

Monterey County Plan of Correction
Per the County Performance Contract Review Report for Review Dates March 3-5, 2020

Finding # or Suggested Improvement #	Finding or Suggested Improvement	Recommendation # (State Corrective Action Step / Identify Timeline / and Evidence of Corrections / Mechanisms for Monitoring Effectiveness)		Score – Comments/ Notes
Finding #1	Monterey County did not identify the strengths of the County or service providers in the assessment of its capacity to implement the proposed programs and services in their approved FY 2017-20 Three-Year Program and Expenditure Plan (Plan). (California Code of Regulations, Title 9, section 3650(a)(5)(A)).	Recommendation #1: The County’s assessment shall include strengths and limitations of the County and service providers that impact their ability to meet the needs of racially and ethnically diverse populations and address all components of Cal. Code Regs., tit 9, § 3650(a)(5) in the approved FY 2020-23 Plan and each subsequent Plan thereafter.	<p><u>Action Step:</u> For all future Plans and each subsequent Plan thereafter, the document will include a narrative assessment identifying the strengths and limitations of the County and contract service providers that impact the County’s ability to meet the needs of racially and ethnically diverse populations, to include the bilingual capacity proficiency in threshold languages and the 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; <u>Timeline:</u> The County’s next Three-Year Program & Expenditure Plan (“Plan”) will cover the period of July 1, 2023 through June 30, 2026. It is anticipated the draft Plan document will be posted for Public Comment in the Spring of 2023, with the approved and adopted Plan to be submitted to the State no later than June 30, 2023. All subsequent Plans will adhere to a similar timeline;</p> <p><u>Evidence of Corrections:</u> All future and subsequent Plans will include a narrative assessment identifying the strengths and limitations of the County and contract service providers that impact the County’s ability to meet the needs of racially and ethnically diverse populations; <u>Mechanisms for Monitoring Effectiveness:</u> During the community program</p>	The submitted plan is accepted.

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			<p>planning process conducted to develop all future and subsequent Plans, the County will conduct an assessment to identify the strengths and limitations of the County and contract service providers that impact the County’s ability to meet the needs of racially and ethnically diverse populations. These assessments will include descriptions of potential strategies to be implemented to address limitations identified during the assessment process.</p>	
Finding #2	<p>Monterey 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)).</p>	<p>Recommendation #2: The County shall 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.</p>	<p>The County shall 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 2021-23 Plan and each subsequent Plan thereafter.</p> <p><i>See page 31 of Monterey County’s FY21- 23 Three-Year Plan. Note: for those FSP strategies that include program(s) serving more than one MHSa Age Group, these estimates by age group will also be included in all future and subsequent Plans.</i></p> <p>File Name: Monterey_Finding #2...</p>	<p>The submitted plan is accepted.</p>
Finding #3	<p>Monterey County lacked evidence of a validated method used to measure changes</p>	<p>Recommendation #3: The County shall select and include documentation of the validated measure(s)</p>	<p><u>Action Step:</u> Following multiple telephone calls with the MHSOAC, the County’s external professional evaluation agency (EVALCORP) developed validated tools and methodologies to ensure outcomes are captured in alignment with</p>	<p>The submitted plan is accepted.</p>

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	<p>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 approved FY 2017-20 Plan and FY 2018-19 Annual Update (Update). (Cal. Code of Regs. tit. 9, §§ 3750(d); 3755(f)(3)).</p>	<p>used for each PEI Stigma and Discrimination Reduction Program and address all components of Cal. Code of Regs. tit. 9, §§ 3750(d), 3755(f)(3) in the approved FY 2020- 23 Plan and FY 2019 Update and each subsequent Plan and Update thereafter.</p>	<p>PEI Regulations for Stigma and Discrimination Reduction Programs; these tools and methodologies have been utilized since June of 2018. The attached file contains the Administration Guidelines, as well as copies of the validated measures. For all future Plans and subsequent Annual Updates, the County shall identify and include documentation of the validated measure(s) used for each Stigma and Discrimination Reduction Program; <u>Timeline:</u> The County’s draft FY22 Annual Update is anticipated to be posted for Public Comment in the Spring of 2021, with the approved and adopted Update submitted to the State no later than June 30, 2021; <u>Evidence of Corrections:</u> The FY22 Annual Update will include an Evaluation Report of all programs and services funded by the Prevention & Early Intervention (PEI) component in FY2019-20. This Report will identify and include documentation of these validated measure(s) used for each Stigma and Discrimination Reduction program as noted above; all future Plans and Updates will include this information; <u>Mechanisms for Monitoring Effectiveness:</u> Monterey County will continue to conduct a consistent review of any changes in the State PEI regulations regarding program reporting and evaluation and will work with EVALCORP to make any necessary modifications of data collection and</p>	

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			reporting mechanisms to assure compliance as required. File Name: Monterey_Finding #3...	
Suggested Improvement #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 Annual Revenue and Expenditure Report (ARER). 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.	<p><u>Action Step</u>: The County will assure the program names and service categories detailed in the approved Plan and Update documents match those names and categories in the FY 2019-20 ARER and future ARERs;</p> <p><u>Timeline</u>: The ARER for FY20 will be consistent with the approved budget in our FY20 Update and will be submitted to DHCS by the due date, with subsequent ARERs being consistent with each respective budget in the approved Plan and Update;</p> <p><u>Evidence of Corrections</u>: The FY20 ARER will be consistent with the program names and service categories in the budget in the approved Plan and Update; if the program or service did not occur, the ARER will indicate zero expenditures. All subsequent ARERs will be consistent with the budget in the approved Plans and Updates;</p> <p><u>Mechanisms for Monitoring Effectiveness</u>: Draft ARERs will be reviewed for consistency with the Expenditure Plan in each Plan and Update before being finalized for submission to DHCS</p>	The submitted plan is accepted.

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Suggested Improvement #2	Community Program Planning Process (CPPP) Development	Suggested Improvement #2: DHCS recommends the County finalize their CPPP policy and procedure to include the designated position(s) responsible for the overall CPPP and CPPP training of County staff and stakeholders.	See attached CPPP Policy finalized by the Monterey County Behavioral Health Quality Improvement Committee on 09/24/2020. File Name: Monterey_Suggested Improvement #2...	The submitted plan is accepted.
Suggested Improvement #2a	Community Program Planning Process (CPPP) Development	Suggested Improvement #2a: DHCS recommends the County compare stakeholder and County demographics to ensure desired participation of target populations in the CPPP and to determine whether stakeholders reflect the diversity of the demographics of the County, including but not limited to geographic location,	<u>Action Plan:</u> The County will compare stakeholder and County demographics to ensure desired participation of target populations in the CPPP and to determine whether stakeholders reflect the diversity of the demographics of the County, including but not limited to geographic location, age, gender, race, and unserved and/or underserved populations. This comparison of both stakeholder demographics and overall County demographics will be included within the approved Plans and Updates; <u>Timeline:</u> The FY22 Annual Update, anticipated to be posted for Public Comment in the Spring of 2021 with the approved and adopted Update submitted to the State no later than June 30, 2021, will include this comparison as described in the Action Plan, as will all future Plans and Updates;	The submitted plan is accepted.

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		age, gender, race, and unserved and/or underserved populations. DHCS recommends the County include this comparison of both stakeholder demographics and overall County demographics within the approved Plans and Updates.	<p><u>Evidence of Corrections:</u> Commencing with the FY22 Annual Update, the County will compare stakeholder and County demographics to ensure desired participation of target populations in the CPPP and to determine whether stakeholders reflect the diversity of the demographics of the County, including but not limited to geographic location, age, gender, race, and unserved and/or underserved populations. This comparison of both stakeholder demographics and overall County demographics will be included within the approved Plans and Updates;</p> <p><u>Mechanisms for Monitoring Effectiveness:</u> During the annual CPPP process, the County will implement outreach and engagement strategies designed to encourage participation of the targeted populations in the CPPP and will include the demographic data comparison report in each Plan and Update.</p>	
Suggested Improvement #3	MHA Policies and Procedures	Suggested Improvement #3: DHCS recommends the County develop FSP specific policies and procedures that include, but are not limited to identification of FSP eligibility criteria, position(s) that serve as the	See attached FSP Policy approved by the Monterey County Behavioral Health Quality Improvement Committee on 9/24/2020. File Name: Monterey_Suggested Improvement #3...	The submitted plan is accepted.

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		Personal Service Coordinator (PSC)/single point of contact for FSP clients, process for ensuring that a PSC or other qualified individual known to the client/family is available to respond to the client/family 24 hours a day, 7 days a week to provide after-hours interventions, cultural competency requirements for PSCs and requirements for Individual Services and Support Plans (ISSP)/Client Plans/Treatment Plans.		
Suggested Improvement #3a	MHSA Policies and Procedures	Suggested Improvement #3a: DHCS recommends the County develop specific policies and procedures and training for the MHSA	Monterey County Behavioral Health has specific policies and procedures related to all Medi-Cal beneficiary's problem resolution processes. See <i>128 Beneficiary Problem Resolution MHSA update 2020 8 25</i> that reflects this problem resolution process being available to all Medi-Cal beneficiaries (line 4), and the inclusion on	The submitted plan is accepted.

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		<p>Issue Resolution process for all behavioral health employees and service providers involved in the complete delivery of services to recipients of MHSAs programs. Additionally, DHCS recommends the County maintain documentation to substantiate that training was provided to staff.</p>	<p>contracted providers (line 17). This policy will be finalized at the Quality Improvement Committee of 9/24/2020. File Name: Monterey_Suggested Improvement #3a... (pdf file)</p> <p>Additionally, specific language has been added to the Problem Resolution Process (line 93) to ensure that Quality Improvement is specifically tracking MHSAs beneficiary issues. Please see <i>Example of Problem Resolution Log</i>, updated to track MHSAs beneficiary/programs. This practice has been implemented as of 8/25/2020. File Name: Monterey_Suggested Improvement #3a...(Excel file)</p> <p><u>Action Steps:</u> The County has an existing Beneficiary Problem Resolution Process for all beneficiaries regardless of program or funding sources, which includes MHSAs programs. The County tracks grievances/appeals/expedited appeals for MHSAs programs in a log that is reviewed and responded to by Quality Improvement in accordance with Policy 128. The County is providing additional training to employees on 1/25/2021 to review the beneficiary Problem Resolution Process and will post training slides on the Quality Improvement website.</p> <p><u>Evidence of Corrections:</u> The County has attached new evidence of training slides and</p>	

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			<p>QIC Committee Meeting Minutes, and previously submitted an example of beneficiary grievance and appeal log and updated policy 128 specifically highlighting the inclusion of MHSA programs. (see above)</p> <p>File Name: Monterey_Suggested Improvement 3a_(ppt file)</p> <p>File Name: Monterey_Suggested Improvement 3a_(pdf file)</p> <p><u>Mechanism for Monitoring Effectiveness:</u> The County's Quality Improvement Team tracks beneficiary grievances and appeals and responds to complaints in accordance with Policy 128. Additionally, all grievances/Appeals are reviewed twice annually (Fiscal Year and Calendar Year) and general findings will be shared at the County Behavioral Health Quality Improvement Committee.</p>	