

**Mental Health Services Act (MHSA) Performance Review Report
Mariposa County Program Review
April 22-23, 2025**

FINDINGS

Finding #1: Mariposa County lacked clear and consistent documentation of achievement in performance outcomes in all Community Services and Support (CSS), Prevention and Early Intervention (PEI), and Innovation (INN) programs and services in the adopted Fiscal Year (FY) 2023-26 Three-Year Program and Expenditure Plan (Plan). (County Performance Contract (6)(A)(5)(d); (Welfare and Institution Code (W&I Code) section 5848).

Recommendation #1: The County must provide evidence of compliance for achievement in performance outcomes for all direct services for CSS, PEI, and INN programs and services for FY 2023-24.

Finding #2: Mariposa County did not indicate the number of children, transition aged youth (TAY), adults, and older adults to be served, and did not provide the cost per person in direct service programs for Prevention and Early Intervention (PEI), and Innovation (INN) in the FY 2023-26 Plan. (W&I Code section 5847(e)).

Recommendation #2: The County must provide evidence of compliance for the estimated number of children, TAY, adults, and older adults per age group, to be served, and indicate the cost per person for PEI, and INN for FY 2023-24. The County needs to clearly identify the number of clients served by age group, not collectively representing them as one group, as an example in the Case Management Program.

Finding #3: Mariposa County did not address all the components in their assessment of the county's capacity to implement proposed mental health programs and services in the adopted FY 2023-26 Plan. Specifically, only the following components were addressed:

- 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.
- b. Identification of possible barriers to implementing the proposed programs/services and methods of addressing these barriers.
(California Code of Regulations (Cal. Code Regs.), title 9, section, 3650(a)(5)).

Recommendation #3: The County must provide evidence of compliance with an assessment of its capacity to implement mental health programs and services which addresses and includes all the following required components:

- a. Bilingual proficiency in threshold languages,
- b. Percentages of diverse cultural, racial/ethnic and linguistic groups represented among direct service providers, as compared to percentage of the total population needing services and the total population being served.

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Finding #4: Mariposa County does not have an identified Access and Linkage to Treatment Program in the adopted FY 2023-26 Plan, and did not provide regulatory evidence of opting out of this program, per Cal. Code Regs., tit. 9, §§ 3705(a)(4)(A)(1), 3705(a)(4)(B).

Recommendation #4: The County must provide evidence of compliance of an Access and Linkage to Treatment Program in the Prevention and Early Intervention (PEI) component for FY 2023-24 and/or evidence of opting out of the program per Cal. Code Regs., tit. 9, §§ 3705(a)(4)(A)(1), 3705(a)(4)(B).

Finding #5: Mariposa County did provide evidence from the Board Of Supervisors (BOS) that the county cannot meet the requirement to have an Access and Linkage to Treatment Program; and did not provide documentation describing the rationale of county decisions and how the county ensured meaningful stakeholder involvement in the decision to opt out. (Cal. Code Regs., tit. 9, §§ 3705(a)(4)(A)(1); 3705(a)(4)(B)).

Recommendation #5: The County must provide evidence of compliance of a resolution from the BOS that the County cannot meet the requirement to have an Access and Linkage to Treatment Program and provide documentation describing the rationale for the County's decision to opt out and how the County ensured meaningful stakeholder involvement in the decision to opt out.

SUGGESTED IMPROVEMENTS

Suggested Improvement #1: The Department of Health Care Services (DHCS) recommends the County write Specific, Measurable, Achievable, Relevant, and Time-bound (SMART) goals that can be tracked, analyzed, and reported for their documentation of achievement in performance outcomes for direct services for each CSS, PEI and INN program. For example, a goal from the Friendly Visitor program presented in the adopted FY 2023-26 Plan, *“provides social opportunities and companionship weekly for 30-60 minutes in person and/or over the phone, intended to help elderly adults prevent or overcome physical and mental health risks associated with isolation and loneliness”* is not specific. An example of a SMART goal that could be used is *“Increase elderly client’s participation in weekly activities by 20% over the next three months.”* In this example, the goal states what will be measured, provides a measurable quantitative item, is achievable because the County provides social engagement, is relevant because outreach and engagement is essential to providing quality mental health services, and is time-bound because it gives a specific unit of time of data to be collected, measured, and reported.