SAN MATEO COUNTY HEALTH
BEHAVIORAL HEALTH & RECOVERY SERVICES

Behavioral Health Commission
Unapproved Minutes
Wednesday, August 5, 2026 | 3:30 PM – 5:30 PM

Hybrid Meeting – 2000 Alameda de las Pulgas, Room 201, San Mateo, CA 94403; 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 ☐ Kristin Kurczak ☐ P.D. Kristina Bell	☐ Laura Gomez ☒ Michael Lim ☒ Paul Nichols ☒ Sid Palani ☒ Veer Chowdhary
SMC BHRS Staff:	☒ Dr. Jei Africa ☒ Chantae Rochester	☒ Kristie Lui ☒ Doris Estremera	
Others Present (in-person)	Maria Lorente Foresti		
Others Present (online)	Armando Mendoza, Elder Pam, Sylvia Tang, Ammi, Anna Tran, Leslie Wambach, Norma Naser, Susan Cortopassi, Yahaira Ortega, Brenda, Lee Harrison, Brenda, Carolyn Shepherd, OCFA, Teo Boon, Cassandra Wilson, Anna Tran, Walter Ng, Jose Cabrera		

Meeting called to order at 3:34 p.m. by Chair Jean Perry.

ITEM	DISCUSSION/ACTION
Roll Call/ Introductions	Roll call was completed.
Approval of Agenda	The meeting agenda was approved with the following revision: - Correct dates for the standing committee meetings ►**M/S/C** Bido/Nichols
Approval of Minutes	The meeting minutes were with the following revision: - Update Youth Commissioner names ►**M/S/C** Bido/Nichols
Correspondence, Announcements & Public Comment	• Leti Bido- I want to share my experience being trained at Wellness Recovery Action Plan training on June 30th. It was strongly facilitated by Voices of Recovery. I highly recommend it. The experience, authenticity, tools and resources were pretty extraordinary. It will be offered again possibly in September. • Leti Bido- 8/16, Heart and Soul Annual Picnic at Beresford Park from 11AM-3PM. There will be food, prizes, bingo, games and activities for everyone. • Jean Perry- One of the members of Lived Experience and Suicide Prevention Committee is planning an event for older adults in September for Recovery Happens and Suicide Prevention Month. Please email me if you want to be connected. • Pam Ward- I have some serious concerns about things happening in the county right now. I came today to share my personal lived experience. I've participated in advocacy around mental health for more than 25 years, served in the committee that formed Health Equity Initiatives, served as chair for two Health Equity Initiatives, have been a speaker and workshop presenter. What I am finding right now is a mindset of preserving the system and making sure people get paid and not focused on the people that are supposed to be served. I think this is symptomatic of what we see right now in society in general. We used to say, "Nothing About Us, Without Us" and I don't see that anymore. Why not hire more community people and less staff? • Laura Parmer- I service Nami San Mateo County. We have our annual NAMI Walks event on October 3rd at Coyote Point. All are welcome. Visit NAMIWalks.org/SanMateo for more info. We also have Judge Wendler who will be presenting on September 22nd at 6:30PM. You can send us what topics of interest you may have. To keep up to date on our program, sign up for our

	newsletter at NAMISanMateo.org. We will be hosting a Family-to-Family class in Spanish and English. • Sylvia Tang- I'm community health planner currently in a work-out-of-class at Public Health and Policy Planning. With Prop 1, we are shifting Suicide Prevention from BHRS to Public Health with the goal of shifting the work upstream. Thank you to Behavioral Health Commissioner chairs who invited me to speak on Suicide Prevention Month. This is an opportunity to raise awareness, reduce stigma and connect folks to resources. We want every sector to be involved. This year's theme is "The Weight We Carry" focused on men and boys and the invisible weight they carry. I have two requests for the commission. If you have any events that you want us to promote, let me know so we can help promote. If you are interested in staying in the loop, you can join our mailing list. • Lee Harrison- I'm a community member. There is an obvious need for more robust implementation for peer support. Many clients and caregivers do not know what peer support is or that it is a service BHRS provides. SAMHSA first recognized the efficacy of peer support in 1998. Our Board of Supervisors issues a proclamation to recognize their support in 2024. This is one of the most effective supports that can make a critical difference in the quality and effectiveness of behavioral health care. Peer Support is a proven best practice. I urge this commission to form an ad-hoc committee or subcommittee to remedy this disparity and make this support an integral part of BHRS services. Quality of treatment and life will be impacted for the better. • Jennifer Sanchez- I am client manager for Psynergy Programs. Our program is a little different compared to other boards and cares as we have an outpatient clinic assigned to each of our campuses. We have an equine program so those who enjoy going out to the horse stables can go out for a DBT group. I would like to be put on the agenda in the future if you would all be interested in hearing more about our program. • Melinda Henning- I'm a resident of Foster City. I want to reinforce Lee Harrison's point that engagement in treatment is essential which happens through relationship building. In Solutions for Supportive Homes, we are the aging parents who've been caring for adult children with long-term serious mental illness. We are the ones asking, who is going to care for our kids, our adult kids, when we're gone? Where will they live? So, I endorse Lee's proposal that we form a subcommittee to really figure out how to implement this, how to provide proper training, and how to supplement the person-to-person relational type of care that we would like to have more in our system.
Veterans Affair Presentation by LaShelle Burch	• I'm a licensed clinical social worker, and I've been with Veterans Affair (VA) for about 6 years. I've been doing community-based interventions for about 4 years. • We see about 17 veterans dying per day by suicide. There has been a decrease. The number 22 was a number commonly used because when we were first doing a deep dive on veteran suicide, at the time it was 22 veterans per day. Recent data suggests we are on a trend going down and it aligns with our veteran homeless population. • Access to lethal means is a big risk for veterans. A lot of veterans also experience loss to their military service and that takes a toll which is something we're really focused on as well. We've been really working on a peer support model as a protective factor for veterans. Connectedness is a huge protective factor. • We also love community partnerships as a protective factor. Our goal at the VA is to maximize protective factors and reduce risk factors. • In the VA we have a whole program focused on lethal means safety since it is such a huge risk factor.

	• Lethal means are objects that may be used by individuals experiencing a suicide crisis e.g. firearms, medications, alcohol, ropes, cords, sharp objects, etc.
	• According to data, Veteran suicide by firearms is about 73.5% versus non-veteran U.S. adult suicide which is about 52.2% which is still an issue. So, the VA does supply cable locks that are free to the whole community that we distribute to behavioral health centers and police departments.
	• At the VA we use the S.A.V.E. model which stands for:
	  ○ Spot the signs a Veteran might be thinking about suicide
	  ○ Ask the critical question
	  ○ Validate the Veteran's experience
	  ○ Encourage and support next steps
	• VA S.A.V.E. also has a training for caregivers known as the caregiver support program. Their mission is to promote the health and well-being of Family Caregivers who care for our Nation's Veterans through education, resources, support and services.
	• VA Palo Alto Healthcare System (VAPAHCS) serves about 6 counties. We have one emergency department in Palo Alto at 3801 Miranda Ave and a few outpatient clinics and Vet Centers.

Veterans Affair Presentation Questions and Responses	• Jean Perry – What is the relationship between PTSD and traumatic brain injury?
	  ○ A: There is a whole military competency training out there that talks about specific injuries which is an important component. A lot of our veterans are experiencing polytrauma.
	• Michael Lim- You have 60 beds?
	  ○ A: The number fluctuates, but yes as of last year we have 60 beds.
	• Leti - Could you share more about utilization rates? Do you touch on culturally sensitive programs? What are some of those and also intergenerational programs.
	  ○ A: There are so many resources and rich programs. The utilization part is really difficult. So, David Rice and I are out in the community to connect people to programs and resources. Word of mouth is so powerful. If I'm able to go to Vietnam Veteran Association, that is the best way to get the word out. The veteran for veteran model is very powerful.
	  ○ With cultural competency component, a lot of our materials we are developing is focused on special populations. I'm very proud to have worked on an Asian American, Native Hawaiian, Pacific Islander resource. We are also developing resources for our Black/ African American and Latino/a/x community.
	  ○ For intergenerational outreach, we are participating a lot with senior centers. A lot of our centers we've partnered with have created a veteran program. They are open for all veterans regardless of age. I hear from our younger veterans that when they hear similarities from older veterans, they find this helpful. I think we have a lot of work to be done.
	• Jean Perry - I'm aware that you often attend Suicide Prevention Committee. We have seen a high rate of suicide in older men. I'm wondering if you see this in the other counties you are involved with. Do you think there is solid reporting on veterans in these categories?
	  ○ A: I think it's very complicated. The VA has a mechanism to identify when a veteran dies by suicide even in active service. Really having a clear picture of our veteran population and their impact is really difficult. Definition of a veteran is different from federal to state lens. I don't know about county definition and how

	that's being logged, but from having discussions, data is very important. Even the data in itself isn't an accurate reflection of the actual numbers. We're all trying to figure out what is actually happening in our communities, and it's difficult. • Yoko Ng - Can you tell us among the 6 counties, what are the homeless successes and challenges with the VA? o I'd have to defer to a homeless specialist. Maybe a presentation on homelessness would be helpful in the future. Maybe someone from VA Palo Alto or VA San Francisco.
Standing Committee	**Committee for Children & Youth Service** Reported by Veer Chowdhary • Kate Saywell who was my former co-liaison, today at our retreat we did a bit of networking to find a second liaison, and it was a huge success. We are hoping to conduct interviews and get new liaison by 8/15. • We had our retreat which included goal setting and preparing for our larger Youth Action Board retreat. I want to thank Bill Silverfarb and Supervisor Canepa for their support on the youth resolution. Otherwise, we have been on our summer recess. Next meeting is Wednesday, August 19, 2026, 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 Jean Perry • There was a site visit at Hawthorne House. Next meeting is Wednesday, August 19, 2026, at 10:15 a.m. **Committee for Older Adult Services** Reported by Jean Perry • No updates. Next meeting is Wednesday, August 19, 2026, 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 • On June 10th we had a presentation on abstinence versus harm reduction from Mary Taylor. It was well attended. Next meeting we are visiting Latino Coalition for a site visit. Next meeting is Thursday, August 13, 2026, at 2 p.m. Virtual: Teams
Director's Report	• Dr. Jei Africa o I've been out last month, and this is my first day back. The state accepted our BHSA Plan which is a big deal. When I was gone, our staff had been made aware that VLF funds remain an issue with an enormous shortfall. We are being asked to prepare for possible financial scenarios. One of the things important for us is meeting our obligation as a managed care behavioral health plan. o You have asked for regular updates on BHSA. Doris and I devised this template to present every quarter. o Our team is also responding to the Foster City condo fire. We are linking people to services, available resources, etc. o Epic remains to be a big ask for us. I think it has gotten better but there are still gaps. • Doris Estremera

	○ I will be presenting highlights for our transformation journey. If you want to learn more about the transformation journey, you can access the overview document here: https://www.smchealth.org/post/bhrs-transformation-journey ○ We have 25 milestones across the journey. We have completed 1 of the 25 which is getting the San Mateo County 3-year Integrated Plan approved. ○ You can also read director's newsletter for some more info on the launch of BHSA. ○ Through the PIVOT project, we have learned a good amount of info on MediCal billing. ○ In December, we are going to pilot a new rental subsidy program. ○ Full-service partnership requires us to launch American Society of Addiction Medicine screening training for providers.
Director's Report Questions and Public Comments	• Frieda Edgette - Has the county executives' office given key drivers for BHRS? ○ Jei Africa: Given change in VLF, they have asked departments to do some planning which includes different scenarios for reductions. Our primary obligation is to comply as a county behavioral health plan. Our history in the county is that they have been very generous with funding. There are many possible impacts on client services. Maybe folks will take a longer time to get services, maybe less robust services, maybe there are programs we are not mandated that we will stop providing. There have been no decisions at this point. • Frieda Edgette - Related to Mobile Crisis, with these tragedies in the county, what impact has this had on service and personnel deployment? I think things will continue to escalate in this way. ○ Jei Africa: I don't have an answer to that. We are looking at what services mobile crisis needs to respond or what services are other programs able to respond to. • Yoko Ng - What are you offering for people who are not on MediCal ○ Jei Africa - Our priority is those who have severe mental illness and substance use. It's painful that we have to accept we can't be everything for everybody. It's important when the time comes, we will need your help to bring up the importance of these services that are not getting funding.
Liaison, Task Force and Ad Hoc Committees	**Suicide Prevention Committee** • No report given **New Member Committee** • No report given **Site Visits Committee** • No report given **Cal BHB/C** • No report given
New Business	• Nominating Committee will begin this month. • David Lewis Award in September. Applications due Aug 14th.
Adjournment	This meeting was adjourned at 5:28 p.m. by Chair Jean Perry.

Next BHC Meeting:	Wednesday, September 2, 2026, from 3:30 p.m.-5:30 p.m. 2000 Alameda de las Pulgas, Room 201, San Mateo, CA 94403 and Online Information will be posted on www.smchealth.org/BHC.
Next Executive Committee Meeting:	Wednesday, September 2, 2026, at 5:30 p.m. 2000 Alameda de las Pulgas, Room 201, San Mateo, CA 94403 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.