

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



07/13/2022

Sent via e-mail to: Georgina. Yoshioka@dbh.sbcounty.gov

Georgina Yoshioka, Interim Behavioral Health Director San Bernardino County Behavioral Health 303 East Vanderbilt Way San Bernardino, CA 92415

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Interim Director Yoshioka,

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 San Bernardino 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 San Bernardino County's Fiscal Year 2021-22 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

San Bernardino 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 9/13/2022. Please use enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at <a href="mailto:SABGcompliance@dhcs.ca.gov">SABGcompliance@dhcs.ca.gov</a>.

If you have any questions, please contact me at <a href="mailto:emanuel.hernandez@dhcs.ca.gov">emanuel.hernandez@dhcs.ca.gov</a>.

Sincerely,

Emanuel Hernandez (916) 713-8667

> 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: Interim Director Yoshioka,

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 Catherine Smith, San Bernardino County Substance Use Disorder & Recovery Services Program Manager I

## **COUNTY REVIEW INFORMATION**

# County:

San Bernardino

# **County Contact Name/Title:**

Catherine Smith, Substance Use Disorder & Recovery Services Program Manager I

## **County Address:**

658 E. Brier Drive, Suite 250, San Bernardino, CA 92408

# **County Phone Number/Email:**

909-501-0803/csmith@dbh.sbcounty.gov

#### **Date of Review:**

04/12/2022

# **Lead CCU Analyst:**

Emanuel Hernandez

# **Assisting CCU Analyst:**

N/A

# Report Prepared by:

**Emanuel Hernandez** 

# 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 04/12/2022. The following individuals were present:

• Representing DHCS:

Emanuel Hernandez, Associate Governmental Program Analyst (AGPA) Macia Casado, AGPA

Representing San Bernardino County:

Catherine Smith, San Bernardino County (SBC) Program Manager I

Patricia Grace, SBC Supervising Automated Systems Analyst I

Barbara Knutson, SBC Business Applications Manager/Information Technology

Christopher Bailey, SBC Program Specialist I

Natalie Sanders, SBC Program Specialist I

Mark Kennedy, SBC Social Worker II

Lois Mergener, SBC Program Specialist II

Michael Sweitzer, SBC Program Manager II

Anabelle Miranda-Muniz, SBC Mental Health Clinic Supervisor

Erica Ochoa, SBC, Chief Compliance/Privacy Officer

Jennifer Alsina, SBC Deputy Director

Jonathan Avalos, SBC Associate Medical Director

Kim Carson, SBC Chief Quality Management Officer

Luis Castillo, SBC Social Worker II

Briceida Tompkins, SBC Ethics and Compliance Coordinator

Donald Harris, SBC Mental Health Education Consultant

Maria Arroyo, SBC Social Worker II

Marina Espinosa, SBC Deputy Director Program Support Services

Matty Landa, SBC Program Manager I

Thelma Rodriguez, SBC Program Specialist I

Jeron Crawford, SBC Social Worker II

Emily Cambell, SBC Administrative Supervisor II

Maria Harigan SBC Accounting Technician

During the Entrance Conference, the following topics were discussed:

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

#### **Exit Conference:**

An Exit Conference was conducted via WebEx on 04/12/2022. The following individuals were present:

 Representing DHCS: Emanuel Hernandez, AGPA

Macia Casado, AGPA

Representing San Bernardino County:

Catherine Smith, San Bernardino County (SBC) Program Manager I

Patricia Grace, SBC Supervising Automated Systems Analyst I

Barbara Knutson, SBC Business Applications Manager/Information Technology

Christopher Bailey, SBC Program Specialist I

Natalie Sanders, SBC Program Specialist I

Mark Kennedy, SBC Social Worker II

Lois Mergener, SBC Program Specialist II

Michael Sweitzer, SBC Program Manager II

Anabelle Miranda-Muniz, SBC Mental Health Clinic Supervisor

Erica Ochoa, SBC, Chief Compliance/Privacy Officer

Jennifer Alsina, SBC Deputy Director

Jonathan Avalos, SBC Associate Medical Director

Kim Carson, SBC Chief Quality Management Officer

Luis Castillo, SBC Social Worker II

Briceida Tompkins, SBC Ethics and Compliance Coordinator

Donald Harris, SBC Mental Health Education Consultant

Maria Arroyo, SBC Social Worker II

Marina Espinosa, SBC Deputy Director Program Support Services

Matty Landa, SBC Program Manager I

Thelma Rodriguez, SBC Program Specialist I

Jeron Crawford, SBC Social Worker II

Emily Cambell, SBC Administrative Supervisor II

Maria Harigan SBC Accounting Technician

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)**

	<u>Section</u>	Number of CD's
1.0	Administration	3
2.0	Prevention	0
3.0	Perinatal	0
4.0	Adolescent/Youth Treatment	1
5.0	Data/CalOMS	3
6.0	Program Integrity	1
7.0	Fiscal	0

# **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: 1.5.4:

## 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 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 deficiency in regulations, standards or protocol requirements was identified:

# **COMPLIANCE DEFICIENCY:**

#### CD 4.2.3:

#### 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: <a href="https://www.dhcs.ca.gov/provgovpart/Pages/Youth-Services.aspx">https://www.dhcs.ca.gov/provgovpart/Pages/Youth-Services.aspx</a>.

#### Youth Treatment Guidelines Section VIII, E, 1-2

- E. Buildings/Grounds
  - 1. All residential facilities must be licensed in accordance with applicable state licensing statutes and regulations and remain in compliance with such requirements.
  - 2. All facilities should be clean, sanitary, and in good repair at all times for the safety and well-being of youth, staff, and visitors.

**Findings:** The County did not provide evidence demonstrating how County and subcontracted providers ensure facilities are in compliance with licensing and regulations.

# **Category 5: DATA/CALOMS**

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

## **COMPLIANCE DEFICIENCIES:**

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 (<a href="https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx">https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx</a>) 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: <a href="https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx">https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx</a>

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

#### CD: 5.1.2:

#### 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 (<a href="https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx">https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx</a>) 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: <a href="https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx">https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx</a>

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

#### CD: 5.1.3:

#### SABG Application, Enclosure 2, III, 5, A-D

- 5. Drug and Alcohol Treatment Access Report (DATAR)
  - The DATAR business rules and requirements are:
  - A. The County shall be responsible for ensuring that the County-operated treatment services and all treatment providers, with whom County makes a contract or otherwise pays for the services, submit a monthly DATAR report in an electronic copy format as provided by DHCS.
  - B. The County shall ensure that treatment providers who reach or exceed 90 percent of their dedicated capacity, report this information to <a href="mailto:DHCSPerinatal@dhcs.ca.gov">DHCSPerinatal@dhcs.ca.gov</a> within seven days of reaching capacity.
  - C. The County shall ensure that all DATAR reports are submitted by either County-operated treatment services and by each subcontracted treatment provider to DHCS by the 10th of the month following the report activity month.
  - D. The County shall ensure that all applicable providers are enrolled in DHCS'web-based DATARWeb program for submission of data, accessible on the DHCS website when executing the subcontract.

Findings: The County's DATAR 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 6.1.2:

#### SABG Application Enclosure 2, I, 3, A, 1, e

- 1. County's performance under the County Performance Contract and the SABG County Application shall be monitored by DHCS during the term of the County Performance Contract. Monitoring criteria shall include, but not be limited to:
  - e. Whether the County conducted annual onsite monitoring reviews of services and subcontracted services for programmatic and fiscal requirements. County shall submit copy of its monitoring and audit reports to DHCS within two weeks of issuance. Reports shall be sent via a Secure Managed File Transfer system specified by DHCS.

**Findings:** The County did not provide evidence demonstrating it conducted onsite monitoring reviews of each County managed and subcontracted program providing SABG funded services.

- The County monitored 27 of 30 SABG funded programs and submitted audit reports of these annual reviews to DHCS.
- The County did not submit any of the 27 annual monitoring reports secure and encrypted to DHCS.
- The County did submit 27 annual monitoring reports within two weeks of completion to DHCS.

# TECHNICAL ASSISTANCE

The County of San Bernardino did not request technical assistance.