of the complaints formally received by IDJC staff, all of the complaints were resolved in eleven (11) calendar days or less, and four (4) of the eight (8) were resolved in one (1) calendar day.

Table 3: IDJC Complaint Detail, Quarter 2, SFY 2021

Date	Region	Type of Concern	Status	Resolution	Days to Resolution	
10/02/2020	2	Juvenile stated that he was accused of misconduct and he felt targeted by peers.	Resolved	Grievance was looked in to by staff.		
10/12/2020	2	Youth felt upset by staff member when he spoke up during another youth's restraint.	Resolved	Superintendent spoke with the youth and advised him to comply with protocol and follow staff's directives during code and restraint.	11	
10/13/2020	2	Youth felt retaliated against for reporting a misconduct allegation.	Resolved	Discussed individually and in a staff meeting about respecting the youth and their privacy.	6	
11/4/2020	1	States staff won't work with him and his IEP as he should get breaks.	Resolved	Talked with IEP staff and relayed information to juvenile. Special Education Breaks were not an accommodation listed on their IEP.	1	
11/9/2020	3	States he was forced to get a COVID-19 test without the option of refusal.	Resolved	Juvenile was tested for Covid-19 due to pandemic, Health Department, and medical provider instructions for the safety and security of others.	1	
11/10/2020	3	States the group lied to the nurse about the cause of a medical condition, preventing him from talking to the nurse and receiving care.	Resolved	Unit Manager talked to juvenile and nurse at the clinic. Juvenile understands that his instructions from the clinic are to inform the staff when this is happening so that they can call the clinic at the time to come and take his vitals. Instructions were also given to the group that if they nurse is interviewing someone for a medical request that they need to allow them to explain the medical condition.	3	
12/04/2020	3	A staff has been antagonizing him for the past few days. He also states the group is joining in for this behavior.	Resolved	Unit Manager talked with juvenile about this and then also talked with the staff and then the staff and juvenile sat down with the unit manager together and were able to work through the different views to resolve the concern.	1	
12/31/2020	3	States he would like to be moved groups due to his inability to control his impulses.	Resolved	Unit Manager talked to juvenile about how to handle these situations in the moment with the whole group aware and also some options we can look to add to his treatment such as JSAT pack and the education that comes with it.	1	

Idaho State Department of Education (SDE)

This worksheet contains four tables representing four years of dispute resolution data for school years 2016-2017, 2017-2018, 2018-2019, and 2019-2020. Section A: Written, Signed Complaints Item description Item # 2016-2017-2018-2019-2017 2018 2019 2020 Total number of written signed complaints filed. 28 29 41 30 Complaints with reports issued. 1.1 22 35 23 27 Reports with findings of noncompliance. 1.1.a 16 20 16 22 Reports within timelines. 1.1.b 22 35 23 27 Reports within extended timelines. 1.1.c 0 0 0 0 Complaints pending. 1.2 0 0 o o Complaints pending a due process hearing. 1.2.a O 0 O O Complaints withdrawn or dismissed. 6 6 6 1.3 3 Section B: Mediation Requests Item # Item description 2016-2017-2018-2019-2017 2018 2019 2020 Total number of mediation requests received through all dispute 19 2 18 9 14 resolution processes. Mediations held. 2.1 9 13 14 Mediations held related to due process complaints. 2.1.a 1 1 0 1 Mediation agreements related to due process complaints. O 2.1.a.i 1 1 1 Mediations held not related to due process complaints. 8 2.1.b 12 0 13 Mediation agreements not related to due process complaints. 6 2.1.b.i 12 2 13 Mediations pending. 2.2 O 0 O o Mediations withdrawn or not held. 2.3 10 5 0 **Section C: Due Process Complaints** Item description 2018-Item # 2016-2017-2019-2017 2018 2019 2020 Total number of due process complaints filed. 3 5 3 5 5 Resolution meetings. 2 2 3.1 4 3 Written settlement agreements reached through resolution meetings. 2 2 o 2 3.1.a Hearings fully adjudicated. 2 3.2 1 2 1 Decisions within timeline (include expedited). o 0 1 1 3.2.a Decisions within extended timeline. 3.2.b 2 1 1 O Due process complaints pending. 0 3.3 0 3 0 Due process complaints withdrawn or dismissed (including resolved 2 3.4 3 o 4 without a hearing). Section D: Expedited Due Process Complaints (Related to Disciplinary Decision) Item description Item # 2016-2018-2017-2019-2017 2018 2019 2020 Total number of expedited due process complaints filed. 4 1 1 O 2 Expedited resolution meetings. 4.1 o 1 0 1 Expedited written settlement agreements. o 1 o 1 4.1.a Expedited hearings fully adjudicated. 0 0 0 o 4.2 Change of placement ordered. 0 o 4.2.a 0 o Expedited due process complaints pending. o 0 O o 4.3 Expedited due process complaints withdrawn or dismissed. 4.4 1 O 2

Quality Management Improvement and Accountability (QMIA)

The Quality Management Improvement and Accountability (QMIA) Council brings together DBH, Medicaid, FACS, IDJC, and SDE to collaborate in YES quality monitoring.

• Quarterly Report – in progress

In the most recent meeting, it was acknowledged that complaints can be complex. It was noted that in many instances, families feel overwhelmed by the process of obtaining multiple services and choose not to file complaints when the process has been completed. The council also discussed the fear of repercussions that exists for families who need services. This may require additional avenues for families to submit complaints. Further exploration of these issues will inform improvement projects in upcoming strategic work.

The QMIA Family Advisory Subcommittee (Q-FAS)

The Q-FAS presents an opportunity to gather and learn from family's stories. Q-FAS solicits family members' and family advocates' first-hand input on families' experiences accessing and utilizing YES services. The feedback received about successes, challenges and barriers to care is used to identify areas that need increased focus and to prioritize quality improvement projects. This subcommittee helps to guide YES partners work, providing children, youth, and families in Idaho access to appropriate and effective mental health care.

A new section of the Quarterly Rights and Resolution report will be to report issues raised by the Q-FAS. While these issues may not be associated with actual data, it is believed that the issues should be noted and tracked as part of the QMIA structure. At the December meeting of the Q-FAS, family advocates discussed concerns about the time between approval for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services and other high intensity care, such as Wrapround, and the actual start of services. It was noted that for some individuals/families, this can be weeks or even months and families may have few to no resources to help them during this wait time. The QMIA Council is looking into ways this could be tracked, monitored, and/or alleviated.

Establishing Centralized Complaints Update

Status as of March 31, 2021:

- Published one number for complaints (DBH number) on informational brochures.
- Added links to the YES website for Concerns and Complaints process and form.
- Developed collaborative process between DBH and Medicaid for sharing complaints filed via the Complaints form and SharePoint
- Set up QMIA-Family Advisory Subcommittee (Q-FAS) to discuss family concerns and complaints
- Created link on YES website for Family stories
- Publishing YES report on complaints and appeals called YES Rights and Resolutions quarterly
- Assess YES partners current complaint management processes

Plan for Q3 and Q4 SFY 2021

- QMIA Council to review all formal complaints for trends and identification of YES quality issues
- Establish best practices for complaints management
- DBH lead work with YES partners to:
 - 1. Finalize option for centralized tracking
 - 2. Finalize option for "impartial" process to address complaints
 - 3. Develop work plan to implement centralized tracking and impartial processes
 - 4. Implement work plan