## Colusa County Plan of Correction Per the County Performance Contract Review Report for Review Dates June 29, 2021

Finding #, Suggested Improvement # or Technical	Finding, Suggested Improvement or Technical	Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)		Score – Comments/Notes FOR DHCS USE
Assistance # Finding #1	Assistance Colusa County's complete and accurate FY 2019- 20 Annual Revenue and Expenditure Report (ARER) was not submitted to the Department of Healthcare Services (DHCS) by January 31st following the end of the fiscal year. (California Code of Regulations, title 9, Section 3510 (a)).	Recommendation #1 The County must submit the complete and accurate FY 2020-21 ARER by January 31st following the end of the fiscal year to DHCS and for each subsequent ARER thereafter. Failure to submit the ARER in a timely manner may result in a withholding of twenty- five (25) percent of each monthly distribution to the County. (Cal. Code Regs., tit. 9, § 3510.005(d)).	<ul> <li>12/21/21 – Colusa County Department of Behavioral Health's Fiscal Administrative Officer (FAO) will be sure to submit the completed and accurate FY 2020-2021 ARER and all future ARERs by January 31<sup>st</sup> following the end of the fiscal year to DHCS. The FAO will input a reminder within Outlook Scheduler which will notify/remind the FAO of this task annually.</li> <li>3/4/2022 – The FAO submitted the ARER on 2/1/2022.</li> <li>9/12/2022 – Submitted a screenshot of the email sent on 2/1/22 with the ARER.</li> </ul>	ONLY The submitted plan is accepted.
Finding #2	Colusa County's FY 2019-20 ARER was not posted to the County's website. (Cal. Code Regs., tit. 9, § 3510.010(b)(1); Welfare and	Recommendation #2 The County must post a copy of the FY 2020-21 ARER, and each subsequent ARER thereafter, to the county's website within 30 days of submitting to DHCS.	12/21/21 – CCDBH's Fiscal Administrative Officer will make sure that a copy of the FY 2020-2021 ARER, and each subsequent ARER thereafter will be posted on the county's website within 30 days of submitting to DHCS. The FAO will input a reminder within Outlook Scheduler which will notify/remind the FAO of this task annually.	The submitted plan is accepted.

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	Institutions Code section 5899).		3/4/2022 – Colusa posted the FY 20-21 ARER to the county website. Here is the link: <u>County Website</u>	
Finding #3	Colusa County's adopted FY 2019-20 Annual Update (Update) did not include a description of the county demographics, including, but not limited to: age, gender, and race/ethnicity. However, the county did acknowledge threshold language and unique characteristics. (Cal. Code Regs, tit 9, § 3300(b)(4), FY 2015-16 Mental Health Services Oversight & Accountability Commission (MHSOAC) MHSA	Recommendation #3 The County must include a description of its' demographics, including, but not limited to: size of the county, threshold languages, unique characteristics, age, gender, and race/ethnicity in the adopted FY 2020-23 Three-year Program and Expenditure Plan (Plan), FY 2021-22 Update and each subsequent Plan and Update thereafter.	<ul> <li>12/21/21 – The County's MHSA Coordinator will assure that a more detailed county description will be included in future MHSA Three Year Plans and Annual Update reports. This will be ensured by utilizing data from Census Reporter's website which includes demographics such as age, gender, race/ethnicity, language, education, and income.</li> <li>3/4/2020 – Colusa County will have the completed MHSA Annual Update Report of FY 22-23 by 6/30/2022 and the plan will have more details of demographics in the County Description narrative. The MHSA Coordinator will also create a checklist of items to include in each year's annual update to ensure compliance with this item. This checklist will be referenced each year when drafting the update. This checklist will be completed and submitted on 6/30/2022.</li> </ul>	The submitted plan is accepted.

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	Annual Update (AU) Instructions (pg 5)).		9/12/2022 – In the MHSA Annual Update Report of FY22-23, County Description begins on page 3 and notes different demographics within our community.	
Finding #4	Colusa County's adopted FY 2019-20 Update did not include a description of the Community Program Planning Process (CPPP). (Cal. Code Regs, tit. 9, §§ 3315, 3300).	Recommendation #4 The County must include a description of the CPPP in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.	<ul> <li>12/21/21 – The County's MHSA Coordinator will describe the CPPP in more detail. The MHSA Coordinator will include dates, times, flyers, and a narrative description of the PowerPoint presentation that is provided to community stakeholders, as well as a list of stakeholder's names and/or agency names and position titles who attended the CPPP and their comments/feedback.</li> <li>3/4/2022 – For FY22-23, Colusa started the CPPP on February 4, 2022. There have been 4 scheduled community stakeholder meetings to educate the public on MHSA and to obtain feedback. At each meeting, a PowerPoint detailing the different components of MHSA is presented as well as the programs that fall under each components and their budgets.</li> <li>Evidence submitted includes:</li> <li>Community Stakeholder Flyer</li> <li>MHSA PowerPoint</li> </ul>	The submitted plan is accepted.

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			<ul> <li>On 6/30/2022, additional evidence for the completion of this item will include:</li> <li>FY22-23 Annual Update with additional information about the CPPP, included stakeholder names and titles, in the Introduction to MHSA section of the plan.</li> <li>9/12/2022 – In the MHSA Annual Update Report of FY22-23, the Community Planning Program Process begins on page 5 with the Stakeholder Process.</li> </ul>	
Finding #5	Colusa County's adopted FY 2019-20 Update did not include a description of how stakeholder involvement demonstrates a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder	Recommendation #5 The County must include a description of how stakeholder involvement demonstrates a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder involvement on: mental health policy, program planning and	12/21/21 – Although the description was not included in CCDBH's FY 2019-20 Update CCDBH involves partnership with constituents and stakeholders throughout the process. CCDBH does this by creating flyers for stakeholder meetings, presenting a PowerPoint on MHSA and all county specific MHSA programs, providing comments forms for stakeholders, posting a survey for stakeholders on our county website, and posting a draft of our MHSA plans at our front office, at all local library branches, a link of the drafted plan on our county	The submitted plan is accepted.

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	involvement on: mental health policy, program planning and implementation, monitoring, quality improvement, evaluation, and budget allocations. (W&I Code section 5848).	implementation, monitoring, quality improvement, evaluation, and budget allocations in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.	<ul> <li>website for stakeholders to view and provide feedback. A description, attachment, and or a screen shot will be provided in subsequent plans and updates as proof.</li> <li>3/4/2022 - Colusa County will ensure that this finding will be addressed in the upcoming FY 22-23 Annual Update by 6/30/2022 and each subsequent MHSA plan. This item will also be added on the checklist that the MHSA Coordinator will create to ensure compliance with this item. This checklist will be referenced each year when drafting the update. This checklist will be completed and submitted on 6/30/2022.</li> <li>9/12/2022 – In the MHSA Annual Update Report of FY22-23, evidence of this finding begins on page 5 with the Stakeholder Process.</li> </ul>	
Finding #6	Colusa County's adopted FY 2019-20 Update did not include the date of	Recommendation #6 The County must include the date of the public hearing held by the local	12/21/21 – The MHSA Coordinator will ensure that the date of the public hearing held by the local Behavioral Health Board will be included in subsequent MHSA	The submitted plan is accepted.

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	the public hearing held by the local mental health board or commission. (W&I Code section 5848; MHSOAC AU FY 2015-16 (pg 3))	mental health board or commission in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.	<ul> <li>plans by including the date of the public hearing and a screen shot of the public hearing flyer.</li> <li>3/4/2020 – 6/30/2022 is the date of expected completion of this item.</li> <li>Evidence will include: <ul> <li>FY22-23 Public Hearing Flyer</li> <li>FY22-23 Annual Update with date of public hearing noted in the Introduction to MHSA section</li> </ul> </li> <li>9/12/2022 – In the MHSA Annual Update Report of FY22-23, the date of the public hearing held by the local Behavioral Health Board can be found on page 10.</li> </ul>	
Finding #7	Colusa County did not submit the adopted FY 2019-20 Update to DHCS within 30 days of adoption by the County Board of Supervisors. The Update was adopted on June 25, 2019 and submitted to DHCS on April, 3rd,	Recommendation #7 The County must submit the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter to DHCS within 30 days of adoption by the County Board of Supervisors.	12/21/21 – Colusa County Department of Behavioral Health will submit to DHCS the County Board of Supervisors approved plan within 30 days of adoption. The MHSA Coordinator will create a flowchart/checklist of items with timeframes that relate to the plan update. Thus, the County can refer to this flowchart/checklist to ensure that annually each year Colusa is within compliance of this item.	The submitted plan is accepted.

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	2020. (W&I Code section 5847(a)).		<ul> <li>3/4/2020 – The County will have the finalized checklist submitted to DHCS by 6/30/2022. At the latest, additional evidence of an email submission to DHSC with Annual Update Plan approval of BOS will be submitted by 7/30/2022.</li> <li>9/12/2022 – Evidence of BOS Approval was submitted with email. BOS approved the MHSA Annual Update Report of FY22-23 on 6/21/2022.</li> </ul>	
Finding #8	Colusa County's adopted FY 2019-20 Update did not include any summary and analysis of any substantive written recommendations received during the 30-day public comment period and the County's resulting actions, including any substantive changes	Recommendation #8 The County must include a summary and analysis of any substantive written recommendations received during the 30-day public comment period and the County's resulting actions, including any substantive changes made to the Plan or Update in response to public comments in the adopted FY 2020-23 Plan, FY 2021-22 Update and each	12/21/21 – Colusa County Department of Behavioral Health will ensure to include a summary and analysis of any substantive written recommendations received during the 30-day public comment period and Colusa's resulting actions. The MHSA Coordinator will create a flowchart/checklist of items with timeframes that relate to the annual plan update, including the 30-day public comment period. Thus, the County can refer to this flowchart/checklist to ensure that annually each year Colusa is within compliance of this item.	The submitted plan is accepted.

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	made to the Update in response to public comments. (W&I Code section 5848(b); Cal. Code Regs., § 3315, MHSOAC FY 2014- 17 MHSA Plan Instructions (Plan) (pg 3) and MHSOAC FY 2015-16 MHSA AU Instructions (pg 3)).	subsequent Plan and Update thereafter.	<ul> <li>3/4/2020 – 6/30/2022 is the date of expected completion of this item.</li> <li>Evidence will include: <ul> <li>Flowchart of CPPP</li> <li>FY22-23 Annual Update with written recommendations received during the 30-day public comment period.</li> </ul> </li> <li>9/12/2022 – In the MHSA Annual Update Report of FY22-23, the comments received during the 30-day public comment period can be found beginning on page 9.</li> </ul>	
Finding #9	Colusa County did not include documentation of achievement of performance outcomes in the adopted FY 2019-20 Update for Community Services and Supports (CSS), Prevention and Early Intervention (PEI), and Innovation (INN).	Recommendation #9 The County must include documentation of achievement of performance outcomes for CSS, PEI and INN in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.	<ul> <li>12/21/21 – Colusa County Department of Behavioral Health is in the process of hiring a Marketing and Administrative Specialist. This position includes tasks of data entry, aggregation, and analysis. Performance outcomes for CSS, PEI, and INN will be tracked by the Marketing and Administrative Specialists and findings presented to our MHSA Coordinator who then in turn can include this information within our plans.</li> <li>3/4/2020 – On 1/5/2022, the County hired a Marketing and Administration Specialist. This position will be tasked</li> </ul>	The submitted plan is accepted.

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	(County Performance Contract (6.)(A.)(5)(d.); W&I Code Section 5848(c)).		<ul> <li>with data entry, aggregation, and analysis of our internal MHSA programs. The MHSA Coordinator will obtain data from external MHSA programs to include in the FY 22-23 annual update. The MHSA Coordinator will also add this item to the checklist for monitoring of compliance. Date of expected completion is 6/30/2022.</li> <li>9/12/2022 – Program Data and Outcomes in the MHSA Annual Update Report of FY22/23 begins on page 34. Each program within CSS, PEI, and INN also has Successes and Challenges at the end of their program description throughout the plan.</li> </ul>	
Finding #10	Colusa County's adopted FY 2019-20 Update did not contain a budget summary, including the total budgeted for each funding category of CSS, PEI, Workforce Education and Training (WET), Capital Facilities	Recommendation #10 The County must include a budget summary for each fiscal year, including the total budgeted for each funding category of CSS, PEI, WET, CF, and TN in the adopted FY 2020-23 Plan, FY 2020-21 Update and each subsequent Plan and Update thereafter.	12/21/21 – CCDBH's Fiscal Administrative Officer will include a budget summary for each fiscal year and the total budgeted funding for each category of CSS, PEI, WET, CF, and TN in subsequent MHSA plans. The County's MHSA Team will hold regular meetings with the Fiscal Administrative Officer to improve communication about the FY's total budget and projected budget regarding CSS, PEI, WET, CF, and TN.	The submitted plan is accepted.

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	(CF), and Technological Needs (TN). (Cal. Code Regs., tit. 9, § 5847(e))		<ul> <li>3/4/2020 – The MHSA Team met with the FAO on 2/14/2022 to establish a projected budget for FY 22-23. The worksheet that was developed is attached as evidence. This will also be included in the FY22/23 Annual Update. Expected competition date of 6/30/2022.</li> <li>9/12/2022 – In the MHSA Annual Update Report of FY22-23, the budget summary can be found on page 57.</li> </ul>	
Finding #11	Colusa County did not provide an estimate of the number of clients, in each age group, to be served in the Full Service Partnership (FSP) service category in the adopted FY 2019-20 Update. (Cal. Code Regs., tit. 9, § 3650(a)(3)).	Recommendation #11 The County must provide an estimate of the number of FSP clients to be served in each age group: children (0-15 years old), transitional age youth (16- 25 years old), adult (26-59 years old), and older adult (60 and older) for each fiscal year in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.	12/21/21 – The MHSA Coordinator will provide an estimate of the number of FSP clients to be served in each age group for each fiscal year in MHSA plans by reaching out to CCDBH's Adult Clinical Program Manager and Children's Clinical Program Manager to come up with an estimated number. This number will be calculated by identifying the previous year's number of clients served, looking at our growth rate and adding that percentage in, and then adding 25% more spots to ensure our programs ability to grow and serve if/when needs arise.	The submitted plan is accepted.

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Finding #12	Colusa County did not report the cost per person for CSS, PEI, and INN Programs. (W&I Code section 5847(e), MHSOAC FY 2015-16 AU Instructions (pg4))	Recommendation #12 The County must include the cost per person for each CSS, PEI, and INN Program in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.	<ul> <li>3/4/2022 – The MHSA Coordinator will report on FSP data in the FY 22-23 Annual Update. The MHSA Coordinator will also add this item to the checklist for monitoring of compliance. Date of expected completion is 6/30/2022.</li> <li>9/12/2022 – In the MHSA Annual Update Report of FY22-23, the estimate of FSP clients to be served can be found on page 15.</li> <li>12/21/21 – Colusa County Department of Behavioral Fiscal Administrative Officer will include the cost per person for each CSS, PEI, and INN Program in subsequent MHSA plans. Again, a flowchart/checklist of items needed for the plan update will be created by the MHSA Coordinator to ensure that Colusa covers all items to be within compliance.</li> <li>3/4/2020 – 6/30/2022 is the date of expected completion of this item. Evidence will include:</li> </ul>	The submitted plan is accepted.

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		<ul> <li>FY22 23 Annual Update with cost per person data of CSS, PEI, and INN.</li> <li>Finalized checklist/flowchart of items that need to be included in the MHSA Annual Update</li> <li>6/14/2022 – The County was unable to obtain a cost per person for each CSS, PEI, and INN program this fiscal year. The County will work to include this type of data tracking in the upcoming FY 22-23.</li> <li>9/12/2022 – As mentioned in the County's 6/14/2022 response, we are unable to obtain cost per person for each CSS, PEI, and INN program for the FY21-22 and thus were unable to report it in our FY22-23 plan. In FY 22-23, the County is keeping improved records for tracking and reporting purposes of MHSA funds. This compliance deficiency will be corrected within the County's FY23-24 to FY25-26 Three Year Plan.</li> </ul>	
		9/26/2022 - DHCS can anticipate to receive the approved FY 23-26 Three- Year Plan with the finding addressed one	

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			month after Colusa County's BOS approves it at the end of the fiscal year; thus, 7/30/2023 at the latest.	
Finding #13	Colusa County did not have a Stigma and Discrimination Reduction Program and an Access and Linkage to Treatment Program in the PEI component of the adopted FY 2019-20 Update. (Cal. Code Regs., tit. 9, § 3705(a)(4); W&I Code section 5840).	Recommendation #13a, #13b, #13c #13a: The County must have at least one of each of these programs: Early Intervention Program, Outreach for Increasing Recognition of Early Signs of Mental Illness Program, Prevention Program, Stigma and Discrimination Reduction Program, and Access and Linkage to Treatment Program listed in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter. #13b: A Small county (with population under 100,000) may opt out of the requirement to have at least one Prevention Program if the small county obtains a declaration from the Board	12/21/21 – The County has a new program that was approved in FY 2021- 22 named the Youth Center. This program will be dedicated to offering Colusa County youth aged 12-17-year-old a safe, welcoming, and healthy environment to participate in during after school hours. This program will have collaborative input from Behavioral Health, Health and Human Services, Juvenile Probation, and the Office of Education that will form the Youth Center's Policy Council. The Policy Council will help to identify ways to address our youths' social and emotional needs. The Youth Center will offer age- appropriate workshops that focus on core elements of overall health and wellbeing such as social skills, life skills, creative expression, cultural humility, academic achievement, community service, and recreational activities. These workshops will be provided by staff from the collaborative County Departments listed above. This program will serve as the county's Stigma and Discrimination	The submitted plan is accepted.

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		of Supervisors that the county cannot meet this requirement. A small county that opts out of the requirement must include in their adopted Plan and Update, documentation describing the rationale for the county's decision and how the county ensured meaningful stakeholder involvement in the decision to opt out. (Cal. Code Regs., tit. 9, § 3705). #13c: A Small County (with population under 100,000) may combine and/or integrate Early Intervention Program(s), Outreach for Increasing Recognition of Early Signs of Mental Illness Program(s), Prevention Program(s), Access and Linkage to Treatment Program(s), and Stigma and Discrimination Reduction Program(s) per Cal. Code of Regs., tit. 9, § 3705(c). If the County	Reduction Program and the Access and Linkage to Treatment Program under the PEI component. The Youth Center will provide groups to youth and parents of youth on topics that will reduce stigma and discrimination. Informational brochures will also be accessible to those who enter the center. Youth who participate in the Youth Center will also be facilitating stigma reduction presentations to community members such as local school boards. The youth center will also act as a linkage to treatment program by allowing referrals to Mental Health treatment occur on site with a clinician who can provide an intake. Youth Center participants can also access wellness groups that will be provided to gain skills around treatment topics. 3/4/2022 – Colusa County will ensure that this finding will be addressed in the upcoming FY 22-23 Annual Update to be submitted to DHCS by 6/30/2022 and each subsequent MHSA plan, confirming that there are programs that fall under Stigma and Discrimination Reduction Program and the Access and Linkage to Treatment Program.	

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		does combine and or integrate PEI programs, the adopted Plan and Update requirements pursuant to Cal. Code of Regs., tit. 9. § 3755(o) must be met.	<ul> <li>6/20/2022 – Upon further review, the Youth Center will only serve as the Access and Linkage to Treatment Program. Within the FY22-23 Annual Update, the Cultural Competency Committee (CCC) will serve as the Stigma and Discrimination Reduction Program. The CCC is made up of Behavioral Health staff and other county staff from departments such as Health and Human Services, Probation, Library, and Office of Education, as well as community members with a representative from Colusa City Council. It is through this committee that Behavioral Health believes we can further extend our reach to improve cultural practices of other community services.</li> <li>9/12/2022 – In the MHSA Annual Update Report of FY22-23, our Stigma and Discrimination Reduction Program is the Cultural Competency Committee which can be found on page 27. The Access and Linkage to Treatment Program is our Bright Vista Youth Center, found on page 28.</li> </ul>	

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Finding #14	Colusa County did not specify the methods and activities to be used in each of their Stigma and Discrimination Reduction Programs; to change attitudes, knowledge, and/or behavior regarding being diagnosed with mental illness, having mental illness and/or seeking mental health services, including timeframes for measurement and collected data in the adopted FY 2019-20 Update. Specifically, Colusa included the outcomes but did not include a description of methods and	Recommendation #14 The County must include a description specifying the methods and activities to be used in each of their Stigma and Discrimination Reduction Programs; to change attitudes, knowledge, and/or behavior regarding being diagnosed with mental illness, having mental illness and/or seeking mental health services, including timeframes for measurement and collected data for each PEI Stigma and Discrimination in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.	<ul> <li>12/21/21 – We are in the process of hiring a Marketing and Administrative Specialist whose duties will include data entry, tracking, and analysis specific to MHSA programs. This position will be a key contributor to the Youth Center which will ensure that the program will have methods and activities in place to measure stigma and discrimination reduction efforts of this program.</li> <li>As stated in our 12/21/21 response, we hired a position that will assist in obtaining data measured from our Youth Center program. We are still in the development of this new program, which is tentative to open by August 2022. Our staff is still in discussion with what specific methods we will utilize to track changes of attitudes, knowledge and/or behavior about mental illness or seeking mental health services.</li> <li>6/20/2022 – Upon further review, The Stigma and Discrimination Reduction program will be linked with the County's Cultural Competency Committee. This committee has recently expanded to</li> </ul>	The submitted plan is accepted.

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	activities used. (Cal. Code Regs., tit. 9, §§ 3750(d), 3755(f)(3)).	<ul> <li>include staff from other county agencies such as Health and Human Services, Office of Education, Library, Probation, and other community representatives, such as Colusa City Council. Colusa County Behavioral Health plans to provide trainings related to mental health awareness and stigma reduction efforts. These trainings will be accompanied by a pretest and posttest in order to measure the change in knowledge, attitudes, and potential behavior. Colusa County will ensure that this finding will be addressed in the FY 22-23 Annual Update which will be submitted by 6/30/2022.</li> <li>9/12/2022 – The County was unable to secure a training for the Cultural Competency Committee within FY21-22, and thus no occurrence or a reporting of a pre-test and post-test took place can be found with FY22-23 MHSA Annual Update. The County is looking to bring in trainings and presenters regarding mental health stigma, best cultural practices, inclusion efforts, etc within FY22-23 now that a budget for training for CCC has been</li> </ul>	

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			established. This compliance deficiency will be corrected within the County's FY23-24 to FY25-26 Three Year Plan. 9/26/2022 - DHCS can anticipate to receive the approved FY 23-26 Three- Year Plan with the finding addressed one month after Colusa County's BOS approves it at the end of the fiscal year; thus, 7/30/2023 at the latest.	
Finding #15	Colusa County's INN and WET services/program implementation and budget were not consistent between the adopted FY 2019-20 Update and FY 2019-20 ARER.	Recommendation 15 The County must ensure that the program names listed in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter, are consistent with the names in the adopted ARER. The budget in the adopted Plan and Update should be consistent with the adopted ARER. If the program or service did not occur, report the program or service on the adopted ARER and indicate zero	12/21/21 – The county's MHSA Coordinator will work with CCDBH's Fiscal Administrative Officer to ensure that all MHSA program names listed in MHSA plans are consistent with the names in the adopted ARER. The Fiscal Administrative Officer will ensure that the budget in the adopted MHSA plans will also be consistent with the ARERs. If services were not provided during the Fiscal Administrative Officer will also be sure to report that zero expenditures were made. Name changes to any MHSA programs will be tracked, documented, and explained in MHSA plans by the MHSA Coordinator.	The submitted plan is accepted. DHCS anticipates receiving Colusa County's FY 21-22 Annual Revenue and Expenditure Report with incorporated corrections by 1/31/2023.

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		expenditures. Any discrepancies or name changes must be explained in the adopted Plan and Update.	<ul> <li>3/4/2022 – DHCS can anticipate to see this finding addressed in the FY21-22 ARER due 1/31/2023. The MHSA Team and FAO will be working closer to ensure compliance with this item. It will also be added to the checklist as a reminder to use the same program name on the ARER as is written within the Annual Update.</li> <li>9/12/2022 – The FY21-22 ARER has not yet been completed as it is due to the State by 1/31/2023. The County will ensure this finding is corrected within the ARER upon its submission.</li> </ul>	
Improvement #1	DHCS recommends the County include a description of the challenges and barriers for each program and the strategies used to mitigate those challenges and barriers in the program descriptions of the adopted Plans and Updates.	Improvement #1	<ul> <li>12/21/21 – CCDBH's MHSA Coordinator will hold an annual meeting to obtain feedback from staff involved with our MHSA programs regarding challenges and barriers. This information will be included in our plan's evaluation and will also strategies that will be developed to mitigate those challenges in each program.</li> <li>3/4/2022 – DHCS can anticipate the challenges and barrier for each program within the FY 22-23 Annual Update which will be submitted by 6/30/2022. The MHSA Coordinator will also add</li> </ul>	The submitted plan is accepted.

Finding #, Suggested Improvement # or Technical Assistance #	Finding, Suggested Improvement or Technical Assistance	Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)		Score – Comments/Notes FOR DHCS USE ONLY
			this item onto the checklist to further improve our plan. 9/12/2022 – Successes and Challenges are found throughout the plan after each program's description.	
Technical Assistance #1	The adopted FY 2020-23 Plan must identify each program funded with PEI funds as a Prevention, Early Intervention, Outreach for Increasing Recognition of Early Signs of Mental Illness, Stigma and Discrimination Reduction, Suicide Prevention (optional), Access and Linkage to Treatment, or Improve Timely Access to Services for Underserved	Technical Assistance #1	<ul> <li>12/21/21 – No TA needed at this time.</li> <li>The county is clear on specifying each program under each PEI category.</li> <li>6/3/2022 – The MHP will address this finding in the upcoming FY Annual Update so that each program funded by PEI is specifically identified as either Outreach for Increasing Recognition of Early Signs of Mental Illness, Stigma and Discrimination Reduction, Suicide Prevention, Access and Linkage to Treatment, or Improve Timely Access to Services for Underserved Populations.</li> </ul>	The submitted plan is accepted.

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Technical	Populations program. (Cal. Code Regs., tit. 9, § 3755(I)(2)). The County must	Technical Assistance #2	12/21/21 – Colusa is requesting TA on	The submitted plan is
Assistance #2	include an assessment of its capacity to implement mental health programs and services in the next adopted FY 2020-23 Plan, and each subsequent Plan thereafter which includes: a. The strengths and limitations of the county and service providers that impact their ability to meet the needs of racially and ethnically diverse populations. The evaluation should include an assessment of bilingual proficiency	a, b, c	this item as we are unsure how to measure capacity on how to implement programs/services. 6/3/2022 – On June 2 <sup>nd</sup> , the County administered a Staff Demographic Survey which included questions of: primary language, bilingual capacity, race/ethnicity, gender assigned at birth, current gender identity, disability, age range, belonging to other cultural groups, lived experience, education level, household income, and county of residence. The data from this survey will allow the MHP to gain a better understanding of our staff population. We will use this data to compare it with the population we serve and identify any shortcomings. The County will discuss the advantages and barriers that result from this comparison, and if necessary, develop a plan of how to target/attract specific providers based on our need.	accepted.

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	in threshold languages. b. Percentages of diverse cultural, racial/ethnic and linguistic groups represented among direct service providers, as compared to percentage of the total population needing services and the total population being served. c. Identification of possible barriers to implementing the proposed programs/services and methods of addressing these barriers. (Cal. Code Regs., tit. 9, §§ 3650(a)(5))		