



TOBY DOUGLAS
DIRECTOR

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



EDMUND G. BROWN JR.
GOVERNOR

January 30, 2015

Ms. Sherri Gauger
Interim Executive Director
Mental Health Services Oversight and Accountability Commission
1325 J Street, Suite 1700
Sacramento, CA 95814

Dear Ms. Gauger:

This letter is in response to your recent correspondence, regarding the Mental Health Services Act (MHSA) Issue Resolution Process (IRP). We are supportive of having a process in place for persons that have issues specific to the MHSA. As you are aware, the IRP was initially developed by the former Department of Mental Health (DMH) with the input of various stakeholders over many stakeholder meetings. The Department of Health Care Services (DHCS) has adopted this process with minor updates, see Enclosure 1.

Below are responses to the questions included in your correspondence.

Question 1: To date, (since DHCS has assumed responsibility from DMH for the MHSA) how many MHSA issues have come to the attention of DHCS?

Response

Since July 1, 2012, DHCS has received six MHSA issues through the IRP.

Question 2: What type of MHSA issues have been raised to DHCS?

Response

In brief, issues raised include:

- 1) Improper use of MHSA funds to assist individuals with accessing rental assistance.
- 2) Unfair or inappropriate removal of Full Service Partnership (FSP) status/services.
- 3) Lack of county stakeholder engagement.
- 4) Improper use of MHSA funds, including conflict of interest in awarding MHSA contracts.
- 5) Redirection of MHSA funding.
- 6) Inappropriate loss of FSP housing subsidy.

Question 3: Are MHSA issues raised to DHCS documented?

Response

Yes. Each issue raised to DHCS is logged and assigned for review. The Department does an initial review to ensure the issues identified fall within the scope of the IRP.¹ The review may include contacting the issue filer, the county, other agencies and/or referring the issue/question to the appropriate department/agency. On a case-by-case basis, the requirement of accessing the local issue resolution process is evaluated. DHCS records the issue, actions taken and a description and date of the resolution. All relevant and/or interested parties are notified, in writing, of the resolution.

Question 4: Are persons who fear local retaliation if they raise an MHSA issue at the local level able to go directly to DHCS with their concern?

Response

Yes. Incorporated into the IRP is an exception to accessing the local issue resolution process requirement. DHCS will make this determination on a case-by-case basis.

Question 5: Are there timelines established for DHCS to respond to an individual's MHSA concerns?

Response

Yes. Within 10 days of receipt of an issue, DHCS begins the review process, including determining the organization responsible for addressing the issue. Additional timelines are dependent on this initial review. If DHCS does not refer the issue to another organization and is the responsible organization for addressing the issue, DHCS is committed to a timely resolution, of which the relevant parties will be notified.

Question 6: Are you able to delineate a step-by-step process for review and resolution of MHSA issues brought to your attention?

Response

Yes. The current IRP process provides step-by-step guidance for resolving MHSA issues submitted to the Department.

¹ Scope of Issues, as identified through the statewide Issue Resolution Process include: 1) Access to mental health services, 2) Violation of statute or regulations relating to use of MHSA funds, 3) Non-compliance with the General Standards pursuant to Welfare and Institutions Code (WIC) §3320, 4) Inconsistency between the approved MHSA Plan and its implementation, 5) The local MHSA Community Program Planning Process, and 6) Supplantation.

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Your letter also requested a formal dialogue between DHCS and the Mental Health Services Oversight and Accountability Commission regarding an IRP for MHSA issues. We are open to discussing the current process with you and welcome your input in further refining the process. You may contact Donna Ures, Chief of the Program Outcomes, Evaluation and Reporting Section at (916) 324-0401 or donna.ures@dhcs.ca.gov to arrange these discussions.

Thank you again for the support that you continue to provide to the MHSA stakeholders in accessing the MHSA IRP.

Sincerely,



Karen Baylor, Ph.D., LMFT, Deputy Director
Mental Health & Substance Use Disorder Services

Enclosure

cc: Brenda Grealish, Acting Chief
Mental Health Services Division
1501 Capitol Avenue, MS 2702
P.O. Box 997413
Sacramento, CA 95899-7413

Charles Anders, Acting Chief
Fiscal Management & Outcomes Reporting Branch
Mental Health Services Division
1501 Capitol Avenue, MS 2702
P.O. Box 997413
Sacramento, CA 95899-7413

Donna Ures, Chief
Program Outcomes, Evaluation & Reporting Section
Mental Health Services Division
1501 Capitol Avenue, MS 2702
P.O. Box 997413
Sacramento, CA 95899-7413

Mental Health Services Act Issue Resolution Process

This Mental Health Services Act (MHSA) Issue Resolution Process (IRP), developed in collaboration with various public mental health stakeholders, provides information regarding the resolution process to address local issues related to MHSA, access to services and MHSA requirements. The IRP is subject to revision as needed.

A. Local Issue Resolution Principles

Issues regarding the MHSA should initially be addressed at the local level.¹ The local process should be completed in an expedient manner, with decisions being consistent with MHSA statutes and regulations. General principles and processes for a local MHSA issue resolution process may include:

1. The right for an Issue Filer to bring an issue forward.
2. The review of an issue by an impartial body.
3. Written notification of the outcome to the Issue Filer.

B. Issues Appropriate for this Process

1. Access to mental health services
2. Violation of statute or regulations relating to use of MHSA funds
3. Non-compliance with the General Standards pursuant to Welfare and Institutions Code §3320²
4. Inconsistency between the approved MHSA Plan and its implementation
5. The local MHSA Community Program Planning Process
6. Supplantation

C. How to Submit an MHSA Issue

If the Issue Filer has exhausted his or her county's local issue resolution process, including the local mental health board,³ without satisfactory resolution, the following steps may be taken:

1. The Issue Filer may submit the MHSA issue in writing or by e-mail or by calling the Department of Health Care Services (DHCS) at:

¹ As a general rule, DHCS will require that the local issue resolution process be accessed and exhausted but understands that, in some instances, this may not be possible. Each case will be reviewed accordingly.

² Community Collaboration, Cultural Competence, Client Driven, Family Driven, Wellness, Recovery, and Resilience Focused, and Integrated Service Experiences for clients and their families.

³ In some instances this may include communicating with the local mental health board. Section 5848 provides for the board to conduct a public hearing on three-year plans and updates and provide recommendations to the county mental health department.

Department of Health Care Services
Mental Health Services Division
Attention: MHSA Issue Resolution Process
1500 Capitol Avenue, MS 2702
P.O. Box 997413
Sacramento, CA 95899-7413
Phone: (916) 319-9758
Email: mhsa@dhcs.ca.gov

2. The Issue Filer may also submit the MHSA issue to any of the following entities:
 - Mental Health Services Oversight and Accountability Commission (MHSOAC)
 - California Mental Health Planning Council
 - Any agency and/or entity the Issue Filer feels may assist in resolving the MHSA related issue.
3. The Issue Filer may authorize another person to act on his or her behalf in filing an MHSA issue. Due to confidentiality restrictions, DHCS and/or other agencies may be required to request a Release of Information from the Issue Filer allowing DHCS to share information with all appropriate parties, including the Issue Filer's representative. If the Issue Filer does not respond to a request for a Release of Information within 14 days, DHCS will close the case and notify all appropriate parties in writing.

D. DHCS Review Process:

1. Within 10 business days of receipt of the letter, e-mail or phone call identifying the issue, DHCS will begin the review process, including determining the organization responsible for addressing the issue.
2. If the issue does not fall within the scope of the MHSA Issue Resolution Process, the issue will be referred to other resources such as Patient Rights, the Ombudsman, Medi-Cal, or other State and local resources. No further action will be taken. DHCS will send a letter or email to the Issue Filer summarizing the status and disposition of their issue.
3. If the MHSA issue does fall within the scope of the MHSA Issue Resolution Process, DHCS will contact the Issue Filer to obtain further information. DHCS may ask for documentation that the county issue resolution process was accessed and exhausted at the local level. As a general rule, DHCS will require that the local issue resolution process be accessed and exhausted but understands that, in some instances, this may not be possible. Each case will be reviewed and, as appropriate, DHCS will either continue to attempt to

- resolve the issue or refer the Issue Filer back to his or her county to address the MHSA issue.
4. The Issue Filer has the right to request anonymity and/or confidentiality. If this request is made, DHCS will continue to pursue a resolution with the appropriate parties, with the understanding that this may limit DHCS's effectiveness in resolving the MHSA issue.
 5. DHCS will contact the county and obtain the status regarding the MHSA issue. DHCS will review the county's response, seek clarification and/or further information, if needed, from the involved parties and determine whether the county's action and response to resolving the issue was consistent with the MHSA regulations and statutes.
 6. If the county's response to the MHSA issue is consistent with the MHSA regulations and statutes, DHCS will send a summary letter stating this determination to the Issue Filer and the county. At this point, DHCS has fulfilled its responsibilities and considers the issue resolution process to be complete.
 - If the Issue Filer disagrees with DHCS's determination, the Issue Filer will be urged to seek remedy through his or her local county mental health board. In addition, DHCS reserves the right to contact the MHSOAC to request county technical assistance regarding the MHSA issue that was raised.
 7. If DHCS determines that the activity by the County was inconsistent with the MHSA regulations and/or statutes, DHCS will contact the Issue Filer and the county to determine next steps. As appropriate, DHCS will notify the MHSOAC, the local board of supervisors and the local county mental health board of DHCS's determination. DHCS may participate to help resolve the issue.