



State of Utah

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Governor

SPENCER J. COX
Lieutenant Governor

Department of Human Services

ANN SILVERBERG WILLIAMSON
Executive Director

Division of Substance Abuse and Mental Health

DOUG THOMAS
Director

May 5, 2020

Mr. Mike Davis
Wasatch County Manager
25 North Main
Heber City, UT 84032

Dear Mr. Davis:

In accordance with Utah Code Annotated 62A-15-103, the Division of Substance Abuse and Mental Health has completed its annual review of Local Authority, Wasatch County and its contracted service provider, Wasatch Mental Health; the final report is enclosed. The scope of the review included fiscal management, children, youth, family and adult mental health services, substance abuse treatment and prevention services, and general operations.

The center has many strengths; however, this report by its nature focuses on the exceptions and areas in need of improvement. The Division has approved all corrective action plans submitted by the Center/County in response to each reported finding, which have been included in the final report. If you have any questions, please contact Chad Carter (801)538-4072

We appreciate the cooperation and assistance of the staff and look forward to a continued professional relationship.

Sincerely,

Doug Thomas

Doug Thomas (May 5, 2020)

Doug Thomas
Division Director

Enclosure

cc: Juergen Korbanka, Director, Wasatch Mental Health



Site Monitoring Report of

Wasatch County/
Wasatch County Family Clinic

Local Authority Contracts #152296 and #152297

Review Date: February 11th, 2020

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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 (also referred to in this report as Wasatch County Family Clinic, WCFC or the County) on February 11th, 2020. 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.

The Center is required to respond in writing within 15 business days of this draft report with a plan of action addressing each non-compliance issue and the Center employee responsible to ensure its completion.

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 1	7
<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	14
<i>Substance Abuse Treatment</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance Deficiency	None None 2 1	17-18 18

Governance and Fiscal Oversight

The Division of Substance Abuse and Mental Health (DSAMH) conducted its annual monitoring review of Wasatch County/Wasatch County Family Clinic (WCFC) and their contracted service provider, Wasatch Mental Health (WMH). The Governance and Fiscal Oversight section of the review was conducted on January 23rd, 2020 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. 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.

As part of the site visit, Wasatch Mental Health sent several files pertaining to Wasatch County to demonstrate Wasatch County's allocation plan and to justify their billed amounts. The allocation plan is clearly defined and shows how administrative and operational costs are equitably distributed across all cost centers and that the billing costs for services are consistently used throughout the system.

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, 2018. The firm Larson & Company, PC completed the audit and issued a report dated August 12th, 2019. 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 findings or deficiencies were reported in the audit.

As Wasatch County's contracted service provider, Wasatch Mental Health also received a single audit. The CPA firm Kimball & Roberts completed the audit for the year ending June 30th, 2019. The auditors issued an unmodified opinion in their report dated November 15th, 2019. There were no findings or deficiencies reported.

Follow-up from Fiscal Year 2019 Audit:

FY19 Minor Non-compliance Issues:

- 1) *Documentation:* During the payment file review, some samples were taken to verify that services used to justify specific funding categories qualified for each funding type. A sample was reviewed for the Pregnant Women and Women with Dependent Children set aside that didn't clearly demonstrate the client was eligible for this funding. The notes in the client

account mentioned one child that was not in the mother's custody. The client could still be eligible under certain circumstances, but the system didn't include any additional documentation or detail. WCFC should include more detailed information in their system to clearly identify pregnant women, women with dependent children or other client categories that may be eligible for specific funding.

This issue has been resolved. WCFC has made improvements in their documentation of pregnant women and women with dependent children. All reviewed samples clearly demonstrated that the clients qualified for this category of funding.

Findings for Fiscal Year 2020 Audit:

FY20 Major Non-compliance Issues:

None

FY20 Significant Non-compliance Issues:

None

FY20 Minor Non-compliance Issues:

None

FY20 Deficiencies:

- 1) *Federal Awards Policy:* The OMB Uniform Guidance under 2 CFR 200 requires non-Federal entities that receive Federal funding to have a written policy surrounding the management of their Federal award funds. Wasatch County does not currently have an approved Federal awards policy in place.

County's Response and Corrective Action Plan:

Action Plan: A written policy surrounding the management of Federal award funds will be developed and approved.

Timeline for compliance: June 30, 2020

Person responsible for action plan: Mike Davis, Randy Huntington, & Chad Shubin

FY20 Recommendations:

- 1) As the contracted service provider, Wasatch Mental Health's emergency plan is applicable to the clients served under this contract. The WMH emergency plan was reviewed by Robert Snarr, Program Administrator and Geri Jardine, Program Support Specialist, as part of monitoring. A checklist based on SAMHSA recommendations was completed and is included at the end of this report as Attachment A. It is recommended that WCFC and WMH review these suggestions and update their emergency plan accordingly.

FY20 Division Comments:

- 1) Wasatch County was asked to provide monitoring reports for their service provider Wasatch Mental Health, as part of annual monitoring from the Division starting this year. Wasatch County created their own monitoring tool and submitted their written report prior to the site visit, their cooperation and effort is greatly appreciated.

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 20th, 2020. The monitoring team consisted of Mindy Leonard, Program Manager. The review included the following areas: record reviews, discussions with clinical supervisors and management, case staffing, and program visits. During the visit, the monitoring team reviewed the FY19 monitoring report; statistics, including the Mental Health Scorecard; Area Plans; Youth Outcome Questionnaires; High Fidelity Wraparound; Multi-Agency Coordinating Committee; mental health early intervention funding; school-based behavioral health; 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 2019 Audit

No findings were issued in FY19.

Findings for Fiscal Year 2020 Audit

FY20 Major Non-compliance Issues:

None

FY20 Significant Non-compliance Issues:

None

FY20 Minor Non-compliance Issues:

None

FY20 Deficiencies:

None

FY20 Recommendations:

- 1) *Family Resource Facilitation and Family Peer Support:* Wasatch County continues to support the Family Resource Facilitators (FRF) model. FRFs continue to be an integral part of the continuum of care through Wasatch County in Heber. It is recommended that Wasatch examine methods to train staff on the FRF services available to increase appropriate referrals. It is also recommended that WCFC capture work done by FRFs in the EMR and train FRFs and supervisors on family peer support notes.

FY20 Division Comments:

- 1) *Community Outreach:* WCFC has been very active and has representation on various community outreach groups. WCFC has a positive relationship with the county and the county commissioner reported being satisfied with the services provided. WCFC provides a

mental health day to promote awareness in the community. WCFC recognizes the gap that exists with regard to intellectual and developmental disabilities and is actively looking for resources to provide for this population.

- 2) *School Based Mental Health:* WCFC's partnership with Wasatch County School District has changed in the past year due to additional funding for the district. The school district still maintains a relationship with WCFC to provide clinical and group services. WCFC is currently in discussions with school officials to ensure that services continue. WCFC has also expanded services in the alternative high school. WCFC is dedicated to providing the best possible mental health services for school-based clients. DSAMH is willing to support and offer assistance with regard to expanding school based services.

Adult Mental Health

The Adult Mental Health team conducted its annual monitoring review of Wasatch County Family Clinic, on February 20th, 2020. The team included Mindy Leonard, 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 interviews with a county commissioner and Judge. During the discussions, the team reviewed the FY19 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 2019 Audit

No findings were issued in FY19.

Findings for Fiscal Year 2020 Audit

FY20 Major Non-compliance Issues:

None

FY20 Significant Non-compliance Issues:

None

FY20 Minor Non-compliance Issues:

None

FY20 Deficiencies:

None

FY20 Recommendations:

- 1) *Peer Support Specialists(PSS):* PSS services are currently provided through Utah Support Advocates for Recovery Awareness (USARA) with an emphasis on substance use disorders. This is also reflected on the low number of PSS services seen on the 2019 Adult Mental Health Scorecard (WCFC-2.1%; rural-4.3%). WCFC is encouraged to consider employing a mental health PSS to provide recovery supports for mental health clients.
- 2) *Specialty Courts:* Wasatch County has an excellent Drug Court that has been very effective with treatment. WCFC works directly with the court and attends each session. The Judge over Drug Court suggested that WCFC consider expanding the court to include Mental Health Court.

FY20 Division Comments:

- 1) *Supportive Housing*: WCFC recognizes the barrier to continuity of care that results from the lack of affordable transitional housing for those receiving mental health treatment. WCFC has identified a few resources and is dedicated to continuing to search for good housing options for individuals leaving incarceration and receiving treatment.

- 2) *Mental Health Care for Older Adults*: WCFC has recently expanded their treatment for older adults, now providing therapy on-site at the skilled nursing facility.

Substance Use Disorders Prevention

Becky King, LCSW, Program Administrator, conducted the annual prevention review of Wasatch County Family Clinic on February 11th, 2020. 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 2019 Audit

No findings were issued in FY19.

Findings for Fiscal Year 2020 Audit

FY20 Major Non-compliance Issues

None

FY20 Significant Non-compliance Issues

None

FY20 Minor Non-compliance Issues:

None

FY20 Deficiencies:

- 1) *EASY Compliance Checks:* The number of Eliminating Alcohol Sales to Youth (EASY) Compliance Checks decreased from 17 to 11 checks from FY18 to FY19 respectively, which does not meet Division Directives. The number of EASY Compliance Checks should increase by a minimum of one check each year.

County's Response and Corrective Action Plan:

Action Plan: Due to COVID-19 all EASY Compliance checks are currently suspended to protect youth and officers from risk of unnecessary exposure. When COVID-19 is no longer a risk factor, the LSAA will coordinate with law enforcement in efforts to facilitate EASY Checks.

Timeline for compliance: Pending the conclusion of current pandemic.

Person responsible for action plan: Chad Shubin, Colleen Oshier

FY20 Recommendations:

- 1) *School Prevention:* WCFC has focused on middle schools and high schools over the past several years and recently decided to start focusing on elementary schools as well. They are planning to look into evidenced-based practices for elementary school and including the Principal's feedback in the community assessment to determine the needs for elementary

school kids. It is recommended that the WCFC work with their Prevention Regional Director on this effort.

- 2) *Prevention with Lesbian, Gary, Bisexual, Transgender, Queer or Questioning (LGBTQ):* WCFC has been working with the LGBTQ individuals in their community, but have not had success in getting individuals to their events. For example, they hosted an LGBTQ event last year with the Mayor and City Council, but only three individuals showed up. It is recommended that WCFC work with their Prevention Regional Director on methods of increasing engagement with the LGBTQ community in their local area.

FY20 Division Comments:

- 1) *Community Collaboration:* WCFC has a great relationship with key stakeholders and community partners, which has helped move prevention efforts forward in their community. WCFC offered the following activities last year: (1) After-School Clubs, (2) Head, Heart, Hands and Health (4-H) activities (3) Parenting classes, including Strengthening Families, Love & Logic and Prime For Life, which were also taught in the 10th grade health classes, (4) Question, Persuade and Refer (QPR) and Mental Health First Aid classes which were taught by WCFC, Wasatch County Health Department and the Wasatch County School District. WCFC is planning to provide a minimum of three Mental Health First Aid classes this year, which will continue in 2020.
- 2) *Coalitions:* There is a lot of engagement with the coalitions in Wasatch County. These coalitions include (1) Caring Community Coalition (2) Wasatch Mental Wellness Coalition and (3) Wasatch Latino Coalition, which recently reunited last year. WCFC hired a Prevention Coordinator for the Wasatch Latino Coalition, who is doing an excellent job of moving coalition efforts forward in their community. The County Council members, Mayor, Police Department and other community members attend coalition meetings on a regular basis and are actively involved in moving initiatives forward. The WCFC Prevention Coordinators meet with all coalition members every year to review the strengths and weaknesses of the coalition and use their feedback to make improvements.
- 3) *Risk and Protective Factors:* The following risk factors were identified by WCFC for their community: poor family management, favorable attitudes towards problem behaviors, low perceived risk of harm and low commitment to school. With the support of the three coalitions, the following problem areas were prioritized: E-cigarettes, prescription drug abuse, marijuana use, mental health and suicide prevention. The Governing Youth Council (GYC) met with Mitt Romney's office during the past year and talked about the dangers of E-cigarettes and marijuana, which resulted in positive change for their community. As a result of their efforts, the city passed an ordinance requiring smoke shops to move out of the county, which are now located by the airport. This has reduced access to E-Cigarettes and vaping products. In addition, these efforts helped educate parents on E-Cigarettes, vaping, marijuana and the benefit of adding smoke detectors in bathrooms to monitor kids more closely. WCFC is also focusing on mental health prevention and has provided Mental Health First Aid training and is using "Why Try" more frequently in schools. Events such as Back

to School, conferences, Concert and Dinner in the Park include mental health messages, which have helped educate the community on a larger scale on this issue.

Substance Use Disorders Treatment

Becky King, LCSW, Program Administrator, conducted the review of Wasatch County Family Clinic on February 11th, 2020, 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 in Wasatch County.

Follow-up from Fiscal Year 2019 Audit

FY19 Minor Non-compliance Issues:

- 1) WCFC did not collect 85.7% of the criminogenic risk data for adults compelled to treatment in the criminal justice system, which does not meet Division Directives. Local Authorities cannot have more than 10% of the data unknown or not collected for criminogenic risk.

This issue has not been resolved and will be continued in FY20; see Deficiency #1.

- 2) The Treatment Outcomes Measures Scorecard shows that tobacco use from admission to discharge moved from 2.7% to -6.7%, which does not meet Division Directives.

This issue has been resolved. The Treatment Outcomes Measures Scorecard shows that tobacco use from admission to discharge moved from -6.7% to 4.2.% from FY18 to FY19 respectively, which meets Division Directives.

Findings for Fiscal Year 2020 Audit:

FY20 Major Non-compliance Issues:

None

FY20 Significant Non-compliance Issues:

None

FY20 Minor Non-compliance Issues:

- 1) The Treatment Outcomes Scorecard shows that the number of individuals that were employed from admission to discharge, decreased from 11.3% to 9.6% from FY18 to FY19 respectively, which does not meet Division Directives.

County’s Response and Corrective Action Plan:

Action Plan: Due to COVID-19, employment numbers are likely to decrease for the next few months. Where appropriate, and to the degree that social distancing will allow, clinicians will refer unemployed clients to Vocational Rehabilitation. Additionally, in circumstances where clients desire to pursue employment and wish to address this in treatment, clinicians will identify therapeutic objectives designed to help clients be prepared for gainful employment.

Timeline for compliance: Immediate

Person responsible for action plan: Chad Shubin

- 2) The Youth Consumer Satisfaction Surveys shows that 5.4% of data was not collected and 9.2% of the data was not collected for Youth (Family) Satisfaction Surveys, which does not meet Division Directives. There needs to be at least a 10% data sample rate to obtain accurate data results.

County’s Response and Corrective Action Plan:

Action Plan: Local authority has already collected beyond 10% of needed satisfaction surveys for all client categories.

Timeline for compliance: Completed

Person responsible for action plan: Chad Shubin

FY20 Deficiencies:

- 1) WCFC did not collect 43.3% of the criminogenic risk data for adults involved in the justice system in FY19, which does not meet Division Directives.

County’s Response and Corrective Action Plan:

Action Plan: RANDT risk assessment will be administered to all clients who are involved in criminal legal proceedings, probation, or parole.

Timeline for compliance: Immediate

Person responsible for action plan: Chad Shubin

FY20 Recommendations:

- 1) *Clinical Charts:* WCFC is doing a good job in their clinical charts overall. There are a few areas in need of improvement, which include the following:
 - Include ASAM goals in recovery plan and reviews. This should include: (1) identifying the ASAM Dimension that is the issue, (2) identifying the condition or issue that creates a high use/relapse potential, (3) and writing the objectives that move the individual towards resolving these issues or conditions.

- Address tobacco cessation during the assessment and include it in the recovery plan if the client is ready to work on tobacco / nicotine use.
 - Discuss Medication Assisted Treatment (MAT) at the assessment and refer to MAT services if needed.
 - Develop objectives that are specific, time limited and measurable. They should also include a specific end date.
 - Identify recovery support, ongoing services, referrals and provide follow-up care as needed in the discharge summary (*Chart #'s 1051565, 1052112, 1051255, 1038704*).
- 2) *Data*: WCFC would like to receive assistance in understanding the requirements for entering the following data in the Treatment Episode Data Set (TEDS): (1) Medication Assisted Treatment and (2) Criminogenic Risk Data for Justice Involved Adults. It is recommended that WCFC follow up with the DSAMH Data Team for technical assistance in this area.

FY20 Division Comments:

- 1) *Quality Services*: WCFC has a well trained team that is dedicated to providing quality services for their clients and families. They are currently providing gender-responsive, trauma focused services in an outpatient and intensive outpatient setting. They also offer a variety of individualized groups and services in their clinic and the Jail. They also refer individuals to residential services as needed. Beginning February 2020, the WCFC Clinical Team will begin doing monthly peer review chart audits as a team to sharpen skills and verify that they are meeting required standards.
- 2) *Drug Court*: WCFC has a positive relationship with the Drug Court Team, including the Judge and law enforcement. In fact, the Judge is really invested in Drug Court, which has helped move initiatives forward in their program. Case Managers are assigned to work with clients as needed to connect them to community services. The Drug Court Team attends the State Drug Court and Fall Conference each year to ensure that they are meeting their training requirements. The Drug Court Program in Wasatch County has made a positive impact on their clients and families.
- 3) *Holistic Approach to Wellness*: The WCFC Clinic staff work to provide individualized person-centered recovery services and engage clients in identifying meaningful goals and objectives. When appropriate, a variety of wellness focused goals are included in a client's treatment plan. Such goals and objectives could include anything from taking time to get out and walk regularly to finding time for peaceful meditation. WCFC also holds an annual conference with breakout sessions focused on health education. In addition, they have PEHP Healthy Utah train staff on a number of health issues. Finally, their Relias Learning program offers a number of online curriculums regarding health issues.

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:

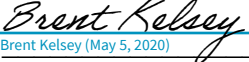
Chad Carter  Date 05/05/2020
Chad Carter (May 5, 2020)
Auditor IV


Approved by:

Kyle Larson  Date 05/05/2020
Kyle Larson (May 5, 2020)
Administrative Services Director

Eric Tadehara  Date 05/05/2020
Eric Tadehara (May 5, 2020)
Assistant Director Children's Behavioral Health

Kimberly Myers  Date 05/05/2020
Kim Myers (May 5, 2020)
Assistant Director Mental Health

Brent Kelsey  Date 05/05/2020
Brent Kelsey (May 5, 2020)
Assistant Director Substance Abuse

Doug Thomas  Date 05/05/2020
Doug Thomas (May 5, 2020)
Division Director

UTAH DIVISION OF SUBSTANCE ABUSE AND MENTAL HEALTH

Emergency Plan Monitoring Tool

Name of Agency: Wasatch Mental Health

Date: January 22, 2020

<i>Compliance Ratings</i>				
Y = Yes, the Contractor is in compliance with the requirements.				
P = Partial, the Contractor is in partial compliance with requirements; comments provided as suggestion to bring into compliance.				
N = No, the Contractor is not in compliance with the requirements.				
Monitoring Activity	Compliance			Comments
	Y	P	N	
Preface				
Cover page (title, date, and facility covered by the plan)	X			Need date
Signature page (with placeholders to record management and, if applicable, board of directors' approval of the plan and confirmation of its official status)		X		Need signatures on plan
Title page (with placeholders to record the dates that reviews/revisions are scheduled/have been made)			X	No date for when review/revision is scheduled
Record of changes (indicating when changes have been made and to which components of the plan)			X	Need place to identify changes to the plan, made by whom, and date of change
Record of distribution (individual internal and external recipients identified by organization and title)			X	Need distribution record
Table of contents	X			
Basic Plan				
Statement of purpose and objectives	X			
Summary information	X			
Planning assumptions	X			
Conditions under which the plan will be activated	X			
Procedures for activating the plan	X			
Methods and schedules for updating the plan, communicating changes to staff, and training staff on the plan			X	Need to identify schedule for updating plan, communicating changes and training staff on the plan.
Functional Annex: The Continuity of Operations (COOP) Plan				
Essential functions and essential staff positions	X			
Continuity of leadership and orders of succession	X			
Leadership for incident response	X			
Alternative facilities (including the address of and directions/mileage to each)	X			
Planning Step				

<p>Disaster planning team has been selected, to include all departments (i.e., safe/security, clinical services, medication management, counseling/case management, public relations, staff training/orientation, compliance, operations management, engineering, housekeeping, food services, pharmacy services, transportation, purchasing/contracts, medical records, computer hardware/software, human resources, billing, corporate compliance, etc.)</p>	X			
<p>The planning team has identified requirements for disaster planning for Residential/Housing services including:</p> <ul style="list-style-type: none"> ● Engineering maintenance ● Housekeeping services ● Food services ● Pharmacy services ● Transportation services ● Medical records 	X			
<p>The team has coordinated with others in the State and community.</p>	X			











DSAMH FY20 Monitoring Report - Wasatch County


Final Audit Report

2020-05-05

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