

**Mental Health Services Act (MHSA) Performance Review Report
Tuolumne County Program Review
August 22-23, 2023**

FINDINGS

Finding #1: Tuolumne County did not include an analysis or indication of substantive changes made in the adopted Fiscal Year (FY) 2020-23 Three-Year Program and Expenditure Plan (Plan) or FY 2022-23 Annual Update (Update). However, the Plan and Update did include written revisions for review received during the 30-day comment period. (Welfare and Institution Code (W&I Code) section 5848(b)); (California Code of Regulations (Cal. Code Regs., title 9, section 3315(a)(3-4)).

Recommendation #1: The County must summarize and analyze the recommended revisions received during the 30-day public comment period and 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 #2: Tuolumne County did not address all the components in their assessment of the county's capacity to implement proposed mental health programs and services in the adopted FY 2020-23 Plan. (Cal. Code Regs., tit. 9, § 3650(a)(5)).

Recommendation #2: The County must include an assessment of its capacity to implement mental health programs and services in their adopted Plan. While the Plan did include bilingual proficiency in threshold languages, and the strengths and limitations of the county and service providers that impact their ability to meet the needs of racially and ethnically diverse populations; it did not include all the components in their assessment. Specifically, the county's capacity assessment must include all the following components in each subsequent adopted Plan thereafter:

- a. The strengths and limitations of the county and service providers that impact the ability to meet the needs of racially and ethnically diverse populations,
- b. 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, and
- d. Identification of possible barriers to implementing the proposed programs/services and methods of addressing these barriers.

Finding #3: Tuolumne County did not indicate the number of children, TAY, adults, and seniors to be served for Community Services and Supports (CSS) and Prevention and Early Intervention (PEI) in the adopted FY 2020-23 Plan and FY 2022-23 Update.

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However, the county did indicate the cost per person of children, TAY, adults, and seniors to be served for CSS and PEI in the Plan and Update. (W&I Code section 5847(e)).

Recommendation #3: 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 Innovation (INN), in each subsequent adopted Plan and Update thereafter.

Finding #4: Tuolumne County did not have at least one of each program type listed in the adopted FY 2020-23 Plan or FY 2022-23 Update. Specifically, there was no identified Access and Linkage to Treatment Program.

- 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)).

Recommendation #4: The County must include a description of each of these programs in the PEI portion of their Plan and Update: Early Intervention Program, Outreach for Increasing, Recognition of Early Signs of Mental Illness Program, Prevention Program, Stigma and Discrimination Reduction Program, Access to Linkage to Treatment Program, and Suicide Prevention Program (optional) in each subsequent adopted Plan and Update thereafter.

Finding #5: Tuolumne County did not 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 for each Stigma and Discrimination Reduction Program in the adopted FY 2020-23 Plan and FY 2022-23 Update. (Cal. Code Regs., tit. 9, § 3755(f)(3)).

Recommendation #5: The County must include a description of each Stigma and Discrimination Reduction Program and select and use a validated method to measure changes in attitudes, knowledge, and/or behavior regarding being diagnosed with mental illness, having mental illness and/or seeking mental health services for each Stigma and Discrimination Reduction Program in each subsequent adopted Plan and Update thereafter.

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SUGGESTED IMPROVEMENTS

Suggested Improvement #1: DHCS recommends the county write Specific, Measurable, Achievable, Relevant, and Time-bound (SMART) goals that can be tracked, analyzed, and reported for their documentation of achievement in performance outcomes for each CSS, PEI and INN program in each subsequent adopted Plan and Update thereafter.

For example, a goal of *'The TAY program intends to improve parent, family, and community education regarding first episode psychosis (FEP) by assisting with transportation costs to and from appointments'* could be rewritten. A suggested SMART goal could be *'95% of TAY individuals referred to the TAY-FEP Program will receive transportation support via case management services for their first three appointments.'* In this example, the goal states what will be measured, provides a measurable quantitative item, is achievable because the county controls the engagement attempts, is relevant because outreach and engagement is essential to providing quality mental health services, and is time-bound because it gives a specific unit of time of data to be collected, measured, and reported.