## Mental Health Services Act (MHSA) Performance Review Report Modoc County Program Review February 19, 2024

#### **FINDINGS**

<u>Finding #1:</u> Modoc County did not include any substantive written recommendations for revisions received during the 30-day comment period in the adopted Fiscal Year (FY) 2020-23 Three-Year Program and Expenditure Plan (Plan). The County generally described types of comments, discussion, analysis, and result of the discussion. (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. Identify those comments received during 30-day comment period versus those received during other times. List or aggregate the comments in the Plan and Update narratives or in the appendix.

**Finding #2:** Modoc County did not submit the adopted FY 2020-23 Plan and/or Update within 30 days after adoption. The FY 2022-23 Update was adopted by the County Board of Supervisors (BOS) on October 11, 2022, and submitted to the Department of Health Care Services (DHCS) on November 16, 2022. (W&I Code Section 5847(a)).

Recommendation #2: The County must submit the adopted Plan and/or Update to DHCS for each subsequent adopted Plan and Update thereafter.

**Finding #3:** Modoc 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 services in the adopted FY 2020-23 Plan. (California Code of Regulations (Cal. Code Regs.), title 9, section § 3650(a)(1)(A)).

Recommendation #3: 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 for each subsequent adopted Plan thereafter.

Finding #4: Modoc 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 2020-23 Plan. (Cal. Code Regs., tit. 9, § 3650(a)(1)(A)).

Recommendation #4: 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/

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inappropriately served, and fully served county residents who qualify for MHSA services in each subsequent adopted Plan thereafter.

<u>Finding #5:</u> Modoc 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 for each fiscal year of the adopted FY 2020-23 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 #5: 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.

**<u>Finding #6:</u>** Modoc County did not provide evidence of a FSP Partnership Agreement. (Cal. Code of Regs., tit. 9, § 3620(e)).

Recommendation #6: 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.

<u>Finding #7:</u> Modoc 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 Community Services and Support (CSS), Prevention and Early Intervention (PEI) and Innovation (INN) components in the adopted FY 2020-23 Plan and FY 2022-23 Update. (W&I Code section 5847(e)).

Recommendation #7: 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.

<u>Finding #8:</u> Modoc County did not include documentation of achievement in performance outcomes for CSS programs in the adopted FY 2020-23 Plan and FY 2022-23 Update. While the County did provide supporting documentation during the review of performance outcomes being identified and tracked, they were not incorporated into the Plan and Update. (W&I Code section 5848 (c); County Performance Contract (6)(A)(5)(d)).

Recommendation #8: The County must include documentation of achievement in performance outcomes for CSS, PEI, and INN programs in each subsequent adopted Plan and Update thereafter.

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Finding #9: Modoc 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 2020-23 Plan. (Cal. Code Regs., tit. 9, § 3755(f)(3)).

Recommendation #9: 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.

<u>Finding #10:</u> Modoc County did not include an assessment of the county's capacity to implement mental health programs and services in the adopted FY 2020-23 Plan. (Cal. Code of Regs., tit. 9, § 3650(a)(5)).

<u>Recommendation #10:</u> The County must include an assessment of its capacity to implement mental health programs and services in each subsequent adopted Plan thereafter. Specifically:

- a. The strengths and limitations of the county and service providers that impact their ability to meet the needs of racially and ethnically diverse populations.
- b. The evaluation should include an assessment of bilingual proficiency in threshold languages.
- c. 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.
- d. Identification of possible barriers to implementing the proposed programs/services and methods of addressing these barriers.

### SUGGESTED IMPROVEMENTS

<u>Suggested Improvement #1:</u> 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.