

**Mental Health Services Act (MHSA) Performance Contract Review Report  
Trinity County Program Review  
September 2, 2020**

**FINDING #1:** Trinity County submitted the FY 2018-19 Annual Revenue and Expenditure Report (ARER) past the due date. (California Code of Regulations, title 9, section 3510(b)).

**Recommendation #1:** The County must submit the FY 2019-20 ARER no later than January 31, following the end of the fiscal year.

**FINDING #2:** Trinity County's adopted FY 2017-20 Three-Year Program and Expenditure Plan (Plan) and FY 2018-19 Annual Update (Update) did not include expenditure plans. (Welfare and Institution (W&I) Code, § 5847(e)).

**Recommendation #2:** The County must provide an expenditure plan for each fiscal year in the approved Plan and Update and in each subsequent Plan and Update thereafter.

**FINDING #3:** Trinity County's adopted FY 2017-20 Plan and FY 2018-19 Annual Update (Update) did not include reports on achievement of performance outcomes for MHSA services. (W&I Code, § 5848(c); County Performance Contract (6)(A)(5)(d)).

**Recommendation #3:** The County must develop and implement policies and procedures to ensure data is collected and analyzed to report on its achievement of performance outcomes for services provided. The adopted FY 2020-23 Plan and FY 2019-20 Update, shall include reports of achievement of performance outcomes for MHSA services provided; and for each subsequent Plan and Update thereafter.

**FINDING #4:** Trinity County did not have a MHSA Issue Resolution Log (IRL) to record issues submitted as part of the Issue Resolution Process. (County Performance Contract (6)(A)(2)).

**Recommendation #4:** The County must develop and maintain an MHSA Issue Resolution Log that contains the date the issue or complaint was received, brief synopsis of the issue, final issue resolution outcome and date the final resolution was reached.

**FINDING #5:** Trinity County did not submit the approved FY 2018-19 Update to the Department of Health Care Services (DHCS) within 30 days of adoption. (W&I Code, § 5847(a)).

**Recommendation #5:** The County must submit the approved FY 2020-23 Plan and FY 2019-20 Update to DHCS at [MHSA@dhcs.ca.gov](mailto:MHSA@dhcs.ca.gov) and the Mental Health Oversight and Accountability Commission (MHSAOAC) within 30 days of adoption by the County Board of Supervisors and each subsequent Plan and Update thereafter.

**FINDING #6:** Trinity County did not provide an estimate of the number of clients, in each age group, to be served in the Full Service Partnership Service (FSP) Category for each fiscal year in the approved FY 2017-20 Plan. (Cal. Code of Regs., tit. 9, § 3650(a)(3)).

**Mental Health Services Act (MHSA) Performance Contract Review Report  
Trinity County Program Review  
September 2, 2020**

Recommendation #6: The County must provide an estimate of the number of FSP clients 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 in the approved FY 2020-23 Plan and each subsequent Plan thereafter.

**SUGGESTED IMPROVEMENTS**

**Item #1:** MHSA Transparency and Consistency

Suggested Improvement #1: DHCS recommends the ARER be consistent with the budget in the approved Plans and Updates. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures. Provide an update of that program or service in the following approved Plan or Update.

Suggested Improvement #1a: DHCS recommends the County post the full ARER on the County's website.

**Item #2:** MHSA Policies and Procedures

Suggested Improvement #2: DHCS recommends the County should update policy and procedure MHSA – Community Program Planning Process (CPPP) to include that the plans and updates should be submitted to OAC and DHCS within 30 days of the County Board of Supervisors' adoption.

Suggested Improvement #2a: DHCS recommends the County incorporate all aspects of the current CPPP into formalized written policies and procedures. This includes CPPP designated positions, staff training, stakeholder training, client and stakeholder outreach and involvement.

**CONCLUSION**

The Department of Health Care Services' MHSA Program Monitoring Unit conducted a review of Trinity County Behavioral Health Services' MHSA Program on September 2, 2020. Trinity County is a small rural county whose population is distributed unevenly with varying topography. These features represent both significant challenges and a source of strength used by the County to overcome those challenges.

With the emergence of the COVID-19 Pandemic, the County was able to quickly transition to online options for clinical services and tele-health. Due to the significant challenges presented by the remote location of the county, hiring and licensing of staff remains challenging; however, this has caused the staff to be quite resourceful and engage in department and county wide cross-training which significantly helped making necessary transitions to online services.

While online group treatment remains challenging for the County, there are several innovations that stand out as remarkable successes. Navigating the remote terrain has resulted in a transportation program that provides transportation to and from clinics,

**Mental Health Services Act (MHSA) Performance Contract Review Report**  
**Trinity County Program Review**  
**September 2, 2020**

therapy, and assists with case management. Additionally, the County maintains strong cooperative ties to the County Office of Education and Probation which tremendously impacts the success of their PEI programs and outreach efforts.

In addition to working cooperatively with other County departments, the County has developed strong cooperative ties with nearby Modoc County through grant writing in an effort to develop programs leveraging the strengths of similar-sized counties. These efforts resulted in recent funding through the Mental Health Student Services Act to expand mental health diversion programs for youth.

Finally, due to challenges with staffing that come with the county size and location, they have hired a contracted Medical Director to run their medication program and provide clinical services to consumers. The county reports the Medical Director has built a very good relationship with consumers and is the driving factor behind the success of their medication program.