Finding # or Suggested Improvement #	Finding or Suggested Improvement	Corrections / M	Recommendation # ction Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
Finding #1	Placer County lacked a narrative analysis of assessment of mental health needs and its capacity to implement proposed programs/services of mental health needs of unserved, underserved and residents who qualify for MHSA services in their FY 2017-20 Three-Year Program and Expenditure Plan (Plan). (California Code of Regulations, tit. 9 § 3650(a)).	Recommendation #1: The County must incorporate an assessment of the County's mental health needs and its capacity to implement proposed programs/services and address all components of Cal. Code Regs., tit. 9, § 3650(a) in the FY 2020-23 Plan and thereafter.	Placer has incorporated an analysis of needs and capacity identified with the CPP in the 2020-23 plan.	The submitted plan is accepted.
Finding #2	Placer County does not designate a Personal Service Coordinator (PSC)/ Case Manager for each Full Service Partnership (FSP) client, and when appropriate the client's family, to be the single point of responsibility for that	Recommendation #2: The County shall demonstrate that they have designated a PSC/Case Manager for each FSP client, and when appropriate the client's family, to be the single point of responsibility for that client/family. In addition, the County	This finding has been removed from the Plan of Correction. Placer County provided a redacted FY 16-17 report with each PSC and client. See document titled Finding 2_FSP PSC List – FY 16-17. Additionally, PSC and their respective clients are updated and submitted monthly, at the minimum, via the Data Collection and Reporting (DCR) submission to BHIS as required.	N/A

Finding # or Suggested Improvement #	Finding or Suggested Improvement		Recommendation # stion Step / Identify Timeline / and Evidence of echanisms for Monitoring Effectiveness)	Score – Comments/ Notes
	client/family. (Cal. Code Regs., tit. 9, § 3620(f)(1)).	shall develop FSP policies and procedures and/or other documents that demonstrate Placer County is assigning, to each individual enrolled in a full service partnership, a PSC/Case Manager, and when appropriate the client's family, to be the single point of responsibility.		
Finding #3	Placer County does not ensure that a PSC/Case Manager, or other qualified individual known to the client and/or family is available to respond 24 hours a day, 7 days a week to provide after-hour interventions. (Cal. Code of Regs., tit. 9, § 3620(i)).	Placer County shall demonstrate that a PSC/Case Manager, or other qualified individual known to the client and/or family is available to respond 24 hours a day, 7 days a week to provide afterhour interventions. The County shall develop FSP policies and procedures and/or other documents that demonstrate the PSC/Case Manager, or	This finding has been removed from the Plan of Correction. Placer County has had mechanisms in place before and during the onsite review, including policies and procedures for county operated and contracted organizational providers to have services available 24 hours a day, 7 days a week for after-hour response. This is also a contractual requirement with Placer County's organizational providers who provide FSP services. See policies for Uplift Family Services titled Finding 3_Uplift SBQR 24-7 Coverage Policy and Turning Point titled Finding 3_Turning Point After Hours Support in Person, Finding 3_Turning Point PP On-call, Finding 3_Turning Point Program Description, and	N/A

Finding # or Suggested Improvement #	Finding or Suggested Improvement		Recommendation # stion Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
Finding #4	Placer County does	other qualified individual known to the client and/or family is available to respond 24 hours a day, 7 days a week to provide afterhour interventions. Recommendation #4:	Finding 3_Turning On-Call Protocol 122618. a. Attached is a sample after hour calendar for Placer County staff members titled Finding 3_24-7 on call schedule August 2019. a. Placer County has updated its policy	The
	not ensure that the PSC/Case Manager is responsible for developing an Individualized Services and Supports Plan (ISSP) with the client and, when appropriate, the client's family. (Cal. Code of Regs., tit. 9, § 3620(h)(1).	Placer County shall demonstrate that a PSC/Case Manager is responsible for developing an ISSP with the FSP client and when appropriate, the client's family. The County shall develop FSP policies and procedures and/or other documents that demonstrate the PSC/Case Manager assigned to FSP clients are responsible for developing an ISSP with the client and, when appropriate, the client's family.	pertaining to service coordinators and ISSP development. See attached policy titled Finding 4_SMHS-MHSA Treatment Plan and Authorization Process SP 1200. b. Placer County has created an automated monitoring report within its Electronic Health Record, Avatar,that allows services coordinators, supervisors and managers to monitor timeliness plan completion with notice of those plans coming due. This automated report is sent out on a weekly basis. See attached Finding 4_REDACTED client services timeline report v12.1.	submitted plan is accepted.
Finding #5	Placer County did not provide evidence	Recommendation #5: The County shall have	Attached is a redacted sample of Placer's new grievance log and phone	The submitted

Finding # or Suggested Improvement #	Finding or Suggested Improvement		Recommendation # stion Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
	of an Issue Resolution Log. The Issue Resolution process was handled through the County's mental health grievance process and recorded on the Grievance and Appeal Report. However, the date the MHSA issue was received, brief synopsis of issue, final resolution outcome and date of final resolution outcome was not represented in the report. (County Performance Contract (6.)(A.)(2)).	an Issue Resolution process to handle client disputes related to the provision of their mental health services. The County shall develop a log that contains the date the issue was received, a brief synopsis of the issue, the final issue resolution outcome and the date the final issue resolution was reached.	log, both maintained by Placer County QM. See attachment titled Finding 5_Issue Resolution and Phone log REDACTED SAMPLE. b. See policies titled Finding 5_MHSA Issue Resolution QM 400 and Finding 5_Appeal and Grievance RE 100. 9-4-2020 A. Re 100 has been updated to include required elements. Refer to highlighted section in attachment: 4-9-2020 Finding 5.A RE 100 Appeal and Grievance. B. Placer County trained all staff and providers in 2019, and continues to train providers on an annual basis via our electronic platform Placer Learns. Reference attachments: 9-4-2020 Finding 5.B MH Provider Meeting Minutes, 9-4-2020 Finding 5.B SUS Provider Meeting Minutes, 9-4-2020 Finding 5.B QA Training Workplan FY 20-21, 9-4-2020 Finding 5.B QM Training Log Teams 2019, and 9-4-2020 Finding 5.B Spring 2019 MH Provider Newsletter. The Grievance and Appeal Log has been incorporated into Placer's EHR and includes required elements. Refer to	plan is accepted.

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
		attachment 4-9- 2020 Finding 5.C Grievance Log DHCS Response: The following training related documents: Finding 5.B MH Provider Meeting Minutes (4/12/19), Finding 5.B Spring 2019 MH Provider Newsletter (4/12/19), Finding 5.B SUS Provider Meeting Minutes (2/20/19), Finding 5.B QM Training Log Teams 2019 (showing trainings occurred 3/20/19 for SUD, 4/12/19 MH Providers and 6/1/19 for MY Providers) indicate these trainings occurred prior to the appeal and grievance process P&P last revision on 9/3/20. Therefore, staff have not been trained on the required elements of the log per MHSA, but more importantly, staff and providers have not been trained on MHSA specific issues to be logged. Finding5.B QA Training Workplan FY 20-21 highlights the next Beneficiary Protection training will cocur by July 2021. DHCS suggests include training regarding these concerns during this training. 11-13-2020: 5A & 5B: Placer County Plans to review and revise existing policy and procedure, or create new, to incorporate any missing MHSA elements and ensure ability to track and monitor MHSA grievances. Placer will incorporate new policy guidelines in	NOTES

Finding # or Suggested Improvement #	Finding or Suggested Improvement		Recommendation # ction Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
			upcoming trainings to be completed by staff and SOC providers by July 31, 2021, and annually thereafter. This will be monitored ongoing via training completion rosters from our electronic learning system Placer Learns.	
Finding #6	Placer County FY 2017-20 Plan and FY 2016-17 Annual Update (Update) lacked documentation of achievement of performance outcomes. (Welfare and Institution (WIC) Code, Section 5848(c); County Performance Contract (6.)(A.)(5)(d.)).	Recommendation #6: The County Plans and Updates shall include reports on the achievement of performance outcomes for services provided which are funded by the Mental Health Services Fund. The achievement of performance outcomes shall be in the FY 2020-23 Plan and FY 17-18 Update and thereafter.	There are performance outcomes in the annual updates and 3 Year Evaluation Reports as required by regulations, Placer will continue to include such in all subsequent plans and updates.	The submitted plan is accepted.
Finding #7	Placer County Community Services and Supports (CSS) programs/services implementation was not found to be consistent with the approved FY 2017- 20 Plan, FY 2016-	Recommendation #7: All expenditures for the County's mental health programs shall be consistent with a currently approved Plan or Update. The County must align CSS	Placer County acknowledges its original RER contained an error with consistent language regarding CSS program titles. Placer County has made the corrections in subsequent RERs that have been submitted thus far and will continue to do so for subsequent submissions. See the attached file titled <i>Finding 7_Placer County FY 2017-18 MHSA Rev and Exp Report</i> .	The submitted plan is accepted.

Finding # or Suggested Improvement #	Finding or Suggested Improvement	Corrections / M	Recommendation # stion Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
	17 Update and FY 2016- 17 ARER. (WIC Code, Section 5892(g)).	programs/services implementation with the approved FY 2020- 23 Plan, FY 2017- 18 Update and FY 2017-18 ARER and thereafter.		
Finding #8	Placer County did not dedicate at least 51% of Prevention and Early Intervention (PEI) funds used to serve individuals 25 years old or younger. (Cal. Code of Regs., tit. 9, § 3706(b)).	Recommendation #8: The County shall demonstrate that at least 51% of PEI funds shall be used to serve individuals 25 years old or younger on the FY 2017-18 Annual Revenue and Expenditure Report (ARER) and thereafter.	Placer County acknowledges its original RER contained an error which has been rectified and Placer will continue to demonstrate such in the future. See the PEI tab on the file titled <i>Finding 8_FY16-17_Placer Encl 3 Annual MHSA Revenue and Expenditure Rpt Revised 08 01 18</i> , which was also provided to DHCS onsite during review.	The submitted plan is accepted.
Finding #9	Placer County PEI programs/services implementation was not found to be consistent with the approved FY 2017-20 Plan, FY 2016-17 Update and FY 2016- 17 ARER. (WIC Code, Section 5892(g)).	Recommendation #9: All expenditures for the County's mental health programs shall be consistent with a currently approved Plan or Update. The County must align PEI programs/services implementation with the approved FY	Placer County acknowledges its original RER contained an error with consistent language regarding program titles. Placer County has made the corrections in subsequent RERs that have been submitted thus far and will continue this process. See the attached file titled <i>Finding 9_Placer County FY 2017-18 MHSA Rev and Exp Report</i> .	The submitted plan is accepted.

Finding # or Suggested Improvement #	Finding or Suggested Improvement		Recommendation # ction Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
Suggested Improvement Item # 1	MHSA Transparency and Consistency	2020- 23 Plan, FY 2017-18 Update and FY 2017- 18 ARER and thereafter. The County should develop and implement accounting and cost allocation policies and procedures that will allow the County to allocate a majority of PEI funds to serve individuals 25 or younger. Suggested Improvement #1.1: Department of Health Care Service (DHCS) recommends program names and service categories detailed in the Plan and Update match the program names and service categories in the ARER. The ARER	County acknowledges its original RER contained an error with consistent language regarding program titles. Placer County has made the corrections in subsequent RERs that have been submitted thus far. See the attachment from previous submission titled Finding 9_Placer County FY 2017-18 MHSA Rev and Exp Report. DHCS Response: There seems to be progress, but still some inconsistencies. The 2018-19 Annual Update which shows 18 CSS programs and the ARER shows 24 CSS programs and 7CFTN programs in the Update and 1 on the ARER. County	The submitted plan is accepted.

Finding # or Suggested Improvement #	Finding or Suggested Improvement	Corrections / M	Recommendation # ction Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
		should be consistent with the budget in the Plan and Update. If the program or service did not occur, still report the program or service on the ARER and indicate zero expenditures.	needs to still report zero expenditures on the ARER for programs in which services did not occur. Number of PEI programs (46) and INN programs (1) matches. 11/13/2020: Placer County will work to ensure that all program names and service categories will be consistent across Plan, Annual Updates ,ARER and budget pages for all upcoming and future submissions.	
Suggested Improvement Item # 1	MHSA Transparency and Consistency	Suggested Improvement #1.2: DHCS recommends the County provide a budget for each fiscal year in the Plan and Update and update the budget in each subsequent Annual Update.	9-4-2020 Placer County has provided a budget for each fiscal year in all prior plans and the current 3 year plan and will continue to ensure this is included in all future submissions.	The submitted plan is accepted.
Suggested Improvement Item # 1	MHSA Transparency and Consistency	Suggested Improvement #1.3: DHCS recommends the Plan and Update components be presented in the following order: CPPP – Community Program Planning Process	9-4-2020 Placer County has noted DHCS' recommendation regarding the order, Placer County has a very similar order in 3 Year Plans and Annual Updates. Some order differences were determined with stakeholders in mind to reduce any confusion regarding funding sources. E.g. Housing was placed at the end, as they were one time funds and it could be confusing to stakeholders to place it in other sections. Placer will continue to consider the	The submitted plan is accepted.

Finding # or Suggested Improvement #	Finding or Suggested Improvement	•	Recommendation # stion Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
		CSS – Community Services and Supports FSP – Full Service Partnership GSD – General Service Development O&E – Outreach and Engagement Housing PEI – Prevention and Early Intervention INN – Innovation WET – Workforce Education and Training CFTN – Capital Facility and Technological Needs	recommended order in future submissions along with stakeholder readability.	
Suggested Improvement Item # 1	MHSA Transparency and Consistency	Suggested Improvement #1.4: DHCS recommends the County provide detailed MHSA program narratives in the Plan and Update by component with concrete examples	9-4-2020 Placer county will continue to provide details program narratives in the plan and subsequent updates.	The submitted plan is accepted.

Finding # or Suggested Improvement #	Finding or Suggested Improvement		Recommendation # ction Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
Suggested	MHSA Program	of program descriptions, summaries, goals and/or activities, as well as document any changes made to the Plan in subsequent Updates.	0.4.2020 Placer County is an integrated system of	The
Suggested Improvement Item # 2	MHSA Program Development	Suggested Improvement #2.1: DHCS recommends the County develop and implement a defined MHSA program. Such programs should identify processes and supports including: a. Policies and procedures that incorporate MHSA general principles. b. Requirements and	9-4-2020 Placer County is an integrated system of care and many of the MHSA program requirements are incorporated in system policies and procedures and are not separated out to avoid duplicative and confusing processes for staff. Placer will continue to incorporate MHSA required elements within its policies and procedures, and where there none, will create them to ensure all MHSA programmatic requirements are identified within the SOC. DHCS disagrees that policy and procedures specific to MHSA would be confusing to staff. There are missing corrective action steps (development, implementation, training schedule and timeline for completion). 11-13-2020: Placer will systematically evaluate the MHSA program documentation, including review of existing policies and procedures that	The submitted plan is accepted.

Finding # or Suggested Improvement #	Finding or Suggested Improvement	•	Recommendation # stion Step / Identify Timeline / and Evidence of lechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
Suggested Improvement Item # 2	MHSA Program Development	components (CPPP, CSS (FSP/GSD/O &E), PEI, INN, WET, CFTN). c. Funding and reporting requirement d. Plans and Updates. Other needs such as staffing, performance objectives and outcomes. Suggested Improvement #2.2: The program should also address how the county will evaluate the effectiveness of programs/services they	capture MHSA processes and supports as identified in items a-e. Placer will identify gaps and create written policy or procedure as needed to ensure the MHSA program elements are captured. Training will be provided to staff on these elements and changes by the end of the 2021 calendar year and annually thereafter, to be monitored via training completion rosters from our electronic learning system Placer Learns. 9-4-2020 Placer County conducts an SOC Evaluation Committee on a monthly, recently changed to bi-monthly basis in which the county evaluates the effectiveness of programs and services and identifies quality improvement opportunities. Additionally as an integrated system MHSA service programs are evaluated along with	The submitted plan is accepted.
		deliver and their on going quality improvement strategies.	all other behavioral health programs through ongoing QI activities that are reported on during quarterly QI committee meetings.	
Suggested Improvement Item # 2	MHSA Program Development	Suggested Improvement #2.3: DHCS recommends staff education on	9-4-2020 Placer is in agreement with this suggestion, Placer prepares an annual power point for community stakeholders and will work on modifying this for staff to be trained on an	The submitted plan is accepted.

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
		MHSA program training for all mental health employees and service providers involved in the complete delivery of services to recipients of MHSA programs; and documentation of annual training.	annual basis. 11-13-2020: Placer county will create an annual training, adapted from annual stakeholder presentation, to provide training for all mental health employees and service providers in the complete delivery of services to recipients of MHSA programs. This training will be completed and provided to staff by the end of the 2021 Calendar year, in line with completion of the action steps identified in suggestion 2.1, and annually thereafter. This will be monitored ongoing via training completion rosters from our electronic learning system Placer Learns.	
Suggested Improvement Item # 2	MHSA Program Development	Suggested Improvement #2.4: DHCS recommends MHSA program training to all new employees; and documentation of annual training.	11-13-2020: 9-4-2020 Placer is in agreement with this suggestion, see plan identified under Item 2.3 Training will be provided to staff on these elements and changes by the end of the 2021 calendar year and annually thereafter, to be monitored via training completion rosters from our electronic learning system Placer Learns.	The submitted plan is accepted.
Suggested Improvement Item # 3	Timeliness in Reporting	Suggested Improvement #3.1: DHCS recommends the Update report the MHSA	9-4-2020 Placer has incorporated the MHSA programs/services and expenditures provided during the previous year in all annual updates and will continue to do so.	The submitted plan is accepted.

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
		programs/services and expenditures provided during the previous year (i.e., the FY 2015- 16 AU should reflect those programs/services and expenditures for FY 2014-15).		
Suggested Improvement Item # 3	Timeliness in Reporting	Suggested Improvement #3.2: The Plan should report the programs/services and expenditures anticipated and budgeted for the upcoming three years the Plan represents (i.e., the FY 2017-20 Plan should reflect those programs/services and budgeted expenditures anticipated for FY 2017-20).	9-4-2020 Placer county has reported the program services and anticipated expenditures in the 2017-20 Plan and will continue to do so in upcoming plans.	The submitted plan is accepted.
Suggested Improvement Item # 3	Timeliness in Reporting	Suggested Improvement #3.3: The Plan should also report	9-4-2020 Placer county has reported the program services and anticipated expenditures in the 2017-	The submitted

Finding # or Suggested Improvement #	Finding or Suggested Improvement	(State Corrective Ac Corrections / M	Score – Comments/ Notes	
		the MHSA programs/services and expenditures provided during the previous year (i.e., the FY 2016-17)	20 Plan and will continue to do so in upcoming plans.	plan is accepted.