

2020/21 BUCKS COUNTY MHIP FOLLOW UP AFTER HOSPITALIZATION SURVEY Community Report

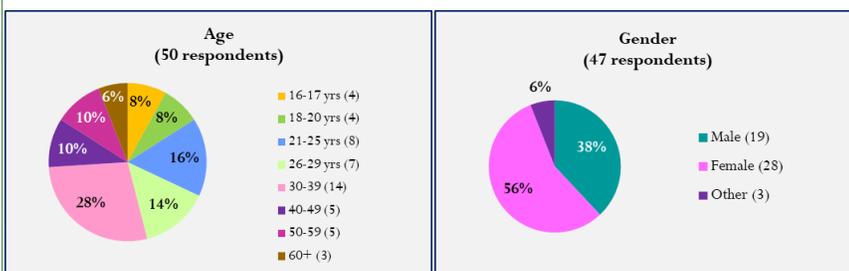
Voice & Vision, Inc. interviewed by phone 50 randomly selected Bucks County Health Choices (Medicaid) members, ages 16 and older, who had received at least one mental health inpatient hospital stay in the 12 months prior to August 2020.

The Bucks County Consumer/Family Satisfaction Team (C/FST) developed the Mental Health Inpatient Follow Up After Hospitalization survey questionnaire in collaboration with the Bucks County Department of Behavioral Health & Developmental Programs (BC-BH/DP) and Magellan Behavioral Health.

The purpose of this project was to gather information from Bucks County members about their ability to have attended a follow up aftercare appointment within seven days after hospital discharge.

This brief summary of the data is provided to assist Bucks County and Magellan Behavioral Health in improving recovery outcomes for individuals who have been discharged from a mental health inpatient stay. We thank all who made this project possible, especially those who took time to share their experiences with us.

Demographics:



RECOMMENDATIONS

Aftercare planning:

- ◆ *Ensure individuals understand how to get medications refilled if their follow up appointment is delayed.*

What helps/hurts attendance at 7-day follow-up:

- ◆ *Continue practices related to ensuring individuals have enough medication to last until their follow up aftercare appointment.*
- ◆ *Promote the inclusion of “family” members (as defined by individual) in the discharge planning process as support from a loved one was indicated as one of the top factors helpful in attending an aftercare appointment within 7 days of discharge.*

How community supports impact aftercare:

- ◆ *Educate family members, friends, or other supports on the importance of helping the individual they support to attend their aftercare appointment.*
- ◆ *Connect individuals to outside supports prior to discharge from the hospital.*
- ◆ *Encourage hospital staff to connect individuals to a Magellan Peer Support person, where available, to improve their ability to attend their aftercare appointment.*

State questions:

- ◆ *Continue to empower individuals to make treatment decisions for themselves.*
- ◆ *Develop educational materials and resources for family members and friends, along with distribution strategies, to improve understanding of mental health and/or SUD diagnoses to help reduce stigma.*

Aftercare planning

The first project objective involved learning how mental health hospital staff carries out aftercare planning as a part of an individual’s discharge plan.

90% reported that someone at the hospital read through their discharge plan with them prior to discharge.

When asked if they had enough medication at the time of discharge to last until their post-hospitalization follow up care appointment, forty-two out of 48 respondents (88%) indicated they had.

Eighty-eight percent also reported that nothing prevented them from taking their medications as prescribed after discharge.

More than 80% of people indicated someone at the hospital had provided them with the following useful information regarding their prescribed medications:

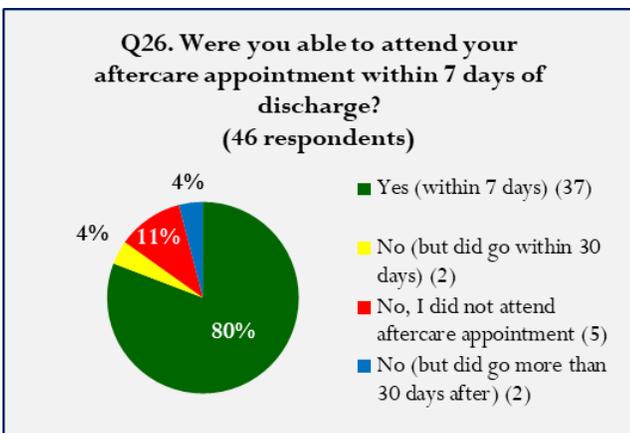
- ❖ *How often to take it (93%)*
- ❖ *The reason for it (90%)*
- ❖ *How to get refills (83%)*



Eighteen out of 30 respondents (60%) reported someone at the hospital had provided them with information about how to get prescription refills if their follow up care appointment was delayed.

What Helps or Hinders Attendance at an Aftercare Appointment

Thirty-seven people (80%) who indicated they were able to attend an aftercare appointment within 7 days

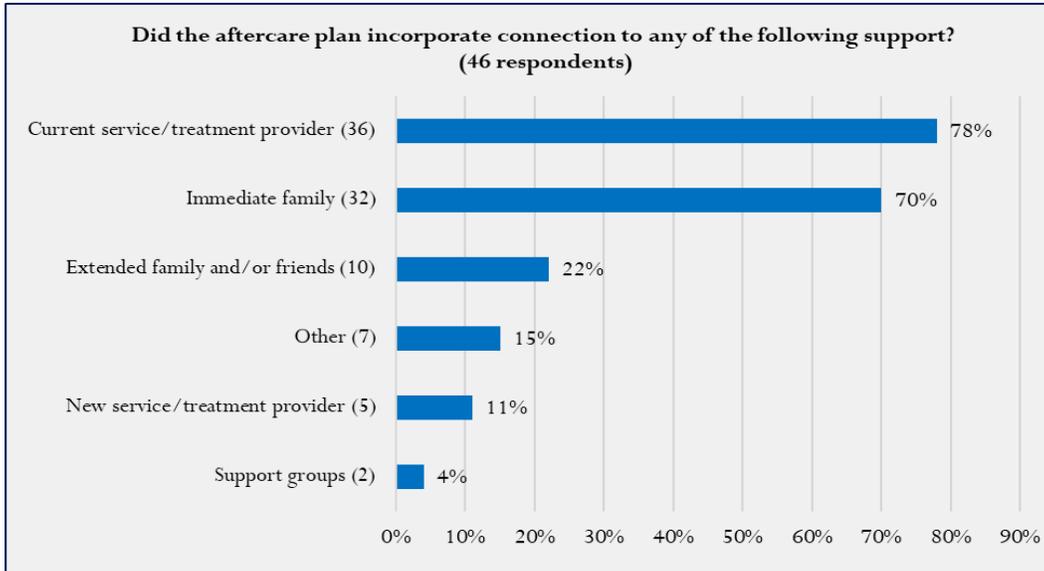


of discharge shared the following top 5 things that helped them keep that appointment:

- ❖ *Having enough medication to last until their aftercare appointment (81%)*
- ❖ *Support from a loved one (78%)*
- ❖ *Good relationship with their therapist (73%)*
- ❖ *Good Availability of appointment days/times (68%)*
- ❖ *Text/call reminders from provider (46%)*

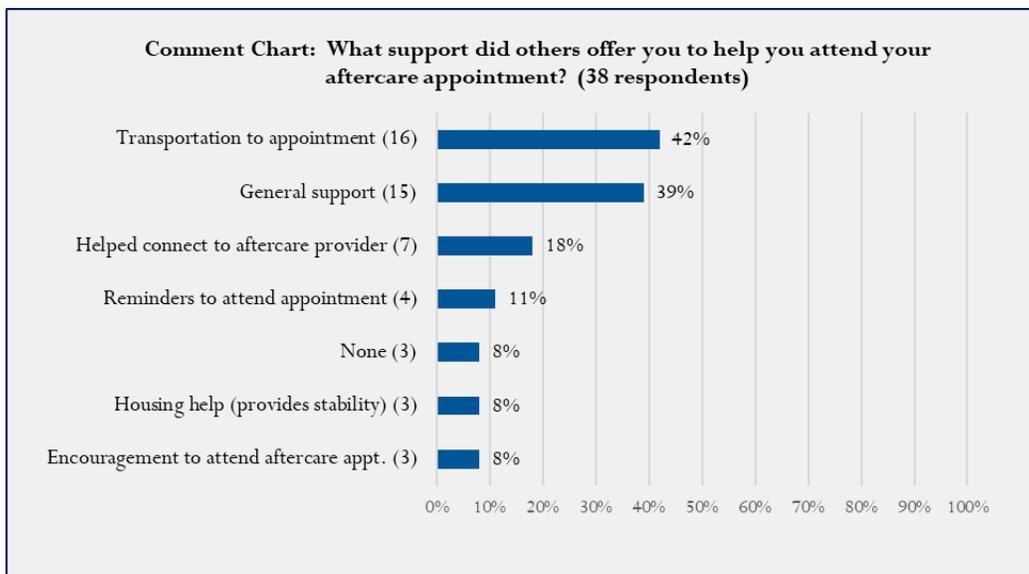
How Community Supports Impact Aftercare

Thirty-six out of 46 respondents (78%) indicated connection to their current provider was incorporated into their aftercare plan. Thirty-four people (74%) indicated their aftercare plan incorporated connection to immediate family, extended family, and/or friends as forms of support, which correlates to data indicating support from a loved one being one of the most important factors in attending an aftercare appointment.



Other: Shelter, Partial (3), LAMB, Residential Treatment facility, police, help for intellectual disabilities, Lenape Valley Foundation, legal guardian

Individuals were asked about the support offered them by others to help them attend their aftercare appointment. The most commonly cited supports included transportation to appointments, “general support,” and helping them get connected to an aftercare provider.

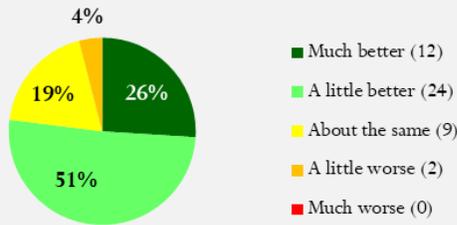


General support: People reported family, friends, providers, etc. were generally “supportive” but did not share details about that support.

State Questions

State questions are required on all C/FST surveys and relate to all areas of the lives of those receiving services. We also ask follow up questions which can help clarify responses to the 3 State questions.

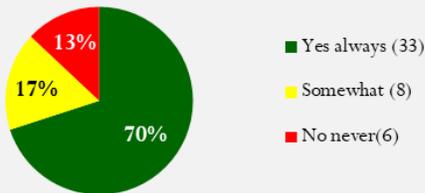
What effect has the treatment you received had on the quality of your life? (47 respondents)



Thirty-six out of 47 respondents (77%) indicated their life was “much better” or a “little better” and shared the following top three ways in which their lives had improved since receiving treatment:

- ❖ Their symptoms improved (30)
- ❖ Better able to manage daily life (22)
- ❖ Have a more positive outlook (22)

Were you given the chance to make treatment decisions? (47 respondents)



Seventy percent of respondents reported they were **always given the chance to make treatment decisions.**



Twelve out of 47 respondents indicated they were not always able to get the help they needed; 25% or more of those people shared the following difficulties they experienced:

- ❖ Insurance issues (4)
- ❖ Limited/no availability of services (4)
- ❖ Didn't know where to go (3)
- ❖ Ineffective services (3)
- ❖ Delays in getting appointments (3)

Twenty-five respondents who reported they had experienced stigma related to their mental health or substance use disorder, shared **the top following interactions where stigma was present:**

- ❖ Friends (13)
- ❖ Extended family (11)
- ❖ Immediate family (11)
- ❖ Significant other/partner (6)
- ❖ People in the community/neighbors (4)

Some respondents shared their thoughts about ways to reduce stigma, including...

"[People] need to be educated. They need knowledge and understanding. Then they would know that I am not dangerous. I just have a different coping mechanism."