

**Mendocino County Plan of Correction**  
**Per the Performance Contract Review report for review dates August 27-29, 2018**

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	Mendocino County FY 2016-17 Annual MHA Revenue and Expenditure Report (ARER) was submitted later than December 31 following the end of the fiscal year. (California Code of Regulations., tit. 9, § 3510(b)).	<p>Recommendation #1: The County shall submit its FY 2017-18 ARER no later than December 31, 2018 following the end of the fiscal year and all subsequent FY ARER's by December 31st following the close of the fiscal year thereafter.</p>	<p>The Mendocino County FY 17-18 ARER was submitted to DHCS on time by December 28, 2018.</p> <ol style="list-style-type: none"> <li>The County shall create Policy #III.B.2B MHA Fiscal Documentation and Reporting, outlining the process and timeline related to submitting and posting the ARER, specifying that the ARER will be submitted by December 31 following the close of the fiscal year. This policy shall be created by October 1, 2019. Evidence shown with submission of policy</li> </ol> <p>The county will train all MHA Fiscal staff on the Policy by November 1, 2019. Evidence shown with submission of Agenda and Sign in Sheets.</p>	The submitted plan is accepted.
Finding #2	Mendocino County FY 2016-17 ARER was not posted on the County website prior to the program site review. (Cal. Code Regs., tit. 9, § 3510.010(b)(1)).	<p>Recommendation #2: The County shall within 30 days of submitting the MHA ARER report to Department of Health Care Services (DHCS), post a copy of the ARER to the County's website. The County will post on their website the FY</p>	<p>The Mendocino County FY 2017-18 ARER was posted to the Mendocino County MHA Website January 3, 2019.</p> <ol style="list-style-type: none"> <li>The County shall create Policy #III.B.2B MHA Fiscal Documentation and Reporting outlining the process and timeline related to posting the ARER. The policy specifies that the County will post the ARER to the website within 30 days of submitting to DHCS, (and</li> </ol>	The submitted plan is accepted.

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		2017-18 ARER within 30 days of submitting to the state and thereafter.	no later than January 30 of each year). This policy shall be created by October 1, 2019. Evidence shown with submission of the policy. 2. The County will train all MHSA staff on the Policy by November 1, 2019. As evidenced by Agenda and Sign in Sheets.	
Finding #3	Recommendation #3: The County needs to demonstrate that programs/services providing mental health services to clients is consistent with GSD funds in accordance with regulation. The approved Plan, Update and ARER should match with program names for each GSD programs under Community Services and Supports (CSS) component. All GSD programs/services	Recommendation #3: The County needs to demonstrate that programs/services providing mental health services to clients is consistent with GSD funds in accordance with regulation. The approved Plan, Update and ARER should match with program names for each GSD programs under Community Services and Supports (CSS) component. All GSD programs/services should be described and reported in the	Mendocino County will ensure consistency in our Program and Expenditure Plans, Annual Updates and ARER categorize programs as FSP and Non FSP for each Plan, Update, ARER and thereafter. 1. The County shall update the Policy III.A.2B Mental Health Services Act-Community Services and Supports by August 26, 2019 to improve clarity of CSS program types. Evidence shown with submission of the policy. The County will train al MHSA staff on the updated policies by October 1, 2019. Evidence shown with submission of the Agenda and Sign in Sheets.	The submitted plan is accepted.

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	should be described and reported in the correct service category under Non-FSP Programs with an expenditure budget in the FY 2020-23 Plan, FY 2017-18 Update and the FY 2017-18 ARER and thereafter.	correct service category under Non-FSP Programs with an expenditure budget in the FY 2020-23 Plan, FY 2017-18 Update and the FY 2017-18 ARER and thereafter.		
Finding #4	Mendocino County Community Services and Supports (CSS) program/services implementation is not consistent with the approved FY 2017-20 Plan, FY 2016-17 Update and FY 2016-17 ARER.(Welfare and Institution (WIC) Code, Section 5892(g)).	Recommendation #4: All expenditures for the County’s mental health programs shall be consistent with a currently approved Plan or Update. The approved Plan, Update and ARER should match with program names for each CSS component. All CSS programs/services should be described and reported in the correct service category with an	Mendocino County has added more detail into the Program descriptions to more clearly show consistency between Plan, Budget, ARER, and Summary/Evaluation documents. The county will ensure consistency between the Plan/Update/ARER/Summary for each Plan/Update/ARER and Summary/Evaluation document thereafter. <ol style="list-style-type: none"> <li>1. Mendocino County MHSA shall develop a policy on program monitoring by October 1, 2019 to ensure program implementation and reporting is consistent with the approved plan, and clearly articulates the service categories.</li> </ol>	The submitted plan is accepted.

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		expenditure budget in the FY 2020-23 Plan, FY 2017-18 Update and the FY 2017-18 ARER and thereafter.	Evidence shown with submission of the policy. Mendocino County MHSA will train all MHSA staff on the updated policy by November 1, 2019. Evidence shown with submission of sign in sheets and Agenda,.	
Finding #5	Mendocino County’s Prevention and Early Intervention (PEI) component in the FY 2017-18 Plan and FY 2016-17 Update lacked documentation as required by regulations (i.e., identification of target population, type of program offered (Stigma & Discrimination Reduction, Early Intervention, Access and Linkage to Treatment, etc)) . (Cal. Code Regs., tit. 9, § 3755).	Recommendation #5: The County must incorporate the Prevention and Early Intervention component requirements and address all components of the Cal. Code of Regs., tit. 9, § 3755 in the FY 2020-2023 Plan and FY 2017-18 Update and thereafter.	Mendocino County has clearly designated each of the PEI types of programs beginning with the FY 17-20 Three-year Plan. Each of the PEI categories is represented. <ol style="list-style-type: none"> <li>1. Beginning in FY 18-19 Annual Update, target numbers were more thoroughly described in the plan, and will continue thereafter. Evidence shown with submission of the 18/19 and 19/20 Annual Updates.</li> </ol> The County’s MHSA PEI policy III.A.4B specifies that Mendocino County shall document PEI program type to identify target populations and type of PEI program offered. Evidence shown with submission of policy.	The submitted plan is accepted.

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Finding #6	Mendocino County did not select and use a validated method to measure changes in attitudes, knowledge and/or behavior related to mental illness or changes in attitudes, knowledge, and/or behavior related to seeking mental health services for each Stigma Reduction Program in the FY 2017-20 Plan and FY 16-17 Update. It is not specified how the proposed method is likely to bring about the selected outcomes and the validated method to measure the changes in attitude, knowledge and/or behavior related to mental illness or seeking mental health services. (Cal. Code	<p>Recommendation #6:            The County shall include the requirements of each Stigma and Discrimination Program and address all components of Cal. Code of Regs., tit. 9, § 3755(f) in their FY 2020-23 Plan and FY 17-18 Update and thereafter.</p>	<p>Mendocino County has added more detail into the Stigma Reduction Program descriptions to more clearly delineate the methods to measure changes in attitudes, knowledge, and/or behavior and the methods to measure those.</p> <ol style="list-style-type: none"> <li>1. Mendocino County added more detail to the 19/20 Annual Update. Evidence shown with submission of the 19/20 Annual MHSa Plan Update (in Public Comment 7/18/19-8/21/19).</li> <li>2. Mendocino County shall develop a policy on MHSa program monitoring by October 1, 2019. Evidence shown with submission of the Policy.</li> </ol> <p>All MHSa staff shall be trained in the policy by November 1, 2019. Evidence shown with submission of Sign in Sheets and Agenda.</p>	The submitted plan is accepted.

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	of Regs., tit. 9, §§ 3750(d), 3755(f)).			
Finding #7	The County does not dedicate at least 51% of their PEI funds to serve individuals 25 years or younger. (Cal. Code of Regs., tit 9, § 3706(b)).	<p>Recommendation #7:            The County shall demonstrate that at least 51% of the PEI funds used shall be used to serve individuals 25 years or younger on the FY 2017-18 ARER and thereafter.            The County should develop and implement accounting and cost allocation policies and procedures that will allow the County to allocate a majority of PEI funds to serve individuals 25 years or younger.</p>	<p>Mendocino County is in the process of planning for the 2020-23 Three-Year Plan.</p> <ol style="list-style-type: none"> <li>1. The County shall develop and implement a cost allocation policy by October 1, 2019. Evidence shown with submission of the policy.</li> <li>2. All MHSA staff shall be trained in the policy by November 1, 2019. Evidence shown with submission of Sign in Sheets and Agenda.</li> <li>3. A County-wide training will be offered to providers and community members by November 1, 2019.</li> </ol> <p>Planning for the 2020-23 Three-Year Plan will delineate the population they will serve to ensure PEI funds are allocated to individuals 25 and younger. The competitive process will be released by February 28, 2020. Evidence shown with submission of the 2020-23 Three Year Plan.</p>	The submitted plan is accepted.
Finding #8	Mendocino County PEI programs/services implementation is not consistent with the approved FY 2017-19	<p>Recommendation #8:            All expenditures for the County’s mental health programs shall be consistent with a currently approved</p>	<p>Mendocino County has worked to create consistency between Plans, Budgets, ARERs, and Summary/Evaluation documents. The county will ensure consistency with the Plan/Update/ARER and Summary Evaluation documents with</p>	The submitted plan is accepted.

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	Plan, FY 2016-17 AU and FY 2016-17 ARER. There is inconsistency in program name, target population and budgets. (W&I) Code, Section 5892(g)).	Plan or Update. The County must align PEI programs/services implementation with the approved FY 2020-23 Plan, FY 2017-18 Update and FY 2017-18 ARER.	each Plan/Update/ARER and Summary evaluations and thereafter. <ol style="list-style-type: none"> <li>1. Mendocino County shall develop a policy on MHSA program monitoring by October 1, 2019. As evidenced by submitting the policy.</li> <li>2. All MHSA staff shall be trained in the policy by November 1, 2019. Evidence shown with submission of Sign in Sheets and Agenda.</li> </ol>	
Suggested Improvement #1	MHSA Contract Development and Monitoring	Suggested Improvement #1: Department of Health Care Service (DHCS) recommends the county evaluate their service provider contract deliverables at least quarterly to confirm the scope of work has been performed and that the measureable outcomes are consistent with the goals and objectives of the services/program of the currently	Mendocino County has a contract review and monitoring process that will be formalized to include a quarterly review that is tracked. <ol style="list-style-type: none"> <li>1. Mendocino County will develop a policy on MHSA program monitoring by October 1, 2019. Evidence shown with submission of the policy.</li> <li>2. All MHSA staff shall be trained in the policy by November, 1, 2019. Evidence shown with submission of Training Sign in Sheets and Agenda.</li> <li>3. Mendocino County will develop a contract monitoring tracking list by November 1, 2019. Evidence shown with submission of the Tracking Tool.</li> </ol>	The submitted plan is accepted.

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		approved Plan and Update.	MHSA staff shall monitor the tracking tool and contract review process quarterly.	
Suggested Improvement #2	Consistency between the approved FY Plan, Update, and ARER	Suggested Improvement #2: DHCS recommends the County’s MHSA program names and service categories detailed in the Plan, AU and ARER must match; and placed in correct service component based on regulations. 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.	Mendocino County improved consistency in the names and service categories detailed in the Plan, Annual Updates, ARER, Budget, and Summary/Evaluation documents in FY 18/19. The county will ensure consistency between Plan/Updates/ARER and Summary Evaluation documents with each Plan/Update/ARER and Summary evaluation documents thereafter. <ol style="list-style-type: none"> <li>1. Mendocino County will develop a policy on MHSA program monitoring by October 1, 2019. Evidence shown with submission of the policy.</li> <li>2. Mendocino County will develop a contract monitoring tracking list by November 1, 2019. Evidence shown with submission of the Monitoring Tracking Tool.</li> <li>3. All MHSA staff shall be trained in the policy by November 1, 2019. Evidence shown with submission of Training Sign in Sheets and Agenda.</li> </ol> Mendocino County MHSA staff will discuss terms and outlines during regular MHSA staff meetings to ensure consistency	The submitted plan is accepted.

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			between program and fiscal staff. Evidence shown with submission of Agenda and Sign in Sheets.	
Suggested Improvement #3	MHSA Policies, Procedures, Evaluation, and Training	Suggested Improvement #3: 1. DHCS recommends the county develop and implement a defined MHSA program. Such program should identify processes and supports including: a. Policies and procedures that incorporate MHSA general principles and requirements and components (CPPP, CSS, PEI, INN, WET and CFTN) b. Funding and reporting requirements	Mendocino County has a defined MHSA program which includes Policies and Procedures for each of the components of MHSA. Mendocino County completes a Three Year Plan or Annual Update annually. Mendocino County shall have a training process that ensures all MHSA staff and providers are trained in MHSA Policies, Procedures, and Evaluation Processes. 1. Mendocino County will develop a policy on MHSA program monitoring by October 1, 2019. Evidence shown with submission of the policy. 2. Mendocino County will develop a contract monitoring tracking list by November 1, 2019. Evidence shown with submission of the Tracking Log. 3. Mendocino County will provide training for all MHSA staff which will review existing policies on CPP, CSS, PEI, INN, WET, and CFTN and new policies (program monitoring and funding reporting requirements) created as part of this Plan of Correction by November 1,	The submitted plan is accepted.

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		<p>c. Plans and updates</p> <p>d. Other needs such as staffing, performance objectives and outcomes.</p> <p>2. The program should also address how the county will evaluate the effectiveness of services/programs they deliver and their on-going quality improvement strategies.</p> <p>3. DHCS recommends staff education on MHSA program training for all mental health employees and service providers involved in the</p>	<p>2019. Evidence shown with submission Agenda and Sign in Sheets.</p> <p>4. Mendocino County MHSA staff will evaluate MHSA program performance outcomes quarterly.</p> <p>5. Mendocino County MHSA staff shall collect input and feedback with providers and stakeholders strategies to improve service delivery and effectiveness of programs through MHSA Forums every other month. Evidence shown with submission of Agenda and Sign in Sheets.</p> <p>MHSA staff shall develop a training calendar that involves at least one training in MHSA for staff and providers per year. Evidence shown with submission of Training Calendar, and holding a training by November 1, 2019 Evidence shown with submission of Sign in Sheets and Agenda.</p>	

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		complete delivery of services to recipients of MHSA programs; and documentation of annual training.		