

Mental Health Services Act (MHSA) Performance Contract Review Report
San Joaquin County Program Review
May 25, 2021

Finding #1: San Joaquin County's FY 2019-20 ARER was not posted to the county's website. (Cal. Code Regs., tit. 9, § 3510.010(b)(1); Welfare and Institutions Code section 5899)).

Recommendation #1: The County must post a copy of the FY 2020-21 ARER, and each subsequent ARER thereafter, to the county's website within 30 days of submitting to the Department of Health Care Services (DHCS).

Finding #2: San Joaquin County did not include a description of the County demographics, including: size of the County, unique characteristics, age, and gender in the adopted FY 2019-20 Annual Update (Update). The County did provide a description of the following county demographics: threshold languages and race/ethnicity.(Cal. Code Regs., tit 9, § 3300, MHSOAC FY 2015-2016 MHSA Annual Update Instructions (pg 5)).

Recommendation #2: The County must include a description of the County demographics, including, but not limited to: size of the County, threshold languages, unique characteristics, age, gender, and race/ethnicity in the adopted FY 2020-23 Three-Year Program and Expenditure Plan (Plan), FY 2021-22 Update and each subsequent Plan and Update thereafter.

Finding #3: San Joaquin County did not include a description of how stakeholder involvement demonstrates a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder involvement on: mental health policy, monitoring, quality improvement, and budget allocations in the adopted FY 2019-20 Update. The County did include a description of stakeholder involvement in the following areas: program planning and implementation and evaluation. (W&I Code section 5848; MHSOAC FY 2015-16 MHSA Annual Update Instructions (pg 3)).

Recommendation #3: The County must include a description of how stakeholder involvement demonstrates a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder involvement on: mental health policy, program planning and implementation, monitoring, quality improvement, evaluation, and budget allocations in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.

Finding #4: San Joaquin County did not include documentation of achievement in performance outcomes for Community Services and Supports (CSS) and Innovation (INN) programs/services in the adopted FY 2019-20 Update. The County did include documentation of achievement in performance outcomes for Prevention and Early Intervention (PEI). (County Performance Contract (6.)(A.)(5)(d.); W&I Code section 5848).

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Recommendation #4: The County must include documentation of achievement in performance outcomes for CSS, PEI and INN programs/services in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.

Finding #5: San Joaquin County did not provide an estimate of the number of clients in each age group, to be served in the Full Service Partnership (FSP) service category in the adopted FY 2019-20 Update. (Cal. Code Regs., tit. 9, § 3650(a)(3); W&I Code section 5847(e)).

Recommendation #5: The County must provide an estimate of the number of FSP clients to be served in each age group: children (0-15 years old), transitional age youth (16-25 years old), adult (26-59 years old), and older adult (60 and older) for each fiscal year in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.

Finding #6: San Joaquin County did not report the cost per person for PEI and INN programs in the adopted FY 2019-20 Update. The County did report cost per person for CSS programs. (W&I Code section 5847(e)).

Recommendation #6: The County must include the cost per person for CSS, PEI and INN programs in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.

SUGGESTED IMPROVEMENT

Item #1: Community Program Planning Process (CPPP)

Suggested Improvement #1a: DHCS recommends the County develop, finalize and implement a CPPP policy and procedure that includes the regulations and statutes for the community program planning process.

Item #2: MHSA Plans and Updates

Suggested Improvement #2a: DHCS recommends the County clearly identify the County's underserved/unserved populations in the County demographics section of the adopted Plans and Updates.

Suggested Improvement #2b: DHCS recommends the County include any challenges or barriers for each program and strategies to mitigate those challenges or barriers in future adopted Plans and Updates.

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Item #3: Website Access and Links

Suggested Improvement #3a: DHCS recommends the County ensure that all website hyperlinks are active and accessible to the public.

TECHNICAL ASSISTANCE

The Findings and Suggested Improvements outlined above pertain to the adopted FY 2019-20 Update. The following items represent a list of technical assistance provided to the County during the review call on May 25, 2021 and pertain specifically to inconsistencies and clarity issues identified in the adopted FY 2017-20 Plan. All Findings, Suggested Improvements and Technical Assistance items on this Performance Contract Review (PCR) Report must be addressed by the County in all future adopted Plans and Updates.

#1. The adopted FY 2020-23 Plan must include a description of the training the County provides to the participants in the CCP process. (Cal. Code Regs., tit. 9, § 3300(c)).

#2. The adopted FY 2020-23 Plan must include a budget summary for each fiscal year for the following components: CSS; PEI; INN; Workforce, Education, and Training (WET); Capital Facilities (CF); and Technological Needs (TN). (Cal. Code Regs., tit. 9, § 5847(e)).

#3. The CSS program names listed in the adopted FY 2020-23 Plan must be consistent with the names in the approved ARER. The budget in the adopted Plan 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. (W&I Code section 5892(g)).

SUMMARY

The Department of Health Care Services' MHSA Program Monitoring Unit conducted a review of San Joaquin County Behavioral Health Services' adopted FY 2017-20 Plan and FY 2019-20 Update on May 25, 2021. Though the county had experienced challenges prior to the COVID-19 Global Pandemic, the pandemic brought an opportunity to the County to meet significant challenges with new and innovative solutions.

Just prior to the Pandemic, the County had been working on expanding services to children and increasing housing options for families. The County had added additional service providers to expand services and had been diligent in coordinating with area hospitals to expand integration of services.

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While the Pandemic resulted initially in service reductions, particularly among children and school-based programming such as suicide prevention, there was also an opportunity for the County to develop hybrid learning models, which reduced the number of no-shows in services among other achievements. In addition, the Community Planning and Participation Process was also initially disadvantaged as a result of discontinued in-person meetings with stakeholders and less representation in online forums. Tele-health and online participation resulted in an increased level of engagement and participation, particularly among the Hispanic populations. Stakeholders expressed that tele-health removed the stigma often associated in their community with going to a facility. Once alternative methods were developed, outreach and engagement is at an all-time high during the remainder of the COVID-19 Pandemic.