

Mental Health Services Act (MHSA) Performance Contract Review Report
San Benito County Program Review
July 22, 2020

FINDING #1: San Benito County submitted the FY 2018-19 Annual Revenue and Expenditure Report (ARER) past the due date. (California Code of Regulations, title 9, section 3510(b)).

Recommendation #1: The County must submit the FY 2019-20 ARER no later than January 31, following the end of the fiscal year.

FINDING #2: San Benito County lacked evidence that training in the Community Program Planning Process (CPPP) is offered, as needed, to stakeholders, clients, and when appropriate the client's family, who are participating in the CPPP. (Cal. Code Regs., tit. 9, § 3300(c)(3)(B)).

Recommendation #2: The County must offer training as needed in the CPPP to stakeholders, clients, and when appropriate the client's family, who are participating in the CPPP. CPPP training for stakeholders may include, but is not limited to MHSA background information, General Standards pursuant to Cal. Code Regs., tit. 9, § 3320, the County's programs and services, program planning and implementation, monitoring and quality improvement, evaluation, fiscal and budget components and processes for stakeholders to provide feedback to the County such as through the local review process and MHSA Issue Resolution Process.

FINDING #3: San Benito County lacked a narrative analysis that assesses mental health needs of unserved, underserved/inappropriately served and fully served County residents who qualify for MHSA services; and an assessment of its capacity to implement the proposed programs/services in the approved FY 2017-20 Three-Year Program and Expenditure Plan (Plan). (Cal. Code Regs., tit. 9, § 3650(a)(5)).

Recommendation #3: The County must assess the strengths and limitations of the County and its service providers for their ability to meet the needs of racially and ethnically diverse populations and address all components of Cal. Code Regs., tit 9, § 3650(a)(5) in the approved FY 2020-23 Plan and each subsequent Plan thereafter.

FINDING #4: San Benito County did not provide an estimate of the number of clients, in each age group, to be served in the Full Service Partnership Service (FSP) Category for each fiscal year in the approved FY 2017-20 Plan. (Cal. Code of Regs., tit. 9, § 3650(a)(3)).

Recommendation #4: The County must provide an estimate of the number of FSP clients 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 in the approved FY 2020-23 Plan and each subsequent Plan thereafter.

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SUGGESTED IMPROVEMENTS

Item #1: MHSA Transparency and Consistency

Suggested Improvement #1a: The Department of Health Care Services (DHCS) recommends programs identified in the approved Plan and Annual Update (Update) (e.g. has distinct program descriptions) match program names and services consistently within the approved Plan and Update budgets and ARER. Specifically, the County must divide the Community Services and Supports (CSS) section in the approved Plans and Updates into separate FSP, General System Development (GSD) and Outreach and Engagement (O&E) program descriptions to be consistent with the budget and ARER.

Suggested Improvement #1b: DHCS recommends the County ensure combined and standalone Prevention and Early Intervention (PEI) programs are reported consistently in the approved Plans, Updates, budget and ARER.

Suggested Improvement #1c: DHCS recommends the ARER be consistent with the budget in the approved Plans and Updates. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures. Provide an update of that program or service in the following approved Plan or Update.

Item #2: MHSA Policies and Procedures

Suggested improvement #2a: DHCS recommends the County incorporate details on how staff and stakeholder training on MHSA and CPPP is determined “as needed” in the MHSA Planning Requirements policy and procedure.

Suggested Improvement #2b: DHCS recommends the County include how the CPPP and local review process will be documented in the MHSA Planning Requirements policy and procedure.

Item #3: CPPP in Approved Plans and Updates

Suggested Improvement #3a: DHCS recommends the County include in the approved Plans and Updates the number of stakeholders who participated in the CPPP and corresponding stakeholder demographic information, including but not limited to geographic location, age, gender, race/ethnicity, unserved and/or underserved population, client, client family member and constituent group as applicable.

Suggested Improvement #3b: DHCS recommends the County include a description of feedback received from stakeholders through the CPPP in the approved Plans and Updates (e.g. survey results, stakeholder meetings, targeted focus group discussion topics, etc.).

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CONCLUSION

The Department of Health Care Services' MHSA Program Monitoring Unit conducted a review of San Benito County Behavioral Health Services' MHSA Program on July 22, 2020. San Benito County's strengths include targeted programs for unserved and underserved populations of their community; specifically, a LGBTQ+ program and implementation of a Diversion and Behavioral Health Court program. In addition, the County has established vocational peer positions including nine peer mentors at the wellness center, to work with consumers in the drop-in center. The County's main challenges stem from its proximity to other Bay Area communities and competition for resources. Hiring and retention of staff has been difficult due to neighboring larger counties, such as San Francisco and San Mateo, due to their ability to lure potential candidates for employment.