Mental Health Services Act (MHSA) Performance Contract Review Report Tehama County Program Review September 15, 2020

FINDING #1: Tehama County did not submit the FY 2018-19 Annual Revenue and Expenditure Report (ARER) by December 31 following the end of the fiscal year. (California Code of Regulations, title 9, section 3510(a)).

<u>Recommendation #1</u>: The County must submit a complete and accurate FY 2019-20 ARER and all subsequent ARERs thereafter, no later than January 31 (date effective January 1, 2021), following the end of the reporting fiscal year.

FINDING #2: Tehama County did not provide Full Services Partnership (FSP) services to the children age group (0-15) in FY 2018-19. (Cal. Code Regs., tit. 9, § 3620(j): W&I Code section 5847(a)).

<u>Recommendation #2</u>: The County must provide FSP services to all age groups: children (0-15), transitional age youth (16-25), adult (26-59), and older adult (60 and older).

FINDING #3: Tehama County did not provide an estimate of the number of clients, in each age group, to be served in the Full Service Partnership (FSP) category for each fiscal year in the approved FY 2018-19 Update. (Cal. Code Regs., tit. 9, § 3650(a)(3); W&I Code section 5847(e)).

<u>Recommendation #3</u>: The County must provide an estimate of the number of FSP clients to be served 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 in the approved FY 2020-23 Plan, FY 2020-21 Update and all subsequent Plans and Updates thereafter.

FINDING #4: Tehama County's MHSA components of Community Services and Supports (CSS) and Prevention and Early Intervention (PEI) programs/services were inconsistent between the approved FY 2018-19 Update and the FY 2018-19 ARER. (W&I Code section 5892(g); Cal. Code Regs., tit. 9, § 3320(a)).

Specifically, the following programs/services and budget components were inconsistent: The CSS proposed budget in the approved FY 2018-19 Update and FY 2018-19 ARER were listed under categories. The CSS programs must be listed by individual program name. The PEI FY 2018-19 ARER had an expenditure for the Teen Screen project; however, this was not listed in the proposed budget in the approved FY 2018-19 Update. Additionally, for the Parent Child Interaction Therapy program, the County did not list a proposed budget in the approved FY 2018-19 Update

<u>Recommendation #4:</u> The County must ensure that the program names listed in the CSS, PEI, Innovation (INN) and Capital Facilities and Technological Needs (CFTN) components of the approved FY 2020-23 Plan and FY 2020-21 Update, and all subsequent Plans and Updates thereafter, are consistent with the names in the

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currently approved ARER. The budget in the approved Plan and Update should be consistent with the approved ARER. If the program or service did not occur, report the program or service on the approved ARER and indicate zero expenditures. Any discrepancies or name changes must be explained in the approved Plan and Update.

SUGGESTED IMPROVEMENT

Item #1: Policy and Procedures (P&P)

<u>Suggested Improvement #1:</u> DHCS recommends the County finalize and approve the following P&P's: MHSA Capacity Assessment P&P, MHSA CPPP P&P, MHSA FSP Process P&P, MHSA Housing Program P&P, MHSA Issue Resolution Process (IRP)

P&P, MHSA CSS and Outreach & Engagement (O&E) Programs P&P, MHSA Peer Advocate Program P&P, MHSA Peer Assistant Program P&P, MHSA PSC and Individual Services and Supports Plan (ISSP) P&P, and the MHSA Workforce Education and Training (WET) Component P&P.

CONCLUSION

The Department of Health Care Services' MHSA Program Monitoring Unit conducted a program review of the Tehama County Health Services Agency's MHSA programs and services on September 15, 2020. Tehama County continues to face staffing shortages and challenges with finding qualified individuals for positions within the Agency, which impacts service availability in the community. Additionally, a significant amount of programs outside of behavioral health such as children's services and law enforcement utilize behavioral health dollars and this competition for funding can be especially difficult for a small County. And, as a small, rural County, transportation is a major challenge for community members since the limited public transportation system does not allow easy access to services.

Tehama County noted successes as it relates to collaboration within the County and dealing with the impacts of COVID-19. An advantage of being a small County is the amount of collaboration within the community. Some of the successes the County has seen as a result of this is being able to engage the faith community and work providing affordable housing with supportive services for clients in need. California counties have felt the significant impacts of Covid-19, especially on service delivery. However, Tehama County noted that a positive of the pandemic has been the increased utilization of technology to connect with clients, which has allowed the County to engage and serve the younger demographic; something that has been a challenge in the past.