

MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)

1.	County/City:	Alameda County
2.	POC Submitted for:	MHSA Performance Review
3.	Date of Audit/Performance Review	April 25-27, 2023
4.	Name of Preparer:	
5.	Preparer Contact Email:	
6.	Preparer Contact Telephone:	

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
7.	#1	Alameda County did not indicate the number of children, TAY, adults, and older adults to be served and the cost per person for Community Services and Supports (CSS), Prevention and Early Intervention (PEI) and Innovation (INN) programs/services	The County must indicate the number of children, TAY, adults, and older adults to be served and the cost per person for CSS, PEI and INN programs/services in each subsequent adopted Plan and	Alameda County, on its own, had previously noted this deficiency for the CSS component and has already included the number of clients to be served and cost per person for the CSS programs in the draft FY 23-26 Three Year Plan as can be seen here: https://acmhsa.org/wp-content/uploads/2023/07/MHSA2024PI_an_05.pdf starting on page 116. In addition to the CSS component, Alameda will include estimate numbers to be served in future years and cost per client for PEI and INN programming in the FY 24/25 Annual Update. Alameda expects to submit our FY 24/25 MHSA Annual Update by August 30, 2025 and will include page citations to

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		in the adopted FY 2020-23 Three-Year Program and Expenditure Plan (Plan) and FY 2022-23 Annual Update (Update). (Welfare and Institution Code (W&I Code) section 5847(e)).	Update, thereafter.	<p>identify the addressed finding upon submission.</p> <p>Alameda County utilizes an Administrative Plan checklist for regulatory compliance. The items listed in this finding have been highlighted to ensure changes are tracked and implemented in FY 24/25. See attached checklist. (The checklist was included with the original submission and is included again with the revised submission).</p> <p>Alameda will create an MHSA Administrative Plan Policy and Procedure (P&P) document that will highlight how the attached checklist will be utilized to ensure that these requirements will be performed on an ongoing basis. This P&P will be submitted to DHCS by December 31, 2023.</p>
8.	#2	Alameda County did not include a narrative analysis of the mental health needs of unserved, underserved/ inappropriately served, and fully	The County must include a narrative analysis of the mental health needs of unserved, underserved/ inappropriately served, and fully	<p>Alameda County will enhance and clearly document its demographic profile section in the FY 24/25 Plan Update to include a narrative analysis of mental health needs of unserved, underserved/inappropriately served, and fully served County residents who qualify for MHSA services.</p> <p>Alameda County would like to note that in the FY 2020-23 Three Year Plan (page 43-45)</p>

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		served County residents who qualify for MHSA services in the adopted FY 2020-23 Plan. (California Code Regulations (Cal. Code Regs.), tit. 9, § 3650(a)(1)(A)).	served County residents who qualify for MHSA services in each subsequent adopted Plan, thereafter	<p>MHSA2020Plan FINAL WEB update 02.pdf (acmhsa.org) the FY 22/23 Plan Update (page 37-39) MHSA2023Plan FINAL 02.pdf (acmhsa.org) and the FY 2023-26 draft Three Year Plan (page 45-49) MHSA2024Plan 05.pdf (acmhsa.org)</p> <p>we included data from the California Health Information Survey (CHIS) and Medi-Cal penetration/utilization rates by age, language and race/ethnicity to document and analyze need. Alameda expects to submit our FY 24/25 MHSA Annual Update by August 30, 2025 and will include page citations to identify the addressed finding upon submission.</p> <p>Alameda will create an MHSA Administrative Plan Policy and Procedure (P&P) document that will highlight how the attached checklist will be utilized to ensure that these requirements will be performed on an ongoing basis. This P&P will be submitted to DHCS by December 31, 2023.</p>
9.	2a	Alameda County also did not identify the number of children/TAY/adult/ and older adults by gender, race/ethnicity, and	The County must identify the number of children, TAY, adult, and older adults by gender, race/ethnicity, and primary language	<p>Alameda County will enhance and clearly document its demographic profile section in the FY 24/25 Plan Update to include a more expansive narrative analysis of mental health needs of Alameda County residents, by the number of children, TAY, adult, and older adults by gender, race/ethnicity, and primary language who qualify for MHSA services.</p> <p>Alameda County would like to note that in the FY 2020-23</p>

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		primary language in the narrative analysis in the adopted FY 2020-23 Plan. (Cal. Code Regs., tit. 9, § 3650(a)(1)(A)).	in the narrative analysis in each subsequent adopted Plan, thereafter.	<p>Three Year Plan (page 43-45) MHSA2020Plan FINAL WEB update 02.pdf (acmhsa.org) the FY 22/23 Plan Update (page 37-39) MHSA2023Plan FINAL 02.pdf (acmhsa.org) and the FY 2023-26 draft Three Year Plan (page 45-49) MHSA2024Plan 05.pdf (acmhsa.org) we included data from the California Health Information Survey (CHIS) and Medi-Cal penetration /utilization rates by age, language and race/ethnicity to document and analyze need.</p> <p>Alameda expects to submit our FY 24/25 MHSA Annual Update by August 30, 2025 and will include page citations to identify the addressed finding upon submission.</p> <p>Alameda will create an MHSA Administrative Plan Policy and Procedure (P&P) document that will highlight how the attached checklist will be utilized to ensure that these requirements will be performed on an ongoing basis. This P&P will be submitted to DHCS by December 31, 2023.</p>
10.	#3	Alameda County did not have evidence that a Full Service Partnership	The County must enter an FSP agreement with each client served	In Alameda County the agencies that operate the Full Service Partnership programs mainly utilize their own consent to treatment forms as the Partnership Agreement document, due to vague language in

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		<p>(FSP) agreement with each client served under the FSP Service Category, and when appropriate, with the client's family was entered into with the County. (Cal. Code of Regs., tit. 9, § 3620(e)).</p>	<p>under the FSP Service Category, and when appropriate the client's family.</p>	<p>Cal. Code of Regs., tit. 9, § 3620(e)) that states a Partnership Agreement must be signed, but does not provide specific language for the agreement.</p> <p>To address this finding, Alameda County has been in dialog with the Department of Health Care Services (DHCS) staff since July 25, 2023 requesting technical assistance and appropriate Partnership Agreement language so as to include it in our contracted agencies consent forms that would satisfy this regulation.</p> <p>On 8/24/23, Alameda County received technical assistance from DHCS regarding appropriate Partnership Agreement language for the county's FSP Consent to Treatment forms.</p> <p>Alameda is currently updating its Full Service Partnership P&P to include the new information so as to ensure that these requirements re: Partnership Agreement language will be performed on an ongoing basis. This P&P will be updated and submitted to DHCS by December 31, 2023.</p> <p>Alameda will also submit Evidence of the new Consent to Treatment forms with the updated language per FSP by December 31, 2023.</p>

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				Alameda expects to submit our FY 24/25 MHSA Annual Update by August 30, 2025
11.	#4	Alameda County did not provide an estimate of the number of clients, in each age group, to be served in the FSP category for each fiscal year of the adopted FY 2020-23 Plan. (Cal. Code Regs., tit. 9, § 3650(a)(3)).	The County must provide an estimate of the number of clients, in each age group, to be served in the FSP service category for each fiscal year of the Plan, in each subsequent adopted Plan thereafter.	<p>Alameda, on its own, had previously noted this deficiency for the FSP section and has already included the number of clients to be served by each age-based FSP for each fiscal year of the draft FY 23-26 Three Year Plan as can be seen here: https://acmhsa.org/wp-content/uploads/2023/07/MHSA2024Plan_05.pdf starting on page 116 under item VII. Projections of Clients to be Served.</p> <p>Alameda would like to note that each FSP highlights the target age group to be served in the beginning portion of each FSP reporting template (see gray box starting on page 114). The number of clients served for future years is listed at the end of each FSP reporting template as item VII, see page 116 for the first FSP listed in the section on FSPs. https://acmhsa.org/wp-content/uploads/2023/07/MHSA2024Plan_05.pdf</p> <p>Alameda expects to submit our FY 24/25 MHSA Annual Update by August 30, 2025 and will include page citations to identify the addressed finding upon submission.</p>

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#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
				Alameda will create an MHSA Administrative Plan Policy and Procedure (P&P) document that will highlight how the attached checklist will be utilized to ensure that these requirements will be performed on an ongoing basis. This P&P will be submitted to DHCS by December 31, 2023.

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Instructions: Complete the MHSA Plan of Correction (POC) to address Findings from the Fiscal Audit Report or Performance Review Report.

Row 1: Enter County/City name.

Row 2: Select from the drop down menu if this POC is submitted in response to a Fiscal Audit or a Performance Review.

Row 3: Enter the date that the Fiscal Audit or Performance Review was conducted.

Row 4: Enter the name of the person who prepared the Plan of Correction or is responsible for responding to inquiries about the Plan of Correction.

Row 5: Enter the contact email address of the person who prepared the Plan of Correction or is responsible for responding to inquiries about the Plan of Correction.

Row 6: Enter the contact telephone number of the person who prepared the Plan of Correction or is responsible for responding to inquiries about the Plan of Correction.

Rows 7-28, Column A: Enter the number of the specific Finding from the Fiscal Audit Report or Performance Review Report.

Rows 7-28, Column B: Enter the specific Finding from the Fiscal Audit Report or Performance Review Report.

Rows 7-28, Column C: Enter the specific recommendation from the Fiscal Audit Report or Performance Review Report.

Rows 7-28, Column D: Enter the description of the actions taken to correct the Finding. Must include 1) timeline for implementation and/or completion of actions; 2) proposed (or actual) evidence of correction to be submitted to DHCS.

This completed form must be submitted to MHSA@dhcs.ca.gov.