Wellness Matters
Your Wellness • Your Way • Your Community

An E-Journal of San Mateo County Behavioral Health and Recovery Services

March 2017

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Historic New LGBTQ Behavioral Health Coordinated Services Center
By Doris Estremera, MHSA Manager

The very long awaited, first of its kind, LGBTQ Behavioral Health Coordinated Services Center (San Mateo County Pride Center/The Center) will open its doors this summer! The Center will be located at 1021 South El Camino Real, San Mateo, CA 94402 and will serve LGBTQ individuals of all ages.

StarVista, the lead agency for The Center, will work in partnership with Pyramid Alternatives, Daly City Partnership, Peninsula Family Service, Adolescent Counseling Services Outlet Program and in collaboration with San Mateo County BHRS. Services include counseling and crisis intervention, case management, vocational and peer support services, trainings, social and community activities. And finally, the Center will have a large social media and online presence and opportunities to train providers to build competency working with the LGBTQ population.

“The Center has been a dream for many people, like me, who felt very invisible growing up. The goal of the Center is not only to provide a safe space but to acknowledge that we exist, we are important and we are loved,” said Dr. Jei Africa, Director of the Office of Diversity and Equity. “The Center will be a great addition to the work the Pride Initiative has started since 2008 in highlighting and addressing the needs of LGBTQ people in San Mateo County.”

It is well documented that LGBTQ individuals are at high-

County First to Implement Drug Medi-Cal Organized Delivery System
By Clara Boyden, Alcohol and Other Drug Services Manager II

On February 1, San Mateo County became the first county in California to implement the Drug Medi-Cal Organized Delivery System (DMC ODS), an achievement we share with Riverside County, which transforms the existing substance use disorder (SUD) service system for Medi-Cal beneficiaries.

What does this mean for clients?
- Medi-Cal beneficiaries now have access to a full continuum of SUD treatment services- including case management, recovery services, expanded medication assisted treatment, and short-term residential treatment in addition to traditional outpatient and intensive outpatient services.
- Services can be provided via telephone, by telehealth and “in any appropriate setting in the community” – and are no longer strictly limited to a clinic setting.

How to Access Care? The BHRS ACCESS Call Center now fields calls from clients to access care and uses the ASAM Initial Placement screening tool for all callers requesting substance use disorder services (SUDS). Individuals seeking services can call ACCESS at 1-800-686-0101.

What does this mean for substance use providers?
- Providers use a uniform initial placement screening tool based on the American Society of Addiction Medicine (ASAM) to triage clients and direct them to the appropriate level of care.
- Providers are required to use evidence based treatments in their program services.
- Providers can refer a client to ACCESS or refer them to their nearest BHRS contracted substance use disorder treatment provider. (See link below for our ser-

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From the Director's Desk - Stephen Kaplan, Director, BHRS

We Build Bridges
Over the past month or so, and as recently as the other night, I have heard people talk about how they are “building bridges rather than building walls.” Inclusivity, tolerance, random acts of kindness, compassion and diversity serve as the essential “building blocks” for these bridges whether large or small, and whether they are built collectively or individually.

Building bridges is the principal way our BHRS community lives its mission of “Building opportunities for people with or at risk of alcohol and drug addiction and mental health challenges to achieve wellness and/or recovery through partnership, innovation and excellence.” It is also how we strive to achieve our vision of “Individuals, families and communities fulfill their promise and successfully pursue their dreams in a society where stigma and discrimination against those with mental illness and/or alcohol and drug addiction are remnants of the past.”

In March of 2009 we adopted our Primary Prevention Framework for Behavioral Health. The four strategies listed below take on even greater importance today than eight years ago and help us stay the course as we build and strengthen our “Bridges”.

Strategy 1
Enhance Place: Enhance the places people live, work, play, go to school, worship, and socialize to support emotional and psychological health, reduce substance use, and decrease exposure to violence.

Strategy 2
Connect People: Strengthen positive social-emotional development, enhance social connections, and reduce isolation to support emotional health, promote psychological well-being, reduce substance use, and decrease exposure to violence.

Strategy 3
Foster Prosperity: Reduce stigma and enhance economic opportunity and self-sufficiency, especially for those most at risk for mental health problems and substance use.

Strategy 4
Expand Partnerships: Engage multiple government sectors, businesses, and community members—including people receiving behavioral health services and their families—in enhancing places, strengthening connections among people, and fostering prosperity to improve emotional health, promote mental well-being, reduce substance use, and decrease exposure to violence.

And then sometimes a powerful message found in an unexpected place captures all that needs saying as I saw in a commercial during this past Sunday’s Oscar show.

LGBTQ Service Center
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er risk of behavioral health issues including increased risk for suicide, higher levels of familial and social abuse, and higher levels of anxiety and depression, and experience multiple barriers accessing behavioral healthcare services. The Center will aim to design, implement and oversee programs that will be tailored to meet the needs of a wide variety of LGBTQ communities. Services will be sensitive to the differing and distinctive needs of the Lesbian, Gay, Bi-sexual, Transgender, and Queer communities and will respond to the ever-changing needs of this diverse community. Services will be provided, in many cases, by LGBTQ peers.

While there are LGBTQ services located in the Bay Area, there are very few services in San Mateo County and a scarcity of published research on models of coordination across services for this community. The opportunity to fund this new and unique approach to providing services for LGBTQ came from the Mental Health Services Act (MHSA) Innovation (INN) component. The Innovation component allows counties to apply for funds for innovative projects designed and implemented for a defined time period and evaluat-

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Mental Health Services Act Update – Doris Estremera, MHSA Manager

MHSA Three-Year Plan
Join behavioral health advocates, providers and clients and provide your input on the next 3 years of MHSA priorities. The MHSA Three-Year Planning Launch is open to the public. Childcare and language interpreters are provided, please contact Colin Hart at chart@smcgov.org to schedule these services.

Three-Year Planning Launch
The planning will launch on Monday, March 13, 2017 from 3-5pm at the Health System Main Campus, Room 100, 225 37th Ave. San Mateo, CA 94403.

Counties are required to engage broad-based stakeholders in MHSA Annual Updates and Three-Year Plan development. The Community Program Planning (CPP) process has begun for the MHSA Three Year Plan Fiscal Years 2017-2020.

The MHSA Steering Committee plays an important role in the development of the Three-Year Plan. The committee makes recommendations about priority service and strategy development. If you are interested in joining please complete an application, which can be found on our MHSA website at: www.smchealth.org/bhrs/mhsa.

MHSA Annual Update
The MHSA Annual Update for FY 2016-17 will be presented to the Board of Supervisors for approval before submission to the State of California Mental Health Services Oversight and Accountability Commission. Materials from the presentation to the MHSA Steering Committee and the Mental Health & Substance Abuse Recovery Commission (MHSARC) are posted on our MHSA website.

You are welcome to provide public comment by submitting a comment form to Doris Estremera, MHSA Manager by email at mhsa@smcgov.org or by mail to: Behavioral Health and Recovery Services, 2000 Alameda de Las Pulgas, Suite 235, San Mateo, CA 94030

MHSA website : www.smchealth.org/bhrs/mhsa.

LGBTQ Service Center
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ed to develop new best practices in mental health services.

The primary question this project is looking to answer is: Does a coordinated service delivery approach improve access and health outcomes for LGBTQ individuals at high risk for or with moderate or severe behavioral health challenges? San Mateo County BHRS is looking forward to sharing the findings and working towards becoming a best practice model for the rest of the State of California and beyond.

When asked, “What are you looking forward to the most with the launch of this center?” Lisa Putkey, The Center’s new Program Director replied “I am most excited about having this space for LGBTQ individuals and to offer many opportunities to bring together multigenerational families and communities to learn, connect and heal together, especially in these really difficult times. There is so much fear and hate out there and we need to come together to create a community … a community based on justice and equity.”

For more information about The Center, contact Jei Africa at jafica@smcgov.org or Lisa Putkey, Program Director at lisa.putkey@star-vista.org.

For more information about the Pride Initiative, check out their website at www.smchealth.org/bhrs/ode/pride.
BEAM and PREP Graduation

January 19 was a heart warming evening of celebration for the ten most recent graduates of Felton's San Mateo PREP (Prevention and Recovery in Early Psychosis) and BEAM (Bipolar Disorder Early Assessment and Management) programs that serve youth and adults under the age of 35. Graduation ceremonies are held several times throughout the year at sites in Alameda, Monterey, San Francisco, and San Mateo counties.

"Tonight celebrates phenomenal milestones for both students and their families," Felton President and CEO Al Gilbert noted with enthusiasm.

Bruce Adams, San Mateo PREP and BEAM Program Manager, began the ceremony by commending the brave students who, despite the odds, completed the programs.

One graduate shared that before PREP, he was "heading into darkness." Another said Felton's programs and staff "guided with direction and purpose."

Successful BEAM graduate, Ernest Li, radiated with joy as he spoke with PREP and BEAM Program Director Adriana Furuzawa. "You've done a lot in my life," said Ernest.

A majority of the graduates completed high school, and now work part-time jobs, while attending college-something one student said "didn't expect would ever happen."

The presentation of certificates and one-word plaques describing the graduates was heartfelt and revealing.

"Courage," "Gracious," and "Determination," were just a few of the attributes written.

Family members shed tears of joy as they expressed appreciation for the life-transformative impact of the programs to Felton staff members, who dabbed away their own joyful tears.

Data indicates that approximately one in five adults in the U.S. experiences mental illness in a given year. One in 25 adults in the U.S. experiences a serious mental illness in a given year that substantially interferes with or limits one or more major life activities.

Although rare, the spectrum of mental illness can set in as early as 12 years old. One half of all mental illnesses begins by age 14 and 75% of those who suffer with the disease experience symptoms by age 24.

The most common forms of mental illness include:
- Anxiety and Panic Disorders
- Bipolar Disorder
- Depression
- Eating Disorders
- Schizophrenia
- Substance use and Addiction

More than half of the adults in the U.S. suffering from mental illness are living undiagnosed.

Overwhelming evidence indicates that early intervention during the first signs of mental illness offers huge benefits. When caught early, it may be possible to delay or prevent the onset of chronic and disabling forms of psychosis and reduce the likelihood of hospitalization.

BEAM is funded by Measure K, a countywide, voter-approved sales tax to support essential County services and to maintain or replace critical facilities. 

- Felton Institute
Serenity House Construction Begins

Renovation began on February 6, 2017 on the long awaited Serenity House respite center located on the northwest end of the Medical Center Campus at 3701 Hacienda Street in San Mateo.

Renovations are expected to take approximately 150 days, with weather working in our favor, we expect to open the program on July 1, 2017. Detailed care and consideration was given in the design process to ensure that the building affords clients privacy and blends in with the surrounding neighborhood.

Renovations for this facility are funded by Measure K, a countywide, voter-approved sales tax to support essential County services and to maintain or replace critical facilities, and funds awarded to BHRS by the California Investment in Mental Health Wellness Program Grant.

Serenity House will be operated by HealthRIGHT 360 and provide 24-hour care and respite for up to 10 individuals age 18 and over who are experiencing destabilization due to mental health symptoms. Individuals, who do not pose an immediate danger to themselves or others, will be stabilized in a home like setting for approximately 10 days which will offer case management, brief individual and group therapy, medication management and family support.

The facility is intended to provide police, family members and mental health providers a better option for individuals experiencing a mental health crisis than being held in jail or placed in a psychiatric hold at SMMC Psychiatric Emergency.

Serenity House will fill a critical gap in the County’s system of care for adults with mental illness and will help clients successfully return to their community with the right resources and tools needed for recovery.

- Molly Henricks, BHRS Crisis Coordinator

Behavioral Health and Recovery Services Relocations

Recently, there have been number of moves at Behavioral Health and Recovery Services. Please note the following changes:

- BHRS Administration has moved to 2000 Alameda de las Pulgas, Suite 235, San Mateo, CA 94030. (The BHRS administration office reception desk in now located in Suite 200.)
- BHRS IT also moved to 2000 Alameda de las Pulgas, Suite 200 Annex, San Mateo.

All phone and FAX numbers remain the same:
Main Phone: 650-573-2541
Main Fax: 650-573-2841
PONY: MLH361

- Alcohol and Drug Services, Chronic Disease and Injury Prevention, Office of Diversity and Equity, Pathways, and Access Call Center are located at:
  310 Harbor Blvd, Bldg. E
  Belmont, CA 94002
  PONY: MLH 202

- Pharmacy
  727 Shasta Street
  Redwood City 94063
  PONY: MLH118

- Conservatorship, Assisted Outpatient Treatment (AOT) and Patient’s Rights Advocacy

  Temporary location:
  262 Harbor Blvd, Bldg. A, Belmont, CA 94002

  PONY: MLH 202S1

March Moves:
- BHRS Payroll & Personnel is scheduled to move to 2000 Alameda de las Pulgas, Suite 200, Room 219, San Mateo, in mid-March.
- MIS/Billing, Contracts, Fiscal, and Communication are currently scheduled to move to 2000 Alameda de las Pulgas, Suite 280, San Mateo in late March.

If you are visiting staff from one these teams, please call ahead to confirm their location.
Friendship Center

This Valentine’s Day, the Friendship Center (FC), a program of the Mental Health Association of San Mateo County, celebrated its 47th anniversary. We are a social, recreational and educational program for adults in our community living with mental illness. We serve over 450 unduplicated members annually and provide over 600 hot lunches monthly. The program is drop-in and free, with locations in Daly City, San Mateo, Belmont, San Carlos, Redwood City and East Palo Alto; meeting Mondays through Saturday. All locations are conveniently located near public transportation.

The Center provides a place to gather in a comfortable and safe setting to meet new people and visit with old friends. The program staff, peer counselors, students and volunteers are the glue that holds everything together; without them we wouldn’t be able to provide the family and community feel that makes us unique. Our volunteer of 40 years, Helen Stewart, says with a smile, “I always look forward to my Thursdays, seeing and visiting with my friends.”

Daily activities vary from wellness, educational discussions, life skills and games to creative expressions. Monthly favorites include homemade meals, community service with residents at a local skilled nursing facility. This was our way of giving back to the community. One member, Nancy, said, “I get out of the house, have structure, meet and talk to nice people.”

In the coming months, the Center will add six-week mini-courses that will explore drama, music, microwave cooking, sumi-i painting and mixed media artwork.

Our annual events afford members the opportunity to get out in the community to experience Alcatraz, the County Fair, Monterey Bay Aquarium and our very popular Santa Cruz Beach Boardwalk outing. Members also can participate in a spring and fall bowling league.

The Center is also known for terrific parties. We celebrate Valentine’s Day and Halloween. Our Annual Holiday Party includes a holiday meal, DJ, dancing, live entertainment, raffle and a special visit with a present from Mr. & Mrs. Claus. These celebrations are often the only parties that our folks attend.

Come for the coffee, stay for the fun, return for the friendship.

For more information about the Friendship Center, volunteer opportunities and donations, email angbc@mhasmc.org, or call Angela Bruno-Castro 650-257-8823. View the monthly Friendship Center calendar of events on the MHA website, www.mhasmc.org.

- Melissa Platte, Executive Director, Mental Health Association.
In the January Issue of Wellness Matters, we celebrated the 10th anniversary of the Edgewood Drop-In Center: North located in San Bruno. The Drop-In Center, a component of comprehensive Full Service Partnership (FSP) services that are funded by MHSA, provides services and resources including: hot meals and snacks, hygiene supplies, laundry, bus tokens, internet and phone access, clothes, and educational and peer support services to emerging adults between the ages of 18-25. These youth often have been impacted by substance use, homelessness, violence, and/or mental illness. Last year, the Drop-In Center North served more than 100 unduplicated clients and average 5-10 participants per night.

I visited the Edgewood Drop-In Center and it is more than just four walls. It’s a comfortable, warm and inviting space much to the credit of the crux of the center; the Peer Partners. I sat down with seven of the Peer Partners that work in both the North and recently opened South location in Redwood City and discussed what it’s like to be a part of the Drop-In Center.

“It’s difficult to tell people what I do for work, what a Peer Partner is, because we wear many hats,” said one partner, “one minute we’re listening to participants vent about their days, their struggles and we listen and sometimes give advice.” Another partner added, “Yeah! The next minute we are cooking, teaching important life skills, decorating the center, making sure that everyone is having fun and feeling welcome.” I noticed right away this was a lively group ready to apply themselves to this conversation with the same positive attitude and insight they give to all the participants that walk through the door.

Each partner had an opportunity to share what they feel they represent for participants at the Drop-In Center. The responses were diverse and inspirational: role model, success story, determination, perseverance, diligence, a dream, equality, and how life would be different without these programs. It was heartbreaking to hear their responses, so I wanted to know more and asked “Why is being a Peer Partner important to you?” One partner was quick to reply saying, “I was once a participant and I want to give back”; Another partner said, “I want help people going through similar situations as I did by sharing the insight I now have that I wish I knew then.” After a brief pause, a final thought was shared that was agreed upon by every Peer Partner in the room, “It’s about fostering a community and working to create positive change.”

The community the Peer Partners create for themselves and participants at the Drop-In Center is one that is welcoming and supportive. The ambiance is one that supports true dialogue and sharing, where empathic and non-judgmental listening is encouraged. It’s incredible that these Peer Partners, some who are not much older than the participants, are creating healthier and resilient communities just by being true to themselves and to each other.

There are two Edgewood Drop-In Centers: The North location is located at 931 San Bruno Ave., Suite #2 in San Bruno and in response to the emerging adults living in San Mateo County’s southernmost cities, MHSA funds expanded the Drop-In Center locations to 605 Price Ave., Suite A in Redwood City. Both locations are open Monday – Friday from 3 PM – 8 PM, and all services are free and confidential. If you know of an emerging adult that could benefit from the Drop-In Center or if you would like more information, contact the Edgewood’s Education and Enrichment Managers:

Mary Therese A. Tamayo
Drop-In Center North
415-725-0173
MTamayo@edgewood.org

Manith Thaing –
Drop-In Center South
415-680-0944,
ManithT@edgewood.org

- Colin T. Hart
Child and Youth Deputy Directory, Paul Sorbo to Retire

Paul Sorbo, LCSW, Deputy Director of Child and Youth Service is retiring on March 31, 2017, after twenty-four years with San Mateo County Behavioral Health and Recovery Services. Paul has been an incredible leader throughout these years within BHRS, amongst our local County departments and agencies, and on the regional and state level. Paul has had a major impact on our services, guided the system with a steady hand through significant changes, and has earned a stellar reputation with his integrity, intellect, clear thinking, diplomacy, and compassion. His moving on to the next phase of life, though well deserved, is truly a loss for BHRS.

Paul was hired in 1993 as the Supervisor of the School Based Mental Health team. He was then promoted to the position of Clinical Services Manager. Paul worked tirelessly on the creation and development of Canyon Oaks Youth Center to serve the County’s youth with the most significant mental health needs. Over the years, Paul worked as a manager for nearly all of the youth teams, working closely with Juvenile Probation, Children and Family Services, and Education, and oversaw large contracts with our community agency partners. Paul gained enormous depth of understanding of the youth system, our staff, and the needs of the youth and their families. In 2008 Paul was promoted to become the Deputy Director of Child/Youth Services.

Over the last nine years Paul has led the BHRS Youth System through some very challenging times and periods of enormous change and has actively supported managers, supervisors and staff. Early on, Paul helped guide us through the budget reductions and many tough decisions and realities. Paul provided critical support in navigating dramatic changes with School Based Mental Health and in ensuring that we would continue to provide the services to youth. Then, with the improvement in the economy and availability of Measure A funds, Paul was instrumental in shaping the expansion of many of our services and increased resources for Trauma Informed Care. Paul’s depth of knowledge, respect for others, willingness to listen, keen problem solving skills, and keeping the needs of youth and families foremost have led Paul to consistently lead in the right direction and to make thoughtful and ethical decisions.

Several years ago BHRS began the Community Services Area (CSA) model of service delivery and Paul took a lead role. With this change to working across Child/Youth, Adult and Older Adult, and Alcohol and Other Drug Services, Paul quickly adapted and became a solid partner with the other Deputy Directors and managers as each needed to learn about the other’s work and form strong working relationships. His openness, partnership and mentorship have been recognized and greatly appreciated through this process.

As Paul moves on, we wish him much happiness and thank him for his enormous contributions as an honorable, effective and respected leader at BHRS.

- Linda Simonsen, LCSW
Retired Clinical Services Manager

Tell us what you think

The San Mateo County Health System is conducting a research project and is seeking input from our partners and providers to learn about impressions of our work and mission. Our goal is to gather as much honest information as we can to better understand how the Health System is perceived and improve how we communicate and deliver our services.

Please complete this brief 5 minute survey: www.surveymonkey.com/r/SMCHighHealthPartners. All responses are confidential. We value your opinion and hope that you will share it with us.

Please complete this survey by Friday, March 3rd.
Wellness Matters

2017-2020 Suicide Prevention Roadmap

To address the increased need for suicide prevention in the community, San Mateo County Behavioral Health and Recovery Services Office of Diversity and Equity developed the very first Suicide Prevention Roadmap for San Mateo County. This 2017-2020 Suicide Prevention Roadmap offers prevention tools for community partners including behavioral health professionals, clients/consumers and family members, and community advocates and agencies.

This first iteration of the Roadmap outlines:

- Statistics on most affected groups and risk factors of suicide
- Four suicide prevention strategies
- The desired outcomes of each strategy
- Descriptions of organizations and programs that are addressing each strategy
- Future recommended activities for each strategy

The Roadmap is a call to action and an opportunity to get involved in what still needs to be done to reduce suicide in San Mateo County.

The foundation of this Roadmap was based on a strategic plan developed by the San Mateo County Suicide Prevention Committee (SPC) in fall 2014. A group of behavioral health treatment providers, clients/consumers, family members, community partners, and concerned community members came together to form the SPC and completed a strategic planning session that identified suicide prevention strategies, current programs and future needs.

Currently, the SPC is working to implement key initiatives of the 2017-2020 Suicide Prevention Roadmap. Join the Suicide Prevention Committee which meets every fourth Wednesday of the even months 1:30-3:00 pm at the San Mateo County Transit District (1250 San Carlos Ave, San Carlos).

Download a copy of the Roadmap at the link below. To learn more about the 2017-2020 Suicide Prevention Roadmap or how to get involved with the Suicide Prevention Committee, please contact Sylvia Tang at stang@smcgov.org or 650-578-7165.

- Sylvia Tang

Download a copy of the Suicide Prevention Roadmap at: www.smchealth.org/SuicidePrevention.

Employee Spotlight

Betty Gallardo
Program Specialist, Quality Management

Hometown: Hayward, CA
Years at BHRS/SMC: 4/10 years

What do you do?
I support staff with any documentation questions as well as tracking subpoenas and overseeing our credentialing process. Most importantly at QM we help BHRS to stay in compliance with state regulations while also helping improve the quality of our system.

What do you enjoy most about your job?
I love that everyday is different in the QM world. I’ve learned so much in the past and I love that there is still so much more to learn. Although QM may sound a little boring, I love that I get to use my clinical skills in a different way. I also get to use my creative side with technology which I also really enjoy. Overall I like working in a team where I can keep pushing myself to learn more.

Most rewarding/memorable experience:
Prior to QM, I used to be a Pre-3 Partners clinician, there I had some very memorable experiences with my little tiny clients. The most memorable experience is knowing that I made a meaningful impact on my little client’s life when he was adopted. He is now in a very loving home where he is nurtured in every way he deserves. I’m grateful to have been part of his journey to find his forever home.

Favorite hobbies/activities:
I like outdoor activities like hiking, going to the beach or just being out. Hanging out with family and friends. I love cooking and baking (at times) and I also really enjoy going to the gym and lifting weights.

“If I weren’t in my current role, I’d be …”:
A traveling photographer.
Peninsula Temple Shalom Hosts Faith and Mental Health Event

On January 22 the Peninsula Temple Shalom (PTS) in Burlingame hosted “Multi-faith Day of Learning: Teen and Young Adult Mental Health.” Nearly 200 people from the Bay Area gathered to join in a gathering of Jewish, Buddhist, Muslim and Christian community members to learn about mental health issues and stigma that face young adults and to discuss what faith communities can do to address these issues. Rabbi Lisa Delson of PTS welcomed all, while Supervisor Dave Pine spoke to the county’s commitment to mental health resources and treatment.

The keynote speaker, Dr. Steven Adelsheim of Stanford University, cited statistics around youth mental health, the need to reduce stigma and the need for coordinated support. William Kruse, Co-Chair of the Spirituality Initiative of the Office of Diversity and Equity, was one of several who spoke about the need of faith communities to collaborate with each other and with mental health professionals. It is known that a majority of people with mental health issues talk with their faith leaders before seeking help from another professional.

Two young people shared their own experiences with depression and the importance of their faith community in their recovery and growth. Group discussions followed with those present sharing how their faith congregation was addressing mental health issues among youth and what next steps might be taken.

PTS Rabbi Dan Feder spoke about the difficulty of this issue and how we need to work together. He closed the session with prayer.

It is laudatory that PTS and their committee, Panim el Panim, (which translates from Hebrew as “the inner spirit” as well as “face to face”) organized such an event and called together many different segments of the community to address faith and mental health issues.

- William Kruse

Be Prepared during a Mental Health Emergency

Learn how to prepare for a mental health emergency. Visit the San Mateo County website to learn:
- What to expect when calling 9-1-1
- What to say when calling 9-1-1
- How to prepare
- Local crisis numbers and resources

Print the brochure and/or wallet card: “Mental Health Emergency: Guidelines for Calling 9-1-1” online at: www.smchealth.org/mh911. Materials are available in English, Spanish, Chinese and Tagalog. Providers, partner and community groups and organizations may order a supply for distribution at no cost.
San Mateo County is full of people who care—people who are willing to immerse themselves in issues of injustice, and who want to help others who are struggling. Lately, however, caring has become more challenging. It sometimes feels like we can’t escape the constant stream of bad news, or do anything to help those around us. The last weekend in January was especially stressful for many members of our community who already feel marginalized. Providers and clients alike voiced distress and fear surrounding such issues as immigration and health care. In response, leaders in the San Mateo County Health Systems sent reassuring messages about our commitment to help all residents – from all backgrounds – live long and healthy lives.

Here at the Office of Diversity and Equity, we work with some of the most dedicated behavioral health professionals – including AOD counselors, social workers, psychiatrists and marriage & family therapists – you will find anywhere. The nature of our work requires a special kind of empathy, the kind that can make our providers and staff more susceptible to feeling their own distress. We will continue to scan for and provide resources to our Behavioral Health Community to find healthy and productive ways of dealing with these challenging times. We created a two-sided card with some tips on self-care on one side and things you can do to help your community on the other side. Many of our community members are already involved with various programs and volunteer efforts. Sometimes, it feels like we need to do everything we can to help, but we wanted to remind people that you can’t help others if you don’t take care of yourself!

We did a lot of research to put these tips together, pulling from such authoritative organizations as the American Civil Liberties Union and the Southern Poverty Law Center.

After our first printing and distribution, we made a few changes and added the Immigrant Legal Resource Center as an additional resource. We couldn’t include all of the useful information these organizations had to share, so we hope you will look into the resources we provided at the bottom of the card. We hope these cards help you learn more about how you create safer communities, while taking care of your mental wellness! To view the card, please see the link below.

Please send requests for cards to: hchu@smcgov.org.

- Hillary Chu and Chenece Blackshear

Download the Community Stress Card at: www.smchealth.org/pod/new-resources.
Quality Management Update and Useful Website Links

Quality Management is taking a hiatus from our Q-Tip column in this month’s Wellness Matters during the Behavioral Health & Recovery Services (BHRS) Triennial Audit by the Department of Health Care Services (DHCS). We will resume our Q-tip column in the next issue. We greatly appreciate all the hard work and preparation by BHRS staff and our many valued contractors in helping us to prepare for this system audit and chart review!

Quality Management information is available at www.smchealth.org/bhrs/qm. Here are some quick, useful links:

- **Release of Information Forms and PHI Policies:** www.smchealth.org/behavioral-health-staff-forms-policies
- **Change of Provider Forms:** www.smchealth.org/bhrs-doc/change-clinician-request-98-01
- **New Client Information & Welcome Page:** www.smchealth.org/overview/client-family-welcome-information
- **Critical Incident (fillable) Report:** www.smchealth.org/bhrs-doc/critical-incident-reporting-93-11
- **Documentation Manual:** Do you have questions about the newly implemented documentation including timeliness? Please refer to our Doc Manual. www.smchealth.org/sites/main/files/file-attachments/bhrsdocmanual.pdf
- **Documentation: Assessment Work Sheets, Diagnosis Help Guide** www.smchealth.org/bhrs/providers/avguide
- **QM always appreciates any feedback or ideas you’d like to share with us.**

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**County First to Implement Drug Medi-Cal Organized Delivery System**

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The DMC ODS is the culmination of many years of dedicated effort by our leaders Louise Rogers and Steve Kaplan, who had the foresight to advocate to DHCS for the inclusion of SUD services within the 1115 Bridge to Reform Waiver back in 2010, as the state began laying the groundwork for Health Care Reform implementation. Once SUD services were included in the “Bridge to Reform” waiver, San Mateo County aggressively established the most comprehensive SUD benefit in the State. Looking back, this set the stage for what would later become California’s DMC ODS benefit package. Creating the momentum for DHCS to redesign the SUD service delivery system, transforming it into a “good and modern” system with a robust continuum of services for beneficiaries is no small task. Over and over again I observed Steve challenge the DHCS and county behavioral health directors to create an effective treatment and recovery system that would truly meet the needs of individuals and families struggling with substance use. I honestly believe that without Steve’s leadership at the state level, the changes to the Drug Medi-Cal System would have been far more limited.

I also want to acknowledge the many partnerships who helped launch our ODS services this month. BHRS staff in contracts, fiscal, MIS, the call center, Service Connect, Quality Management, Information System and our contracted provider partners have all put forth tremendous effort to implement the ODS. Finally, thanks to AOD staff who have worked tirelessly, sometimes night and day, to flesh out details large and small. We still have much to do, but we’re on our way!

As I reflect on our “Organized Delivery System” locally, I am grateful for San Mateo County, for our Health System leadership, and for my colleagues and partners. It is a privilege to work in a system that is on the cutting edge of quality and innovation and to work with such passionate and dedicated people.

If you’d like to learn more about the DMC ODS, or to request a presentation for your team, contact Clara Boyden at 650-802-5101 or cboyden@smcgov.org.

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**Q-Tip for Quality**

**by Holly Severson, RN MSN**

**ThinkQuality**

**Quality Management Update and Useful Website Links**

Quality Management is taking a hiatus from our Q-Tip column in this month’s Wellness Matters during the Behavioral Health & Recovery Services (BHRS) Triennial Audit by the Department of Health Care Services (DHCS). We will resume our Q-tip column in the next issue. We greatly appreciate all the hard work and preparation by BHRS staff and our many valued contractors in helping us to prepare for this system audit and chart review!

Quality Management information is available at www.smchealth.org/bhrs/qm. Here are some quick, useful links:

- **Release of Information Forms and PHI Policies:** www.smchealth.org/behavioral-health-staff-forms-policies
- **Change of Provider Forms:** www.smchealth.org/bhrs-doc/change-clinician-request-98-01
- **New Client Information & Welcome Page:** www.smchealth.org/overview/client-family-welcome-information
- **Critical Incident (fillable) Report:** www.smchealth.org/bhrs-doc/critical-incident-reporting-93-11
- **Documentation Manual:** Do you have questions about the newly implemented documentation including timeliness? Please refer to our Doc Manual. www.smchealth.org/sites/main/files/file-attachments/bhrsdocmanual.pdf
- **Documentation: Assessment Work Sheets, Diagnosis Help Guide** www.smchealth.org/bhrs/providers/avguide
- **QM always appreciates any feedback or ideas you’d like to share with us.**

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