

State of California—Health and Human Services Agency Department of Health Care Services



April 12, 2022

Sent via e-mail to: kpier@inyocounty.us

Kimball Pier Deputy Director, Inyo County Behavioral Health 1360 N. Main Street Bishop, CA 93514

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Deputy Director Pier:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Substance Abuse Block Grant (SABG) and the terms of the Contract operated by Inyo County.

The County Compliance Unit (CCU) within the Audits and Investigations Division (A&I) of DHCS conducted a review of the County's compliance with contract requirements based on responses to the monitoring instrument, discussion with county staff, and supporting documentation provided by the County.

Enclosed are the results of Inyo County's Fiscal Year 2021-22 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Inyo County is required to submit a Corrective Action Plan (CAP) addressing each deficiency noted to the Community Services Division (CSD), Community Support Branch (CSB), Policy, Monitoring and Financing Section (PMFS) Analyst by 6/13/2022. Please use enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at SABGcompliance@dhcs.ca.gov.

If you have any questions, please contact me at katrina.beedy@dhcs.ca.gov.

Sincerely,

Katrina Beedy (916) 713-8811

Audits and Investigations Division Medical Review Branch Behavioral Health Compliance Section County Compliance Unit 1500 Capitol Ave., MS 2305 Sacramento, CA 95814 http://www.dhcs.ca.gov

Distribution:

To: Deputy Director Pier:

CC: Mateo Hernandez, Audits and Investigations, Medical Review Branch Acting Chief Lanette Castleman, Audits and Investigations, Behavioral Health Compliance Section Chief Ayesha Smith, Audits and Investigations, Behavioral Health Compliance Unit Chief Michael Bivians, Audits and Investigations, County Compliance Monitoring II Chief Cindy Berger, Audits and Investigations, Provider Compliance Unit Chief Tracie Walker, Community Services Division, Community Support Branch Chief Denise Galvez, Community Services Division, Operations Branch Chief Donna Ures, Community Services Division, Policy, Monitoring and Financing Section Chief Jessica Fielding, Community Services Division, Family Services Section Chief Angelina Azevedo, Community Services Division, Prevention Services Unit Chief Ashley Love, Community Services Division, Family Services Unit Chief SABGcompliance@dhcs.ca.gov, Policy, Monitoring and Financing Section MCBHDMonitoring@dhcs.ca.gov, County/Provider Operations and Monitoring Branch Stephanie Tanksley, Inyo County HHS Senior Program Integrity and Quality Assurance Manager Catie Grisham, Inyo County Addictions Programs Supervisor Ralph Cataldo, Inyo County HHS Administrative Analyst III Gina McKinzey, Invo County MHSA Coordinator/Compliance Manager Marilyn Mann, Inyo County HHS Director

COUNTY REVIEW INFORMATION

County:

Inyo

County Contact Name/Title:

Stephanie Tanksley/Inyo County HHS Senior Program Integrity and Quality Assurance Manager

County Address:

1360 N. Main Street, Bishop, CA 93514

County Phone Number/Email:

760-872-3273 stanksley@inyocounty.us

Date of Review:

3/8/2022

Lead CCU Analyst:

Katrina Beedy

Assisting CCU Analyst:

N/A

Report Prepared by:

Katrina Beedy

Report Approved by:

Ayesha Smith

REVIEW SCOPE

I. Regulations:

- a. California Code of Regulations, Title 22, section 51341.1 Drug Medi-Cal Substance Use Disorder Services
- b. Code of Federal Regulations; Title 45, Part 96; Subpart L; section 96.121 through 96.137: Substance Abuse Prevention and Treatment Block Grant
- c. United States Code, Title 42, Section 300x-21 through 300x-66: Block Grants regarding Mental Health and Substance Use
- d. Health and Safety Code, Division 10.5, Section 11750 11970: Alcohol and Drug Programs

II. Program Requirements:

- a. Fiscal Year (FY) 2020-21 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
- b. Fiscal Year (FY) 2021-22 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
- c. State of California Youth Treatment Guidelines Revised August 2002
- d. DHCS Perinatal Practice Guidelines FY 2018-19
- e. National Culturally and Linguistically Appropriate Services (CLAS)
- f. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
- g. Behavioral Health Information Notices (BHIN)

ENTRANCE AND EXIT CONFERENCE SUMMARIES

Entrance Conference:

An Entrance Conference was conducted via WebEx on 3/8/2022. The following individuals were present:

Representing DHCS:

Katrina Beedy, Associate Governmental Program Analyst (AGPA) Angela Rankin, AGPA

Representing Inyo County:

Kimball C. Pier, Deputy Director, Behavioral Health Services
Catie Grisham, Addictions Programs Supervisor
Gina McKinzey, MHSA Coordinator/Compliance Manager
Ralph Cataldo, HHS Administrative Analyst III
Stephanie Tanksley, HHS Senior Program Integrity and Quality Assurance Manager

During the Entrance Conference, the following topics were discussed:

- Introductions
- Overview of services provided
- Overview of review process

Exit Conference:

An Exit Conference was conducted via WebEx on 3/8/2022. The following individuals were present:

Representing DHCS:

Katrina Beedy, AGPA

Angela Rankin, AGPA

Representing Invo County:

Kimball C. Pier, Deputy Director, Behavioral Health Services

Catie Grisham, Addictions Programs Supervisor

Gina McKinzey, MHSA Coordinator/Compliance Manager

Ralph Cataldo, HHS Administrative Analyst III

Stephanie Tanksley, HHS Senior Program Integrity and Quality Assurance Manager

During the Exit Conference, the following topics were discussed:

- Submitting follow-up evidence
- Due date for evidence submission

SUMMARY OF FY 2021-22 COMPLIANCE DEFICIENCIES (CD)

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the <u>SABG County Application</u>, <u>Enclosure 2</u>, <u>Part I</u>, <u>Section 3</u>, <u>B</u>, <u>5-7</u> each CD identified must be addressed via a CAP. The CAP is due within sixty (60) calendar days of the date of this monitoring report.

Please provide the following within the completed FY 2021-22 CAP:

- a) A statement of the CD.
- b) A list of action steps to be taken to correct the CD.
- c) A date of completion for each CD.
- d) The name of the person who will be responsible for corrections and ongoing compliance.

The PMFS analyst will monitor progress of the CAP completion.

Category 1: ADMINISTRATION

A review of the County's Maintenance of Records, service providers, referrals, services, contracts, and general provisions was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD: 1.4.1:

SABG Application, Enclosure 2, I, 2, B, 2, d

- 2. County shall provide services to all eligible persons in accordance with state and federal statutes and regulations. County shall assure that in planning for the provision of services, the following barriers to services are considered and addressed:
 - d. Language differences.

Findings: The County did not provide evidence demonstrating that in planning for the provision of services, language differences are considered and addressed.

CD: 1.4.2:

SABG Application, Enclosure 2, I, 2, B, 2, g

- 2. County shall provide services to all eligible persons in accordance with state and federal statutes and regulations. County shall assure that in planning for the provision of services, the following barriers to services are considered and addressed:
 - g. Needs of persons with a disability

Findings: The County did not provide evidence demonstrating that in planning for the provision of services, the needs of persons with a disability are considered and addressed.

CD: 1.5.1:

SABG Application Enclosure 2, II, 17

17. Byrd Anti-Lobbying Amendment (31 USC 1352)

County certifies that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 USC 1352. County shall also disclose to DHCS any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not provide evidence demonstrating County and subcontractor compliance with the Byrd Anti-Lobbying Amendment (31 USC 1352) provision.

CD: 1.5.4:

SABG Application, Enclosure 2, II, 13

13. Trafficking Victims Protection Act of 2000

County and its subcontractors that provide services covered by this Contract shall comply with the Trafficking Victims Protection Act of 2000 (USC, Title 22, Chapter 78, Section 7104) as amended by section 1702 of Pub. L. 112-239.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating County and subcontractor compliance with the Trafficking Victims Protection Act of 2000 (USC, Title 22, Chapter 78, Section 7104) as amended by section 1702 of Pub. L. 112-239 provision.

Category 2: PREVENTION

A review of the SABG Strategic Prevention Plan was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD: 2.1.2:

SABG Application, Enclosure 2, III, 3 A-E

2. Primary Prevention Substance Use Disorder Data Service

The Primary Prevention Substance Use Disorder Data Service (PPSDS) business rules and requirements are:

- A. Contractors and/or subcontractors receiving SABG Primary Prevention Set-Aside funding shall input planning, service/activity and evaluation data into the service. When submitting data, County shall comply with the PPSDS Data Quality Standards.
 http://www.dhcs.ca.gov/ progovpart/Documents/ Substance%20Use%20Disorder-PPFD%20/PPSDS Data Quality Standards.pdf%20
- B. County shall report services/activities by the date of occurrence on an ongoing basis throughout each month. County shall submit all data for each month no later than the 10th day of the following month.
- C. County shall review all data input into the prevention data collection service on a quarterly basis. County shall verify that the data meets the PPSDS Data Quality Standards. Certification is due by the last day of the month following the end of the quarter.
- D. If County cannot meet the established due dates, a written request for an extension shall be submitted to DHCS Prevention Analyst 10 calendar days prior to the due date and must identify the proposed new due date. Note that extensions will only be granted due to system or service failure or other extraordinary circumstances.
- E. In order to ensure that all persons responsible for prevention data entry have sufficient knowledge of the PPSDS Data Quality Standards, all new users of the service, whether employed by the County or its subcontractors, shall participate in PPSDS training prior to inputting any data.

The PPSDS data quality standards require that:

- 1. Prevention data is valid;
- 2. Prevention data is complete;
- 3. Prevention data is unique:
- 4. Prevention data is timely;
- 5. Prevention data is orderly;
- 6. Prevention data is accurate:
- 7. Prevention data is auditable; and

8. Prevention data is consistent.

Findings: An internal review of data compliance standards finds the Primary Prevention SUD Data Service (PPSDS) data submitted during recent submissions to DHCS meets the PPSDS data quality standards. However, the County did not provide evidence describing the process to ensure the PPSDS data meet data quality standards of Unique, Auditable and Consistent.

Category 4: ADOLESCENT/YOUTH TREATMENT

A review of the SABG Adolescent/Youth Treatment program and services was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 4.1.1:

SABG Application, Enclosure 2, II. General, 16

16. Youth Treatment Guidelines

County must comply with DHCS guidelines in developing and implementing youth treatment programs funded under this Enclosure, until new Youth Treatment Guidelines are established and adopted. Youth Treatment Guidelines are posted online at: https://www.dhcs.ca.gov/provgovpart/Pages/Youth-Services.aspx.

Youth Treatment Guidelines Section V, F, 6-7

- F. Treatment Planning
 - 6. The treatment plan should include goals with realistic objectives and timeframes for completing. These should be mutually agreed upon by the program, the youth, and, whenever possible, his or her family/caregiver.
 - 7. The initial treatment plan should be completed at least within 30 days of admission. Progress in treatment should be regularly monitored and treatment plans modified as needs arise or change during treatment, at various stages of the youth's development and recovery, or at least every six months.

Findings: The County did not provide evidence demonstrating how County providers comply with treatment planning for adolescent/youth clients.

CD 4.1.2:

SABG Application, Enclosure 2, II. General, 16

16. Youth Treatment Guidelines

County must comply with DHCS guidelines in developing and implementing youth treatment programs funded under this Enclosure, until new Youth Treatment Guidelines are established and adopted. Youth Treatment Guidelines are posted online at: https://www.dhcs.ca.gov/provgovpart/Pages/Youth-Services.aspx.

Youth Treatment Guidelines Section V, H, 1

- H. Youth Development Approaches to Treatment
 - Programs should integrate a youth development philosophy as the foundation of treatment for youth. Youth development approaches include the following:
 - a. assessment and treatment planning processes that are strength-based rather than deficit-based;
 - b. uncovering what is unique about the youth and building on his/her individual abilities and strengths;

- c. frequent expressions of support and consistent, clear and appropriate messages about what is expected of the youth; and,
- d. encouragement and assistance in developing multiple supportive relationships with responsible, caring adults.

Findings: The County did not provide evidence demonstrating how County providers integrate a youth development philosophy as the foundation of treatment for youth, including:

 Assessment and treatment planning processes that are strength-based rather than deficitbased.

CD 4.1.3:

SABG Application, Enclosure 2, II. General, 16

16. Youth Treatment Guidelines

County must comply with DHCS guidelines in developing and implementing youth treatment programs funded under this Enclosure, until new Youth Treatment Guidelines are established and adopted. Youth Treatment Guidelines are posted online at: https://www.dhcs.ca.gov/provgovpart/Pages/Youth-Services.aspx.

Youth Treatment Guidelines Section V, H, 2

- H. Youth Development Approaches to Treatment
 - 2. Programs should provide or arrange for opportunities for youth to:
 - a. advise and made decisions related to program policies and procedures that impact them;
 - b. plan, organize, and lead program activities and projects;
 - c. develop social skills and decision-making abilities;
 - d. learn values and marketable skills for adulthood; and,
 - e. contribute to their community and serve others.

Findings: The County did not provide evidence demonstrating how County providers arrange opportunities for youth, specifically:

- advise and made decisions related to program policies and procedures that impact them;
- plan, organize, and lead program activities and projects;
- develop social skills and decision-making abilities;
- learn values and marketable skills for adulthood; and
- contribute to their community and serve others.

CD 4.2.1:

SABG Application, Enclosure 2, II. General, 16

16. Youth Treatment Guidelines

County must comply with DHCS guidelines in developing and implementing youth treatment programs funded under this Enclosure, until new Youth Treatment Guidelines are established and adopted. Youth Treatment Guidelines are posted online at: https://www.dhcs.ca.gov/provgovpart/Pages/Youth-Services.aspx.

Youth Treatment Guidelines Section VIII, D, 1-2

D. Detoxification Services

Youth in need of detoxification services should be placed in the most appropriate site for the provision of services.

- When indicated, appropriately trained personnel under the direction of a physician or other health care professional should monitor medical detoxification with specific expertise in management of alcohol and drug detoxification and withdrawal.
- 2. Written protocols should be developed and staff trained to ensure that all programs have the capacity to adequately manage and/or make referral arrangements for youth that appear at the program site under the influence.

Findings: The County did not provide evidence demonstrating how County providers arrange detoxification services for youth in need.

CD 4.2.2:

SABG Application, Enclosure 2, II. General, 16

16. Youth Treatment Guidelines

County must comply with DHCS guidelines in developing and implementing youth treatment programs funded under this Enclosure, until new Youth Treatment Guidelines are established and adopted. Youth Treatment Guidelines are posted online at: https://www.dhcs.ca.gov/provgovpart/Pages/Youth-Services.aspx.

Youth Treatment Guidelines Section V, K

K. Structured Recovery-Related Activities

Intensive outpatient and residential programs should provide or arrange for both therapeutic and diversionary recreation. Therapeutic activities include art therapy, journal writing, and self-help groups. Diversionary recreation activities include sports, games, and supervised outings.

Findings: The County did not provide evidence demonstrating how County providers of intensive outpatient and residential programs arrange for both therapeutic and diversionary recreation for youth in treatment. Specifically, the County did not provide evidence of an available intensive outpatient program for youth clients.

Category 5: DATA/CALOMS

A review of data submissions via CalOMS was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD: 5.1.1:

SABG Application, Enclosure 2, III, 2, C-F

- 2. California Outcomes Measurement System for Treatment (CalOMS-Tx)
 The CalOMS-Tx business rules and requirements are:
 - C. Electronic submission of CalOMS-Tx data shall be submitted by County within 45 days from the end of the last day of the report month.
 - D. County shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS Tx data collection.
 - E. County shall submit CalOMS-Tx admission, discharge, annual update, resubmissions of records containing errors or in need of correction, and "provider no activity" report records in an electronic format approved by DHCS.
 - F. County shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method, as identified online at: https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx

Findings: The County's Open Admissions report is not in compliance.

Category 6: PROGRAM INTEGRITY

A review of the SABG monitoring, privacy, and program integrity was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD 6.2.1:

SABG Application Enclosure 2, II, 19, L

L. Confidentiality of Alcohol and Drug Abuse Patient Records (42 CFR Part 2, Subparts A – E).

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not provide evidence demonstrating subcontractor compliance with Confidentiality of Substance Use Disorder Patient Records under 42 CFR Part 2, Subparts A-E.

TECHNICAL ASSISTANCE

DHCS's County Compliance Unit Analyst will make referrals to the DHCS SABG liaison for the training and technical assistance areas identified below:

Other Topic(s): The County seeks SABG onboarding and training materials for a new SUD supervisor.