



MENTAL HEALTH SERVICES ACT (MHSA) – Issue Resolution Process

I. Behavioral Health & Recovery Services (BHRS) Grievance/Appeals

BHRS consumer/clients receive client rights information upon admission to any program, which includes information on the right to a problem resolution process and how to file a grievance, appeal or request a state fair hearing after exhausting the internal problem resolution process. The Office of Consumer and Family Affairs (OCFA) is available to assist with grievances, appeals, and/or the fair hearing process. *For a complete list of Consumer Rights, call OCFA at 800.388.5189 or visit www.smchealth.org/BHRS/OCFA.*

II. MHSA Issue Resolution - Background

MHSA County Performance Contracts require that Counties adopt an Issue Resolution Process in order to resolve issues related to

- 1) the MHSA Community Program Planning (CPP) process;
- 2) consistency between approved MHSA plans and program implementation; and
- 3) MHSA funded programs (accessibility, appropriate use of funds, etc).

Counties are required to keep and update an Issue Resolution Log to handle client disputes and complaints. The Issue Resolution Log must include brief description of the MHSA issue, dates, and final resolution.

Specifically, CPP is defined in Title 9 California Codes and Regulations and ensures that:

- MHSA funded services are client and family driven meaning that clients and their families have the primary decision-making role in determining the services and supports that are most effective and helpful.
- The county will demonstrate a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder involvement on mental health policy, program planning and implementation, monitoring, quality improvement, evaluation, and budget allocations.
- Consumers and their family members will be provided training, opportunities to provide their viewpoints and experiences and granted stipends for their participation.

III. MHSA Issue Resolution Process

When an MHSA specific grievances are received by the OCFA, the coordinator will:

- Note in the Grievance/Appeal Log that it is an MHSA-specific grievance.
- Handle all issues related to treatment by MHSA funded programs.



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- Direct all CPP issues to the MHSA manager or appropriate staff
- If a satisfactory resolution of the CPP issue is determined, the OCFA coordinator or designee will coordinate with the MHSA Manager to provide a resolution letter.
- If a satisfactory resolution is not determined, all other procedures will be followed as stated in the Consumer Problem Resolution Process Manual.
- Where appropriate (e.g. MHSA community planning process issues) the MHSA Manager will consult a sub-committee of the MHSA Steering Committee, which shall include at least 50% consumer/client and family members to resolve the issue. Decision-makers involved in the grievance process will not have been involved in the specific grievance itself and/or in any previous level of review concerning the grievance.

