

**MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

1

1.	County/City:	<b>Glenn County</b>
2.	POC Submitted for:	<b>MHSA Performance Review</b>
3.	Date of Audit/Performance Review	<b>10/25/2022</b>
4.	Name of Preparer:	-
5.	Preparer Contact Email:	-
6.	Preparer Contact Telephone:	-

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
7.	Finding #1	Glenn County did not provide a description of the county demographics, including, but not limited to size of the County, threshold languages, unique characteristics, age, gender, and race/ethnicity in the adopted FY 21/22 Annual Update.	The County must provide a description of the demographics of the County, including but not limited to, size of the County, threshold languages, unique characteristics, age, gender, and race/ethnicity in each subsequent adopted Plan and Update thereafter.	The County will provide a description of the demographics of the County in each future Plan and Annual Update. In addition, this information is provided in the Annual Cultural and Linguistic Competence Plan. (see attached). a) Update policy MH-157 (MHSA Planning and Stakeholder Training) to include the required components of each Plan and Update, including County demographics. (Update, approve, and submit policy to DHCS by 02/28/23.) b) Provide training to relevant MHSA staff on Plan and Update requirements. Document training in staff training logs. (Train staff by 02/28/23; submit log to DHCS as evidence by 02/28/23) c) MHSA Steering Committee to review each draft MHSA Plan and Update to ensure compliance with required components.

**MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
				Document in MHSA Steering Committee agenda and minutes. (Implement during February 2, 2023 MHSA Steering Committee meeting; submit agenda and minutes to DHCS as evidence by 02/28/2023) d) The County anticipates completing and submitting the next 3-Year Plan by June 30, 2023, pending the BOS approval schedule.

**MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
8.	Finding #2	Glenn County did not report the cost per person for PEI and INN services/programs in the adopted FY 2020-23 Plan and FY 2021-22 Update. However, the County did provide cost per person for CSS services/programs.	The County must report the cost per person for CSS, PEI, and INN services/programs in each subsequent adopted Plan and Update thereafter.	The County will report the cost per person CSS, PEI, and INN services in each future Plan and Annual Update. a) Update policy MH-157 (MHSA Planning and Stakeholder Training) to include the required components of each Plan and Annual Update, including cost per person in CSS, PEI, and INN. (Update, approve, and submit policy to DHCS by 02/28/23.) b) County anticipates completing and submitting the next 3-Year Plan by June 30, 2023, pending the BOS approval schedule.
9.	Finding #3	Glenn County did not include a narrative description of the training provided to participants in the CPPP in the adopted	County must include a description of the training provided to participants in the CPPP in each	The County will include a description of the training provided to participants in the CPPP in each subsequent adopted Plan and Annual Update thereafter.

**MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
		FY 2020-23 Plan and FY 2021-22 Update.	subsequent adopted Plan and Update thereafter.	<ul style="list-style-type: none"> <li>a) Update policy MH-157 (MHSA Planning and Stakeholder Training) to include the required components of each Plan and Annual Update, including a description of the training provided to participants in the CPPP. (Update, approve, and submit policy to DHCS by 02/28/23.)</li> <li>b) The County will include training materials and other evidence of CPPP education efforts in the next 3-Year Plan, and each subsequent Plan and Annual Update.</li> <li>c) The County anticipates completing and submitting the next 3-Year Plan by June 30, 2023, pending the BOS approval schedule.</li> </ul>
10	Finding #4	Glenn County did not submit the adopted FY 2021-22 Update to DHCS within 30 days after adoption by the County BOS, which occurred on July 20, 2021.	The County must submit each subsequent adopted Plan and Update thereafter to DHCS within 30 days of adoption by the County BOS by June 30th and prior to the FY starting July 1.	<p>The County will submit each subsequent adopted Plan and Annual Update thereafter to DHCS within 30 days of adoption by the County BOS.</p> <ul style="list-style-type: none"> <li>a) Update policy MH-157 (MHSA Planning and Stakeholder Training) to include the required components of each Plan and Annual Update, including a description of the training provided to participants in the CPPP. (Update, approve, and submit policy to DHCS by 02/28/23.)</li> <li>b) The County will include training materials and other evidence of CPPP education efforts in the next 3-Year Plan, and each subsequent Plan and Annual Update.</li> </ul>

**MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
				c) The County anticipates completing and submitting the next 3-Year Plan by June 30, 2023, pending the BOS approval schedule.
11	Finding #5	Glenn 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.	<p>The County must include an assessment of its capacity to implement mental health programs and services in each subsequent adopted Plan thereafter:</p> <ul style="list-style-type: none"> <li>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. The evaluation should include an assessment of bilingual proficiency in threshold languages.</li> <li>b. Percentages of diverse cultural, racial/ethnic and linguistic groups represented among direct service providers, as</li> </ul>	<p>Glenn County has an active Cultural Diversity and Equity Committee which assess their capacity to implement mental health programs and services on an ongoing basis. This data on age; race/ethnicity; primary language; LGBTQ+; and gender is reviewed by the committee quarterly and by the subcommittees monthly (Ethnic Services; LGBTQ+; Senior) to closely monitor access to services for these ethnically diverse populations. This information will continue to be included in our annual MHSA planning process, beginning 01/01/2023. Any barriers to access will be documented in the CDEC committee minutes, and shared with leadership and stakeholder groups on an ongoing basis. This will help provide input on opportunities to improve access and services. (Attached is a Quarterly Report on number served by demographics and services delivered.) By 04/01/2023.</p> <ul style="list-style-type: none"> <li>a) Update policy MH-164 (MHSA Capacity Assessment) to include the required components of each Plan and Annual Update, including an assessment of the capacity to implement mental health</li> </ul>

**MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
			<p>compared to percentage of the total population needing services and the total population being served.</p> <p>c. Identification of possible barriers to implementing the proposed programs/services and methods of addressing these barriers.</p>	<p>programs and services, and DHCS guidance in Column C. (Update, approve, and submit policy to DHCS by 02/28/23.)</p> <p>b) The County anticipates completing and submitting the next 3-Year Plan by June 30, 2023, pending the BOS approval schedule.</p>
12	Finding #6	Glenn County did not provide an estimate of the number of clients, in each age group, to be served in the FSP category for each fiscal year of the adopted FY 2020-23 Plan.	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 adopted Plan and in each subsequent adopted Plan thereafter.	<p>The County will 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 adopted Plan and in each subsequent adopted Plan thereafter.</p> <p>a) Update policy MH-157 (MHSA Planning and Stakeholder Training) to include the required components of each Plan and Annual Update, including an estimate of the number of clients, in each age group, to be served in the FSP service category for each fiscal year. (Update, approve, and submit policy to DHCS by 02/28/23.)</p>

**MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
				b) The County anticipates completing and submitting the next 3-Year Plan by June 30, 2023, pending the BOS approval schedule.
13	Finding #7	Glenn County did not indicate the number of children, adults, and seniors to be served in the adopted FY 2021-22 Update.	The County must indicate the number of children, adults, and seniors to be served in each subsequent adopted Update thereafter.	The County will indicate the number of children, adults, and seniors to be served in each subsequent adopted Annual Update thereafter. a) Update policy MH-157 (MHSA Planning and Stakeholder Training) to include the required components of each Plan and Annual Update, including the number of children, adults, and seniors to be served. (Update, approve, and submit policy to DHCS by 02/28/23.) b) The County anticipates completing and submitting the next 3-Year Plan by June 30, 2023, pending the BOS approval schedule.
14	Suggested Improvements #1	The County included the Annual PEI Report within the PEI component section of the adopted FY 2021-22 Update. (Calif. Code of Regs., tit. 9, § 3560.010(a)(1)). However, the Annual PEI Report is not to be used	DHCS will accept the Annual PEI Report submitted to MHSAOAC, as an addendum or attachment, as being a part of the Plan or Update; if it is clearly labeled, indicates what years are being reported and the location	The County has developed a separate PEI Evaluation Report (attached); and will continue to develop and submit a separate PEI Evaluation Report each subsequent fiscal year. a) The County has attached to this POC the recently-completed PEI Evaluation Report. b) The County will update policy MH-124 (MHSA Funding Components & Reporting Requirements) to include the requirements of

**MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
		in lieu of Cal. Code of Regs., tit. 9, § 3755; which are the regulations for the PEI Component of the Plan and Update, and not consistent with the regulations for the Annual PEI Report (Cal. Code of Regs., tit. 9, § 3560.010).	of the report is identified within the Plan or Update. DHCS recommends the county include a cover page for the Annual PEI Report with the title Annual PEI Report FY XXXX to XXXX and included as an addendum or attachment to the Plan or Update. The Annual PEI Report is not to be used in lieu of Cal. Code of Regs., tit. 9, § 3755 (Prevention and Early Intervention Component of the Plan and Update).	and the ongoing timelines for the PEI Evaluation reports. (Update, approve, and submit policy to DHCS by 02/28/23.)
15	Suggested Improvements #2	The Annual PEI Report is not due in years in which a Three-Year PEI Evaluation Report is due. (Calif. Code of Regs., tit. 9, § 3560.010(a)(1).	DHCS recommends the county submit the Annual PEI Report in coordination with Calif. Code of Regs., tit. 9, § 3560.010(a)(1), which states, "Each Annual Prevention and Early Intervention Report is due as part of an Annual Update or Three-Year Program and Expenditure Plan within 30 calendar	The County has developed a separate PEI Evaluation Report (attached); and will continue to develop and submit a separate PEI Evaluation Report each subsequent fiscal year. a) The County has attached to this POC the recently-completed PEI Evaluation Report. b) The County will update policy MH-124 (MHSA Funding Components & Reporting Requirements) to include the requirements of and the ongoing timelines for the PEI Evaluation reports. (Update, approve, and submit policy to DHCS by 02/28/23.)

**MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

	A	B	C	D
#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
			days of Board of Supervisors approval but no later than June 30 of the same fiscal year whichever occurs first. The Annual Prevention and Early Intervention Report is not due in years in which a Three-Year Prevention and Early Intervention Evaluation Report is due."	

## **MENTAL HEALTH SERVICES ACT (MHSA) PLAN OF CORRECTION (POC)**

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).