

Mental Health Services Act (MHSA) Performance Contract Review Report
Butte County Program Review
September 25-26, 2019

FINDING #1: Butte County submitted the FY 2017-18 Annual Revenue and Expenditure Report (ARER) past the due date. (California Code of Regulations, Title 9, § 3510(b)).

Recommendation #1: The County shall submit the FY 2018-19 ARER no later than December 31, following the end of the fiscal year.

FINDING #2: Butte County does not have a designated position responsible to ensure the Community Program Planning Process (CPPP) is adequately staffed. (Cal. Code Regs., tit. 9, § 3300(b)). Butte County Department of Behavioral Health (BCDBH) policy and procedure #339 (page 1 of 4, effective 7/17/19) lacks identifying the designated position and/or units responsible for the overall CPPP.

Recommendation #2: The County shall provide evidence that there is a designated position(s) and/or unit(s) responsible for the CPPP and the requirements outlined in Cal. Code Regs. Tit 9, § 3300(b)(1-5).

FINDING #3: Butte County lacked a narrative analysis that assesses the mental health needs of the unserved, underserved/inappropriately served, and fully served county residents who qualify for MHSA services and an assessment of its capacity to implement proposed programs and services in their adopted FY 2017-20 Three-Year Program and Expenditure Plan (Plan). (Cal.Code Regs., tit. 9, § 3650(a)).

Recommendation #3: The County shall include a narrative analysis of its assessment of the County's mental health needs, its capacity to implement proposed programs/services and address all components of Cal. Code Regs., tit 9, § 3650(a) in the adopted FY 2020-23 Plan and each subsequent Plan, thereafter.

Recommendation #3a: The County should use the results of the assessment to develop the approved Plan.

FINDING #4: Butte County did not report the estimated number of clients the County plans to serve in each Full Service Partnership (FSP) targeted age group in the FY 2017-20 Plan. (Cal. Code of Regs., tit. 9, § 3650(a)(3)).

Recommendation #4: The County must report the number of FSP clients the County plans to serve in each age group: children (0-15), transitional age youth (16-25), adult (26-59) and older adult (60 and older) for each fiscal year of the adopted FY 2020-23 Plan and thereafter

FINDING #5: Butte County lacked evidence of a validated method used to measure changes in attitudes, knowledge, and or behavior related to mental illness or seeking mental health services for each Prevention and Early Intervention (PEI) Stigma and Discrimination Reduction Program in the adopted FY 2017-20 Plan and FY 2018-19 Annual Update (Update). (Cal. Code Regs., tit. 9, §§ 3750(d), 3755(f)(3)).

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Recommendation #5: The County shall select and include documentation of the validated measure(s) used for each PEI Stigma and Discrimination Reduction Program and address all components of Cal. Code of Regs., tit. 9 §§ 3750(d), 3755(f) in their approved FY 2020-23 Plan and FY 2019-20 Update and each subsequent Plan and Update thereafter.

SUGGESTED IMPROVEMENTS

Item #1: MHSA Transparency and Consistency

Suggested Improvement #1: The Department of Health Care Services (DHCS) recommends program names and service categories detailed in the approved Plan and Update match the program names and service categories in the ARER.

Suggested Improvement #1a: The ARER should be consistent with the budget in the approved Plan and Update. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures.

Item #2: CPPP Policies and Procedures

Suggested Improvement #2: DHCS recommends the County incorporate all aspects of the current CPPP into County written policies and procedures and/or duty statements. This includes CPPP designated positions, staff training, stakeholder training, client, client's family, peer and stakeholder outreach and involvement.

Item #3: MHSA Oversight and Performance Outcomes

Suggested Improvement #3: DHCS recommends the County develop Full Service Partnership (FSP) specific policies and procedures that include, but is not limited to the identification of FSP eligibility criteria, position(s) that serve as the Personal Service Coordinator (PSC)/single point of contact for FSP clients, and cultural competency requirements for PSCs.

Suggested Improvement #3a: DHCS recommends the County contracts with service providers include the performance goals from the County's approved Plan and Update that apply to each provider's programs and services.

CONCLUSION

The Department of Health Care Services MHSA Oversight Unit conducted an onsite review of Butte County Behavioral Health Services MHSA Program on September 25-September 26, 2019. Butte County MHSA program strengths include staff longevity, research and analytics team, and a newly formed MHSA Steering Committee, which

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helps to drive training and program development. County challenges include limited affordable housing, diverse geographic areas with differing service needs as a direct result of the County fire, and hiring and retaining Spanish-speaking staff.