



Site Monitoring Report of

Wasatch County Family Clinic

Local Authority Contracts #152296 and #152297

Review Date: February 6th, 2018

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Section One: Site Monitoring Report

Executive Summary

In accordance with Utah Code Section 62A-15-103, the Division of Substance Abuse and Mental Health (also referred to in this report as DSAMH or the Division) conducted a review of Wasatch County Family Clinic (also referred to in this report as WCFC or the Center) on February 6th, 2018. The focus of the review was on governance and oversight, fiscal management, pediatric and adult mental health services, substance abuse prevention and treatment services and general operations.

The nature of this examination was to evaluate the Center's compliance with: State policies and procedures incorporated through the contracting process; Division Directives; State mandated mental health services; and Preferred Practice Guidelines. During the examination, the review teams evaluated: the reliability and integrity of the Center's data and its compliance with established programmatic and operational objectives. Additionally, the review included an examination, through sampling, of the Center's efficient and appropriate use of financial resources.

Any program or operational inadequacies are identified in this report as non-compliance issues. The chart on the following page provides a quick reference to locate any non-compliance issues identified by the monitoring team. A detailed description of the issues can be found in the body of this report.

Summary of Findings

Programs Reviewed	Level of Non-Compliance Issues	Number of Findings	Page(s)
<i>Governance and Oversight</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance Deficiency	None None None None	
<i>Child, Youth & Family Mental Health</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance Deficiency	None None None None	
<i>Adult Mental Health</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance Deficiency	None None None None	
<i>Substance Abuse Prevention</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance Deficiency	None None None 1	13
<i>Substance Abuse Treatment</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance Deficiency	None None None None	

Governance and Fiscal Oversight

The Division of Substance Abuse and Mental Health (DSAMH) conducted its annual monitoring review at Wasatch County Family Clinic (WCFC). The Governance and Fiscal Oversight section of the review was conducted on January 9th, 2018 by Chad Carter, Auditor IV. Overall cost per client data was analyzed and compared to the statewide Local Authority average. Personnel and subcontractor files were examined for compliance with state licensing laws and adherence to contractual requirements, as well as the Center's own policy. Client fees were reviewed for consistency and adherence to approved fee schedules. Executive travel reimbursements were reviewed to ensure they were appropriate and that no personal benefit has been gained. Meeting minutes were reviewed and discussions were conducted to determine if an appropriate level of involvement and financial oversight was provided by the governing board and County.

There is a current and valid contract in place between the Division and the Local Authority. Wasatch County met its obligation of matching a required percentage of State funding.

As required by the Local Authority, Wasatch County received a single audit for the year ending December 31st, 2016. The firm Larson, CPAs completed the audit and issued a report dated July 26th, 2017. The auditors' opinion was unqualified stating that the financial statements present fairly, in all material aspects, the financial position of Wasatch County. In accordance with Government Auditing Standards and the OMB Compliance Supplement, the auditors also issued reports on internal control over financial reporting and compliance for each major Federal program. The SAPT Block Grant was identified as a major Federal program and was selected for specific testing in the audit. No deficiencies were found for this program. The auditors did report one internal control finding for the County. During the review of disbursements, one check out of 60 was found to be missing proper back-up and documentation. The County stated that they would be more diligent in attaching proper documentation. The Division will follow-up with this finding in the next completed audit.

Follow-up from Fiscal Year 2017 Audit:

No findings were issued in FY17

Findings for Fiscal Year 2018 Audit:

FY18 Major Non-compliance Issues:

None

FY18 Significant Non-compliance Issues:

None

FY18 Minor Non-compliance Issues:

None

FY18 Deficiencies:

None

FY18 Recommendations:

None

FY18 Division Comments:

None

Mental Health Mandated Services

According to Utah Code 17-43-301, the Local Authority is required to provide the following ten mandated services:

Inpatient Care

Residential Care

Outpatient Care

24-hour Emergency Services

Psychotropic Medication Management

Psychosocial Rehabilitation (including vocational training and skills development)

Case Management

Community Supports (including in-home services, housing, family support services, and respite services)

Consultation and Education Services

Services to persons incarcerated in a county jail or other county correctional facility

The mandate to provide services to those in county correctional facilities is not applicable to the children and youth population.

In subsection (4)(a)(ii) each local authority is required to “annually prepare and submit to the Division a plan approved by the county legislative body for mental health funding and service delivery, either directly by the local mental health authority or by contract.” This annual area plan provides the state Division of Substance Abuse and Mental Health with a measuring tool against which the local authority is measured during the annual monitoring site review.

A major focus of the monitoring efforts of the Division of Substance Abuse and Mental Health is to measure compliance with this legislative mandate to provide these services to the adults, youth, and children of Utah.

Child, Youth and Family Mental Health

The Division of Substance Abuse and Mental Health Children, Youth, & Families team conducted its annual monitoring review at Wasatch County Family Clinic on February 6th, 2018. The monitoring team consisted of Eric Tadehara, Program Administrator; Mindy Leonard, Program Manager; and Brenda Chabot, representative from the Utah Family Coalition (Allies with Families). The review included the following areas: record reviews, discussions with clinical supervisors and management, case staffing, program visits, and feedback from families through questionnaires. During the visit, the monitoring team reviewed the FY17 monitoring report; statistics, including the Mental Health Scorecard; Area Plans; Youth Outcome Questionnaires; family involvement; Family Resource Facilitation (Peer Support); High Fidelity Wraparound; Multi-Agency Coordinating Committee; school-based behavioral health; Mental Health Early Intervention funding; juvenile civil commitment; compliance with Division Directives; and the Center's provision of the ten mandated services as required by Utah Code 17-43-301.

Follow-up from Fiscal Year 2017 Audit

No findings were issued in FY17.

Findings for Fiscal Year 2018 Audit

FY18 Major Non-compliance Issues:

None

FY18 Significant Non-compliance Issues:

None

FY18 Minor Non-compliance Issues:

None

FY18 Deficiencies:

None

FY18 Recommendations:

None

FY18 Division Comments:

- 1) *Community Partner Collaboration:* WCFC participates in a variety of community collaboration efforts. WCFC collaborates with the local schools and courts, participating in the local youth peer court and various multiagency committees. WCFC currently provides a Spanish speaking therapist to the local dual immersion school which was reported as being “instrumental” in giving children and youth access to the appropriate services. WCFC has

been able to provide services to the children through their school partnerships that the school counselors could not attend to.

- 2) *Family Feedback:* Family feedback was collected from 14 questionnaires gathered by the Utah Family Coalition (UFC) and through five families who attend a focus group. Several families reported that they have benefited from the community resources that they have had the opportunity to utilize. Many of the families stated how much they enjoy the groups offered by WCFC and how much the center has helped with their overall mental health. One family reports “staff genuinely care for you, they are friendly, and this helps with my healing process.”
- 3) *Wraparound & Family Resource Facilitation:* WCFC provides High Fidelity Wraparound as defined by the UFC. WCFC continues to support Family Resource Facilitator (FRF) and the services they provide. At WCFC, the FRF are an integral part of the service delivery system who delivers resources and an opportunity for family voice for those served. Many families reported that their FRFs provides them with support resources, attend meetings and helps them to advocate for their children. Families made statements such as, “the FRF is always there when I need her,” and “she supports me when other did not. She helped me to create a step-by-step plan.”

Adult Mental Health

The Adult Mental Health team conducted its annual monitoring review of Wasatch County Family Clinic (WCFC), on February 6th, 2018. The team included LeAnne Huff, Adult Mental Health Program Manager. The review included the following areas: Discussions with clinical supervisors and management teams, record reviews, site visits to administrative offices and the local County Jail. During the discussions, the team reviewed the FY17 audit; statistics, including the Mental Health Scorecard; area plans; Outcome Questionnaires and the center's provision of the ten mandated services as required by Utah Code 17-43-301.

Follow-up from Fiscal Year 2017 Audit

No findings were issued in FY17.

Findings for Fiscal Year 2018 Audit

FY18 Major Non-compliance Issues:

None

FY18 Significant Non-compliance Issues:

None

FY18 Minor Non-compliance Issues:

None

FY18 Deficiencies:

None

FY18 Recommendations:

- 1) *Peer Support Services (PSS)*: DSAMH appreciates barriers related to the provision of PSS with fee-for-service funding. PSS services will expand to WCFC clients and to individuals in jail with the contract between WCFC and Utah Support Advocates for Recovery Awareness (USARA). DSAMH recommends that WCFC continue to increase evidence-based PSS by hiring a Certified Peer Support Specialist, use of Family Resource Facilitators when appropriate, and continued partnering with Wasatch Mental Health for Clubhouse and Peer Services.

FY18 Division Comments:

- 1) *Jail services*: DSAMH recognizes and appreciates WCFC's efforts to provide services to incarcerated individuals through a partnership between Wasatch County Jail and WCFC. WCFC provides a licensed therapist who provides crisis services, individual therapy, medication assisted treatment, and skills groups twice a week. In addition, WCFC provides case management services within the jail to help identify individuals with mental health and substance abuse issues and connect them to outpatient services upon release. The jail is also

providing nursing services 40 hours a week to address physical health needs.

- 2) *Suicide prevention:* WCFC continues to strengthen their suicide prevention initiative in their county by their involvement in the statewide Zero Suicide Initiative aimed at reducing suicide. WCFC has two staff trained in Question, Persuade, Refer (QPR), and provides training in both English and Spanish. In addition, they have staff certified in Mental Health First Aid (MHFA). These staff members provide education on mental health issues and suicide prevention to their staff as well as community partners. Heber City Police have made a commitment to train all their officers in Mental Health First Aid as well as continued Crisis Intervention Training.
- 3) *Community Involvement and Partnerships:* WCFC continues to develop strong relationships with their community partners through their involvement on multiple local coalitions. WCFC hosted its first annual Mental Health Awareness Day, with the goal of increasing awareness around mental health issues in their community. They advertised in the local paper, radio, and provided a television interview. In addition, WCFC hosted Dinner in the Park for all their community partners, and event which continues to grow each year. The number of people served by WCFC has increased from 676 in FY16 to 745 in FY17, with 545 of those being adults and 210 youth.
- 4) *Documentation:* WCFC continues to provide excellent documentation with updated assessments, treatment plans with measurable objectives, a golden thread throughout goals and progress notes, and evidence of coordinated care.

Substance Abuse Prevention

Susannah Burt, Program Manager, conducted the annual prevention review of Wasatch County Family Clinic on February 13th, 2017. The review focused on the requirements found in State and Federal law, Division Directives, and contracts. In addition, the review evaluated the services described in the annual prevention area plan and the data used to establish prevention priorities.

Follow-up from Fiscal Year 2017 Audit

FY17 Minor Non-compliance Issues:

- 1) WCFC underspent Prevention SAPT Block dollars by \$10,406. The Division Directives require that each Local Authority spends a minimum of 30% of SAPT Block Grant dollars on prevention.

This issue has been resolved, WCFC spent the required 30% minimum of SAPT Block Grant dollars on prevention for FY17.

Findings for Fiscal Year 2018 Audit

FY18 Major Non-compliance Issues:

None

FY18 Significant Non-compliance Issues:

None

FY18 Minor Non-compliance Issues:

None

FY18 Deficiencies:

- 1) WCFC had zero Eliminating Alcohol Sales to Youth (EASY) compliance checks during FY17. In FY16, Wasatch County had 13 checks.

Center's Response and Corrective Action Plan:

WCFC works with the Heber City Police Department to complete the EASY compliance checks. This past year there were changes within the Heber Police Department with officers responsible for this assignment and checks were not completed. WCFC Prevention Coordinator has met with Heber City Police and a new officer has been assigned to this task and he has been briefed and has already completed EASY checks for this current year.

FY18 Recommendations:

- 1) It is recommended that WCFC look at options for additional training for the Latino Coalition. This may include training on the Strategic Prevention Framework, coalition building or specific topics.
- 2) It is recommended that WCFC work with their Regional Director and coalitions to develop a community centered evidence based strategic prevention plan.

FY18 Division Comments:

- 1) WCFC increased the training opportunities for community members, including Youth.
- 2) WCFC has been very timely in submitting invoices for discretionary grants.
- 3) WCFC is working on assessing the needs and gaps in the community with the Caring Community Coalition.
- 4) WCFC programming is considered 100% evidence based. This means that the programming has been tested, researched, and implemented with fidelity.

Substance Abuse Treatment

VaRonica Little, LCSW, Program Administrator conducted the review of Wasatch County Family Clinic on February 5th, 2018, which focused on Substance Abuse Treatment (SAPT) Block Grant Compliance; Drug Court; clinical practice and compliance with contract requirements. Drug Court was evaluated through staff discussion and clinical records. Clinical practices and documentation were evaluated by reviewing client charts and discussing current practices. Adherence to SAPT Block Grant requirements and contract requirements were evaluated by a review of policies and procedures by interviews with Wasatch County staff. Treatment schedules, policies, and other documentation were viewed. The Utah Substance Abuse Treatment Outcomes Measures Scorecard results were reviewed with Wasatch County staff. Client satisfaction was measured by reviewing records, Consumer Satisfaction Survey data and results from client interviews. Finally, additional data was reviewed for Opiate Use and treatment access as well as Driving Under the Influence (*DUI*) rates in Wasatch County.

Follow-up from Fiscal Year 2017 Audit

No findings were issued in FY17.

Findings for Fiscal Year 2018 Audit:

FY18 Major Non-compliance Issues:

None

FY18 Significant Non-compliance Issues:

None

FY18 Minor Non-compliance Issues:

None

FY18 Deficiencies:

None

FY18 Recommendations:

- 1) *TED's Data Entry*: There is a concern that there is not accurate TED's data entered into the clients chart and being submitted for state wide tracking. There was a report of 0 participants in Medication Assisted Treatment (MAT), however there have been multiple clients who utilize MAT while participating in treatment services at WCFC. This was discussed with WCFC Staff, continued training and oversight to ensure that all TED's data is entered accurately moving forward was identified as being the next helpful step.
- 2) *Integrated Health strategies for treatment coordination*: DSAMH recommends additional training for staff on language that furthers public understanding of addictive disorders as a

medical issue to reduce stigma and stereotyping as well as providing resources to clients. This would include discussion of infectious disease transmission, referrals for testing and treatment for health concerns and issues as well as medication management and collaboration with physical health providers throughout treatment. DSAMH is available to provide technical assistance upon request.

FY18 Division Comments:

- 1) WCFC has improved their documented engagement, retention in treatment and successful treatment episodes with the clients they served from FY16 to FY17.
- 2) WCFC continues to be involved in many community partnerships and coalitions that address the needs of their community; specifically by working with schools, including the alternative school in their area, MAT providers and coordination with justice services as well as their work with the suicide and mental wellness efforts in their area.
- 3) WCFC has worked to meet client's access to alternative treatment services and recovery support services by contracting with USARA. This has resulted in the increased outcomes of clients served engaging in recovery services increased from 7% - 38% from FY16 – FY17.
- 4) WCFC has increased the use of peer support staff and recovery coaches as ways to continue engagement and increase retention of clients they serve.
- 5) It is reported that clients are able to access MAT services. There has been continued work with the justice services, as well as including state and federal funding, to ensure there is more access to MAT to all clients who have this need and would like to engage in this portion of treatment.

Section Two: Report Information

Background

Utah Code Section 62A-15-103 outlines duties of the Division of Substance Abuse and Mental Health. Paragraph (2)(c) states that the Division shall:

- Consult and coordinate with local substance abuse authorities and local mental health authorities regarding programs and services,
- Provide consultation and other assistance to public and private agencies and groups working on substance abuse and mental health issues,
- Receive, distribute, and provide direction over public funds for substance abuse and mental health services,
- Monitor and evaluate programs provided by local substance abuse authorities and mental health authorities,
- Examine expenditures of any local, state and federal funds,
- Monitor the expenditure of public funds by local substance abuse authorities and mental health authorities,
- Contract with local substance abuse authorities and mental health authorities to provide a continuum of services in accordance with division policy, contract provisions, and the local plan,
- Assure that these requirements are met and applied uniformly by local substance abuse authorities and mental health authorities across the state,
- Conduct an annual program audit and review of each local substance abuse authority and mental health authority in the state and its contract provider in a review and determination that public funds allocated to by local substance abuse authorities and mental health authorities are consistent with services rendered and outcomes reported by them or their contract providers,
- Each local substance abuse authority and each mental health authority is exercising sufficient oversight and control over public funds allocated for substance abuse and mental health programs and services, and
- Other items determined by the division to be necessary and appropriate.

Non-Compliance Issues, Action Plans and Timelines

This report is organized into individual sections, in which inadequacies will be identified and discussed. Inadequacies are assigned a level of severity based on the combined judgment of the monitoring team. In order to fully understand the degree of severity, a short discussion of the inadequacy levels follows.

A **major non-compliance issue** is non-compliance in contract requirements which affect the imminent health, safety, or well being of individuals. In cases of non-compliance at this level, a written corrective action plan must be completed by the Local Authority immediately and compliance must be achieved within 24 hours or less.

It should be noted that in extreme cases where, in the professional opinion of the monitoring team, an elevated threat of imminent health, safety, or well being of individuals exists, contract payments may be suspended indefinitely.

A **significant non-compliance issue** is either 1) non-compliance with contract requirements that do not pose an imminent danger to clients but that result in inadequate treatment or care that jeopardizes the well being of individuals; OR 2) non-compliance in required training, paperwork, and/or documentation that are so severe or pervasive as to jeopardize the effectiveness of services and continued contract funding. This type of finding will also require the submission of a written corrective action plan in which the Local Authority identifies the steps it will take to rectify the issue and a time frame for accomplishing the correction. The due date for this submission shall be within 10 working days of receipt of the draft monitoring report by the Local Authority. Compliance must be achieved within 30 days of receipt of the draft monitoring report. Verification of the resolution may be accomplished in several ways including a follow-up visit, measurement during the next site review, a review of training documentation, a review of data submitted subsequent to the correction or a combination of these or any other method determined adequate to measure the resolution.

A **minor non-compliance issue** results when the reviewers identify a performance inadequacy that is relatively small in scope and does not impact client well being or jeopardize funding. This type of finding will require the submission of a written corrective action plan in which the Local Authority identifies the steps it will take to rectify the issue and a time frame for accomplishing the correction. The due date for this submission shall be within 15 working days of receipt of the draft monitoring report by the Local Authority. Compliance must be achieved within 60 days of receipt of the draft monitoring report. Verification of the resolution may be accomplished in several ways including a follow-up visit, measurement during the next site review, a review of training documentation, a review of data submitted subsequent to the correction or a combination of these or any other method determined adequate to measure the resolution.

A **deficiency** results when the contractor is not in full compliance, but the deficiency discovered is not severe enough to be categorized as a non-compliance issue. A written corrective action plan is required without a formal timeline. However, the monitoring team may request action to fix the problem by a given date.

A **recommendation** occurs when the contractor is in compliance. The Division is simply making a best practice or technical suggestion. The contractor is encouraged to implement the suggestion but not required.

In rare instances, a non-compliance issue from a previous year may continue unresolved at the time of the monitoring site visit. A recurring non-compliance issue will be prominently displayed in the current monitoring report and will require special attention by the Local Authority to ensure its immediate resolution.

Signature Page

We appreciate the cooperation afforded the Division monitoring teams by the management, staff and other affiliated personnel of Wasatch County Family Clinic and for the professional manner in which they participated in this review.

If there are any questions regarding this report please contact Chad Carter at (801)538-4072.

The Division of Substance Abuse and Mental Health

Prepared by:

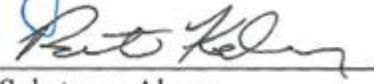
Chad Carter  Date April 20th, 2018
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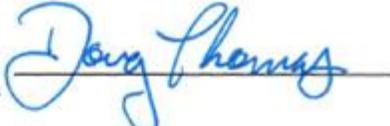
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