



MICHELLE BAASS
DIRECTOR

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



GAVIN NEWSOM
GOVERNOR

August 10, 2022

Sent via e-mail to: anavarro@sbcbswell.org

Antonette Navarro, Behavioral Health Director
Santa Barbara County Alcohol, Drug & Mental Health Services
315 Camino Del Remedio, Bldg 3
Santa Barbara, CA 93110

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Navarro:

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

Santa Barbara 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 10/10/2022. 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 emanuel.hernandez@dhcs.ca.gov.

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: Director Navarro,

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
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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
John M. Doyel, Santa Barbara County Alcohol & Drug Programs Division Chief

COUNTY REVIEW INFORMATION

County:

Santa Barbara

County Contact Name/Title:

John M. Doyle, Alcohol & Drug Programs Division Chief

County Address:

300 North San Antonio Rd. Bldg. 3
Santa Barbara, CA 93110

County Phone Number/Email:

(805) 448-3903
jdoyle@sbcbswell.org

Date of Review:

06/14/2022

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 06/14/2022. The following individuals were present:

- Representing DHCS:
Emanuel Hernandez, County Compliance Unit (CCU) Associate Governmental Program Analyst (AGPA)
Jaime Saunders, County/Provider Operations & Monitoring (CPOM) Staff Services Manager I (SSM I)
Angela Rankin, County/Provider Operations & Monitoring (CPOM) Associate Governmental Program (AGPA)
- Representing Santa Barbara County:
John M. Doyle, Alcohol & Drug Programs Division Chief
Joshua Woody, Quality Care Manager
Melissa Wilkins, Project Manager
Jaime Huthsing, Division Chief of Quality Care Management
Leslie Smith, LMFT Programmatic Monitoring
Amy Lopez, Project Manager
Anoushka Moseley, LMFT Beneficiary Concerns
Dipak Neupane, Revenue Manager
Katarina Zamora, Program Manager, ADP. Certified Prevention Specialist (CPS)
Marshal Ramsay, Division Chief, IT/MIS

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 06/14/2022. The following individuals were present:

- Representing DHCS:
Emanuel Hernandez, CCU AGPA
Jaime Saunders, CPOM SSM I
Angela Rankin, CPOM AGPA

- Representing Santa Barbara County:
John M. Doyle, Alcohol & Drug Programs Division Chief
Joshua Woody, Quality Care Manager
Melissa Wilkins, Project Manager
Jaime Huthsing, Division Chief of Quality Care Management
Leslie Smith, LMFT Programmatic Monitoring
Amy Lopez, Project Manager
Anoushka Moseley, LMFT Beneficiary Concerns
Dipak Neupane, Revenue Manager
Katarina Zamora, Program Manager, ADP. CPS
Marshal Ramsay, Division Chief, IT/MIS

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

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the SABG County Application, Enclosure 2, Part I, Section 3, B, 5-7 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 deficiency in regulations, standards, or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

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.

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 4.2.2:

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 and subcontracted providers of intensive outpatient and residential programs arrange for both therapeutic and diversionary recreation for youth in treatment.

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: 5.1.3:

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 DHCSPerinatal@dhcs.ca.gov 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 and subcontracted managed programs providing SABG funded services.

- The County monitored 20 of 22 SABG funded programs and submitted audit reports of these annual reviews to DHCS.
- The County submitted 18 of 20 annual monitoring reports secure and encrypted to DHCS.
- The County submitted 19 of 20 annual monitoring reports within two weeks of completion to DHCS.

TECHNICAL ASSISTANCE

Santa Barbara County did not request any technical assistance.