



MICHELLE BAASS  
DIRECTOR

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



GAVIN NEWSOM  
GOVERNOR

November 19, 2021

Sent via e-mail to: [vkelly@dbh.sbcounty.gov](mailto:vkelly@dbh.sbcounty.gov)

Veronica Kelley, LCSW, Director, AOD Administrator  
San Bernardino County Behavioral Health  
303 E. Vanderbilt Way  
San Bernardino, CA 92415

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Kelley:

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 San Bernardino 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 San Bernardino County's Fiscal Year 2020-21 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

San Bernardino 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 1/19/2022. Please use enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at [SABGcompliance@dhcs.ca.gov](mailto:SABGcompliance@dhcs.ca.gov).

If you have any questions, please contact me at [susan.volmer@dhcs.ca.gov](mailto: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  
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Michael Sweitzer, San Bernardino County Program Manager

## COUNTY REVIEW INFORMATION

**County:**

San Bernardino

**County Contact Name/Title:**

Michael Sweitzer, Program Manager

**County Address:**

303 E. Vanderbilt Way  
San Bernardino, CA 92415

**County Phone Number/Email:**

(909) 501-0813  
msweitzer@dbh.sbcounty.gov

**Date of Review:**

10/13/21

**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 10/13/2021. The following individuals were present:

- Representing DHCS:  
Susan Volmer, Associate Governmental Program Analyst (AGPA)
  
- Representing San Bernardino County:  
Anabelle Miranda-Muniz, SARC Clinic Supervisor  
April Guzman, Acting Administrative Supervisor II  
Briceida Tompkins, Ethics and Compliance Coordinator  
Catherine Smith, Interim Program Manager II  
Christopher Bailey, Program Specialist I  
Erica Ochoa, Chief Compliance Officer  
Jennifer Alsina, Deputy Director, SUDRS  
Jeron Crawford, Social Worker II  
Dr. Jonathan Avalos, Addiction Medicine Physician  
Kim Carson, Program Manager II  
Kimberlee Van, Administrative Manager  
Lisa Tomaselli, Social Worker II  
Lois Mergener, Program Specialist II  
Manual Ted Rodriguez, Business Application Manager  
Maria Arroyo, Social Worker II  
Maribel Gutierrez, Cultural Competence Officer  
Marina Espinosa, Deputy Director, Program Support Services  
Michael Sweitzer, Program Manager II  
Natalie Sanders, Program Specialist I  
Niema Burrell, Supervising Automated Systems Analyst I  
Patricia Grace, Supervising Automated Systems Analyst I  
Paul Terrazas, Clinical Therapist II  
Robert LoPatriello, Supervising Social Worker  
Tan Suphavarodom, Deputy Director, Administrative Services

During the Entrance Conference, the following topics were discussed:

- Introductions
- San Bernardino County overview of services
- Overview of monitoring process

**Exit Conference:**

An Exit Conference was conducted via WebEx on 10/13/2021. The following individuals were present:

- Representing DHCS:  
Susan Volmer, AGPA  
Jamari Robinson, AGPA
  
- Representing San Bernardino County:  
Anabelle Miranda-Muniz, SARC Clinic Supervisor  
April Guzman, Acting Administrative Supervisor II  
Briceida Tompkins, Ethics and Compliance Coordinator  
Catherine Smith, Interim Program Manager II  
Christopher Bailey, Program Specialist I  
Erica Ochoa, Chief Compliance Officer  
Jennifer Alsina, Deputy Director, SUDRS  
Jeron Crawford, Social Worker II  
Dr. Jonathan Avalos, Addiction Medicine Physician  
Kim Carson, Program Manager II  
Kimberlee Van, Administrative Manager  
Lisa Tomaselli, Social Worker II  
Lois Mergener, Program Specialist II  
Manual Ted Rodriguez, Business Application Manager  
Maria Arroyo, Social Worker II  
Maribel Gutierrez, Cultural Competence Officer  
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Niema Burrell, Supervising Automated Systems Analyst I  
Patricia Grace, Supervising Automated Systems Analyst I  
Paul Terrazas, Clinical Therapist II  
Robert LoPatriello, Supervising Social Worker  
Tan Suphavarodom, Deputy Director, Administrative Services

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>	<u>Number of CD's</u>
1.0 Administration	2
2.0 Prevention	0
3.0 Perinatal	3
4.0 Adolescent/Youth Treatment	1
5.0 Data/CalOMS	2
6.0 Program Integrity	1
7.0 Fiscal	0

## **CORRECTIVE ACTION PLAN (CAP)**

Pursuant to the SABG County Application, Enclosure 1, Part I, Section 3, B, 5-8 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.

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:

### COMPLIANCE DEFICIENCIES:

#### **CD: 1.5.2:**

##### SABG Application Enclosure 2, II, 2

###### 1. Hatch Act

County agrees to comply with the provisions of the Hatch Act (USC, Title 5, Part III, Subpart F., Chapter 73, Subchapter III), which limit the political activities of employees whose principal employment activities are funded in whole or in part with federal funds.

##### 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 all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically the Hatch Act.

#### **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 all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically No Unlawful Use or Unlawful Use Messages Regarding Drugs.

## 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 deficiencies in regulations, standards or protocol requirements were identified:

### COMPLIANCE DEFICIENCIES:

#### **CD 3.2.1:**

SABG Application, Enclosure 2, I, 2, D

D Perinatal Practice Guidelines

County shall comply with the perinatal program requirements as outlined in the Perinatal Practice Guidelines as listed online: <https://www.dhcs.ca.gov/individuals/Pages/Perinatal-Services.aspx>.

The County shall comply with the current version of these guidelines until new Perinatal Practice Guidelines are established and adopted. County must adhere to the Perinatal Practice Guidelines, regardless of whether the County exchanges perinatal funds for additional discretionary funds.

#### 45 C.F.R. § 96.126(e)(3)

(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:

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

**Findings:** The County did not make available evidence demonstrating Perinatal Outreach strategies for targeted populations include the following required element:

- Promoting awareness among injecting drug abusers about the relationship between injecting drug abuse and communicable diseases such as HIV.

#### **CD 3.3.1:**

SABG Application, Enclosure 2, II, 12

12. Tuberculosis Treatment

County shall ensure the following related to Tuberculosis (TB):

- A. Routinely make available TB services to each individual receiving treatment for AOD use and/or abuse.
- B. Reduce barriers to patients' accepting TB treatment.
- C. Develop strategies to improve follow-up monitoring, particularly after patients leave treatment, by disseminating information through educational bulletins and technical assistance.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

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

45 CFR § 96.127(a)(3)(i-ii)

Requirements regarding tuberculosis.

(a) States shall require any entity receiving amounts from the grant for operating a program of treatment for substance abuse to follow procedures developed by the principal agency of a State for substance abuse, in consultation with the State Medical Director for Substance Abuse Services, and in cooperation with the State Department of Health/Tuberculosis Control Officer, which address how the program -

(3) Will implement infection control procedures established by the principal agency of a State for substance abuse, in cooperation with the State Department of Health/Tuberculosis Control Officer, which are designed to prevent the transmission of tuberculosis, including the following:

(i) Screening of patients;

(ii) Identification of those individuals who are at high risk of becoming infected;

**Findings:** The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically Tuberculosis Treatment.

**CD 3.4.1:**

SABG Application, Enclosure 2, I, 2, D

D Perinatal Practice Guidelines

County shall comply with the perinatal program requirements as outlined in the Perinatal Practice Guidelines as listed online: <https://www.dhcs.ca.gov/individuals/Pages/Perinatal-Services.aspx>.

The County shall comply with the current version of these guidelines until new Perinatal Practice Guidelines are established and adopted. County must adhere to the Perinatal Practice Guidelines, regardless of whether the County exchanges perinatal funds for additional discretionary funds.

45 C.F.R. § 96.126(c)

(c) In carrying out subsection (b), the State shall establish a waiting list management program which provides systematic reporting of treatment demand. The State shall require that any program receiving funding from the grant, for the purposes of treating injecting drug abusers, establish a waiting list that includes a unique patient identifier for each injecting drug abuser seeking treatment including those receiving interim services, while awaiting admission to such treatment.

For individuals who cannot be placed in comprehensive treatment within 14 days, the State shall ensure that the program provide such individuals interim services as defined in § 96.121 and ensure that the programs develop a mechanism for maintaining contact with the individuals awaiting admission. The States shall also ensure that the programs consult the capacity management system as provided in paragraph (a) of this section so that patients on waiting lists are admitted at the earliest possible time to a program providing such treatment within reasonable geographic area.

**Findings:** The County did not make available evidence demonstrating a wait list is established that includes a unique identifier for each injecting drug abuser seeking treatment.

## 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 deficiency in regulations, standards or protocol requirements was identified:

### COMPLIANCE DEFICIENCY:

#### **CD 4.1.3:**

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 VI, A, 1, a-e

##### A. Case Management and Complementary Services

Except for early intervention programs, programs should provide or arrange for case management services for every youth in treatment. If the case manager function is provided directly by the treatment program, the case manager should:

1. Have training and skills in the following areas:
  - A. AOD treatment, an understanding of addiction, and the intergenerational nature of AOD abuse;
  - B. familiarity with community resources and other youth service systems (education, child welfare, juvenile justice, mental health, etc.);
  - C. physical and sexual abuse;
  - D. family dynamics; and,
  - E. legal issues (informed consent for minors, disclosure of confidential information, child abuse/neglect reporting requirements, and duty-to-warn issues).

**Findings:** The County did not make available evidence demonstrating that in youth treatment programs where the case manager function is provided; the case manager has the training and skills in the following areas:

- AOD treatment, an understanding of addiction, and the intergenerational nature of AOD abuse;
- Familiarity with community resources and other youth service systems (education, child welfare, juvenile justice, mental health, etc.);
- Physical and sexual abuse;
- Family dynamics; and,
- Legal issues (informed consent for minors, disclosure of confidential information, child abuse/neglect reporting requirements, and duty-to-warn issues).

## Category 5: DATA/CALOMS

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

### COMPLIANCE DEFICIENCIES:

#### **CD: 5.1.2:**

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

#### 2. 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.

The County’s Open Provider Report is not in compliance.

#### **CD: 5.1.3:**

##### SABG Application, Enclosure 2, III, 5, C

#### 5. Drug and Alcohol Treatment Access Report (DATAR)

The DATAR business rules and requirements are:

- C. The County shall ensure that all DATAR reports are submitted by either County-operated treatment services and by each subcontracted treatment provider to DHCS by the 10th of the month following the report activity month.

**Findings:** The County’s DATAR 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 deficiency in regulations, standards or protocol requirements was identified:

### COMPLIANCE DEFICIENCY:

#### **CD 6.1.3:**

#### SABG Application Enclosure 2, I, 3, A, 1, a-e

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:
  - a. Whether the quantity of work or services being performed conforms to Enclosure 3.
  - b. Whether the County has established and is monitoring appropriate quality standards.
  - c. Whether the County is abiding by all the terms and requirements of this Contract.
  - d. Whether the County is abiding by the terms of the Perinatal Practice Guidelines.
  - e. Whether the County conducted annual onsite monitoring reviews of services and subcontracted services for programmatic and fiscal requirements. County shall submit copy of its monitoring and audit reports to DHCS within two weeks of issuance. Reports shall be sent by secure, encrypted e-mail to:

SUDCountyReports@dhcs.ca.gov or

Audits and Investigations Division  
Medical Review Branch  
Department of Health Care Services  
PO Box 997413, MS-2703  
Sacramento, CA 95899-7413

**Findings:** The County did not make available evidence it conducts an onsite monitoring review of each County managed and County subcontracted program providing SABG funded services.

- The County monitored zero (0) of 37 SABG funded providers.

## **TECHNICAL ASSISTANCE**

San Bernardino County did not request Technical Assistance during this review.