

Los Angeles County Plan of Correction
Per the County Performance Contract Review Report for Review Dates February 28-29, 2019

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	Los Angeles County lacked sufficient training for contracted service providers and stakeholders on the Community Program Planning Process (CPPP) and opportunities to participate in and contribute towards the CPPP. Discussions with service providers and clients during program site visits indicated that service providers and clients were often unaware of the opportunities to take part in the CPPP. (Welfare and Institutions (W&I) Code, Section 5848; California Code of Regulations, Title 9, § 3300, 03310 (e)).	Recommendation #1: The County shall provide regular training and outreach to service providers and clients on opportunities to take part in the CPPP, in order to increase stakeholder involvement.	<ul style="list-style-type: none"> • A training plan for providers and clients on how to participate in the CPPP will be developed by June 30, 2020 • The developed training plan will be outlined in the MHSA approved FY 2020-23 Three-Year Program and Expenditure Plan 07/2020 and FY 2018-19 Annual Update and in each subsequent Plan and Update 	The submitted plan is accepted.

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Suggested Improvement #1	MHSA Training	Suggested Improvement #1: Department of Health Care Services (DHCS) discussions with County staff and contracted service providers indicated that staff are not trained regularly on MHSA program policies and procedures. DHCS recommends the County regularly train all Mental Health employees and service providers involved in the complete delivery of services to recipients of MHSA programs, on MHSA program policies and procedures.	<p>LACDMH will develop and implement MHSA policy and procedures training opportunities for directly operated and contracted staff delivering MHSA services within the following timeline:</p> <ol style="list-style-type: none"> 1. Compile existing, updated administrative policy and procedures from identified MHSA program leads by 11/30/20 2. Design a MHSA 101 training to MHSA service delivery staff by 06/30/21 3. Develop a tracking mechanism to ensure all MHSA programs are offered this training by 07/30/21 4. Secure approval from Departmental management to implement MHSA 101 curriculum by 08/30/21 5. Initiate implementation of MHSA 101 training to all applicable service delivery staff by 01/1/21 	The submitted plan is accepted.

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			<p>LACDMH will also conduct quarterly MHSA orientation/training for new community stakeholders through Service Area Advisory Committees (SAACs) and the Underserved Cultural Community Subcommittees (UsCC) meetings regarding their roles as stakeholders beginning 01/30/2020</p> <p>The first orientation/training will take place on or before December 1, 2019 and will be monitored through review and cross reference of sign-in sheets.</p>	
Suggested Improvement #2	Collaboration with Education	Suggested Improvement #2: DHCS discussions with service providers during program site visits indicated that service providers often have difficulty building relationships with select schools when needed for the purpose of outreach and engagement for MHSA programs. DHCS recommends the County work to increase collaboration and lines of	<p>DMH has been working closely with Los Angeles County of Education (LACOE) and Los Angeles Unified School District (LAUSD) since January 2019 to establish School Based Community Access Platforms (SBCAP). SBCAP expands access to prevention services and supports to students and their families towards individual and community wellbeing and stability.</p> <p>This growing partnership between DMH and LACOE/LAUSD will result in improved communication and collaboration between DMH, school districts, and community mental health providers.</p> <p>a) Convene quarterly Service Area meetings between DMH School</p>	The submitted plan is accepted.

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		<p>communication with applicable County departments as well as school leadership and staff, as needed.</p>	<p>coordinators, school districts, and community mental health providers. Initiated on 7/1/18</p> <p>b) Quarterly/monthly meetings between DMH and LACOE/LAUSD Administration. Initiated on 1/1/19</p> <p>c) Countywide Quarterly meetings between DMH and community mental health providers. Anticipated start date 12/1/19</p> <p>d) Develop surveys for community mental health providers as a means of collecting concerns about providing MHSA services at/for schools. Anticipated start date 1/1/20</p> <p>e) Develop a school manual for community mental health providers to encourage school mental health best practices. Anticipated date of completion 3/1/20</p> <p>f) Develop a series of trainings for school staff and for community mental health providers to promote trauma- and</p>	

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			resilience- informed practices in schools anticipated start date 6/1/20	
Suggested Improvement #3	Collaboration with Courts and Correctional Facilities	Suggested Improvement #3: DHCS discussions with service providers during program site visits indicated that service providers often have difficulty building relationships with select courts and correctional facilities, when needed for the purpose of outreach and engagement for MHSA programs. DHCS recommends the County work to increase collaboration and lines of communication with applicable County departments and with leadership and staff within the judicial and correctional systems.	<p>DMH has implemented the Mental Health Court Linkage Program (MHCLP). The objectives of the program are to increase coordination and collaboration between the criminal justice and mental health systems, improve access to mental health services and supports, and enhance continuity of care.</p> <p>MHCLP develops working relationships with the individual service providers to ensure that our clients are provided with the most appropriate plan back into the community. Clinicians work closely with the Service Area Navigators and Community-based providers to link consumers to treatment programs, taking in account best-fit treatment options and Court stipulations.</p>	The submitted plan is accepted.

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Suggested Improvement #4	Issue Resolution Log	Suggested Improvement #4: DHCS discussions with County staff and contracted service providers indicated that grievance logs maintained at the service provider level are not communicated to the County for inclusion in the MHSA Issue Resolution Log.	LACDMH has a process for accepting grievances on its website located at: https://dmh.lacounty.gov/about/mhsa/issue-resolution and will include a policy and procedure for ensuring grievance logs maintained at the service provider level are communicated to the County as part of the training opportunities indicated in Item #1 – MHSA Training.	The submitted plan is accepted.
Suggested Improvement #5	MHSA Transparency and Consistency	Suggested Improvement #5: DHCS recommends program names and service categories detailed in the Plan and Update match the program names and service categories in the ARER. The ARER should be consistent with the budget in the Plan and Update. If the program or service did not occur, still report the program or service on the ARER and indicate zero expenditures.	DMH will ensure the program names and service categories detailed in the approved Plan and Update match the program names and service categories in the Annual Revenue and Expenditure Report (ARER). The ARER is a standard format based on the MHSA Work Plans. Programs and services identified in the Plan and Update may rollup to the MHSA Work Plans. DMH will be sure the link the information so that is related and understandable. Consistent with above. DMH will ensure that the ARER is consistent with the	The submitted plan is accepted.

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		DHCS recommends the County provide a budget for each fiscal year in the Plan and Update and update the budget in each subsequent Annual Update.	budget in the approved Plan and Update. We will identify and relate the programs and services to the MHSA Work Plans in the ARER. DMH will include a budget page for each FY in the Plan and Update.	