

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



March 2, 2022

Sent via e-mail to: nolga2@sbcglobal.net

Noel O'Neill, Interim Director 162 E. Carson Street Colusa, CA 95932

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Interim Director O'Neill:

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 Colusa 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 Colusa County's Fiscal Year 2021-22 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Colusa 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 5/2/2022. 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 susan.volmer@dhcs.ca.gov

Sincerely,

Susan Volmer (916) 713-8677

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: Director O'Neill

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 Cindy Berger, 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 Jessica Fielding, Community Services Division, Family Services Section Chief Angelina Azevedo, Community Services Division, Prevention Services Unit Chief Ashley Love, 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 Jeannie Scroggins, Colusa County QA Manager

COUNTY REVIEW INFORMATION

County:

Colusa

County Contact Name/Title:

Jeannie Scroggins, QA Manager

County Address:

162 E Carson St. Colusa, CA 95932

County Phone Number/Email:

(530) 458-0520

jscroggins@countyofcolusa.com

Date of Review:

12/9/21

Lead CCU Analyst:

Susan Volmer

Assisting CCU Analyst:

Michael Bivians

Report Prepared by:

Susan Volmer

Report Approved by:

Ayesha Smith

REVIEW SCOPE

I. Regulations:

- a. 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. Fiscal Year (FY) 2021-22 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
- c. State of California Youth Treatment Guidelines Revised August 2002
- d. DHCS Perinatal Practice Guidelines FY 2018-19
- e. National Culturally and Linguistically Appropriate Services (CLAS)
- f. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
- g. Behavioral Health Information Notices (BHIN)

ENTRANCE AND EXIT CONFERENCE SUMMARIES

Entrance Conference:

An Entrance Conference was conducted via WebEx on 12/9/21. The following individuals were present:

Representing DHCS:

Susan Volmer, Associate Governmental Program Analyst (AGPA) Michael Bivians, Staff Services Manager I (SSM I) Christina Whitlock, AGPA

Representing Colusa County:
 Jeannie Scroggins, QA Manager
 Noel O'Neill, BH Director
 Jennifer McAllister, Program Manager
 Bessie Rojas, QA Coordinator

During the Entrance Conference, the following topics were discussed:

- Introductions
- Colusa County overview of services
- Overview of monitoring process

Exit Conference:

An Exit Conference was conducted via WebEx on 12/9/2021. The following individuals were present:

 Representing DHCS: Susan Volmer, AGPA Michael Bivians, SSM I Christina Whitlock, AGPA

Representing Colusa County:
 Jeannie Scroggins, QA Manager
 Noel O'Neill, BH Director
 Jennifer McAllister, Program Manager
 Bessie Rojas, QA Coordinator

During the Exit Conference, the following topics were discussed:

- Submitting follow-up evidence
- Due date for evidence submission

SUMMARY OF FY 2021-22 COMPLIANCE DEFICIENCIES (CD)

	<u>Section</u>	Number of CD's
1.0	Administration	2
2.0	Prevention	0
3.0	Perinatal	0
4.0	Adolescent/Youth Treatment	0
5.0	Data/CalOMS	0
6.0	Program Integrity	0
7.0	Fiscal	1

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the <u>SABG County Application</u>, <u>Enclosure 2</u>, <u>Part I</u>, <u>Section 3</u>, <u>B</u>, <u>5-7</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 2021-22 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: 1.5.1:

SABG Application Enclosure 2, II, 17

17. Byrd Anti-Lobbying Amendment (31 USC 1352)

County certifies that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 USC 1352. Countyshall also disclose to DHCS any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award.

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 provide evidence demonstrating County and subcontractor compliance with the Byrd Anti-Lobbying Amendment (31 USC 1352) provision.

CD: 1.5.2:

SABG Application Enclosure 2, II, 22, A

22. Information Access for Individuals with Limited English Proficiency

A. County shall comply with all applicable provisions of the Dymally-Alatorre Bilingual Services Act (Government Code sections 7290-7299.8) regarding access to materials that explain services available to the public as well as providing language interpretation services.

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 provide evidence demonstrating County and subcontractor compliance with the Dymally-Alatorre Bilingual Services Act (Government Code sections 7290-7299.8) provision.

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Category 7: FISCAL

A review of the SABG fiscal services was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 7.1.1:

SABG Application, Enclosure 2, I, 2, A

A. Restrictions on Salaries

County agrees that no part of any federal funds provided under this Contract shall be used by the County or its subcontractors to pay the salary and wages of an individual at a rate in excess of Level II of the Executive Schedule, as found online at: http://grants.nih.gov/grants.nih

Findings: The County did not provide evidence demonstrating verification that SABG funds are not used to pay an individual's salary in excess of Level II of the Executive Schedule.

TECHNICAL ASSISTANCE

Colusa County did not request Technical Assistance during this review.