

**Mental Health Services Act Plan of Correction**

1.	County/City:	Kern County/Bakersfield
2.	POC Submitted for:	MHSA Performance Review
3.	Date of Audit/Performance Review	December 18, 2024
4.	Name of Preparer:	
5.	Preparer Contact Email:	
6.	Preparer Contact Telephone:	

#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
7.	Finding # 1	Kern County did not summarize and analyze the recommended revisions received during the 30-day public comment period for Fiscal Year (FY) 2023-24 in the adopted FY 2023-26 Three-Year Plan (Plan). ((Welfare and Institution Code (W&I Code) section 5848(b); California Code of Regulations (Cal. Code Regs.), title 9, section 3315(a)(3)).	The County must provide evidence of compliance for FY 2023-24 by providing a summary and analysis of the recommended revisions received during the 30-day public comment period.	Kern County has reviewed the feedback received during the 30-day public comment period for the FY 2023-26 Three-Year Plan. Kern County has recognized that the format used to request stakeholder feedback during FY 2023-24 did not independently capture specific time limits. In addition, we acknowledge that we failed to summarize and analyze the recommended revisions. Additionally, Kern County wants to reassure our stakeholders

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				<p>that we are committed to transparency. We will update policy 13.1.17, ensuring the 30-day public comment is reviewed and identified in Annual Updates and Three-Year Plans. This will demonstrate that the county continuously utilizes feedback to revise policies and make needed systematic changes.</p> <p>An approved policy and procedure will be submitted to DHCS by June 30, 2025.</p> <p><b>Resubmission on 6-30-2025:</b></p> <p><b>Kern County's MHSA Annual Update to the Plan FY 2025-26 was submitted to DHCS on June 2nd, 2025 (see attached copy of email in email thread dated 6-30-2025 to DHCS).</b></p>

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				<p><b>The summary and analysis of the recommended revisions received during the 30-day public comment period can be found on pages 441-443 of Kern County's Annual Update to the Plan FY 2025-26.</b></p> <p><b>Link to Kern County MHSA Annual Update to the Plan FY 2025-26:</b></p> <p><a href="https://www.kernbhrs.org/home/showpublisheddocument/20409/638839604799600000">https://www.kernbhrs.org/home/showpublisheddocument/20409/638839604799600000</a></p>
8.	Finding # 2	Kern County did not include any substantive written recommendations for revisions received during the 30-day comment period in the adopted FY 2023-26 Plan. (W&I Code section 5848(b)).	The County must provide evidence of compliance with a description of any substantive changes made to any MHSA programs and/or services for FY 2023-24.	<p>Kern County reviewed the feedback received during the 30-day public comment period before submitting the FY 2023-26 Three-Year Plan. The County also identified the feedback explicitly given to the Program and/or Services for Fiscal Year 2023- 24.</p> <p>Kern County has identified that the Public Comment requested</p>

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				during 30-day public comment for FY 2023-26 did receive specific recommendations; however, a systematic process did not take place to identify and respond to the feedback appropriately and meaningfully. Additionally, Kern County will update policy 13.1.17 to ensure that the 30-day public comment period is reviewed and identified in Annual and Three-Year Plans in a way that demonstrates that the County is utilizing feedback for program changes on an ongoing basis. An approved policy and procedure will be submitted to DHCS <b>by June 30, 2025</b> .
9.	Finding # 3	Kern 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	The County must provide evidence of compliance by providing a narrative analysis of the mental health needs of unserved, underserved/ inappropriately served, and fully	Kern County reviewed the analysis of the mental health needs of unserved, underserved/ inappropriately served, and fully served County residents who qualify for MHSA

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		service in the adopted FY 2023-26 Plan. (Cal. Code Regs., tit. 9, § 3650(a)(1)(A)).	served County residents who qualify for MHSA services in FY 2023-24.	<p>services in the Fiscal Year 2023-26 plan.</p> <p>Kern County has identified that a needs assessment was attempted but failed to capture direct requirements specific to the mental health needs of unserved, underserved/ inappropriately served, and fully served County residents.</p> <p>The FY 2023-26 needs assessment plan will be revised and included in the FY 2025-26 annual update.</p> <p>Additionally, Kern County will update policy 13.1.02 (Community Services and Supports CSS) to include Cal. Code Regs., tit. 9, § 3650(a)(1)(A) and 3650(a)(1) that addresses the analysis of the mental health needs of unserved, underserved/ inappropriately served, and fully served County residents who qualify for MHSA services on an</p>

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				<p>ongoing basis. An approved policy and procedure will be submitted to DHCS by <b>June 30, 2025</b>.</p> <p><b>Resubmission on 6-30-2025:</b></p> <p><b>Kern's Needs Assessment was revised and included in the Kern County MHSA Annual Update to the Plan FY 2025-26.</b></p> <p><b>The Needs Assessment can be found on pages 420-430 of Kern County's Annual Update to the Plan FY 2025-26.</b></p> <p><b>Link to Kern County MHSA Annual Update to the Plan FY 2025-26:</b> <a href="https://www.kernbhhs.org/home/showpublisheddocument/20409/638839604799600000">https://www.kernbhhs.org/home/showpublisheddocument/20409/638839604799600000</a></p>

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Instructions: Complete the MHSA Plan of Correction (POC) to address Findings from the Fiscal Audit Report or Performance Review Report.

Row 1: Enter County/City name.

Row 2: Select from the drop down menu if this POC is submitted in response to a Fiscal Audit or a Performance Review.

Row 3: Enter the date that the Fiscal Audit or Performance Review was conducted.

Row 4: Enter the name of the person who prepared the Plan of Correction or is responsible for responding to inquiries about the Plan of Correction.

Row 5: Enter the contact email address of the person who prepared the Plan of Correction or is responsible for responding to inquiries about the Plan of Correction.

Row 6: Enter the contact telephone number of the person who prepared the Plan of Correction or is responsible for responding to inquiries about the Plan of Correction.

Rows 7-28, Column A: Enter the number of the specific Finding from the Fiscal Audit Report or Performance Review Report.

Rows 7-28, Column B: Enter the specific Finding from the Fiscal Audit Report or Performance Review Report.

Rows 7-28, Column C: Enter the specific recommendation from the Fiscal Audit Report or Performance Review Report.

Rows 7-28, Column D: Enter the description of the actions taken to correct the Finding. Must include 1) timeline for implementation and/or completion of actions; 2) proposed (or actual) evidence of correction to be submitted to DHCS.

This completed form must be submitted to [MHSA@dhcs.ca.gov](mailto:MHSA@dhcs.ca.gov).