

State of California—Health and Human Services Agency Department of Health Care Services



GAVIN NEWSOM GOVERNOR

October 8, 2021

Sent via e-mail to: mmann@inyocounty.us

Marilyn Mann, Director Inyo County Department of Health and Human Services 1360 N. Main Street Bishop, CA 93514

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Mann:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Substance Abuse Block Grant (SABG) and the terms of the Contract operated by Inyo County.

The County Compliance Unit (CCU) within the Audits and Investigations Division (A&I) of DHCS conducted a review of the County's compliance with contract requirements based on responses to the monitoring instrument, discussion with county staff, and supporting documentation provided by the County.

Enclosed are the results of Inyo County's Fiscal Year 2020-21 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Inyo County is required to submit a Corrective Action Plan (CAP) addressing each deficiency noted to the Community Services Division (CSD), Community Support Branch (CSB), Policy, Monitoring and Financing Section (PMFS) Analyst by 12/8/2021. Please use enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at <u>SABGcompliance@dhcs.ca.gov</u>.

If you have any questions, please contact me at susan.volmer@dhcs.ca.gov

Sincerely,

Susan Volmer (916) 713-8677

> Audits and Investigations Division Medical Review Branch Behavioral Health Compliance Section County Compliance Unit 1500 Capitol Ave., MS 2305 Sacramento, CA 95814 http://www.dhcs.ca.gov

Distribution:

To: Director Mann

CC: Mateo Hernandez, Audits and Investigations, Medical Review Branch Acting Chief Lanette Castleman, Audits and Investigations, Behavioral Health Compliance Section Chief Avesha Smith, Audits and Investigations, Behavioral Health Compliance Unit Chief Michael Bivians, Audits and Investigations, County Compliance Monitoring II Chief Tracie Walker, Community Services Division, Community Support Branch Chief Victoria King-Watson, Community Services Division, Operations Branch Chief Donna Ures, Community Services Division, Policy, Monitoring and Financing Section Chief Jessica Fielding, Community Services Division, Family Services Section Chief Angelina Azevedo, Community Services Division, Prevention Services Unit Chief Ashley Love, Community Services Division, Family Services Unit Chief Denise Galvez, Community Services Division, Youth Services Section Chief SABGcompliance@dhcs.ca.gov, Policy, Monitoring and Financing Section MCBHDMonitoring@dhcs.ca.gov, County/Provider Operations and Monitoring Branch Stephanie Tanksley, Invo County Program Integrity and Quality Assurance (PIQA) Manager Ralph Cataldo, Invo County Administrative Analyst III Catherine Grisham, Inyo County Addictions Counselor Sheila Turner, Invo County Addiction Counselor Donna Stephen, Invo County Addiction Counselor

COUNTY REVIEW INFORMATION

County:

Inyo

County Contact Name/Title:

Stephanie Tanksley, Program Integrity and Quality Assurance (PIQA) Manager

County Address:

1360 N. Main Street Bishop. CA 93514

County Phone Number/Email:

760.872.3273 stanksley@inyocounty.us

Date of Review:

8/18/2021

Lead CCU Analyst: Susan Volmer

Assisting CCU Analyst: N/A

Report Prepared by:

Susan Volmer

Report Approved by:

Ayesha Smith

REVIEW SCOPE

I. Regulations:

- a. California Code of Regulations, Title 22, section 51341.1 Drug Medi-Cal Substance Use Disorder Services
- b. Code of Federal Regulations; Title 45, Part 96; Subpart L; section 96.121 through 96.137: Substance Abuse Prevention and Treatment Block Grant
- c. United States Code, Title 42, Section 300x-21 through 300x-66: Block Grants regarding Mental Health and Substance Use
- d. Health and Safety Code, Division 10.5, Section 11750 11970: Alcohol and Drug Programs
- II. Program Requirements:
 - a. Fiscal Year (FY) 2020-21 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
 - b. State of California Youth Treatment Guidelines Revised August 2002
 - c. DHCS Perinatal Practice Guidelines FY 2018-19
 - d. National Culturally and Linguistically Appropriate Services (CLAS)
 - e. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
 - f. Behavioral Health Information Notices (BHIN)

ENTRANCE AND EXIT CONFERENCE SUMMARIES

Entrance Conference:

An Entrance Conference was conducted via WebEx on 8/18/2021. The following individuals were present:

- Representing DHCS: Susan Volmer, Associate Government Program Analyst (AGPA) Angela Rankin, AGPA
- Representing Inyo County: Stephanie Tanksley, Program Integrity and Quality Assurance (PIQA) Manager Ralph Cataldo, Administrative Analyst III Catherine Grisham, Addictions Counselor Sheila Turner, Addiction Counselor Donna Stephen, Addiction Counselor

During the Entrance Conference, the following topics were discussed:

- Introductions
- Inyo County overview of services
- Overview of monitoring process

Exit Conference:

An Exit Conference was conducted via WebEx on 8/18/2021. The following individuals were present:

- Representing DHCS: Susan Volmer, AGPA Angela Rankin, AGPA
- Representing Inyo County: Stephanie Tanksley, Program Integrity and Quality Assurance (PIQA) Manager Ralph Cataldo, Administrative Analyst III Catherine Grisham, Addictions Counselor Sheila Turner, Addiction Counselor Donna Stephen, Addiction Counselor

During the Exit Conference, the following topics were discussed:

- Submitting follow-up evidence
- Due date for evidence submission

SUMMARY OF FY 2020-21 COMPLIANCE DEFICIENCIES (CD)

<u>Section</u>

Number of CD's

1.0	Administration	5
2.0	Prevention	0
3.0	Perinatal	1
4.0	Adolescent/Youth Treatment	2
5.0	Data/CalOMS	1
6.0	Program Integrity	2
7.0	Fiscal	0

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the <u>SABG County Application</u>, <u>Enclosure 1</u>, <u>Part I</u>, <u>Section 3</u>, <u>B</u>, <u>5-8</u> each CD identified must be addressed via a CAP. The CAP is due within sixty (60) calendar days of the date of this monitoring report.</u>

Please provide the following within the completed FY 2020-21 CAP:

- a) A statement of the CD.
- b) A list of action steps to be taken to correct the CD.
- c) A date of completion for each CD.
- d) The name of the person who will be responsible for corrections and ongoing compliance.

The PMFS analyst will monitor progress of the CAP completion.

Category 1: ADMINISTRATION

A review of the County's Maintenance of Records, service providers, referrals, services, contracts, and general provisions was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

CD 1.2.1:

SABG Application, Enclosure 2, I, 1, A, 1, f-g

- Performance under the terms of this Enclosure is subject to all applicable federal and state laws, regulations, and standards. In accepting DHCS drug and alcohol SABG allocation pursuant to HSC Sections 11814(a) and (b), County shall: (i) establish, and shall require its subcontractors to establish, written policies and procedures consistent with the control requirements set forth below; (ii) monitor for compliance with the written procedures; and (iii) be accountable for audit exceptions taken by DHCS against the County and its subcontractors for any failure to comply with these requirements:
 - f. Code of Federal Regulations (CFR), Title 45, Part 75, Uniform Administration Requirements, Cost Principles, and Audit Requirements for Federal Awards.
 - g. CFR, Title 45, Part 96, Block Grants.

45 CFR 75.329(d)

(d) Procurement by competitive proposals. The technique of competitive proposals is normally conducted with more than one source submitting an offer, and either a fixed price or cost-reimbursement type contract is awarded. It is generally used when conditions are not appropriate for the use of sealed bids. If this method is used, the following requirements apply:

1) Requests for proposals must be publicized and identify all evaluation factors and their relative importance. Any response to publicized requests for proposals must be considered to the maximum extent practical;

2) Proposals must be solicited from an adequate number of qualified sources;

3) The non-Federal entity must have a written method for conducting technical evaluations of the proposals received and for selecting recipients;

4) Contracts must be awarded to the responsible firm whose proposal is most advantageous to the program, with price and other factors considered; and

5) The non-Federal entity may use competitive proposal procedures for qualifications-based procurement of architectural/engineering (A/E) professional services whereby competitors' qualifications are evaluated and the most qualified competitor is selected, subject to negotiation of fair and reasonable compensation. The method, where price is not used as a selection factor, can only be used in procurement of A/E professional services. It cannot be used to purchase other types of services though A/E firms are a potential source to perform the proposed effort.

Findings: The County did not provide evidence demonstrating a process for procurement of SABG-funded prevention and treatment programs.

CD 1.2.3:

SABG Application, Enclosure 2, I, 1, A, 1, f-g

- Performance under the terms of this Enclosure is subject to all applicable federal and state laws, regulations, and standards. In accepting DHCS drug and alcohol SABG allocation pursuant to HSC Sections 11814(a) and (b), County shall: (i) establish, and shall require its subcontractors to establish, written policies and procedures consistent with the control requirements set forth below; (ii) monitor for compliance with the written procedures; and (iii) be accountable for audit exceptions taken by DHCS against the County and its subcontractors for any failure to comply with these requirements:
 - f. Code of Federal Regulations (CFR), Title 45, Part 75, Uniform Administration Requirements, Cost Principles, and Audit Requirements for Federal Awards.
 - g. CFR, Title 45, Part 96, Block Grants.

45 CFR 75.329(f) (1-4)

(f) Procurement by noncompetitive proposals. Procurement by noncompetitive proposals is procurement through solicitation of a proposal from only one source and may be used only when one or more of the following circumstances apply:

(1) The item is available only from a single source;

(2) The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation;

(3) The HHS awarding agency or pass-through entity expressly authorizes noncompetitive proposals in response to a written request from the non-Federal entity; or

(4) After solicitation of a number of sources, competition is determined inadequate.

45 CFR 75.333(b)(1)

(b) The non-Federal entity must make available upon request, for the HHS awarding agency or passthrough entity pre-procurement review, procurement documents, such as requests for proposals or invitations for bids, or independent cost estimates, when:

1) The non-Federal entity's procurement procedures or operation fails to comply with the procurement standards in this part;

Findings: The County did not make available a copy of the procurement proposal along with the justification for each noncompetitive SABG provider.

CD: 1.5.3:

SABG Application Enclosure 2, II, 3

- 3. No Unlawful Use or Unlawful Use Messages Regarding Drugs
- Contractor agrees that information produced through these funds, and which pertains to drugs and alcohol related programs, shall contain a clearly written statement that there shall be no unlawful use of drugs or alcohol associated with the program. Additionally, no aspect of a drug or alcohol related program shall include any message on the responsible use, if the use is unlawful, of drugs or alcohol (HSC Section 11999-11999.3). By signing this Contract, Contractor agrees that it will enforce, and will require its Subcontractors to enforce, these requirements.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating compliance with No Unlawful Use or Unlawful Use Messages Regarding Drugs.

CD: 1.5.4:

SABG Application, Enclosure 2, II, 4

4. Limitation on Use of Funds for Promotion of Legalization of Controlled Substances None of the funds made available through this Contract may be used for any activity that promotes the legalization of any drug or other substance included in Schedule I of Section 202 of the Controlled Substances Act (21 USC 812).

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating compliance with the Limitation on Use of Funds for Promotion of Legalization of Controlled Substances.

CD: 1.5.6:

SABG Application, Enclosure 2, II, 5

5. Debarment and Suspension

County shall not subcontract with or employ any party listed on the government wide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines at 2 CFR 180 that implement Executive Orders 12549 (3 CFR part 1986 Comp. p. 189) and 12689 (3 CFR part 1989., p. 235), "Debarment and Suspension." SAM exclusions contain the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority other than Executive Order 12549.

The County shall advise all subcontractors of their obligation to comply with applicable federal debarment and suspension regulations, in addition to the requirements set forth in 42 CFR Part 1001. If a County subcontracts or employs an excluded party, DHCS has the right to withhold payments, disallow costs, or issue a CAP, as appropriate, pursuant to HSC Code 11817.8(h).

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating compliance with Debarment and Suspension.

Category 3: PERINATAL

A review of the SABG Perinatal services, outreach and Tuberculosis (TB) monitoring was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified

COMPLIANCE DEFICIENCY:

CD 3.1.2:

SABG, Enclosure 2, 3, A, 1, d

- 1. County's performance under the County Performance Contract and the SABG County Application shall be monitored by DHCS during the term of the County Performance Contract. Monitoring criteria shall include, but not be limited to:
 - d. Whether the County is abiding by the terms of the Perinatal Practice Guidelines.

Perinatal Practice Guidelines, Section B, 4

2. PARTNERSHIPS

Effective communication between providers is essential to delivering quality care to pregnant and parenting women.

SUD providers shall coordinate treatment services with other appropriate services, including health, criminal justice, social, educational, and vocational rehabilitation well as additional services that are medically necessary to prevent risk to a fetus, infant, or mother. Providers shall also provide or arrange for transportation to ensure access to treatment.

45 CFR § 96.132(c)

Additional agreements.

(c) The State shall coordinate prevention and treatment activities with the provision of other appropriate services (including health, social, correctional and criminal justice, educational, vocational rehabilitation, and employment services). In evaluating compliance with this section, the Secretary will consider such factors as the existence of memoranda of understanding between various service providers/agencies and evidence that the State has included prevention and treatment services coordination in its grants and contracts.

Findings: The County did not make available evidence demonstrating effective communication by County and providers with the coordination of treatment services with other appropriate services including:

- Criminal Justice;
- Educational Services
- Vocational Services; and
- Employment Services

Category 4: ADOLESCENT/YOUTH TREATMENT

A review of the SABG Adolescent/Youth Treatment program and services was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 4.1.1:

SABG Application, Enclosure 2, II. General, 16

16. Youth Treatment Guidelines

County must comply with DHCS guidelines in developing and implementing youth treatment programs funded under this Enclosure, until new Youth Treatment Guidelines are established and adopted. Youth Treatment Guidelines are posted online at: https://www.dhcs.ca.gov/individuals/Pages /youthsudservices.aspx

Youth Treatment Guidelines Section V, A, 1-4

A. Outreach

- 1. Counties should provide or arrange for outreach services that identify AOD-abusing youth and encourage them to take advantage of treatment services.
- 2. Outreach efforts should target youth in at-risk environments.
- 3. High priority should be placed on linking with public systems already serving youth with AOD problems, such as schools, child welfare, public health, mental health, and juvenile justice.
- 4. Outreach activities should also include educating professionals and policymakers in these systems so that they become referral sources for potential clients.

45 CFR §96.126(e)(1)-(5)

(e) The State shall require that any entity that receives funding for treatment services for intravenous drug abuse carry out activities to encourage individuals in need of such treatment to undergo such treatment. The States shall require such entities to use outreach models that are scientifically sound, or if no such models are available which are applicable to the local situation, to use an approach which reasonably can be expected to be an effective outreach method. The model shall require that outreach efforts include the following:

(a). Selecting, training and supervising outreach workers;

(b). Contacting, communicating and following-up with high risk substance abusers, their associates, and neighborhood residents, within the constraints of Federal and State confidentiality requirements, including 42 CFR part 2;

(c). Promoting awareness among injecting drug abusers about the relationship between injecting drug abuse and communicable diseases such as HIV;

(d). Recommend steps that can be taken to ensure that HIV transmission does not occur; and

(e). Encouraging entry into treatment.

Findings: The County did not make available evidence of fliers or advertisements to demonstrate youth Outreach events for the current fiscal year.

CD 4.1.4:

SABG Application, Enclosure 2, II, 16

16. Youth Treatment Guidelines

County must comply with DHCS guidelines in developing and implementing youth treatment programs funded under this Enclosure, until new Youth Treatment Guidelines are established and adopted. Youth Treatment Guidelines are posted online at: https://www.dhcs.ca.gov/individuals/Pages /youthsudservices.aspx

Youth Treatment Guidelines, Section IX, C

C. Notice of Program Rules, Client Rights, and Grievance Procedures Upon admission, all youth should be personally advised of, and given a copy of, the program rules, client rights, and the complaint and/or grievance procedures. These should be culturally, linguistically, and literacy appropriate for the youth and families being served. The program should post these items in a noticeable place in the facility.

Youth Treatment Guidelines, Section X, A

A. Program Rules and Procedures

The program should have written program policies and procedures, client rules and rights, and complaint and/or grievance procedures. All staff should receive training on the program rules, policies, and procedures.

Findings: The County did not make available evidence demonstrating youth treatment programs ensure all youth upon admission is personally advised of and given a copy of the following information:

- The program rules;
- Client Rights; and
- Complaint and/or grievance procedures.

Category 5: DATA/CALOMS

A review of data submissions via CalOMS was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD: 5.1.2:

SABG Application, Enclosure 2, III, 2, C-F

- California Outcomes Measurement System for Treatment (CalOMS-Tx) The CalOMS-Tx business rules and requirements are:
 - C. Electronic submission of CalOMS-Tx data shall be submitted by County within 45 days from the end of the last day of the report month.
 - D. County shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS Tx data collection.
 - E. County shall submit CalOMS-Tx admission, discharge, annual update, resubmissions of records containing errors or in need of correction, and "provider no activity" report records in an electronic format approved by DHCS.
 - F. County shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method, as identified online at: https://www.dhcs.ca.gov/provgovpart/Pages /CalOMS-Treatment.aspx

Findings: The County's Open Admissions Report is not in compliance.

Category 6: PROGRAM INTEGRITY

A review of the SABG monitoring, privacy, and program integrity was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 6.2.4:

County Performance Contract, Attachment A, 1, A

Employee Training.

All workforce members who assist in the performance of functions or activities on behalf of the Department, or access or disclose Department PHI or PI must complete information privacy and security training, at least annually, at Contractor's expense. Each workforce member who receives information privacy and security training must sign a certification, indicating the member's name and the date on which the training was completed. These certifications must be retained for a period of six (6) years following termination of this Agreement.

Findings: The County did not make available the signed training certificates for FY 2019-20 as evidence of completed Privacy and Security training for County staff.

CD 6.2.5:

<u>County Performance Contract, Attachment A, 1, C</u> Confidentiality Statement.

All persons that will be working with Department PHI or PI must sign a confidentiality statement that includes, at a minimum, General Use, Security and Privacy Safeguards, Unacceptable Use, and Enforcement Policies. The statement must be signed by the workforce member prior to access to Department PHI or PI. The statement must be renewed annually. The Contractor shall retain each person's written confidentiality statement for Department inspection for a period of six (6) years following termination of this Agreement.

Findings: The County made available only two (2) of three (3) staff signed confidentiality statements for FY 2019-20 as evidence of compliance.

The County did not make available evidence demonstrating the confidentiality statements are retained for a period of six years following the termination of the agreement.

TECHNICAL ASSISTANCE

DHCS's County Compliance Unit Analyst will make referrals to the DHCS' SABG County Liaison for the training and technical assistance areas identified below:

CalOMS-Tx and DATAR: Assistance with removing older records (2018) from CalOMS.