

CORRECTIVE ACTION PLAN: OSAE REVIEW OF THE MENTAL HEALTH SERVICES ACT IMPLEMENTATION

**PART 1 of 3
DEVELOPMENT AND IMPLEMENTATION PROCESS**

Observation	Recommendation	Corrective Action Taken	Corrective Action To Be Taken	Date of Action To Be Taken	Responsible Staff (L = Lead)	Final Completion Due Date
<p>Observation 1: Undocumented Plan for MHSA Development and Implementation</p> <p>A) Staggered Implementation of Components B) Delayed Issuance of Component Guidelines C) Fund Distribution Not in Compliance with MHSA</p>	<p>A. Create and document a strategic development and implementation plan which includes clear guidance on component integration, performance measures, and program monitoring efforts. Ensure this plan is adhered to, communicated to affected entities, and made readily accessible on DMH's MHSA website.</p>	<p>None</p>	<p>Develop a conceptual design to integrate all MHSA components into the larger public Mental Health system. Consider requiring counties to revise their MHSA Plan on a periodic cycle based on updated demographics, community needs/input and review of lessons learned under prior MHSA Plan</p> <p>Post draft documents to DMH website as developed for public review and input. Use internal and external workgroups to develop drafts.</p> <p>Develop & implement MHSA performance measurement system to include measures, desired levels of attainment for individual counties, and a system for monitoring performance and ensuring accountability through Corrective Action Plans.</p>	<p>October 2008</p> <p>Pending</p>	<p>Denise Arend (L)</p>	<p>October 2009</p>
	<p>B. Create one set of comprehensive integrated guidelines addressing all components. The guidelines should allow for the integrated implementation of the remaining components (PEI, WET, CAPTECH, and Innovation) and the submittal of one integrated Plan.</p>	<p>Guidelines for SFY 09/10 Annual Update, combining CSS, WET and Cap/Tech Components integrating funding requests into one submission published October 2008.</p>	<p>See above</p>			
	<p>C. Create and Develop and Document a funding distribution plan and ensure funds are distributed to counties timely and in compliance with the MHSA.</p>	<p>Convene annual meeting each July, after publication of Governor's May revision, to include DMH, OAC, Planning Council and Counties. Meeting to address revised MHSA revenue estimates/Fund receipts and agree on recommended levels of funding for MHSA components in the following Fiscal Year (FY).</p> <p>Based on agreements reached at July meeting, publish Planning Estimates for all components for the following FY by September.</p> <p>Advise counties of date by which Plans must be submitted to ensure funds will be approved for start of the following FY.</p>		<p>July 2008</p> <p>July 2008</p> <p>July 2008</p>	<p>Denise Arend (L)</p>	<p>Completed and ongoing</p>

**PART 1 of 3
DEVELOPMENT AND IMPLEMENTATION PROCESS
(Cont'd)**

Observation	Recommendation	Corrective Action Taken	Corrective Action To Be Taken	Date of Action To Be Taken	Responsible Staff (L = Lead)	Final Completion Due Date
Observation 2: Ineffective Communication and Coordination A) MHSAs Program versus MHSAs Policy B) Component versus Component C) Coordination of DMH and OAC	A. Require MHSAs Program staff participation during the policy development stage for program consultation. The Program staff should serve as active participants and subject matter experts throughout the development of policy.	<p>Convened a weekly Policy workgroup consisting of internal DMH staff to include external partners (OAC, CMHDA, Counties, and Planning Council) to assist in development of Annual Update guidelines, Three Year Plan conceptual design and development of Performance Measurement system. Implement a written Issue Paper format for presentation, discussion and recommendation on MHSAs issues.</p> <p>Assign internal DMH staff to represent each component area as well as staff representing the county liaison function.</p> <p>Provide management direction that participation on these workgroups is a priority for staff.</p> <p>Continue to convene monthly Interdivisional meeting briefing interested staff from throughout the department of updates regarding the MHSAs.</p>		June 2008	Denise Arend (L)	Completed
	B. Standardize common program processes that are universal amongst component areas.	None	<p>Develop options for centralizing all Plan review responsibility in one organizational area regardless of component.</p> <p>Develop and implement standardized review tool, processes and procedures for Plan approval. Develop tracking systems for Plan & Plan Update review. Publish process and associated timelines on DMH website.</p> <p>Develop and implement system to consistently track elapsed time and ensure comparisons across components.</p> <p>Establish clear expectations and monitor achievement.</p>	October 2008	Mark Heilman (L)	January 2009
	C. Conduct training prior to the release of new policies to maintain a high level of competency at all staff levels and to ensure consistent guidance is provided.	Program staff are currently included on clearance of all drafts of proposed policy for review and comment.	<p>Review and develop options for implementing training for all affected staff prior to release of new policies. Consider weekly ongoing internal meeting of Program and Policy staff and training sessions prior to the release of DMH Information Notices and DMH Policy Letters.</p> <p>Consider developing and implementing FAQ on DMH website as resource to DMH staff and counties to help ensure consistent guidance to counties.</p>	November 2008	Mark Heilman (L)	January 2009
				October 2008	Mark Heilman (L)	February 2009
				October 2008	Mark Heilman (L)	January 2009
				July 2008	Denise Arend (L)	Ongoing
				November 2008	Mark Heilman (L)	January 2009

**PART 1 of 3
DEVELOPMENT AND IMPLEMENTATION PROCESS
(Cont'd)**

Observation	Recommendation	Corrective Action Taken	Corrective Action To Be Taken	Date of Action To Be Taken	Responsible Staff (L = Lead)	Final Completion Due Date
	<p>D. Work cooperatively with the OAC to develop a communication protocol where only one entity requests additional information from the counties and communicate the protocol to counties.</p>	<p>Currently PEI program staff and OAC staff have developed protocols for county contact to avoid duplication of effort and minimize county confusion.</p> <p>DMH holds and participates in several and various standing meetings and conference calls on weekly and monthly basis with MHSA partners and stakeholders. Meetings/calls address issues and questions from counties and other partners. Examples include a weekly Technical Workgroup meetings between CMHDA and DMH and conference calls with CMHDA, counties and stakeholders</p>	<p>Develop protocols for county contacts with OAC for remaining components:</p> <ul style="list-style-type: none"> ✓ Community Services and Supports ✓ Workforce Education & Training ✓ Capital Facilities/Technology ✓ Innovation 	November 2008	Mark Heilman (L) Sheri Whitt	January 2009
<p>Observation 3: Undefined Roles and Responsibilities of MHSA Entities</p>	<p>A. Work collaboratively with each entity to come to an agreement on the roles and responsibilities. Ensure consistency and functionality with the MHSA.</p>	None	As an initial step, draft and implement a formal Memorandum of Understanding between OAC and DMH that delineates each entity's role and responsibility in the implementation of MHSA.	September 2008	Denise Arend (L) Sheri Whitt	December 2008
	<p>B. Develop regulations that define roles and responsibilities of each entity involved in the MHSA and communicate roles and responsibilities to affected parties.</p>	None	The role of certain entities, such as the Mental Health Planning Council, are defined in statute and do not require further delineation. Additionally, DMH will not pursue regulations as this is not the appropriate vehicle to define and memorialize agreed upon roles and responsibilities. DMH will however, with participation from all affected parties, document the role of the parties delineated in the MHSA and communicate this to affected parties.	Pending	All Affected Parties	Pending

Part 2 of 3
PLAN REVIEW AND APPROVAL PROCESS

Observation	Recommendation	Corrective Action Taken	Corrective Action To Be Taken	Date of Action To Be Taken	Responsible Staff (L = Lead)	Final Completion Due Date
Observation 4: Deficiencies in Application of CSS Guidelines	A. Review and revise guidelines to eliminate repetitive and redundant requirements and allow for customization of templates to fit the specific needs of the community being served.	None	Review all component guidelines to identify information that is requested more than once within and across components. Develop crosswalk of duplicative requirements. Incorporate into future guidelines to eliminate multiple requests and implement process to allow plan reviewers to access information previously submitted by counties as appropriate.	November 2008	Mark Heilman (L)	February 2009
	B. Allow counties to submit integrated Plans based on broad concepts rather than exact details.	Release guidelines simplifying requirements for county submissions to access funds for previously approved programs and projects. Simplified process will include but not be limited to certification of non-supplantation, basic budgeting information and explanation of total request.		October 2008	Carol Hood (L)	Completed
	C. Review the DMH's and OAC's application of component guidelines. Revise internal policies to allow for flexibility of reporting requirements.	Same as above.				
	D. Place more reliance on the counties' expertise, but hold them accountable for their Plans. Ensure performance measures and monitoring procedures of counties are appropriately developed and implemented.	None	Develop and implement MHSA Performance Measurement system to include common measures, desired levels of attainment for counties, and a system for monitoring individual county performance and ensuring accountability through Corrective Action Plans.	Pending		
	E. Continually assess and revise the Plan review process and implement efficiencies as identified.	None	Establish process to revise the Plan review process annually to identify areas of improvement and modify process as appropriate.	November 2008	Sophie Cabrera (L)	January 2009 and beyond
Observation 5: Inefficient Review Processes A) Review Times B) Deadlines C) Review Tools	A. Reassess established Plan and Augmentation Request review time frames to determine practicality. If not practical, revise time frames accordingly.	None	Review existing Plan review process and amend to conform to simplified process for previously approved programs and projects. Formalize and communicate to counties.	December 2008	Sophie Cabrera (L)	December 2008
			Establish and publish anticipated review times on DMH website. Develop and implement report on DMH website so counties can review where plans are in the review process and the elapsed time since submission.	December 2008	Sophie Cabrera (L)	February 2009

Part 2 of 3
PLAN REVIEW AND APPROVAL PROCESS
(cont'd)

	<p>B. Negotiate reasonable deadlines for the submittal of requested information from the counties. Follow up as necessary to ensure information is submitted timely.</p>	<p>Establish deadlines at 30 days & 60 days, respectively, to remind counties of submission of additional information requested in Plan review process. Develop and implement system to track and follow-up on information not received.</p>		<p>July 2008</p>	<p>Sophie Cabrera (L)</p>	<p>Completed</p>
	<p>C. Review the use of the OAC's PEI review tool to ensure responsibilities for Plan review are appropriately met. If not, develop a PEI review tool that is tailored to DMH's responsibilities.</p>	<p>OAC and DMH staff have convened regular ongoing meetings to discuss review process issues and improvements. OAC and DMH staff have defined roles and responsibilities in the use of the PEI review tool. DMH staff will complete initial administrative review and provide comments to OAC along with concerns regarding content. OAC will complete review and draft response to county, obtaining CASD staff input prior to transmitting.</p> <p>OAC staff will make any technical assistance visits as appropriate and will issue final approval letter to county with concurrence from DMH. DMH staff will initiate MHSA Agreement modifications.</p>		<p>June 2008</p>	<p>Barbara Marquez (L)</p>	<p>Completed</p>

Part 3 of 3
FUND DISTRIBUTION PROCESS

Observation	Recommendation	Corrective Action Taken	Corrective Action To Be Taken	Date of Action To Be Taken	Responsible Staff (L = Lead)	Final Completion Due Date
Observation 6: Fund Distribution Process Needs Improvement A) Exhibit A B) Payments	A. Develop a formal payment authorization form that details the county payments for issuance. Use this form to notify the Accounting Unit to schedule payments.	Develop ongoing payment authorization form to be used by Program to instruct Accounting to release MHSA Payments.		July 2008	Stan Bajorin (L) Mark Heilman	Completed
	B. Require the Business Services Contracts and Procurement Unit to promptly process and forward executed Agreements to the County Contracts and Technical Assistance Unit. Develop internal policies that require payment to counties within a reasonable time after Agreement execution and/or Agreement modification.	Review existing process for clearance of MHSA Agreements in Contracting and Accounting Branches to identify impediments to prompt approval. Implement process improvements. Document and distribute these revised procedures to affected staff.		July 2008	Stan Bajorin (L)	Completed