

Mental Health Services Act (MHSA) Performance Review Report
Inyo County Program Review
January 16, 2024

FINDINGS

This program review consists of a review of Inyo County's Fiscal Year (FY) 2022-25 Three-Year Program and Expenditure Plan (Plan).

Finding #1: Inyo County did not include any substantive written recommendations for revisions received during the 30-day comment period in the adopted Fiscal Year (FY) 2022-25 Three-Year Program and Expenditure Plan (Plan). The county indicated that input on the FY 2023-25 Plan will be reviewed prior to submission to the County Board of Supervisors (BOS) and the California Mental Health Services Oversight and Accountability Commission, (MHSOAC). However, the Plan was not updated with the correct FY date (should have been FY 2022-25) as well as any substantive written recommendations for revisions received during the 30-day comment period. (Welfare and Institution Code (W&I Code) section 5848(b)).

Recommendation #1: The County must include any substantive written recommendations for revisions received during the 30-day comment period in each subsequent adopted Plan and Annual Update (Update) thereafter. If no recommendations for revisions received, identify no recommendations received in the Plan or Update.

Finding #2: Inyo County did not summarize and analyze the recommended revisions received during the 30-day public comment period in the adopted FY 2022-25 Plan. (California Code of Regulations (Cal. Code Regs.), title (tit.) 9, section (§) 3315(a)(3)).

Recommendation #2: The County must summarize and analyze the recommended revisions received during the 30-day public comment period in each subsequent adopted Plan and Update thereafter.

Finding #3: Inyo County did not include a description of substantive changes made to Plan/Update that was circulated in the adopted FY 2022-25 Plan. (Cal. Code Regs., tit. 9, § 3315(a)(4))

Recommendation #3: The County must include a description of any substantive changes made to each subsequent adopted Plan and Update thereafter that was circulated. If no changes made, identify no changes made in the Plan or Update.

Finding #4: Inyo County 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: monitoring, evaluation, and budget allocations in the adopted FY 2022-25 Plan. (W&I Code section 5848(a))

Recommendation #4: The County must include a description of how stakeholder involvement demonstrates a partnership with constituents and stakeholders throughout

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the process that includes meaningful stakeholder involvement on mental health policy, program planning and implementation, monitoring, quality improvement, evaluation, and budget allocations in each subsequent adopted Plan and Update thereafter.

Finding #5: Inyo County did not submit the adopted FY 2022-25 Plan and/or Update within 30 days after adoption. The FY 2022-25 Plan was adopted by the BOS on July 18, 2023, and submitted to the Department of Health Care Services (DHCS) on October 22, 2023. (W&I Code Section 5847(a)).

Recommendation #5: The County must submit the adopted MHSA Plan and/or Update to DHCS within 30 days after adoption for each subsequent adopted Plan and Update thereafter.

Finding #6: Inyo County did not include a narrative analysis of the mental health needs of unserved, underserved/ inappropriately served, and fully served County residents who qualify for MHSA service in the adopted FY 2022-25 Plan. (Cal. Code Regs., tit. 9, § 3650(a)(1)(A)).

Recommendation #6: The County must include a narrative analysis of the mental health needs of unserved, underserved/ inappropriately served, and fully served County residents who qualify for MHSA services each subsequent adopted Plan thereafter.

Finding #7: Inyo County did not identify the number of children, Transition-age youth (TAY), adult, and Older Adults by gender, race/ethnicity, and primary language in the narrative analysis (see above finding) of the mental health needs of unserved, underserved/ inappropriately served, and fully served county residents who qualify for MHSA services in the adopted FY 2022-25 Plan. (Cal. Code Regs., tit. 9, § 3650(a)(1)(A)).

Recommendation #7: The County must include identification on the number of children, TAY, adult, and older adults by gender, race/ethnicity, and primary language in the narrative analysis of the mental health needs of unserved, underserved/ inappropriately served, and fully served county residents who qualify for MHSA services in each subsequent adopted Plan thereafter.

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 category for each fiscal year of the adopted FY 2022-25 Plan. The county indicated that they estimate to serve twelve clients per month, however, does not clearly identify the clients by age group or for each fiscal year of the Plan. (Cal. Code of Regs., tit. 9, § 3650(a)(3)).

Recommendation #8: 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.

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Finding #9: Inyo County did not provide evidence of a FSP Partnership Agreement. (Cal. Code of Regs., tit. 9, § 3620(e)).

Recommendation #9: The County shall enter a FSP agreement between their client and when appropriate the client's family, and the Personal Service Coordinator/Case Manager for each client served under the FSP service category for each subsequent client and client's family thereafter. DHCS defines an agreement as a signed agreement between the client, and when appropriate the client's family, and the Personal Service Coordinator/Case Manager.

Finding #10: Inyo County did not indicate the number of children, TAY, adults, and older adults to be served, and did not provide the cost per person for Prevention and Early Intervention (PEI) and Innovation (INN) in the adopted FY 2022-25 Plan. The County indicates the cost per person for the Community Services and Support (CSS) category, however, does not indicate the cost per person for each age group. The County does not have an approved INN project, therefore will not have an estimated number per age group and cost per person. (W&I Code section 5847(e)).

Recommendation #10: The County must indicate the number of children, TAY, adults, and older adults to be served, and indicate the cost per person for CSS, PEI, and INN, in each subsequent adopted Plan and Update thereafter.

Finding #11: Inyo County did not include documentation of achievement in performance outcomes for CSS and PEI programs in the adopted FY 2022-25 Plan. The County does not have an approved INN project, therefore will not have achievement in performance outcomes for INN. (W&I Code section 5848 (c); County Performance Contract (6)(A)(5)(d)).

Recommendation #11: The County must include documentation of achievement in performance outcomes for CSS, PEI, and INN programs in each subsequent adopted Plan and Update thereafter.

Finding #12: Inyo County did not have at least one of each PEI program in the PEI component of the adopted FY 2022-25 Plan:

- Early Intervention Program
 - Outreach for Increasing Recognition of Early Signs of Mental Illness Program
 - Prevention Program
 - Stigma and Discrimination Reduction Program
 - Access and Linkage to Treatment Program
- (W&I Code section 5840; Cal. Code Regs., tit. 9, §§ 3705(a), 3755)
- Suicide Prevention Program (optional)
- (Cal. Code Regs., tit. 9, § 3705(b)(1))

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Recommendation #12: The County must have at least one of each PEI programs in the PEI component: Early Intervention Program, Outreach for Increasing Recognition of Early Signs of Mental Illness Program, Prevention Program, Stigma and Discrimination Reduction Program and Access to Linkage to Treatment Program in each subsequent adopted Plan and Update thereafter.

Finding #13: Inyo County did not include a description of each Stigma & Discrimination Reduction program and specify the methods and activities to be used to change attitudes, knowledge, and/or behavior regarding being diagnosed with mental illness, having mental illness and/or seeking mental health services in the adopted FY 2022-25 Plan. (Cal. Code Regs., tit. 9, § 3755(f)(3)).

Recommendation #13: The County must include a description of each Stigma & Discrimination Reduction program and specify the methods and activities to be used to change attitudes, knowledge, and/or behavior regarding being diagnosed with mental illness, having mental illness and/or seeking mental health services in each subsequent adopted Plan and Update thereafter.

Finding #14: Inyo County did not explain how each Access and Linkage to Treatment program for individuals, and, as applicable, their parents, caregivers, or other family members, will be linked to county mental health services, a primary care provider, or other mental health treatment in the Plan/Update; and how the program will follow up with the referral to support engagement in treatment in the adopted FY 2022-25 Plan. (Cal. Code Regs., tit. 9, §§ 3755(h)(4), 3755(h)(5)).

Recommendation #14: The County must explain how individuals, and, as applicable, their parents, caregivers, or other family members, will be linked to county mental health services, a primary care provider, or other mental health treatment; and how the program will follow up with the referral to support engagement in treatment each subsequent adopted Plan and Update thereafter.

Finding #15: Inyo County's adopted FY 2022-25 Plan does not contain a budget summary for each fiscal year, including the total budgeted for each funding category of CSS, PEI, INN, Workforce Education and Training (WET), Capital Facilities (CF), and Technological Needs (TN). (Cal. Code Regs., tit. 9, §§ 3650(a)(6)(c), 3755(l), 3930(d), 3820(e), IN 08-09 Enclosure 2, IN 08-09 Part IV).

Recommendation #15: The County must include a budget summary for each fiscal year, including the total budgeted for each funding category of CSS, PEI, INN, WET, CF, and TN in each subsequent adopted Plan and Update thereafter.

Finding #16: Inyo County did not include the Annual PEI report as a part of the adopted FY 2022-25 Plan. (Cal. Code Regs tit. 9, § 3560.010).

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Recommendation #16: The County must include the Annual PEI report as a distinct part of each subsequent adopted Plan and/or Update hereafter to ensure that future Annual PEI reports are easily located and identified. It should be clearly labeled, indicating what years are being reported and the location of the report within the Plan or Update. The Annual PEI report is not to be used in lieu of Cal. Code of Regs., tit. 9, § 3755, which are the regulations for the PEI Component of the Plan and Update. DHCS recommends the county submit the report as an addendum or attachment to the Plan or Update and include a cover page for the Annual PEI report with the title:

Annual PEI Report
FY XXXX to XXXX

Finding #17: Inyo County did not include the Three-Year PEI Evaluation report as part of the adopted FY 2022-25 Plan. (Cal. Code of Regs., tit. 9, § 3560.020).

Recommendation #17: The County must include the Three-Year PEI Evaluation report as a distinct part of each subsequent adopted Plan and/or Update hereafter. It must be clearly labeled, indicating what years are being reported and the location of the report within the Plan or Update. The Three-Year PEI Evaluation report is not to be used in lieu of Cal. Code of Regs., tit. 9, § 3755, which are the regulations for the PEI Component of the Plan and Update. DHCS recommends the county submit the report as an addendum or attachment to the Plan or Update with a cover page for the Three-Year PEI Evaluation report with the title:

Three-Year Prevention and Early Intervention Evaluation Report
FY XXXX to FY XXXX

The Three-Year PEI Evaluation report is due every third year as part of the Plan and/or Update and shall report on the evaluation(s) for the three prior fiscal years.

SUGGESTED IMPROVEMENTS

Suggested Improvement #1: DHCS recommends the county include an assessment of its capacity to implement mental health programs and services which addresses and includes 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 in each subsequent Plan.

Suggested Improvement #2: DHCS recommends the county update the WET component with program and/or activity titles, description of the program and/or activity, and objective of the programs and/or activity to reflect the current FY for each WET program in each subsequent Plan and Update.

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Suggested Improvement #3: DHCS suggests the county write Specific, Measurable, Achievable, Relevant, and Time-bound (SMART) goals that can be tracked, analyzed, and reported. A suggested goal might be *“County will place 60 percent of qualified applicants, or at least 300, into program on an annual basis.”* In this example, the goal states what will be measured, provides a measurable quantitative item, is achievable, is relevant to the statement of purpose, and is time-bound because it gives a specific unit of time for data to be collected, measured, and reported.