

State of California—Health and Human Services Agency Department of Health Care Services



May 24, 2021

Sent via e-mail to: cculcasi@stanbhrs.org

Cameo Culcasi, Chief, Substance Use Disorder Services Stanislaus County Behavioral Health & Recovery Services 800 Scenic Drive Modesto, CA 95350

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Chief Culcasi:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Substance Abuse Block Grant (SABG) and the terms of the Contract operated by Stanislaus County.

The County Compliance Unit (CCU) within the Audits and Investigations Division (A&I) of DHCS conducted a review of the County's compliance with contract requirements based on responses to the monitoring instrument, discussion with county staff, and supporting documentation provided by the County.

Enclosed are the results of Stanislaus County's Fiscal Year 2020-21 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Stanislaus County is required to submit a Corrective Action Plan (CAP) addressing each deficiency noted to the Community Services Division (CSD), Community Support Branch (CSB), Policy, Monitoring and Financing Section (PMFS) Analyst by 7/26/2021. Please use enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at SABGcompliance@dhcs.ca.gov.

If you have any questions, please contact me at becky.counter@dhcs.ca.gov.

Sincerely,

Becky Counter (916) 713-8567

BLCounter

becky.counter@dhcs.ca.gov

Audits and Investigations Division Medical Review Branch Behavioral Health Compliance Section County Compliance Unit 1500 Capitol Ave., MS 2305 Sacramento, CA 95814 http://www.dhcs.ca.gov

Distribution:

To: Chief Culcasi,

CC: Mateo Hernandez, Audits and Investigations, Medical Review Branch Acting Chief Lanette Castleman, Audits and Investigations, Behavioral Health Compliance Section Chief Ayesha Smith, Audits and Investigations, Behavioral Health Compliance Unit Chief Michael Bivians, Audits and Investigations, County Compliance Monitoring II Chief Janet Rudnick, Audits and Investigations, Provider Compliance Unit Chief Tracie Walker, Community Services Division, Community Support Branch Chief Victoria King-Watson, Community Services Division, Operations Branch Chief Donna Ures, Community Services Division, Policy, Monitoring and Financing Section Chief Angelina Azevedo, Community Services Division, Family Services Unit Chief Denise Galvez, Community Services Division, Youth Services Section Chief SABGcompliance@dhcs.ca.gov, Policy, Monitoring and Financing Section MCBHDMonitoring@dhcs.ca.gov, County/Provider Operations and Monitoring Branch Nasrin Safi, Stanislaus County, Manager III

COUNTY REVIEW INFORMATION

County:

Stanislaus

County Contact Name/Title:

Nasrin Safi/ Manager III

County Address:

800 Scenic Drive Modesto, CA 95350

County Phone Number/Email:

(209) 525-6265 nsafi@stanbhrs.org

Date of Review:

4/6/2021

Lead CCU Analyst:

Becky Counter

Assisting CCU Analyst:

Susan Volmer

Report Prepared by:

Becky Counter

Report Approved by:

Ayesha Smith

REVIEW SCOPE

I. Regulations:

- California Code of Regulations, Title 22, section 51341.1 Drug Medi-Cal Substance Use Disorder Services
- b. Code of Federal Regulations; Title 45, Part 96; Subpart L; section 96.121 through 96.137: Substance Abuse Prevention and Treatment Block Grant
- c. United States Code, Title 42, Section 300x-21 through 300x-66: Block Grants regarding Mental Health and Substance Use
- d. Health and Safety Code, Division 10.5, Section 11750 11970: Alcohol and Drug Programs

II. Program Requirements:

- a. Fiscal Year (FY) 2020-21 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
- b. State of California Youth Treatment Guidelines Revised August 2002
- c. DHCS Perinatal Practice Guidelines FY 2018-19
- d. National Culturally and Linguistically Appropriate Services (CLAS)
- e. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
- f. Behavioral Health Information Notices (BHIN)

ENTRANCE AND EXIT CONFERENCE SUMMARIES

Entrance Conference:

An Entrance Conference was conducted via WebEx on 4/6/2021. The following individuals were present:

Representing DHCS:

Becky Counter, Associate Governmental Program Analyst (AGPA) Susan Volmer, AGPA

Representing Stanislaus County:

Kara Anguiano, Chief Fiscal Officer

Maria Camarillo, Staff Services Coordinator

Chandra Campbell, Manager III, Integrated Forensic Team

Miranda Chalabi, Cultural Competence & Ethical Services Manager

Stacy-Ann Clark, Behavioral Health Specialist II Genesis

Steve Collins, BH Manager

Cherie Dockery, Assoc. Director

Laura Garcia, Manager III, HR

Tina Jamison, Manager II, Business Office

Kirsten Jasek- Rysdahl, Manager III, DOTS

Olivia Jimenez, Admin Clerk III

Bernadet Kaldani, Training Coordinator

Jennifer Marsh, Staff Services Coordinator

Bernardo Mora, MD, Medical Director

Gabriela Munquia, Quality Services Specialist

DeLayne Oliva, Manager III, Contracts

Kevin Panyanouvong, Chief of ASOC

Elizabeth Pike, BH Coordinator

Cam Quach, Staff Services Analyst, DOTS

Norma Rodriguez, Manager II, HR

Diane Rose, Program Coordinator

Nasrin Safi, Manager III, QS/Risk Management/Compliance

Monica Salazar, Risk Management

Tabitha Sprague, BH Coordinator

MaryCruz Vargas, Quality Services Specialist

Megan Vylonis, Quality Services Specialist

Charles Yarnell, BH Coordinator

During the Entrance Conference, the following topics were discussed:

- Introductions
- Overview of the monitoring process

Exit Conference:

An Exit Conference was conducted via WebEx on 4/6/2021. The following individuals were present:

Representing DHCS:

Becky Counter, AGPA

Susan Volmer, AGPA

Andrew Ulibarri, AGPA

Representing Stanislaus County:

Maria Camarillo, Staff Services Coordinator

Chandra Campbell, Manager III, Integrated Forensic Team

Miranda Chalabi, Cultural Competence & Ethical Services Manager

Stacy-Ann Clark, Behavioral Health Specialist II Genesis

Cherie Dockery, Assoc. Director

Laura Garcia, Manager III, HR

Tina Jamison, Manager II, Business Office

Kirsten Jasek- Rysdahl, Manager III, DOTS

Olivia Jimenez, Admin Clerk III

Bernadet Kaldani, Training Coordinator

Jennifer Marsh, Staff Services Coordinator

Bernardo Mora, MD, Medical Director

Gabriela Munguia, Quality Services Specialist

DeLayne Oliva, Manager III, Contracts

Elizabeth Pike, BH Coordinator

Cam Quach, Staff Services Analyst, DOTS

Norma Rodriguez, Manager II, HR

Diane Rose, Program Coordinator

Nasrin Safi, Manager III, QS/Risk Management/Compliance

Monica Salazar, Risk Management

Tabitha Sprague, BH Coordinator

MaryCruz Vargas, Quality Services Specialist

Megan Vylonis, Quality Services Specialist

Charles Yarnell, BH Coordinator

During the Exit Conference, the following topics were discussed:

- Review of compliance deficiencies
- Follow-up deadlines

SUMMARY OF FY 2020-21 COMPLIANCE DEFICIENCIES (CD)

	<u>Section</u>	Number of CD's
4.0		_
1.0	Administration	/
2.0	Prevention	0
3.0	Perinatal	0
4.0	Adolescent/Youth Treatment	0
5.0	Data/CalOMS	0
6.0	Program Integrity	3
7.0	Fiscal	0

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the <u>SABG County Application</u>, <u>Enclosure 1</u>, <u>Part I</u>, <u>Section 3</u>, <u>B</u>, <u>5-8</u> each CD identified must be addressed via a CAP. The CAP is due within sixty (60) calendar days of the date of this monitoring report.

Please provide the following within the completed FY 2020-21 CAP:

- a) A statement of the CD.
- b) A list of action steps to be taken to correct the CD.
- c) A date of completion for each CD.
- d) The name of the person who will be responsible for corrections and ongoing compliance.

The PMFS analyst will monitor progress of the CAP completion.

Category 1: ADMINISTRATION

A review of the County's Maintenance of Records, service providers, referrals, services, contracts, and general provisions was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD: 1.5.2:

SABG Application Enclosure 2, II, 2

1. Hatch Act

County agrees to comply with the provisions of the Hatch Act (USC, Title 5, Part III, Subpart F., Chapter 73, Subchapter III), which limit the political activities of employees whose principal employment activities are funded in whole or in part with federal funds.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically the Hatch Act.

CD: 1.5.3:

SABG Application Enclosure 2, II, 3

3. No Unlawful Use or Unlawful Use Messages Regarding Drugs Contractor agrees that information produced through these funds, and which pertains to drugs and alcohol - related programs, shall contain a clearly written statement that there shall be no unlawful use of drugs or alcohol associated with the program. Additionally, no aspect of a drug or alcohol related program shall include any message on the responsible use, if the use is unlawful, of drugs or alcohol (HSC Section 11999-11999.3). By signing this Contract, Contractor agrees that it will enforce, and will require its Subcontractors to enforce, these requirements.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically No Unlawful Use or Unlawful Use Messages Regarding Drugs.

CD: 1.5.5:

SABG Application Enclosure 2, II, 9

9. Counselor Certification

Any counselor or registrant providing intake, assessment of need for services, treatment or recovery planning, individual or group counseling to participants, patients, or residents in a DHCS licensed or certified program is required to be registered or certified as defined in CCR, Title 9, Division 4, Chapter 8.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts; specifically Counselor Certification.

CD: 1.5.6:

SABG Application, Enclosure 2, II, 5

5. Debarment and Suspension

County shall not subcontract with or employ any party listed on the government wide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines at 2 CFR 180 that implement Executive Orders 12549 (3 CFR part 1986 Comp. p. 189) and 12689 (3 CFR part 1989., p. 235), "Debarment and Suspension." SAM exclusions contain the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority other than Executive Order 12549.

The County shall advise all subcontractors of their obligation to comply with applicable federal debarment and suspension regulations, in addition to the requirements set forth in 42 CFR Part 1001. If a County subcontracts or employs an excluded party, DHCS has the right to withhold payments, disallow costs, or issue a CAP, as appropriate, pursuant to HSC Code 11817.8(h).

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating County compliance with Debarment and Suspension. The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically Debarment and Suspension.

CD: 1.5.7:

SABG Application Enclosure 2, II, 6

6. Restriction on Distribution of Sterile Needles

No SABG funds made available through this Contract shall be used to carry out any program that includes the distribution of sterile needles or syringes for the hypodermic injection of any illegal drug unless DHCS chooses to implement a demonstration syringe services program for injecting drug users.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically the Restriction on Distribution of Sterile Needles.

CD: 1.5.8:

SABG Application, Enclosure 2, II, 10

10. Cultural and Linguistic Proficiency

To ensure equal access to quality care by diverse populations, each service provider receiving funds from this Contract shall adopt the Federal Office of Minority Health Culturally and Linguistically Appropriate Service (CLAS) national standards as outlined online at: https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically Cultural and Linguistic Proficiency.

CD: 1.5.9:

SABG Application, Enclosure 2, II, 14

14. Tribal Communities and Organizations

County shall regularly review population information available through Census, compare to information obtained in the California Outcome Measurement System for Treatment (CalOMS-Tx) to determine whether the population is being reached, and survey Tribal representatives for insight in potential barriers to the substance use service needs of the American Indian/Alaskan Native (Al/AN) population within the County geographic area. Contractor shall also engage in regular and meaningful consultation and collaboration with elected officials of the tribe, Rancheria, or their designee for the purpose of identifying issues/barriers to service delivery and improvement of the quality, effectiveness, and accessibility of services available to Al/NA communities within the County.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically Tribal Communities and Organizations.

Category 6: PROGRAM INTEGRITY

A review of the SABG monitoring, privacy, and program integrity was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 6.2.1:

SABG Application, Enclosure 2, I, A, 1, h

- 1. Performance under the terms of this Enclosure is subject to all applicable federal and state laws, regulations, and standards. In accepting DHCS drug and alcohol SABG allocation pursuant to HSC Sections 11814(a) and (b), County shall: (i) establish, and shall require its subcontractors to establish, written policies and procedures consistent with the control requirements set forth below; (ii) monitor for compliance with the written procedures; and (iii) be accountable for audit exceptions taken by DHCS against the County and its subcontractors for any failure to comply with these requirements:
 - a. Code of Federal Regulations (CFR), Title 42, Part 2, Confidentiality of Substance Use Disorder Patient Records.

SABG Application, Enclosure 2, II, 19, L

- 19. Federal Law Requirements:
 - L. Confidentiality of Alcohol and Drug Abuse Patient Records (42 CFR Part 2, Subparts A E).

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating all of the foregoing SABG Application, Enclosure 2, Section II general provisions are included in all executed subcontracts, specifically the Confidentiality of Substance Use Disorder Patient Records under 42 CFR Part 2, Subparts A-E.

CD 6.2.4:

County Performance Contract, Attachment A, 1, A

Employee Training.

All workforce members who assist in the performance of functions or activities on behalf of the Department, or access or disclose Department PHI or PI must complete information privacy and security training, at least annually, at Contractor's expense. Each workforce member who receives information privacy and security training must sign a certification, indicating the member's name and the date on which the training was completed. These certifications must be retained for a period of six (6) years following termination of this Agreement.

Findings: The County did not make available the signed training certificates for FY 2019-20 as evidence of completed training for County staff.

CD 6.2.5:

<u>County Performance Contract, Attachment A, 1, C</u> Confidentiality Statement.

All persons that will be working with Department PHI or PI must sign a confidentiality statement that includes, at a minimum, General Use, Security and Privacy Safeguards, Unacceptable Use, and Enforcement Policies. The statement must be signed by the workforce member prior to access to Department PHI or PI. The statement must be renewed annually. The Contractor shall retain each person's written confidentiality statement for Department inspection for a period of six (6) years following termination of this Agreement.

Findings: The County did not make available the subcontractors' signed confidentiality statements for FY 2019-20 as evidence of compliance.

TECHNICAL ASSISTANCE

Stanislaus County did not request technical assistance for this fiscal year.