

Inyo County Plan of Correction
Per the County Performance Contract Review Report for Review Dates August 3, 2021

Finding #, Suggested Improvement # or Technical Assistance #	Finding, Suggested Improvement or Technical Assistance	Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)		Score – Comments/Notes FOR DHCS USE ONLY
Finding #1	Inyo County did not submit the FY 2019-20 Annual MHSA Revenue and Expenditure Report (ARER) to the Department of Health Care Services (DHCS) by January 31, following the end of the reporting fiscal year. As of June 9, 2021 the ARER had not been submitted to DHCS. (California Code of Regulations, title 9, § section 3510(a)).	<p>Recommendation #1:</p> <p>The County must submit the FY 2020-21 ARER by January 31st following the end of the fiscal year to DHCS and for each subsequent ARER thereafter. Failure to submit the ARER in a timely manner may result in a withholding of twenty-five (25) percent of each monthly distribution to the County. (Cal. Code Regs., tit. 9, § 3510.005(d)).</p>	<p>Senior Management Analyst and Mental Health Administrative Analyst shall develop a procedure on how to do the CMH and MHSA cost reports by February 15, 2022. This procedure shall include monthly tasks so finalizing the cost reports and RER can be submitted by due date; and when a revision will be needed for the RER.</p> <p>The County will submit the P&P to DHCS by August 1, 2022.</p> <p>The County will submit the FY 20-21 ARER no later than January 31, 2023.</p>	The submitted plan is accepted.
Finding #2	Inyo County's FY 2019-20 ARER, or any previous fiscal year ARER's, was not posted	<p>Recommendation #2:</p> <p>The County must post a copy of the FY 2020-</p>	Senior Management Analyst and Mental Health Administrative Analyst shall develop a procedure on how to do the CMH and MHSA	The submitted plan is accepted.

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	to the county's website. (Cal. Code Regs., tit. 9, § 3510.010(b)(1); Welfare and Institutions Code (W&I) section 5899))	21 ARER to the county's website within 30 days of submitting to DHCS and for each subsequent ARER thereafter.	cost reports which shall include posting the ARER on our county's website by February 15, 2022. This procedure shall include monthly tasks so finalizing the cost reports and RER can be submitted by due date; and when a revision will be needed for the RER. The County will provide evidence to DHCS by August 1, 2022.	
Finding #3	Inyo County did not submit the adopted FY 2019-20 Annual Update (Update) to DHCS within 30 days of adoption by the County Board of Supervisors (BOS). The FY 2019-20 Update was adopted by the BOS on May 28, 2019 and there was no record of submission to DHCS. On page nine of the adopted FY 2019-20 Update the county indicates the adopted Update was sent	Recommendation #3: The County must submit to DHCS and MHSOAC within 30 days of adoption by the county Board of Supervisors the adopted FY 2020-23 Three-Year Program and Expenditure Plan (Plan), FY 2021-22 Update and each subsequent Plan and Update thereafter.	Inyo County will provide a Policy and Procedure for submitting the Three-Year Workplan to DHCS by August 1, 2022. The County will commence with the Community Planning Process (CPP) in January of each Fiscal Year beginning in January of 2022 to include the following: 1.) Monthly stakeholder meetings to include hospital emergency room staff, law enforcement, Toiyabe Family Services, probation	The submitted plan is accepted.

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	to the Mental Health Services Oversight and Accountability Commission (MHSOAC) only; unaware the adopted Update needed to be submitted to DHCS. (W&I Code section 5847(a)).		<p>department, school counseling and teaching staff, jail and re-entry staff to determine needs for chronically mentally ill and/or substance and justice involved community members to identify needs and gaps in services</p> <p>2.) Ongoing: Monthly behavioral health advisory board meetings to receive input from Board members and participants as to existing program efficacy</p> <p>3.) March of each FY: Community needs assessment surveys to community members and community partners to identify needs and gaps in services</p>	
Finding #4	Inyo County did not include a description of County demographics, including, but not limited to: size of the County, threshold languages, unique characteristics,	<p>Recommendation #4:</p> <p>The County must include a description of County demographics, including, but not limited to: size of the</p>	The County has updated County demographics and will include them in the 2022-2025 Three-year plan and Annual updates per Policies and Procedures per CA WIC Section 5847. The County will submit a Policy and Procedure and	The submitted plan is accepted.

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	age, gender, and race/ethnicity in the adopted FY 2019-20 Update. Although the County did include county demographics in the adopted FY 2017-20 Plan, there was not a description in the adopted FY 2019-20 Update. (Cal. Code of Regs., tit. 9, § 3300, MHSOAC FY 2015-2016 MHSA Annual Update Instructions (pg 5)).	County, threshold languages, unique characteristics, age, gender, and race/ethnicity in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.	a copy of the County demographics to DHCS by August 1, 2022.	
Finding #5	Inyo County lacked documentation of achievement of performance outcomes for Community Services and Support (CSS) and Innovation (INN) programs/services in the adopted FY 2019-20 Update. (County Performance Contract (6.)(A.)(5)(d.); W&I Code section 5848(c)).	Recommendation #5: The County must ensure program goals are established and data is collected and analyzed to report on its achievement of performance outcomes for CSS, INN and Prevention and Early Intervention (PEI) programs/services provided in the adopted	The County has a written Policy and Procedure to include Reporting Guidelines per 9 CCR 3530.30 for gathering and analyzing data for efficacy of CSS, PEI, and INN services. The Reporting Guideline's procedures will be included in the 2022-25 Three-Year Plan for each service area. The County will provide evidence to DHCS by August 1, 2022.	The submitted plan is accepted.

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		FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter	
Finding #6	Inyo County's adopted FY 2019-20 Update 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, program planning and implementation, monitoring, quality improvement, evaluation, and budget allocations. Although the County indicates in the adopted FY 2019-20 Update that basic education regarding mental health policy, program planning and implementation,	Recommendation #6: 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	<ol style="list-style-type: none"> 1.) The County has a written Policy and Procedure describing the Community Planning Process (CPP) pursuant to CA WIC 5848 (a- f) to include procedures for planning and implementation, quality improvement, evaluation, and budget allocations. 2.) The County will include CPP procedures in the 2022-25 Three-Year Plan. 3.) The County has a written Policy and procedure describing MHSA Foundational Precepts and Stakeholder Engagement for development of services and programs. 4.) Procedures for Stakeholder Engagement will be included in the 2022-2025 Three-Year Plan.
			The submitted plan is accepted.

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	monitoring and quality improvement, evaluation, and fiscal and budget components is provided, there is not a description of how stakeholder involvement demonstrates a partnership with constituents and stakeholders throughout the process. (W&I Code section 5848; MHSOAC FY 2015-16 MHSA Annual Update Instructions (pg 3))	subsequent Plan and Update thereafter	<p>5.) The County has records of stakeholder meetings and has a calendar for monthly meetings and QIC meetings for the purposes on continuous monitoring</p> <p>The County will provide evidence to DHCS by August 1, 2022.</p>	
Finding #7	Inyo County did not consistently report cost per person for CSS programs for adults and seniors, PEI programs and services for children, and INN programs in the adopted FY 2019-20 Update. Specifically, the County did not indicate cost per person for the Wellness Center, CSS Outreach and	<p>Recommendation #7:</p> <p>The County must report 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</p>	<p>The County has a written Policy and Procedure Reporting Cost per Person for CSS programs (FSP, PEI, General Service programs) and will report the data in the 2022-2025 Three-Year Plan and annual updates pursuant to CA WIC 5800, Part 3, 3.2, 5830, Part 3.6, 5840, Part 3.6, and Part 4, 5850.</p> <p>ICBHS will ensure that the cost per person is included for CSS programs, PEI programs, and INN</p>	The submitted plan is accepted.

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	Engagement Activities, General System Development Program (GSD), School-Based Early Intervention – North Star Counseling, Latinx Outreach Program or the Community Care Collaboration Project. (W&I Code section 5847(e)).		<p>projects in subsequent MHSA Plans and Updates hereafter.</p> <p>ICBHS will develop a policy and procedure to ensure that reporting cost per person for PEI and INN programs will be performed on an ongoing basis.</p> <p>The County will provide evidence to DHCS by August 1, 2022.</p>	
Finding #8	Inyo County did not provide an estimate of the number of clients, in each age group, to be served in the Full Service Partnership (FSP) category in the adopted FY 2019-20 Update. (Cal. Code Regs., tit. 9, § 3650(a)(3); W&I Code section 5847(e)).	<p>Recommendation #8:</p> <p>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 years and older) for each fiscal year in the adopted FY 2020-23 Plan, FY 2021-22</p>	<p>1.) The County has a written Policy and Procedure for providing an estimate for number of FSP clients to be served in each age group pursuant to CCR 3650(a)(3).</p> <p>2.) The County will include an estimate of the numbers of FSP clients in each age category in the 2022-2025 Three-Year Plan and each Annual Update.</p>	The submitted plan is accepted.

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		Update and each subsequent Plan and Update thereafter	3.) The 2022-2025 Three-Year Plan will be submitted to DHCS with evidence included by October 1, 2022.	
Finding #9	Inyo County did not have an Access and Linkage to Treatment Program in the PEI component of the adopted FY 2019-20 Update. (Cal. Code Regs., tit. 9, § 3705(a)(4); W&I Code section 5840).	<p>Recommendation #9a:</p> <p>The County must have at least one of each of these programs: Early Intervention Program, Outreach for Increasing Recognition of Early Signs of Mental Illness Program, Prevention Program, Stigma and Discrimination Reduction Program, and Access and Linkage to Treatment Program listed in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter.</p> <p>Recommendation #9b:</p>	<p>1.) In its 2022-2025 Three year- Plan, the County will include at least one Prevention program, one Early Intervention Program, and a stigma and Discrimination and Reduction program, and a procedure for Access and Linkage to treatment programs pursuant to 9 CCR 3705 (a), 9 CCR 3710, 9 CCR 3710, 9 CCR, 3715, 9 CCR 3720, 9 CCR 3750, and 9 CCR 3755.</p> <p>2.) The County will adopt NAMI's Stigma and Discrimination Reduction program "Ending the Silence" into its existing PEI programming with the school districts and will adopt the stigma and discrimination</p>	The submitted plan is accepted.

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		<p>A Small county may opt out of the requirement to have at least one Prevention Program if the small county obtains a declaration from the Board of Supervisors that the county cannot meet this requirement. A small county that opts out of the requirement must include in their Plan and Update, documentation describing the rationale for the county's decision and how the county ensured meaningful stakeholder involvement in the decision to opt out. (Cal. Code Regs., tit. 9, § 3705).</p> <p>Recommendation #9c:</p>	<p>reduction core principles according to the DHCS strategic plan.</p> <p>The County will provide evidence to DHCS by August 1, 2022.</p>	

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		The County may combine and or integrate Early Intervention Program(s), Outreach for Increasing Recognition of Early Signs of Mental Illness Program(s), Prevention Program(s), Access and Linkage to Treatment Program(s), and Stigma and Discrimination Reduction Program(s) per Cal. Code of Regs., tit. 9, § 3705(c). If the County does combine and or integrate PEI programs, the Plan and Update requirements pursuant to Cal. Code of Regs., tit. 9. § 3755(o) must be met.		
Finding #10	Inyo County did not specify the methods and activities to be used in each of their Stigma and Discrimination Reduction	Recommendation #10: The County must include a description specifying the methods	ICBHS will provide detailed program descriptions on the methods and activities to be used in each of their Stigma and Discrimination Reduction Programs	The submitted plan is accepted.

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	Programs; to change attitudes, knowledge, and/or behavior regarding being diagnosed with mental illness, having mental illness and/or seeking mental health services, including timeframes for measurement in the adopted FY 2019-20 Update.(Cal. Code Regs., tit. 9, §§ 3750(d), 3755(f)(3)).	and activities to be used to measure changes in attitudes, knowledge and or behavior regarding the diagnosed mental illness, having mental illness and or seeking mental health needs for each standalone PEI Stigma and Discrimination Reduction Program in the adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent Plan and Update thereafter	within the subsequent FY 2022-25 Three-Year Plan and Annual Update. ICBHS will provide approved policies and procedures that will ensure that these requirements will be performed on an ongoing basis. The County will provide evidence to DHCS by October 1, 2022.	
Suggested Improvement #1	MHSA Plans and Updates	Suggested Improvement #1a: DHCS recommends the County post the adopted Plans and Updates on the County's website after submission to DHCS and MHSOAC. The FY 2017-20 Plan and FY	1a: The County will post all Plans to the website the same day it is sent to DHCS/MHOAC. Drafts will not be posted on the website. 1b: The County will review the CPPP and ensure that meaningful stakeholder input is reflective of our diversity by using provided surveys during the planning process. The County will provide policies and procedures that will describe	The submitted plan is accepted.

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		<p>2019-20 Update located on the County's website were both drafts at the time of the review.</p> <p>Suggested Improvement #1b:</p> <p>DHCS recommends the County collect stakeholder demographic data utilizing Community Program Planning Process (CPPP) related surveys and report this information in the adopted Plans and Updates to ensure the required stakeholders are included and reflect the diversity of the County. The County may redact demographic information that may be considered identifiable.</p>	<p>stakeholder engagement and ensure that final adopted ARERs are posted to the website moving forward. The County will provide these P&Ps to DHCS by August 1, 2022.</p>	

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Suggested Improvement #2	MHSA Transparency and Consistency	Suggested Improvement #2a: DHCS recommends programs identified in the adopted Plan and Update (e.g. has distinct program descriptions) match program names and services consistently within the adopted Plan, Update, budget and ARER. The ARER should be consistent with the budget in the adopted Plan and Update. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures	2a: Programs will be clearly identified in the adopted Plan and Update (e.g. has distinct program descriptions) match program names and services consistently within the adopted Plan, Update, budget and ARER. Program Staff will work with Fiscal to ensure that we are using the same language. The ARER should be consistent with the budget in the adopted Plan and Update. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures ARER will match the budget in the 2022 Three year workplan and program component names (CSS and sub-categories; PEI, WET, CFTN, and INN) will match the budget line items in the ARER. The County will provide evidence of Program Staff working with Fiscal to ensure program names are	The submitted plan is accepted.

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		<p>consistent to DHCS by August 1, 2022.</p> <p>The 2022-2025 Three-Year Plan will be submitted to DHCS by October 1, 2022.</p> <p>The County will submit the FY 20-21 ARER no later than January 31, 2023.</p>	
Suggested Improvement #3	Staffing	<p>Suggested Improvement 3a:</p> <p>DHCS recommends the County appoint a full-time and distinct MHSA Coordinator to sufficiently perform the tasks necessary to ensure compliance with MHSA statutes, regulations and the Performance Contract</p>	<p>The submitted plan is accepted.</p>
Technical Assistance #1	The adopted FY 2020-23 Plan, FY 2021-22 Update and each subsequent	The adopted FY 2020-23 Plan, FY 2021-22 Update and each	<p>The Plan will contain a budget summary, for each FY, including</p> <p>The submitted plan is accepted.</p>

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	Plan and Update thereafter, must contain a budget summary for each fiscal year, including the total budgeted for each funding category. The adopted FY 2017-20 Plan did not include the budget summary. (Cal. Code Regs., tit. 9, §§ 3650(a)(6)(C), 3755(l), 3820(e), 3930(d); W&I Code Section 5847(e)).	subsequent Plan and Update thereafter, must contain a budget summary for each fiscal year, including the total budgeted for each funding category. The adopted FY 2017-20 Plan did not include the budget summary. (Cal. Code Regs., tit. 9, §§ 3650(a)(6)(C), 3755(l), 3820(e), 3930(d); W&I Code Section 5847(e))	the total budgeted for each funding category. Fiscal Manager will ensure that the 2022-2025 Three-Year Workplan will have a budget summary reflecting total budgeted for each funding category	
Technical Assistance #2	The adopted FY 2020-23 Plan must include an assessment of its capacity to implement the proposed programs/services. (Cal. Code Regs. tit. 9, § 3650(a)(5)). a. The strengths and limitations of the county and service providers that impact their ability to meet the needs of racially and ethnically	The adopted FY 2020-23 Plan must include an assessment of its capacity to implement the proposed programs/services. (Cal. Code Regs. tit. 9, § 3650(a)(5)). a. The strengths and limitations of the county and service providers that impact their ability to meet the needs of racially and ethnically	ICBHS is in the process of developing the Three-Year-Plan which will include an assessment of Inyo County's capacity to implement proposed services pursuant to 9 CCR 3650 (a)(5).	The submitted plan is accepted.

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	diverse populations. The evaluation should include an assessment of bilingual proficiency in threshold languages. b. Percentages of diverse cultural, racial/ethnic and linguistic groups represented among direct service providers, as compared to percentage of the total population needing services and the total population being served. c. Identification of possible barriers to implementing the proposed programs/services and methods of addressing these barriers.	diverse populations. The evaluation should include an assessment of bilingual proficiency in threshold languages. b. Percentages of diverse cultural, racial/ethnic and linguistic groups represented among direct service providers, as compared to percentage of the total population needing services and the total population being served. c. Identification of possible barriers to implementing the proposed programs/services and methods of addressing these barriers.	