

**Mono County Plan of Correction**  
**Per the County Performance Contract Review Report for Review Dates August 11, 2021**

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance   | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)  |  | Score – Comments/Notes          |
|--|--|--|--|---------------------------------|
| Finding #1   | Mono County did not post a copy of the FY 2019-20 Annual Revenue and Expenditure Report (ARER) on the County’s website within 30 days of submitting to the Department of Health Care Services (DHCS). (California Code of Regulations, title 9, section 3510.010(b)(1); Welfare and Institutions Code section 5899). | <p>Recommendation #1</p> <p>The County must post a copy of the FY 2020-21 ARER, and each subsequent ARER thereafter, on the County’s website within 30 days of submitting to DHCS.</p> | <ul style="list-style-type: none"> <li>a. A copy of the 19-20 ARER is now posted on the MCBH website <a href="#">MHSA page</a></li> <li>b. A copy of the 20-21 ARER will be posted to <a href="#">this website</a> within 30 days of submission to DHCS               <ul style="list-style-type: none"> <li>a. Completion: Feb 1, 2022</li> <li>b. Evidence submitted (screen shot and link) to DHCS by 7/1/22 [please note that the Program Manager/MHSA Coordinator will be on maternity leave from approximately Feb 15-June 15 and hopes to do submit most POC evidence at once upon her return]</li> </ul> </li> </ul> | The submitted plan is accepted. |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance  | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)   |   | Score – Comments/Notes          |
|--|---|---|---|---------------------------------|
| Finding #2   | Mono County did not include a signed and dated MHPA County Compliance Certification by the county behavioral health director in the adopted FY 2019-20 Annual Update (Update). (W&I Code section 5847(b)(8)).             | <p>Recommendation #2</p> <p>The County must include a signed and dated MHPA County Compliance Certification in the adopted FY 2020-23 Three-Year Program and Expenditure Plan (Plan), FY 2020-21 Update and each subsequent Plan and Update thereafter.</p> | <ul style="list-style-type: none"> <li>a. MCBH included a signed and dated MHPA County Compliance Certification in the FY 2020-23 Three-Year Program and Expenditure Plan (Plan) and the FY 2021-22 Update <ul style="list-style-type: none"> <li>a. View page 7 at <a href="#">this link</a></li> </ul> </li> <li>b. A County Compliance Certification will be included in each subsequent plan thereafter <ul style="list-style-type: none"> <li>a. Completion: 7/1/22 submit FY 22-23 Annual Update to DHCS</li> </ul> </li> </ul> | The submitted plan is accepted. |
| Finding #3   | Mono County did not include a description of how stakeholder involvement demonstrates a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder involvement on: mental | <p>Recommendation #3</p> <p>The County must include a description of how stakeholder involvement demonstrates a partnership with constituents and stakeholders throughout the</p>   | <ul style="list-style-type: none"> <li>a. MCBH is unable to include this information in the FY 2020-23 Plan or FY 2021-22 Update as these have already been completed.</li> <li>b. MCBH gathers meaningful stakeholder involvement on these items through its Behavioral Health Advisory Board. A “description of how stakeholder involvement</li> </ul>  | The submitted plan is accepted. |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance   | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)  |  | Score – Comments/Notes |
|--|--|--|--|------------------------|
|  | <p>health policy, monitoring, quality improvement, evaluation, and budget allocations in the adopted FY 2019-20 Update. (W&amp;I Code section 5848).</p> | <p>process that includes meaningful stakeholder involvement on: mental health policy, program planning and implementation, monitoring, quality improvement, evaluation, and budget allocations in the adopted FY 2020-23 Plan, FY 2020-21 Update and each subsequent Plan and Update thereafter.</p> | <p>demonstrates a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder involvement on: mental health policy, program planning and implementation, monitoring, quality improvement, evaluation, and budget allocations” will be included in the forthcoming FY 21-22 Annual Update.</p> <ul style="list-style-type: none"> <li>a. Completion: 7/1/22 submit FY 22-23 Annual Update to DHCS</li> <li>c. In MCBH’s current CPP process, (in preparation for the upcoming 22-23 Annual Update) the Dept is incorporating stakeholder involvement on the items listed by discussing with the Behavioral Health Advisory Board. A new practice has been developed highlighting such items as monitoring, evaluation, etc. into the BHAB</li> </ul> |                        |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness) |  | Score – Comments/Notes |
|--|--|---|--|------------------------|
|  |  |   | <p>agenda to ensure that all BHAB members and staff writing plans can easily identify the involvement associated with each item. To ensure compliance with this ongoing practice, the program manager and staff services analyst responsible for the BHAB agenda will work together to keep such items on the agenda.</p> <ul style="list-style-type: none"> <li>a. Please see attached agenda and minutes from 12/13/21 BHAB meeting</li> <li>d. Effectiveness of corrective action will be monitored through the Three-Year Plan and Annual Update process. The program manager intends to include a section about this type of involvement in the plan, so during the update of each plan, this section will be re-visited and re-evaluated.</li> </ul> |                        |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance  | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)   |  | Score – Comments/Notes                 |
|--|---|---|--|--|
| Finding #4   | <p>Mono County did not include a description of the stakeholders who participated in the Community Program Planning Process (CPPP) to ensure they reflect the diversity of the County in the adopted FY 2019-20 Update. Specifically, the County noted the number of stakeholders who attended planning meetings, but did not include a description of stakeholders to compare to County demographics and ensure the participants reflect the diversity of the County. (W&amp;I Code section 5848; Cal Code. Regs., tit. 9, §§ 3300, 3315).</p> | <p>Recommendation #4</p> <p>The County must include a description of the stakeholders who participated in the CPPP to ensure they reflect the diversity of the County in the adopted FY 2020-23 Plan, FY 2020-21 Update and each subsequent Plan and Update thereafter.</p> | <ul style="list-style-type: none"> <li>a. MCBH included a description of the stakeholders who participated in its CPPP community survey in its FY 2020-23 Plan and FY 2021-22 Annual Update. <ul style="list-style-type: none"> <li>a. View pages 22 and 115 at <a href="#">this link</a></li> <li>b. As stated on page 22, MCBH believes this is a “Robust mixture of different demographics, including location, race, sexual orientation, and gender” that reflect the diversity of the county.</li> </ul> </li> <li>b. MCBH will continue to provide such a description and ensure that the CPPP participants reflect the diversity of the County in each subsequent plan thereafter <ul style="list-style-type: none"> <li>a. Completion: 7/1/22 submit FY 22-23 Annual Update to DHCS</li> </ul> </li> </ul> | <p>The submitted plan is accepted.</p> |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance  | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness) |  | Score – Comments/Notes          |
|--|---|---|--|---------------------------------|
| Finding #5   | Mono County did not include a corresponding budget summary, including the total budgeted for each funding category, in the adopted FY 2019-20 Update. Specifically, the adopted FY 2019-20 Update did not include a budget summary for the Workforce Education and Training (WET) component. (Cal. Code Regs., tit. 9, §§ 3820(e); W&I Code section 5847(e)). | Recommendation #5   | <p>The County must include a corresponding budget summary for each component in the adopted FY 2020-23 Plan, FY 2020-21 Update and each subsequent Plan and Update thereafter.</p> <ul style="list-style-type: none"> <li>a. MCBH included a corresponding budget summary for each component in the FY 2020-23 Three-Year Program and Expenditure Plan (Plan) and the FY 2020-21 Update <ul style="list-style-type: none"> <li>a. View pages 74-90 at <a href="#">this link</a></li> </ul> </li> <li>b. MCBH will include a corresponding budget summary for each component in each subsequent plan thereafter <ul style="list-style-type: none"> <li>a. Completion: 7/1/22 submit FY 22-23 Annual Update to DHCS</li> </ul> </li> </ul> | The submitted plan is accepted. |
| Finding #6   | Mono County did not report cost per person for Community Services and Supports (CSS),   | <p>Recommendation #6</p> <p>The County must report cost per person</p>  | a. MCBH is unable to include this information in the FY 2020-23 Plan or FY 2021-22   | The submitted plan is accepted. |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance   | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)              |   | Score – Comments/Notes          |
|--|--|--|---|---------------------------------|
|  | Prevention and Early Intervention (PEI), and Innovation (INN) programs in the adopted FY 2019-20 Update. (W&I Code section 5847(e)).   | for CSS, PEI, and INN programs in the adopted FY 2020-23 Plan, FY 2020-21 Update and each subsequent Plan and Update thereafter.                   | <p>Update as these have already been completed.</p> <p>b. The cost per person for CSS, PEI, and INN programs will be included in each subsequent plan thereafter</p> <p style="padding-left: 40px;">a. Completion: 7/1/22 submit FY 22-23 Annual Update to DHCS</p> <p>c. Effectiveness of corrective action will be monitored through the Three-Year Plan and Annual Update process. The program manager intends to include a section about this type of involvement in the plan, so during the update of each plan, this section will be re-visited, re-evaluated, and updated.</p> |                                 |
| Finding #7   | Mono County did not specify the methods and activities to be used in their Stigma and Discrimination Reduction Program (Community Engagement); to change attitudes, knowledge, | <p>Recommendation #7</p> <p>The County must include a description specifying the methods and activities to be used in each of their Stigma and</p> | <p>a. MCBH is unable to include this information in the FY 2020-23 Plan or FY 2021-22 Update as these have already been completed.</p> <p>b. Prior to writing its FY 22-23 Annual Update, MCBH plans to examine its current SDR</p>   | The submitted plan is accepted. |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance   | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)   |   | Score – Comments/Notes |
|--|--|---|---|------------------------|
|  | <p>and/or behavior regarding being diagnosed with mental illness, having mental illness and/or seeking mental health services, including timeframes for measurement in the adopted FY 2019-20 Update.(Cal. Code Regs., tit. 9, §§ 3750(d), 3755(f)(3), WIC Code section 5840).</p> | <p>Discrimination Reduction Programs; to change attitudes, knowledge, and/or behavior regarding being diagnosed with mental illness, having mental illness and/or seeking mental health services, including timeframes for measurement for each PEI Stigma and Discrimination Reduction Program in the adopted FY 2020-23 Plan, FY 2020-21 Update and each subsequent Plan and Update thereafter.</p> | <p>programming and determine if all should remain funded under the SDR category.</p> <ul style="list-style-type: none"> <li>c. Following that determination, MCBH will review MOQA SDR measurements and complete an evaluation of any remaining SDR programs.</li> <li>d. A description as specified above will be included in each subsequent plan thereafter <ul style="list-style-type: none"> <li>a. Completion: 7/1/22 submit FY 22-23 Annual Update to DHCS</li> </ul> </li> <li>e. MCBH has determined that only the social media component of its Community Engagement PEI Program will remain SDR programming. A short poll appropriate for social media has been developed based on the MOQA SDR items and will be administered by 2/1/22. <ul style="list-style-type: none"> <li>a. Completion: 2/1/22 submit screen shot of poll post and results of survey to DHCS.</li> </ul> </li> </ul> |                        |



| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance  | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)  |   | Score – Comments/Notes          |
|--|---|--|---|---------------------------------|
|  |   |  | <ul style="list-style-type: none"> <li>f. To ensure compliance over time, MCBH will add an annual poll to its task management system to create a reminder for the assigned staff member.</li> </ul>   |                                 |
| Finding #8   | Mono County did not dedicate at least 51% of their PEI funds to serve individuals who are 25 years old or younger. (Cal. Code Regs., tit. 9, § 3706(b); W&I Code section 5846). | <p>Recommendation #8</p> <p>The County must demonstrate that at least 51% of PEI funds are used to serve individuals 25 years old and younger on the FY 2020-21 ARER and each subsequent ARER thereafter. The County must develop and implement accounting and cost allocation policies and procedures that will allow the County to allocate a majority of PEI funds to serve</p> | <ul style="list-style-type: none"> <li>a. MCBH will work with fiscal specialist Mike Geiss to develop and implement the processes described above, thus ensuring that MCBH meets the 51% requirement</li> <li>b. The 20-21 ARER with this evidence will be posted to <a href="#">this website</a> within 30 days of submission to DHCS <ul style="list-style-type: none"> <li>a. Completion: Feb 1, 2022</li> <li>b. Evidence submitted (completed RER) to DHCS by 7/1/22 [please note that the Program Manager/MHSA Coordinator will be on maternity leave from</li> </ul> </li> </ul> | The submitted plan is accepted. |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance  | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)  |   | Score – Comments/Notes          |
|--|---|--|---|---------------------------------|
|  |   | individuals who are 25 years old or younger.   | <p>approximately Feb 15-June 15 and hopes to do submit most POC evidence at once upon her return]</p> <p>c. MCBH will ensure that it meets the 51% requirement in each subsequent ARER thereafter</p> <p>a. Completion: 2/1/23 submit completed FY 21-22 ARER to DHCS</p> |                                 |
| Finding #8   | Mono County did not dedicate at least 51% of their PEI funds to serve individuals who are 25 years old or younger. (Cal. Code Regs., tit. 9, § 3706(b); W&I Code section 5846). | <p>Recommendation 8a:</p> <p>Small county may opt out of the requirement to dedicate at least 51% of PEI funds to serve individuals who are 25 years old or younger. The process for opting out includes obtaining a declaration from the Board of Supervisors that the County cannot meet the</p> | <p>a. MCBH will be implementing Recommendation 8 instead of 8a</p>  | The submitted plan is accepted. |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance   | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)  |  | Score – Comments/Notes                 |
|--|--|--|--|--|
|  |  | <p>requirements because of specified local conditions and including, in the adopted Plans and Updates, documentation describing the rationale for the County’s decision and how the County ensured meaningful stakeholder involvement in the decision to opt out. All requirements pursuant to Cal. Code of Regs., tit. 9. § 3706 must be met.</p> |  |  |
| Finding #9   | <p>Mono County’s MHA components of INN and WET programs/services implementation is inconsistent between the adopted FY 2019-20 Update and the FY 2019-20 ARER. (W&amp;I Code section 5892(g)).</p> | <p>Recommendation #9<br/><br/>The County must ensure that the program names listed in the adopted FY 2020-23 Plan, FY 2020-21 Update and each subsequent Plan</p>  | <p>a. In completing the FY 20-21 ARER, MCBH will ensure that program names are consistent with the adopted Plan and Update and that zero expenditures are appropriately reported.<br/><br/>b. The 20-21 ARER with this evidence will be posted to <a href="#">this</a></p> | <p>The submitted plan is accepted.</p> |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance   | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)   |   | Score – Comments/Notes          |
|--|--|---|---|---------------------------------|
|  | <p>Specifically, the following programs and components were inconsistent:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> For the INN component, the County listed Technology Suite in the adopted FY 2019-20 Update budget, but an expenditure was not listed in the FY 2019-20 ARER.</li> <li><input type="checkbox"/> For the WET component, the County did not include a corresponding budget summary in the adopted FY 2019-20 Update.</li> </ul> | <p>and Update thereafter, are consistent with the names in the adopted ARER. The budget in the adopted Plan and Update should be consistent with the adopted ARER. If the program or service did not occur, report the program or service on the adopted ARER and indicate zero expenditures. Any discrepancies or name changes must be explained in the adopted Plan and Update.</p> | <p><a href="#">website</a> within 30 days of submission to DHCS</p> <ul style="list-style-type: none"> <li>a. Completion: Feb 1, 2022</li> <li>b. Evidence submitted (completed RER) to DHCS</li> </ul> |                                 |
| Improvement Item 1a  | MHSA Plans and Updates   | <p>Recommendation 1a:</p> <p>DHCS recommends the County clearly identify the County's underserved/unserved populations in the County demographics</p>   | <p>1. MCBH will ensure this is more clearly defined in its upcoming Annual Update</p> <ul style="list-style-type: none"> <li>a. Completion: 7/1/22 submit FY 22-23 Annual Update to DHCS</li> </ul>     | The submitted plan is accepted. |

| Finding #, Suggested Improvement # or Technical Assistance # | Finding, Suggested Improvement or Technical Assistance | Recommendation # (State Corrective Action Step/Identify Timeline/and Evidence of Corrections/Mechanisms for Monitoring Effectiveness)   |   | Score – Comments/Notes          |
|--|--|---|---|---------------------------------|
|  |  | section of the adopted Plans and Updates.   | 2. MCBH will create this definition by cross-referencing work done in other departmental plans (i.e. Cultural Competence Plan, QI Work Plan) and ensuring the descriptions are consistent. The department will also ensure that it incorporates the definition of unserved/underserved from statute.  |                                 |
| Improvement Item 1b  | MHSA Plans and Updates                                 | <p>Recommendation 1b:</p> <p>DHCS recommends the County clearly identify the County's threshold language in the County demographics section of adopted Plans and Updates.</p> | <p>1. MCBH will ensure this is more clearly defined in its upcoming Annual Update</p> <p style="padding-left: 40px;">a. Completion: 7/1/22 submit FY 22-23 Annual Update to DHCS</p> <p>2. MCBH has received notice of its threshold languages via the annual EQRO report. The only threshold language is Spanish – please see page 6 of Mono County's EQRO Final Report.</p> | The submitted plan is accepted. |

| Finding #,<br>Suggested<br>Improvement #<br>or Technical<br>Assistance # | Finding, Suggested<br>Improvement or<br>Technical Assistance | Recommendation # (State Corrective Action Step/Identify<br>Timeline/and Evidence of Corrections/Mechanisms for<br>Monitoring Effectiveness) | Score –<br>Comments/Notes |
|--|--|---|---------------------------|
|  |  |   |                           |