

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

1.	County/City:	Kings
2.	POC Submitted for:	MHSA Performance Review
3.	Date of Audit/Performance Review	November 29, 2022
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.	1	Kings County did not report the cost per person for Innovation (INN) services/programs in the adopted FY 2020-23 Three-Year Program and Expenditure Plan (Plan) and FY 2020-21 Annual Update (Update). However, the county did provide cost per person for Prevention Early Intervention (PEI) and Community Services and Support (CSS) services/programs. (Welfare & Institution Code (W&I Code) section 5847(e)).	The County must report the cost per person for CSS, PEI, and INN services/programs in each subsequent adopted Plan and Update hereafter.	The per person cost for the Kings County Innovation program which is titled MOST has been determined, see table below. However, per the feedback by the DHCS Reviewers, since the prior plans have been approved by the community and Behavioral Health Advisory Board through a 30-day public post and hearing and subsequently approved by the Board of Supervisors, the plans should remain to form and a correction note should be made in subsequent plans pertaining. As such, within the 2023-2026 Three Year Plan and Innovation Evaluation due to DHCS June 30, 2023, a correction will be noted with the cost person table below.

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					<table border="1"> <thead> <tr> <th data-bbox="1352 406 1499 480">INN Costs</th> <th data-bbox="1499 406 1625 480">INN Caseload</th> <th data-bbox="1625 406 1757 480">Costs per Client</th> </tr> </thead> <tbody> <tr> <td data-bbox="1352 480 1499 516">19/20</td> <td data-bbox="1499 480 1625 516">487,428.54</td> <td data-bbox="1625 480 1757 516">45</td> </tr> <tr> <td data-bbox="1352 516 1499 552">20/21</td> <td data-bbox="1499 516 1625 552">700,026.00</td> <td data-bbox="1625 516 1757 552">70</td> </tr> <tr> <td data-bbox="1352 552 1499 586">21/22</td> <td data-bbox="1499 552 1625 586">990,246.92</td> <td data-bbox="1625 552 1757 586">76</td> </tr> </tbody> </table>	INN Costs	INN Caseload	Costs per Client	19/20	487,428.54	45	20/21	700,026.00	70	21/22	990,246.92	76				<p>Furthermore, Kings County will develop and adopt policies and procedures to ensure these requirements will be performed on an ongoing basis, of which the adopted policies and procedures will be submitted to DHCS by January 30, 2024.</p> <p>Unfortunately, due to resource impacts being experienced in fiscal year 2022/2023 by such initiatives as the adoption of CalAIM initiative and conversion to a new electronic health record (EHR) because the current EHR (Anasazi) will no longer going to be supported by it's host technology vendor (Cerner), in addition to significant staff shortages to include a vacancy of the MHSA Manager and of the Deputy Director of Administrative Services which oversaw the MHSA Manager position, the County is experiencing a delay in the completion of the MHSA required plan due to DHCS June 30, 2023. The community</p>
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				planning process is complete, and most of the program evaluation is complete; however, it is anticipated the final drafting, budgetary input, and public hearing with Board of Supervisor approval will be completed and submitted to DHCS by October 31, 2023.
8.	2	Kings County did not include a narrative description of the training provided to participants in the Community Program Planning Process (CPPP) in the adopted FY 2020-23 Plan and FY 2020-21 Update. (California Code of Regulations, title 9, section 3300(c)). MHSOAC FY 2014-15 through FY 2016-17 MHSA Plan Instructions (pg	The County must include a description of the training provided to participants in the CPPP in each subsequent adopted Plan and Update hereafter.	The County contracts with EvalCorp Research & Consulting for design, implementation, and reporting of the Community Program Planning Process (CPPP) as it relates to the County’s MHSA Three Year Plan and Annual Updates. EvalCorp does provide training during the CPPP as needed to staff and stakeholders throughout the process, to the extent and in the format needed. However, this was not included in a narrative description within the Plans and Updates as the County does not read within the regulations cited the

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		3); MHSOAC FY 2015-16 MHSA Annual Update Instructions (pg 2)).		<p>requirement to include a description of the training within the Plans and Updates, rather, that it shall be provided during the CPPP as needed. But, a description of the trainings that are provided can be placed within subsequent Plans and Updates, beginning with the Kings County 2023-2026 MHSA Three Year Plan currently being drafted due to DHCS June 30, 2023.</p> <p><i>Cal. Code Regs. tit. 9 § 3300 (3) Training. (A) Training shall be provided as needed to County staff designated responsible for any of the functions listed in 3300(b) that will enable staff to establish and sustain a Community Program Planning Process. (B) Training shall be offered, as needed, to those stakeholders, clients, and when appropriate the client's family, who are participating in the Community Program Planning Process.</i></p> <p>Furthermore, Kings County will develop and adopt policies and procedures to ensure these requirements will be performed on an ongoing basis, of which the adopted policies and</p>

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				<p>procedures will be submitted to DHCS by January 30, 2024.</p> <p>Unfortunately, due to resource impacts being experienced in fiscal year 2022/2023 by such initiatives as the adoption of CalAIM initiative and conversion to a new electronic health record (EHR) because the current EHR (Anasazi) will no longer going to be supported by it's host technology vendor (Cerner), in addition to significant staff shortages to include a vacancy of the MHSA Manager and of the Deputy Director of Administrative Services which oversaw the MHSA Manager position, the County is experiencing a delay in the completion of the MHSA required plan due to DHCS June 30, 2023. The community planning process is complete, and most of the program evaluation is complete; however, it is anticipated the final drafting, budgetary input, and public hearing with Board of Supervisor approval will be completed and submitted to DHCS by October 31, 2023.</p>
9.	3	Kings County's adopted FY 2020-23 Plan and FY 2020-21 Update did not include documentation that the	The County must include documentation that the County Board of	Per the required MHSA County Compliance Certification page for which DHCS supplied the template, the Behavioral Health Director certifies through signature the following

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		County Board of Supervisors adopted the Update or Plan and the date of that adoption. (W&I Code section 5847(a)); MHSOAC FY 2015-2016 MHSA Annual Update Instructions (pg 6); MHSOAC FY 2014-2015 Through FY 2016-2017 MHSA Plan Instructions (pg 5)).	Supervisors adopted the Update or Plan and the date of that adoption in each subsequent adopted Plan and Update hereafter.	<p>statement which includes attesting the Plan and/or Update not only went through Public Comment, Public Hearing, and was approved by the local Mental Health Board, but was also adopted by the Board of Supervisors and the dates associated. Through this templated certificate, it is understood this was the documentation of approval by the Board of Supervisors, as it does not state within the regulations that additional supporting documentation must be included such as a resolution. However, the County can add the minute order as an attachment to the email to further demonstrate approval, beginning with the Kings County 2023-2026 MHSA Three Year Plan currently being drafted due to DHCS October 31, 2023..</p> <p><i>MHSA County Compliance Certification I hereby certify that I am the official responsible for the administration of county mental health services in and for said county and that the County has complied with all pertinent regulations and guidelines, laws and statutes of the Mental Health Services Act in preparing and submitting this annual update,</i></p>

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				<p><i>including stakeholder participation and nonsupplantation requirements.</i></p> <p><i>This annual update has been developed with the participation of stakeholders, in accordance with Welfare and Institutions Code Section 5848 and Title 9 of the California Code of Regulations section 3300, Community Planning Process. The draft annual update was circulated to representatives of stakeholder interests and any interested party for 30 days for review and comment and a public hearing was held by the local mental health board. All input has been considered with adjustments made, as appropriate. The annual update and expenditure plan, attached hereto, was adopted by the County Board of Supervisors on 6/15/2021. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code section 5891 and Title 9 of the California Code of Regulations section 3410, Non-Supplant.</i></p> <p><i>All documents in the attached annual update are true and correct.</i></p>

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10	4	<p>Kings County did not provide the number of children, TAY, adults, and seniors to be served in the adopted FY 2020-21 Update. The county did provide a total number of individuals served; however, not broken down by age group. (W&I Code section 5847(e)).</p>	<p>The County must indicate the number of children, TAY, adults, and seniors to be served in each subsequent adopted</p>	<p>Kings County is currently completing the MHSA 2023-2026 Three Year Plan and Annual Update for which it has amended the program by program table to include number served by age group:</p> <p>Furthermore, Kings County will develop and adopt policies and procedures to ensure these requirements will be performed on an ongoing basis, of which the adopted policies and procedures will be submitted to DHCS by January 30, 2024.</p> <p>Unfortunately, due to resource impacts being experienced in fiscal year 2022/2023 by such initiatives as the adoption of CalAIM initiative and conversion to a new electronic health record (EHR) because the current EHR (Anasazi) will no longer going to be supported by it's host technology vendor (Cerner), in</p>

Status:	<input type="checkbox"/> New	<input type="checkbox"/> Continuing	<input type="checkbox"/> Modification
Target Population:	<input type="checkbox"/> Children Ages 0 – 15	<input type="checkbox"/> Transitional Age Youth Ages 16 – 25	<input type="checkbox"/> Adult Ages 26 – 59
Number Served in FY 2021-2022 by Age Group:	[Redacted]		
Total Served in FY 2021-2022:	[Redacted]		
Cost per person served in FY 2021-2022:	[Redacted]		

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				<p>addition to significant staff shortages to include a vacancy of the MHSA Manager and of the Deputy Director of Administrative Services which oversaw the MHSA Manager position, the County is experiencing a delay in the completion of the MHSA required plan due to DHCS June 30, 2023. The community planning process is complete, and most of the program evaluation is complete; however, it is anticipated the final drafting, budgetary input, and public hearing with Board of Supervisor approval will be completed and submitted to DHCS by October 31, 2023.</p>
11	5	<p>Kings County explained how individuals, and as applicable, their parents, caregivers, or other family members, will be linked to county mental health services, a primary care provider, or other mental health treatment for each Access and Linkage to Treatment Program. However, the County did not explain how each Access and Linkage to Treatment Program will follow up with</p>	<p>The County must not only explain how individuals, and as applicable, their parents, caregivers, or other family members, will be linked to county mental health services, a primary care provider, or other mental health treatment but also how the program</p>	<p>The referral follow-up processes have been reviewed and verified with the Access and Linkage to Treatment Program providers, and additional details about these processes will be included in each subsequent Three-Year Plan/Annual Update, including the Three-Year Plan/Annual Update due June 30, 2023. Language drafted to date to be included is as follows:</p> <p><i>The County's Access and Linkage to Treatment Programs will utilize living and virtual record keeping systems that will provide the full details of each referral as it pertains to</i></p>

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		<p>the referral to support engagement in treatment in the adopted FY 2020-23 Plan and FY 2020-21 Update. (Cal. Code Regs., tit. 9, §§ 3755(h)(4), 3755(h)(5)).</p>	<p>will follow up with the referral to support engagement in treatment for each Access and Linkage to Treatment Program in each subsequent adopted Plan and Update thereafter.</p>	<p><i>the follow up from each program’s involvement in supporting participants’ engagement and outcome of treatment efforts. The reporting systems will be closely monitored and readily available to access by the County upon request.</i></p> <p>Unfortunately, due to resource impacts being experienced in fiscal year 2022/2023 by such initiatives as the adoption of CalAIM initiative and conversion to a new electronic health record (EHR) because the current EHR (Anasazi) will no longer going to be supported by it’s host technology vendor (Cerner), in addition to significant staff shortages to include a vacancy of the MHSA Manager and of the Deputy Director of Administrative Services which oversaw the MHSA Manager position, the County is experiencing a delay in the completion of the MHSA required plan due to DHCS June 30, 2023. The community planning process is complete, and most of the program evaluation is complete; however, it is anticipated the final drafting, budgetary input, and public hearing with Board of Supervisor</p>

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				<p>approval will be completed and submitted to DHCS by October 31, 2023</p> <p>Furthermore, Kings County will develop and adopt policies and procedures to ensure these requirements will be performed on an ongoing basis, of which the adopted policies and procedures will be submitted to DHCS by January 30, 2024.</p>
12	6	Kings County did not include the Annual PEI Report as a part of the adopted FY 2021-24 Plan and/or FY 2020-21 Update. (Cal. Code Regs tit. 9, § 3560.010).	The County must include the Annual PEI Report as part of each subsequent adopted Plan and/or Update hereafter. It must be clearly labeled, indicating what years are being reported and the location of the report within the Plan or Update. The Annual PEI Report is not to be used in lieu of Cal. Code of Regs., tit. 9, § 3755;	The County contracts with EvalCorp Research & Consulting for PEI data report compiling, collection, and analyzing as it pertains to reporting on the County’s Annual PEI Reporting and Three-Year Plans. The County will therefore submit subsequent Annual PEI Reports and Three-Year Plans in accordance with their Fiscal Year June 30th deadline which includes June 30, 2023 for the coming Annual PEI Report due date. The County will clearly label and indicate the exact years and location of each report within each subsequent Plan or Update. Per the request of DHCS, the County will submit the FY 2020-2021 Annual PEI Report as an attachment to the Kings County 2023-2026 Three Year MHSA Plan

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			<p>which are the regulations for the PEI Component of the Plan and Update. DHCS recommends the county submit it as an addendum or attachment to the Plan or Update and include a cover page for the Annual PEI Report with the title: Annual PEI Report FY XXXX to XXXX</p>	<p>which is due by Juen 30, 2023 and include a cover page for the report with the title: Annual PEI Report FY 2020 to 2021</p> <p>Furthermore, Kings County will develop and adopt policies and procedures to ensure these requirements will be performed on an ongoing basis, of which the adopted policies and procedures will be submitted to DHCS by January 30, 2024.</p> <p>Unfortunately, due to resource impacts being experienced in fiscal year 2022/2023 by such initiatives as the adoption of CalAIM initiative and conversion to a new electronic health record (EHR) because the current EHR (Anasazi) will no longer going to be supported by it's host technology vendor (Cerner), in addition to significant staff shortages to include a vacancy of the MHSA Manager and of the Deputy Director of Administrative Services which oversaw the MHSA Manager position, the County is experiencing a delay in the completion of the MHSA required plan due to DHCS June 30, 2023. The community planning process is complete, and most of the</p>

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				program evaluation is complete; however, it is anticipated the final drafting, budgetary input, and public hearing with Board of Supervisor approval will be completed and submitted to DHCS by October 31, 2023.
13	Suggested Improvement 1	<p>DHCS recommends the County include the Three-Year PEI Evaluation report as part of the adopted Plan or Update for each subsequent adopted Plan and Update hereafter (Cal. Code of Regs., tit. 9, § 3560.020). However, the Three-Year PEI Evaluation report is not to be used in lieu of Cal. Code of Regs., tit. 9, § 3755, which are the regulations for the PEI Component of the Plan and Update. DHCS will accept the Three-Year PEI Evaluation report as submitted to MHSAOAC if it is clearly labeled, indicates what years are being reported, and the location of the report is identified within the Plan or Update. DHCS recommends the county include the Three Year PEI Evaluation report as an addendum or attachment to the Plan or Update with a cover page for the Three-Year PEI Evaluation report submitted with the title:</p> <p style="text-align: center;">Three-Year Prevention and Early Intervention Evaluation Report FY XXXX to FY XXXX</p>		The County appreciates this suggested improvement, and is taking it under advisement during it's review of MHSA Plan corrections noted above in the Corrective Action Plan to ensure corrective action is taken in subsequent plans for alignment with regulations and reporting timelines.

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		The Three-Year PEI Evaluation report is due every third year as part of the Plan or Update and shall report on the evaluation(s) for the three prior fiscal years. (Cal. Code of Regs., tit. 9, § 3560.020(a)(1)).		

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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.