

Mental Health Services Act (MHSA) Performance Contract Review Report
Contra Costa County Program Review
July 24, 2020

Finding #1: Contra Costa County's Community Services and Supports (CSS) programs/services were not consistent with the approved FY 2017-20 Three-Year Program and Expenditure Plan (Plan), FY 2018-19 Annual Update (Update), and FY 2018-19 Annual Revenue and Expenditure Report (ARER). Specifically, Adult Mental Health Clinic Support, Wellness and Recovery Centers, Older Adult Mental Health Program, Children's Wraparound Support, Miller Wellness Center, Concord Health Center, Liaison Staff, Clinic Support, Forensic Team, and Quality Assurance are listed in the approved FY 2018-19 Update. These programs are not listed on the FY 2018-19 ARER. The program titled System Development is not listed on the approved FY 2017-20 Plan and FY 2018-19 Update; however is on the FY 2018-19 ARER. (Welfare and Institutions Code (W&I Code) section 5892(g)); California Code of Regulations, Title 9, section 3320(a).

Recommendation #1: The County must ensure that the program names listed in the CSS component section of the approved FY 2020-23 Plan and FY 2019-20 Update, and each subsequent year thereafter, are consistent with the names in the approved ARER. The budget in the approved Plan and Update should be consistent with the approved ARER. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures. Any discrepancies or name changes must be explained in the approved Plan and Update.

Finding #2: Contra Costa County did not provide an estimate of the number of clients to be served each year in each Full Service Partnership (FSP) targeted age group in the approved FY 2017-20 Plan. (Cal. Code of Regs., tit. 9, § 3650(a)(3)).

Recommendation #2: The County shall provide an estimate of the number of FSP clients the County plans to serve in each age group: children (0-15), transitional age youth (16-25), adult (26-59), and older adult (60 and older) for each fiscal year of the approved FY 2020-23 Plan and each subsequent Plan thereafter.

Finding #3: Contra Costa County lacked summarized data for each Prevention and Early Intervention (PEI) program in the approved FY 2018-19 Update. (Cal. Code of Regs., tit. 9, §§ 3560.010, 3560.020).

Recommendation #3: The County must include all Prevention and Early Intervention Report data for each PEI program component (Early Intervention, Outreach for Increasing recognition of Early Signs of Mental Illness, Prevention, Stigma and Discrimination Reduction, Access and Linkage to Treatment, and Suicide Prevention) required by the Cal. Code of Regs., tit 9, § 3560.010 in the approved FY 2019-20 Update and each subsequent Update thereafter.

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Finding #4: Contra Costa County's Innovation (INN) programs/services were not consistent with the approved FY 2017-20 Plan, FY 2018-19 Update, and FY 2018-19 ARER. Specifically, the program Emerging Projects is listed in the approved FY 2018-19 Update; however, is not listed in the FY 2018-19 ARER. The programs CBSST (Emerging Project), CORE (Emerging Project), and LGBTQ – Youth are not listed on the approved FY 2017-20 Plan and FY 18-19 Update. These programs are listed on the FY 2018-19 ARER. (W&I Code section 5892; Cal. Code of Regs., tit. 9, § 3320(a).

Recommendation #4: The County must ensure that the program names listed in the INN component section of the approved FY 2020-23 Plan, FY 2019-20 Update, and each subsequent year thereafter, are consistent with the names in the approved ARER. The budget in the approved Plan and Update 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 and Update.

CONCLUSION

The Department of Health Care Services' MHSA Program Monitoring Unit conducted a program review of the Contra Costa County Behavioral Health Services' MHSA Program on July 24, 2020. A challenge Contra Costa has identified is their need for more crisis intervention in the community. The dialogue started with 5 central policy departments coming together in conversation on how to prevent and handle escalating situations. At that time, the COVID pandemic began, followed by the national movement for social justice and equity. Now, partnering with law enforcement; those conversations have picked up speed and are on-going. The county currently has crisis response teams, but there is need for increased funding and capacity.

During the community planning process, a formal stakeholders group identified and prioritized 3 different topics: permanent supportive housing, suicide prevention and early childhood mental health needs. In addition to the formal planning process, there was also an informal planning process for those not involved in the formal group. This informal group also focused on the need for housing, not necessarily permanent or transitional; but more therapeutic. The county has identified the importance of the collaborative voice of the community.

Another identified success has been the transition to the new electronic health record system, allowing ease of use and greater ability to collect data.

Contra County currently posts on their website, videos of the different meetings/forums held in the county. These provide an insider's view of how well the meetings are attended and the brainstorming process (in the breakout groups) for soliciting ideas on

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how to improve MH services in the community, from the community. The meeting host introduced each meeting with an open invite to the participants to attend upcoming meetings. This was a common theme and a unique way of sharing MHSA with the community along with calendar events.

The website also included a resource directory of various programs/services available throughout the county. In addition, the County has developed a thorough Full Service Partnership (FSP) Handbook for their personal service coordinators which provides detailed information of what the FSP entails; and an excellent reference for guidance and necessary forms. These strategies show the county's committed effort in engaging and addressing the needs of partners and the community.