

Contra Costa Plan of Correction
Per the County Performance Contract Review Report for Review Dates July 24, 2020

Finding # or Suggested Improvement #	Finding or Suggested Improvement	Recommendation # (State Corrective Action Step / Identify Timeline / and Evidence of Corrections / Mechanisms for Monitoring Effectiveness)		Score – Comments/ Notes
Finding #1	Contra Costa County's Community Services and Supports (CSS) programs/services were not consistent with the approved FY 2017-20 Three-Year Program and Expenditure Plan (Plan), FY 2018-19 Annual Update (Update), and FY 2018-19 Annual Revenue and Expenditure Report (ARER). Specifically, Adult Mental Health Clinic Support, Wellness and Recovery Centers, Older Adult Mental Health Program, Children's Wraparound Support, Miller Wellness Center, Concord Health Center, Liaison Staff, Clinic Support, Forensic Team, and	<p>Recommendation #1: The County must ensure that the program names listed in the CSS component section of the approved FY 2020-23 Plan and FY 2019-20 Update, and each subsequent year thereafter, are consistent with the names in the approved ARER. The budget in the approved Plan and Update should be consistent with the approved ARER. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures. Any discrepancies or name changes must be explained in the approved Plan and Update.</p>	<p>Corrective Action Step: BHS-MHSA staff will collaborate with Finance team to ensure a thorough cross-walk between programs listed in the Plan and the ARER prior to submission. This guidance will be followed moving forward and reflected in the 20-23 Plan and corresponding ARER's.</p> <p>Timeline: 30 Days: MHSA schedules regular bi-monthly meeting time with BHS Finance team. Next meeting set for 2/22/21. <i>See Attachment A</i></p> <p>MHSA utilizes monthly internal team meetings (as needed) to orient new staff to MHSA financials, including ARER and monthly expenditure reports. <i>See Attachment A2</i></p> <p>6 Mos: MHSA and Finance teams have had at least 3 meetings; have established regular communication to share information about updates in program spending, positions and upcoming reports.</p> <p>MHSA team will be responsible for analyzing quarterly expenditure reports in advance of meetings with Finance team. This can be used as a tracking tool for mapping programs to financials and will be reviewed during meetings</p>	The submitted plan is accepted.

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	<p>Quality Assurance are listed in the approved FY 2018-19 Update. These programs are not listed on the FY 2018-19 ARER. The program titled System Development is not listed on the approved FY 2017-20 Plan and FY 2018-19 Update; however is on the FY 2018-19 ARER. (Welfare and Institutions Code (W&I Code) section 5892(g)); California Code of Regulations, Title 9, section 3320(a).</p>		<p>between MHSA and Finance teams.</p> <p>12 Mos: 20-21 ARER (due 12-31-21) will reflect suggested recommendations and correspond clearly with the 20-23 Three Year Plan regarding programs described in the CSS section of the Plan.</p> <p>Evidence of Corrections: Workflow delineated between MHSA staff, BH Administration Project Manager and Finance Team. <i>See Attachment B.</i></p> <p>Folder created in shared drive that contains key working documents, and can be accessed by relevant staff. <i>See Attachment C.</i></p> <p>Staff training – cross training of new team members to read and interpret financial documents. MHSA monthly team meetings or individual supervision meetings can be used for this purpose.</p> <p>Regular bi-monthly meetings established between MHSA, Project Manager and Finance teams.</p>	

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			<p>Mechanisms for Monitoring Effectiveness: Standing meetings between MHSA and Finance staff to cross reference documents and ensure effective communication.</p>	
Finding #2	<p>Contra Costa County did not provide an estimate of the number of clients to be served each year in each Full Service Partnership (FSP) targeted age group in the approved FY 2017-20 Plan. (Cal. Code of Regs., tit. 9, § 3650(a)(3)).</p>	<p>Recommendation #2: The County shall provide an estimate of the number of FSP clients the County plans to serve in each age group: children (0-15), transitional age youth (16-25), adult (26-59), and older adult (60 and older) for each fiscal year of the approved FY 2020-23 Plan and each subsequent Plan thereafter.</p>	<p>Corrective Action Step: Contra Costa FSP’s currently do serve Older Adults, but numbers were previously included in total Adult category. MHSA team has initiated steps to report Older Adults as a separate category. The estimated numbers to be served for the Older Adult FSP age group will be identified in the Three Year Plan and Annual Updates moving forward, beginning with the 20-23 Plan.</p> <p>Timeline: 30 Days: MHSA has reached out to Adult FSP Providers: Hume Center, Mental Health Systems and Familias Unidas to request future reporting and estimates in numbers served include Older Adults category as separate from Adults. Information has been provided for current year and incorporated into 20-23 Three Year Plan that will be finalized later this spring.</p> <p>12 Months: FY 21-22 Annual Plan will include an estimate of number served by FSP’s in each age category including Older Adults.</p>	<p>The submitted plan is accepted.</p>

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			<p>Evidence of Corrections: The 20-23 Three Year Plan has tables illustrated under the CSS component that demonstrate FSP clients served according to age group. In the 20-23 Three Year Plan, this has been modified to include Older Adults as a separate category. <i>See Attachment D.</i></p> <p>Mechanisms for Monitoring Effectiveness: DCR Reports & Annual reporting from FSP programs – used to verify outcomes. Existing Quarterly FSP Provider Meetings – can be utilized, as needed, to discuss any questions or concerns regarding the process.</p>	
Finding #3	Contra Costa County lacked summarized data for each Prevention and Early Intervention (PEI) program in the approved FY 2018-19 Update. (Cal. Code of Regs., tit. 9, §§ 3560.010, 3560.020).	<p>Recommendation #3: The County must include all Prevention and Early Intervention Report data for each PEI program component (Early Intervention, Outreach for Increasing recognition of Early Signs of Mental Illness, Prevention, Stigma and Discrimination Reduction, Access and Linkage to Treatment,</p>	<p>Corrective Action Step: PEI Data has been collected annually since FY 16- 17, per regulations, and reported in an annual PEI Report. MHSA staff will incorporate the most current existing data into the Three Year Plan by inserting a new data section into the PEI portion of the Three Year Plan.</p> <p>Timeline: 30 Days: MHSA staff takes PEI data reported by PEI providers in FY19-20 and modifies 20-23 Three Year Plan to include that information.</p>	The submitted plan is accepted.

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		and Suicide Prevention) required by the Cal. Code of Regs., tit 9, § 3560.010 in the approved FY 2019-20 Update and each subsequent Update thereafter.	<p>6 Months: PEI Supervisor is fully on-boarded and trained in process of collecting PEI data and creating aggregate reports.</p> <p>12 Months: 21-22 Annual Update includes PEI data.</p> <p>Evidence of Corrections: PEI Data is reflected in 20-23 Plan under the PEI component in the section labeled as <i>PEI Data</i>. <i>See Attachment E.</i></p> <p>Mechanisms for Monitoring Effectiveness: MHSA staff will utilize data contained in the PEI Annual Report, and ensure it is also reflected in future 3 Year Plans and Annual Updates. Thorough cross- walk will occur. To be addressed in monthly MHSA Team Meetings, as needed.</p>	
Finding #4	Contra Costa County’s Innovation (INN) programs/services were not consistent with the approved FY 2017-20 Plan, FY 2018-19 Update, and FY 2018-19 ARER. Specifically, the program Emerging Projects is listed in the	Recommendation #4: The County must ensure that the program names listed in the INN component section of the approved FY 2020-23 Plan, FY 2019-20 Update, and each subsequent year thereafter, are consistent with the	<p>Corrective Action Step: Actions steps for Finding # 4 follow the same process as #1.</p> <p>BHS-MHSA staff will collaborate with Finance team to ensure a thorough cross-walk between programs listed in the Plan and the ARER prior to submission. This guidance will be followed moving forward and reflected in the 20-23 Plan and corresponding ARER’s.</p> <p>The County will be sure to include all Innovation</p>	The submitted plan is accepted.

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	<p>approved FY 2018-19 Update; however is not listed in the FY 2018-19 ARER. The programs CBSST (Emerging Project), CORE (Emerging Project), and LGBTQ – Youth are not listed on the approved FY 2017-20 Plan and FY 18-19 Update. These program are listed on the FY 2018-19 ARER. (W&I Code section 5892; Cal. Code of Regs., tit. 9, § 3320(a).</p>	<p>names in the approved ARER. The budget in the approved Plan and Update should be consistent with the approved ARER. If the program or service did not occur, report the program or service on the approved ARER and indicate zero expenditures. Any discrepancies or name changes must be explained in the approved Plan and Update.</p>	<p>programs accurately, even those listed in the Plan that may not end up being funded in that reporting year.</p> <p>Timeline: The County will ensure the ARER contains Innovation programs/services that are consistent with the Plan, beginning with the 19-20 ARER.</p> <p>30 Days: MHSA schedules regular bi-monthly meeting time with BHS Finance team. First meeting set for 2/22/21. <i>See Attachment A.</i></p> <p>MHSA utilizes monthly internal team meetings (as needed) to orient new staff to MHSA financials, including ARER and monthly expenditure reports. <i>See Attachment A2</i></p> <p>6 Mos: MHSA and Finance teams have had at least 3 meetings; have established regular communication to share information about updates in program spending, positions.</p> <p>MHSA team will be responsible for analyzing quarterly expenditure reports in advance of meetings with Finance team. This can be used as a tracking tool for mapping programs to financials and will be reviewed during meetings between MHSA and Finance teams.</p>	

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		<p>12 Mos: 20-21 ARER (due 12-31-21) will reflect suggested recommendations and correspond clearly with the 20-23 Three Year Plan regarding programs described in the INN section of the Plan.</p> <p>Evidence of Corrections: Workflow established between MHSA staff, BH Admin Project Manager and Finance Team. Folder created in shared drive that contains key working documents. <i>See Attachment B.</i></p> <p>Staff training – cross training of new team members to read and interpret financial documents.</p> <p>Regular bi-monthly meetings between MHSA, Project Manager and Finance teams.</p> <p>The 19-20 Plan contains the following Innovation programs: Coaching to Wellness, Partners in Aging, Overcoming Transportation Barriers, Center for Recovery and Empowerment, Cognitive Behavioral Social Skills Training, and Administrative Support. This also reflective of the 19-20 ARER.</p>	

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			Mechanisms for Monitoring Effectiveness: Standing meetings between MHSA and Finance staff to cross reference documents and ensure effective communication.	