



Behavioral Health Commission

Unapproved Minutes

Wednesday, October 1, 2025 | 3:30 PM – 5:30 PM



Hybrid Meeting – College of San Mateo, 1700 Hillsdale Blvd, Bldg 10,
Room 468, San Mateo; 840 Deep Woods Trl, Poleridge, MT; 2000
Broadway, Redwood City; and Online

BHC Members:	☒ Jean Perry – Chair ☒ Leticia Bido – Vice Chair ☒ Yoko Ng – Vice Chair ☐ Bill Silverfarb – BOS Rep ☒ Dan Keohane ☐ David Rice	☒ Frieda Edgette ☒ Jason Sutherland ☒ Kate Saywell (online) ☐ Kristin Kurczak ☒ P.D. Kristina Bell	☐ Laura Gomez ☐ Michael Lim ☒ Paul Nichols ☒ Sid Palani ☒ Veer Chowdhary (online) ☐ Victoria Yu
SMC BHRS Staff:	☒ Dr. Jei Africa (online) ☒ Chantae Rochester (online)	☒ Kristie Lui ☒ Doris Estremera	
Others Present (in-person)	Dr. Maria Lorente Foresti, Teresa Wall		
Others Present (online)	Jeff Blood, Jordan, Laura Palmer, Pat Willard, Paul Cummings, Susan Cortopassi, Waynette Brock, Millka Baetcke, Jessica Wright, Leslie Wambach		

Meeting called to order at 3:35 by Chair Jean Perry.

ITEM	DISCUSSION/ACTION
Roll Call/ Introductions	Roll call was completed.
Approval of Agenda	The meeting agenda was unanimously approved after revisions. ► M/S/C Edgette/ Nichols
Approval of Minutes	The meeting minutes were unanimously approved after revisions. ► M/S/C Keohane/ Bido
Correspondence, Announcements & Public Comment	- Jean Perry- Thank you to those who attended the Board of Supervisor (BOS) study session on BHRS. Thank you to dozens of people including commissioners who have participated in input sessions over the past few months. Last transition taskforce meeting is tomorrow, 10/2 at Redwood Shores Library. NAMI walks will be this Saturday at Seal Point. - Frieda Edgette- California Public Health Department is seeking educators, parents, clinicians, and experts in the field to take a brief 5-minute screening survey to determine eligibility for a key informant interview. If selected, the interview will last approximately 60 minutes and will be scheduled at your convenience. Participants will receive a stipend of \$125 in appreciation of their time. If you are interested, please complete the screening survey here by October 6, 2025: https://forms.office.com/pages/responsepage.aspx?id=URsxH9n2U0GbrFXg75ZBuJ-KSR9bRChGiuWucHg0uAFUOUxETVRNT1AzTlhXQUROWUtQS0ZSRIVDVi4u&route=shorturl - Frieda Edgette- The California Partners Project is conducting a research project in collaboration with the Family Online Safety Institute and other partners to understand how families are navigating screens, social media, and the shrinking number of real-world places where teens can gather and connect in person. - Audience: We're looking for parents and caregivers of children aged 12–18 to join a 60-minute virtual focus group. - Focus groups will be held in October 2025—dates and times TBD. - One-time virtual focus group (60 minutes); meaningful small group conversation with other parents/caregivers - You will receive a \$50 gift card as a thank-you for your time

	○ Why it matters: Your voice can help shape policies and programs that give youth better opportunities to connect, thrive, and build healthy habits offline. ○ If interested, email Jennifer Heifferon at jenh@calpartnersproject.org • Dan Keohane- I had a meeting with Supervisor Jackie Speier. One of the things she mentioned was that because of the BOS meeting, she would like to become more connected with the information we are doing as a Commission so she can follow up on some of the issues that came up in the meeting. I would be happy to follow up if we need someone to take that on. • Leti Bido– There is an interactive parenting workshop this Friday from 6:30-8PM at Menlo Church in San Mateo. Audience is grades 3-12. Topics include resiliency and competency in school and life. • Pat Willard- I want to remind the commission and Dr. Africa that at the BOS I brought up giving more funding for the MCRT program which would give us a total of 6 teams. This would really help reduce the response time. • Laura Parmer-Lohan- I serve as the ED of NAMI SMC. Thank you, Commissioner Perry for the shout out for the NAMI Walks. Every step hopes to end stigma. We hope to see you there. https://www.namiwalks.org/sanmateo
Behavioral Health Transformation Journey Presented by Dr. Jei Africa, San Mateo County Behavioral Health & Recovery Services Director	• Thanks for allowing me to share our Transformation Journey. Lots of things are happening in our space. Our identity is changing, and we need to adapt to that changing identity. About 30 years ago, county BH moved to a managed care system, and in general we have been slowly adapting to that change. • Other things that's driving us to look at our system differently is different state mandates we have to implement. e.g. CARE ACT, BH-CONNECT, Prop 1, SB43, Prop 36, CalAIM as well as looking at the complexity of our clients' needs including homelessness, justice involvement, co-occurring disorders, inequities in behavioral health outcomes. • Before we served everyone with a "whatever it takes" model, but being a managed care system behavioral health (or a mental health/behavioral health plan), we are needing focus on those with severe mental health conditions (and of course with substance use conditions). Mild to moderate has been moved back to MCP. More and more the state is pushing for compliance as a behavioral health plan. • If you listened to the county presentation a week ago, the BOS approved a balanced budget. While we are good for now, it doesn't take away the fact that there are many things threatening our funding including shift in Medicaid funding, shifting federal landscape, etc. • Our provider network is having challenges with the many changes due to the mandates we have to implement. We've provided technical assistance as best we can. • BHRS is trying to be the drivers, to shape and influence the changes within our scope. • One focus right now is the backend (operations) process; things we can control e.g. personnel, contracts, etc. • Also, BHRS has not had a strategic vision in years. Going through this transformation will help us identify/move towards our north star. • For example, we are working on streamlining processes and workflows. Currently our clinics look very different from each other. • As part of this transformation journey, our objectives include strengthening and improving quality services, aligning funding, priorities, and expertise, engaging staff and community in the process, making data-informed decisions, improving communication and transparency. • We've been on-going in this journey from Nov 2024 and validating the need for a strategic vision. Now we have identified future activities to current work for the Five-Year Road Map.

	• Much of this work is driven by Prop 1 so we are doing a mindful approach to the transition. The state will need to review this and approve our plan. • What would it look like if we successfully lived this transformation? ○ Culture of excellence and continuous improvement ○ Financial stewardship for mission-aligned growth ○ Connected and collaborative behavioral health ecosystem ○ Transformed client & staff experience • We would like for you to reflect on what would make you proud as part of BHC related to these outcomes for the organization and our clients. • Where you can be helpful: ○ Priority alignment - Align your goals and subcommittee activities to the BHRS transformation journey priorities. ○ Continuous improvement- site visits, see how our providers are doing the work; look at the outcomes. ○ Increase awareness - Be a messenger for this transformation. Be aware of what is happening statewide and federal landscape ○ What tools do you need to help us engage community and raise awareness? • Next steps include finalizing the roadmap over the next couple months. We will adjust priorities, outcomes and activities, map milestones, and launch a communications campaign. • Please fill out our BHRS Transformation Journey Survey: ○ https://globaleysurvey.ey.com/jfe/form/SV_57KFOqjRuDouiPQ
Behavioral Health Transformation Journey Presentation Questions and Responses	• Frieda Edgette- I'm a big proponent of what you are doing, Dr. Africa and I want to commend you on your thoughtfulness. I was curious about the time horizon we are working on. I understand change absolutely takes time. Also given the desired future state, I'm curious what the actual north star is. We are about to go through a communications campaign, so what is the succinct description? As we prepare for the implementation of Prop 1, I am hearing conversations of prevention and other services, and I'm curious about how tier 1 and tier 2 fit in this transformation, and if not, what is planned from a change enablement perspective for our community partners and County Health. ○ A: We have been trying to figure this out as well. What is the tagline here? My sense is that this is at least a 5-year journey. So, some of the KPIs are probably ongoing and some will probably be accomplished sooner, but some of the major transformations will probably take a few years. We have to submit a draft plan to the state by early 2026. Again, Prop 1 is the catalyst for this transformation. We are starting some efforts, but some restructuring will take a few years. For prevention, from what I know at this point, it will likely be driven by the state. The funding from MHSA hasn't moved to the local level. It is still in the state level. While MHSA has funded prevention in the past, it will not be the case after July 1, 2025. We will need to work with the Health Plan to do prevention work. So, the next phase of that is how do we partner with the managed care partners better. Also, there are some small funds through the SUD portion that can be used. So, we are thinking about how we can leverage that, if possible. • Frieda Edgette– To what extent is the 10,000-foot looking beyond BHRS and how it integrates with the county and other departments like housing, law enforcement in terms of those intersectionalities as well as the Board of Supervisors' Shared Vision 2025. These might be preemptive, but I wanted to plant the seed. • Jason Sutherland – Related to KPI performances and actual outcomes, seeing the total outreach impact not just from a statistical perspective, but from case studies, when you think about his original question about the complexities of all the different departments and efforts for outreach, at what point does this 10,000-foot we are at now show a hierarchy of a

	connected system to show those intersections? At what point do we allow this 10,000-foot view for all of us to see where all these intersections are and understand how they overlap, any inconsistencies, touch points, etc.? ○ A: Our systems are fragmented, and we have some improvements to make. Our goal is to have a clear place of how we go about this. Because communication is important, we are launching a campaign to help folks better understand how we explain and describe this. I don't know if you had a chance to watch the BHRS 101 I led a few months ago, but that highlights some of the complexities we are dealing with. If you have private insurance, it's a different door, if you are experiencing mild to moderate that's another door. That's the problem. Our goal is to have clarity about how to get services from us. So, we are doing our best for alignment. There have been a lot of conversations about what this would look like from a 1000 level that I haven't shared yet today. We are engaging others. An example of a key indicator is that we operate with psychological safety. We should be trauma-informed but even trauma-informed can look very different for different people. When we are closer, we will share back to you all what we are thinking and the dashboards for how we are moving there. I'm a realist of where my scope of control begins and where it ends. In Behavioral Health, I have more control/influence, but when it extends to other parts, we work with other partners. Also that's where you can assist – as partners and we need to do some advocacy. • Paul Nichols– I've been part of the transformation steering committee meetings, and I have to express some frustration because whenever a presenter comes, I ask the same two questions: how do you measure success and what are your success metrics, and there isn't a single thing in your presentation about anything at all that we can get a sense about how you're doing and how well it's working. Talking about aligned strategies and fiscal stewardship, from my perspective none of that is measurable. All of this is great, and I get it, but from my perspective, I would like some data. I would like some numbers. How our money is being spent and what we are getting in return for it? I am wondering if you can address that and present the commission with that type of data. ○ A: We are very early in the plan. With the new Integrated Plan, when Prop 1 kicks off in July, there are clear indicators. We have not been good at getting outcomes; our infrastructures need to be improved to get the data we want. In previous meetings we shared the FSP has outcomes. Doris has shared those results, but it is not meaningful for folks. When we presented the data to the BOS, we were clear that we were very early on in the process because we have not had the infrastructure. When we presented to the BOS, it was all hands-on deck. We had a lot of staff helping with data. Epic is also coming. We literally have inquiries that Avatar can't solve. With the building of the new electronic health record, we are hoping we will be better at tracking outcomes. • Dan Keohane- One of the things that came up for me, and I thought a lot about the transformation priorities, how will the first priority take place to help the other three? ○ A: Part of the state mandate is how are you improving your systems. So, you have a to build a culture that you are constantly trying to improve. For example, we are in the beginning steps of helping our staff understand the Plan, Do, Study, Act (PDSA) cycle. People are afraid of data. People are afraid it's going to tell them what they are not doing well versus how we make decisions based on data. So, we don't even have a standardized assessment for level of care. My perspective is that we are seeing the state is being more directive of what they are asking the counties to do. The managed care model is an incentivized, value-
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	based performance. Because we have been so reactive, we haven't had the time to look at what the data is saying to us. By embracing continuous quality improvement, we are looking at how we can best serve the clients based on what they need. • Sid Palani– Similar to Paul's question, I see in August 2025, there were associated KPIs. Is this still happening? ○ A: We have begun our initial thinking of what those KPIs will look like, but because we are still in the process of getting feedback, we have some initial metrics. Once we finish this process, we will come back to share what we learned. Probably towards end of this year.
Standing Committee Reports	Committee for Children & Youth Service Reported by Kate Saywell and Veer Chowdhary • Kate: We have received a grant of money from the Be the Change podcast and the Youth Action Board has been deciding how we want to spend that money. We decided we want to do outreach for this. We are deciding how we will reach as many people as possible through Instagram and other ways of expanding. From the Youth Commission, we are continuing our work on the wellness 5K coming in May and there will be more updates as we get closer to May. • Veer: Last month was Suicide Prevention Month so last month we focused on that by accepting city proclamations including myself. Moving forward with YAB, a lot of us are just getting into focus groups. So as a whole we are planning out our projects. Next meeting is Wednesday, October 15, 2025, at 4:00 p.m. In-person at allcove (2600 S El Camino Real Suite 300, San Mateo) and Virtual: Zoom or dial 669-444-9171 Meeting ID: 990 0971 9684 Committee for Adult Services Reported by Yoko Ng • Last meeting was my first time co-chairing with Commissioner Rice. Grateful for Paul for helping us get a co-chair. • We have support from commissioners Perry and Nichols and two committee members from NAMI. • We learned a lot about CalAIM and referral to AOD services. With the current data, this program is making strong progress. Next meeting is Wednesday, October 15, 2025, at 10:30 a.m. Virtual: Zoom or dial 669- 900- 6833 Meeting ID: 983 9161 3998 Committee for Older Adult Services Reported by Jean Perry • Our most recent meeting was an input session. • There were folks who don't regularly attend who joined, and it was a topic we hadn't discussed a lot, so I hope we provided new data for that group. Next meeting is Wednesday, October 15 2025, at 1 p.m. In-person at 2000 Alameda de Las Pulgas, Suite 200, San Mateo, CA 94403 Virtual: Zoom or dial 669-900-6833 Meeting ID: 944 8158 6160 Committee for Alcohol and Other Drug Services Reported by Paul Nichols • Last meeting focused on Prop 1 community input session on homelessness. The best part was the breakout session where we talked about a number of things, and it seemed like the facilitators got a lot out of it. • This month we are doing two AOD committee meetings.

	• First will be through Zoom with a presentation on AOD prevention strategic planning from Stella Chau. • We will also be having a site tour visit of Cordilleras Campus. Next meeting is Wednesday, October 8, 2025, at 4PM-5PM Virtual: Teams and Wednesday, October 29, 2025, at 4PM-5PM site tour of Cordilleras Campus. Mental Health Services Act Steering Committee Reported by Jean Perry • MHSA has been transitioned to BHSa transition task force. • BHSa Transition Taskforce Meeting #4 (hybrid meeting) Thursday, October 2nd, 3-4:30pm ○ https://www.smchealth.org/sites/main/files/bhsa_transition_taskforce_flyer_4.2025_0.pdf
Director's Report presented by Dr. Jei Africa	See attached slides. • We got county budget approved on 9/23 for \$5.5B for a balanced approach. • If you can come and attend the CALBHB/C quarterly meeting in Oct 17-18. • I am presenting on what we do in BHRS and will focus on ODE, OCFA and OII.
Public Comments on Director's Report	• No questions
Liaison, Task Force and Ad Hoc Committees	Suicide Prevention Committee Reported by Yoko Ng • Abbreviated meeting • In-person group meeting New Member Committee • No report given. QIC Committee Reported by Jean Perry • We meet this month on October 22nd. Site Visits Committee Reported by Paul Nichols • We have not found an agreed format for evaluation. • Dan Keohane and Leti Bido will join committee. • We also have not considered a post-visit report. Cal BHB/C Reported by Dan Keohane • Big meeting coming up on 10/17-18 will be here in Burlingame. If you can't be with us, it will also be on Zoom. • Most important topic is that they want to develop planning tools for commissioners for how they work. • Jean, Leti and Dan will be attending.

Old Business	• Slate of Officers ○ Paul Nichols- member at large (Paul will need to not be part of nominating committee to be considered for member at large) ○ Jean Perry- Commission Chair ○ Leti Bido and Yoko Ng- Vice co-chairs ○ Dan Keohane- CALBHB/C role ○ Voting will be in November. We can also open nominations in the next meeting before the final vote. • Standing Committees ○ Older Adult Committee needs a vice chair who will eventually become chair ○ David Rice has agreed to serve as vice chair and become chair when Yoko transitions out for Adult Committee. ○ We are seeking a co-chair for the Adult Committee ○ Paul can continue serving and Dan will be vice-chair ○ MHSA does not need a chair anymore.
New Business	• Committee for retreat: Jason Sutherland, Kathryn Saywell, Veer Chowdary, Dan Keohane, Yoko Ng, and Leti Bido
Adjournment	This meeting was adjourned at 5:31 p.m. by Chair Jean Perry.

Next BHC Meeting:	Wednesday, November 5, 2025, from 3:30-5:30 p.m. College of San Mateo - College Center, Building 10, Room 468 840 Deep Woods Trl, Polebridge, MT 59928, and Online Information will be posted on www.smchealth.org/BHC .
Next Executive Committee Meeting:	Wednesday, November 5, 2025, at 5:30p.m. College of San Mateo - College Center, Building 10, Room 468 840 Deep Woods Trl, Polebridge, MT 59928, and Online
Note:	PLEASE BE SURE TO CONTACT KRISTIE LUI AT KFLUI@SMCGOV.ORG . IF YOU ARE UNABLE TO ATTEND EITHER THE BHC OR EXECUTIVE COMMITTEE MEETING. In compliance with the American with Disabilities Act (ADA), auxiliary aids and services for this meeting will be provided upon request when given three-day notice. Please call 650.573.2544.