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

PART 1 of 3 DEVELOPMENT AND IMPLEMENTATION PROCESS

	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			
Observation 1: Undocumented Plan for MHSA Development and Implementation A) Staggered Implementation of Components B) Delayed Issuance of Component Guidelines C) Fund Distribution Not in Compliance with MHSA	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.	Initial "Framework for Mental Health Services Act (MHSA) Three- Year Program and Expenditure Plan" posted to DMH Website October 1, 2008	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 Post revised versions of Framework to DMH website as developed for public review and input. Use internal and external workgroups to develop drafts. 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.	October 2008	Denise Arend (L)	October 2009 Ongoing			
	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.	Guidelines for SFY 09/10 Annual Update, combining CSS, WET and Cap/Tech Components integrating funding requests into one submission published October 2008.	See above						
	C. Create and Develop and Document a funding distribution plan and ensure funds are distributed to counties timely and in compliance with the MHSA.	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). Based on agreements reached at July meeting, publish Planning Estimates for all components for the following FY by September. Advise counties of date by which Plans must be submitted to ensure funds will be approved for start of the following FY.		July 2008 July 2008 July 2008	Denise Arend (L)	Completed and ongoing			

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

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Observation 2: Ineffective Communication and Coordination A) MHSA Program versus MHSA Policy B) Component versus	A. Require MHSA Program staff participation during the policy development stage for program consultation. The Program staff should serve as active	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		June 2008	Denise Arend (L)	Completed
Component C) Coordination of DMH and OAC	participants and subject matter experts throughout the development of policy.	MHSA issues. Assign internal DMH staff to represent each component area as well as staff representing the county liaison function.			Denise Arend (L)	Completed
		Provide management direction that participation on these workgroups is a priority for staff.			Denise Arend (L)	Completed
		Continue to convene monthly Interdivisional meeting briefing interested staff from throughout the department of updates regarding the MHSA.			Denise Arend (L)	Completed and ongoing
		Implemented a weekly "MHSA Coordination Meeting" of all DMH managers with responsibility for MHSA development & implementation to identify/discuss cross cutting policies and ensure consistency in process and procedures.			Mark Heilman (L)	Completed and ongoing
	B. Standardize common program processes that are universal amongst	With the organizational restructure of the Community Services Division within DMH, responsibility for all Plan reviews has been centralized in one organization area under one Manager.		October 2008	Mark Heilman (L)	Completed
	component areas.	Standardized processes and review tools have been developed and implemented for each of the MHSA components.		October 2008	Mark Heilman (L)	Completed
		Elapsed processing times for Plan and Update reviews have been developed and implemented for all MHSA components		October 2008	Mark Heilman (L)	Completed
			Post process and associated timelines on DMH website.	October 2008	Mark Heilman (L)	February 2009
			Establish clear expectations and monitor achievement.	July 2008	Denise Arend (L)	Ongoing
	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. A weekly "MHSA Coordination Meeting" of all DMH managers with responsibility for MHSA development & implementation has been implemented. All proposed Information Notices are reviewed by this group prior to publication to ensure consistency across policies and identify training needs.	Development of an EAO function on the DMH website as recovered	November 2008	Mark Heilman (L)	Completed
			Development of an FAQ function on the DMH website as resource to DMH staff and counties to help ensure consistent guidance to	November	Mark Heilman	February 2009

	counties is underway.	2008	(1.)	
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PART 1 of 3 DEVELOPMENT AND IMPLEMENTATION PROCESS (Cont'd)

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	D. Work cooperatively with the OAC to develop a communication protocol where only one entity requests additional	Currently PEI program staff and OAC staff have developed protocols for county contact to avoid duplication of effort and minimize county confusion. Development of protocols for remaining MHSA components is	Develop protocols for county contacts with OAC for remaining	November 2008	Mark Heilman (L) Sheri Whitt	Completed February 2009
	information from the counties and communicate the protocol to counties.	underway.	components: Community Services and Supports Workforce Education & Training Capital Facilities/Technology Innovation	2008		rebluary 2009
Observation 3: Undefined Roles and Responsibilities of MHSA Entities	A. Work collaboratively with each entity to come to an agreement on the roles and responsibilities. Ensure consistency and functionality with the MHSA.	A draft Memorandum of Understanding (MOU) between OAC and DMH that delineates each entity's role and responsibility in the implementation of MHSA has been developed and is being finalized.		September 2008	Denise Arend (L) Sheri Whitt	April 2009
	B. Develop regulations that define roles and responsibilities of each entity involved in the MHSA and communicate roles and responsibilities to affected parties.	Meetings continue among the County Mental Health Director's Association (CMHDA), the OAC, the Mental Health Planning Council and DMH to discuss respective Roles & Responsibilities.	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 in a 4 party MOU 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

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Observation	Recommendation	Corrective Action Taken	Corrective Action To Be Taken	Date of Action To	Responsible Staff	Final Completion		
				Be Taken	(L = Lead)	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.	Annual Update requirements have been streamlined for FY 09/10 funding requests.	Incorporate into future Framework (see Observation 1. A. Action Item) a process that eliminates duplicate information being requested from counties.	November 2008	Mark Heilman (L)	September 2009		
	B. Allow counties to submit integrated Plans based on broad concepts rather than exact details.	Guidelines have been released simplifying requirements for county submissions to access funds for previously approved programs and projects. Simplified process includes but is not 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 (see Observation 2. B. and 4. A., Action Items).	November 2008	Sophie Cabrera (L)	January 2009 and beyond		
Observation 5: Inefficient Review Processes A) Review Times B) Deadlines	A. Reassess established Plan and Augmentation Request review time frames to determine practicality. If not practical,	Review processes have been amended and communicated to counties in Information Notice #08-28. Elapsed review times for the Community Services and Support		December 2008	Sophie Cabrera (L)	Completed		
C) Review Tools	revise time frames accordingly.	component are posted to the DMH website and similar tracking tools for the remaining components are under development.		December 2008	Sophie Cabrera (L)	Completed and ongoing		
			Publish anticipated review times on DMH website.	December 2008	Sophie Cabrera (L)	February 2009		

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

B. Negotiate reasonable deadlines for the submittal of requested information from the counties. Follow up as necessary to ensure information is submitted timely.	Established deadlines at 30 days & 60 days, respectively, to remind counties of submission of additional information requested in Plan review process. Developed and implemented system to track and follow-up on information not received.	July 2008	Sophie Cabrera (L)	Completed
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.	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. 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.	June 2008	Barbara Marquez (L)	Completed

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