

DIRECTOR'S UPDATE

Scott Gilman, MSA, CBHE

Mental Health Crisis Response Pilot Launches in Four Cities

Mental health professionals are teaming with law enforcement in San Mateo County's four largest cities as part of a two-year pilot program aimed at de-escalating 9-1-1 calls and providing appropriate, compassionate care for non-violent individuals.

The Community Wellness Crisis Response Team (CWCRT) program was launched on December 6, 2021 in Daly City, San Mateo, Redwood City and South San Francisco with two goals in mind: to provide an alternative to jail and overburdened hospital emergency rooms for non-violent individuals undergoing a behavioral health crisis and to free up police officers.

"This program is intended to give law enforcement a resource by teaming a police officer with a mental health clinician that can help manage high-risk situations in a way that improves outcomes and public safety," said Don Horsley, supervisor of San Mateo County.

BHRS trained the contracted StarVista clinicians, who are embedded within each city's police department. 9-1-1 dispatchers deploy clinicians along with police officers to calls involving individuals suspected of experiencing behavioral health crises. Once officers declare the scene safe, clinicians assess the individual and determine the best methods of immediate care.

The John W. Gardner Center for Youth and Their Communities at Stanford University will independently evaluate the methods that the clinicians and cities use to help refine the program. The four cities will contribute \$408,388 while the County will contribute \$468,388 for each of two years, for a two-year total of about \$1.5 million.

For questions about the CWCRT, contact the BHRS Crisis and Outreach team: [Shirley Chu](#) and [Ally Hoppis](#).

New MHSA Supportive Housing Developments



The Mental Health Services Act (MHSA) Three-Year Plan for fiscal years 2020-23 prioritizes funding to implement various [housing recommendations](#) to develop a comprehensive housing

continuum for individuals living with a mental illness. These recommendations include a \$10 million one-time allocation for the development of supportive housing units for BHRS clients.

Permanent supportive housing units provide on-site supportive services for clients including case management, housing retention skills, harm reduction, motivational interviewing, crisis intervention and service coordination. In addition, clients are linked to ongoing mental health and substance use services as needed. They also receive daily living skills training, peer support, and recreational, educational and employment services provided by BHRS and/or contracted providers.

Since releasing the recommendations, San Mateo County has transferred \$5 million in MHSA funds to the Department of Housing (DoH) so that supportive housing units would be included as part of the DoH's affordable housing fund efforts. In July 2021, the DoH released a funding availability notice. Three affordable housing projects were selected to be funded and will include a total of 25 new supportive housing units:

- Week St. Apartments, East Palo Alto, MidPen & EPA CanDo - 135 affordable units and 8 supportive housing units, 2024 completion.
- North Fair Oaks Apartments, North Fair Oaks, Affirmed Housing - 84 affordable units and 11 supportive housing units, 2025 completion.

37.1%

Revenue Ratio (R3)

8,593

Total Clients

768

Admitted

735

Discharged

- Fire House Square Apartments, South SF, Eden Housing - 82 affordable senior units and 6 Supportive Housing units, 2024 completion.

In addition to the projects funded through the DoH, two more projects have been identified to develop supportive housing units for a total of 18 additional units:

- Kiku Apartments, Downtown San Mateo, Mid Pen - 224 affordable housing and 9 supportive housing units, 2024 completion.
- Light Tree Apartments, East Palo Alto - 198 affordable units and 9 supportive housing units, 2023 completion.

The MHSA Housing Program in San Mateo County has funded and completed the development of 62 supportive housing units since 2009. With 43 new units in development, we expect to have 105 dedicated supportive housing units for BHRS clients across San Mateo County in the near future.

Congratulations & Farewell



Ziomara Ochoa

Ziomara Ochoa, Deputy Directory, Child and Youth Services, has been selected as a scholarship recipient in the third cohort of the National Hispanic and Latino Executive Leadership and Fellowship Program. The training aims to provide capacity building for executive leadership and coaching to maximize their leadership potential in behavioral and integrated health. Recipients are identified by the National Hispanic and Latino Addiction Technology Transfer Center Network and Prevention Technology Transfer Center Network.



Jennifer Basler

Jennifer Basler, Clinical Services Manager I, Crisis/Outreach and Engagement Services, resigned effective December 9, after five years at BHRS to return to Canada. She served as the work-out-of-class and then permanent clinical services manager I for crisis/outreach and engagement services from July 2020 to December 2021. Prior to this, Jennifer worked at BHRS as the program specialist for the PERT (Psychiatric Emergency Response Team) and HEAL (Homeless Engagement Assessment and Linkage) teams. She brought many years of experience in mental health, AOD, and crisis and

outreach services from both the US and Canada to her role. At BHRS, she served as the Crisis Response Team Coordinator through multiple crises/disasters, including wildfires in San Mateo and Santa Cruz counties; at the Disaster Operations Center for the COVID-19 pandemic; and worked with law enforcement, cities, and the County on new crisis mobile outreach pilots/programs. We wish her well in her future endeavors.

Federal Funds Aim to Combat COVID 19-Related Impact



BHRS Alcohol and Other Drug (AOD) Services has received supplemental Substance Abuse Block Grant (SABG) funding from the Department of Health Care Services to address the COVID-19

pandemic's impact on our communities and substance use disorder (SUD) providers.

Just over \$4.3 million from the American Rescue Plan Act (APRA) Supplemental Funding and the Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA) will finance critical prevention, treatment and recovery supports for youth, women who are pregnant and parenting, and individuals who use IV drugs. The funding will also strengthen the recovery housing infrastructure over the next three and a half years.

San Mateo County's efforts will focus on gaining a better understanding for and meeting the needs of communities disproportionately impacted by the pandemic, and those that have experienced increased stigma due to COVID-19 related anti-Asian rhetoric. The funding will support the following:

- **Community Assessments:** Work with community-based organizations (CBO) from the African American, Latinx, and Pacific Islander communities to assess factors that contribute to substance use disorders; identify unique treatment needs and barriers to accessing care; and understand how to improve outreach, engagement, and services. Develop and implement strategies to address these needs, including community outreach and social media campaigns.
- **Perinatal Services:** Strengthen training opportunities for perinatal providers, including training in Neurosequential Model in Therapeutics;

fund sensory integration rooms at provider sites; and engage community assessments with an emphasis on perinatal needs.

- **Adolescent/Youth:** Develop and implement a youth outreach plan to increase awareness of and participation in substance use disorder treatment.
- **Contingency Management and Digital Therapeutics:** Pilot an innovative new treatment using technology to support clients in accessing contingency management and other clinically validated treatments 24/7 via a smartphone or tablet.
- **Care Coordination:** Strengthen system collaboration among CBO providers by building skills and partnerships to support transitions between levels of care and retention in treatment.
- **Language Access:** Improve language matching within CBO provider sites and provide funding for material translations and interpreter services.
- **Recovery Housing Support:** Enhance recovery housing environments for mothers and their infants and children; increase the availability of recovery residence housing for diverse and underserved populations; complete deferred maintenance at residential facilities; and purchase supplies and home equipment needed to support clients in recovery housing.

COVID-19 Update



BHRS is pleased to announce that we reached an 81% vaccination rate for all BHRS clients as of December 29, 2021. Rates by program are: Youth 76%, Adult 85%, AOD 75%, and Primary Care Interface 85%.

Because BHRS clients had the lowest vaccination rate of any population in the county, BHRS convened a Vaccination Outreach Planning Workgroup in October of staff charged with developing interventions and strategies to increase client vaccination rates in their respective areas.

Adult and older adult services is one of our teams with the highest client vaccination rate at 85%. Here's some insight on how they attained this milestone:

When BHRS first launched the vaccination improvement effort in October, it seemed daunting (if not impossible)

to achieve the ambitious goal of having over 80% of our clients vaccinated by year end. The adult program began with a baseline of 71.55%, yet in less than five weeks, has surpassed the goal and is showing no signs of slowing down.

To reach the estimated 733 un(der)-vaccinated clients by year end, adult leadership piloted small interventions, learned quickly, and then spread these learnings to others using the scientific Plan-Do-Study-Adjust (PDSA) method. The North County clinic was selected as the pilot site (as it includes the cities with the County's lowest vaccination rates). There, a small team convened twice weekly to design and implement various interventions.

The collaborative team included representatives from each discipline on the adult teams and, critically, included both leadership (Deputy Director Karen Krahn, Manager Chummy Sevilla and Supervisors Linda Hildreth, Maggie Tapia and Adam Crits) and front-line staff (MFT John Zamora, RN Dana Deras, and Patient Services Assistant Mercedes Medal).

The team leveraged learnings from previous outreach attempts and focus groups conducted by Health. Thus, the main intervention involved having the provider with the strongest treatment alliance with the client conduct the outreach. Staff also incorporated vaccination discussions during their appointments with these clients.

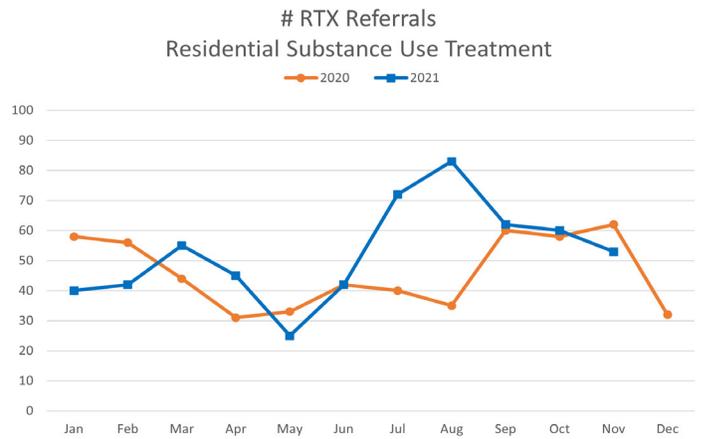
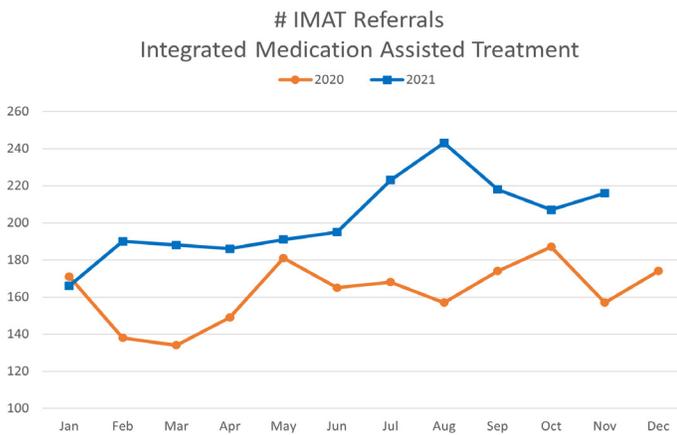
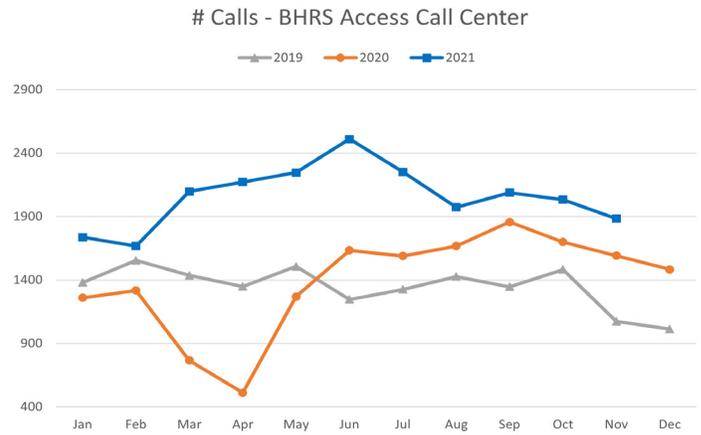
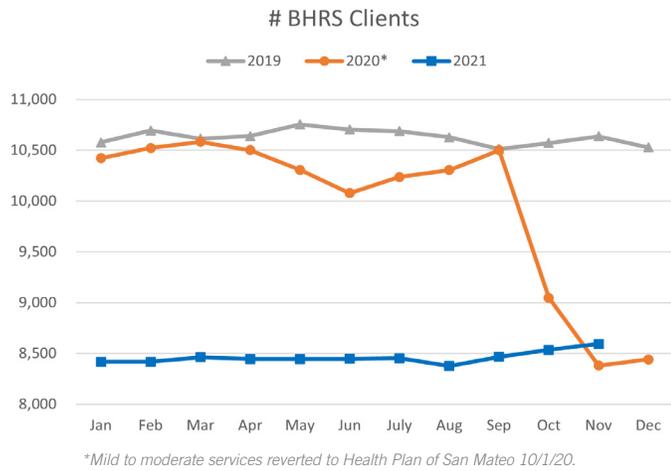
Key learnings included:

- Including front line staff on the planning team ensured that ideas could be incorporated quickly and were based on real-life experiences. Their openness and active engagement were the keys to our success.
- Having real-time data showing how each outreach contact was contributing and seeing the needle move was a huge motivator. It also helped to incite some friendly competition!

During the process, we discovered that our vaccination rate was artificially low. Due to data errors, a significant number of clients on the un(der)-vaccinated list had already been fully vaccinated. For these clients, we adjusted our focus to helping them get their information updated in the State's database.

The overall success of BHRS's efforts can be attributed to the process that we followed and the people involved. Many thanks to staff who contributed to this effort.

SNAPSHOT: BHRS Clients - as of November 30, 2021



Service Category	Total Clients	Admitted - November	Discharged - November
Mental Health Services County SMI	5,586	522	545
Mental Health Services Contracted SMI	1,849	117	83
AOD Services County	503	43	38
AOD Services Contracted	655	86	69
Total BHRS Clients	8,593	768	735

Total clients are unduplicated within each service category, however, if a client received services in more than one category during the same period, the client is counted in multiple categories.

R3% - 37.1% (revenue ratio of billed services as of 11/30/21)

Would you like to see positive change?

Then become a better Advocate!



Join the OCFA Advocacy Academy 2022

Presented by The Copeland Center for those BHRS clients and family members who want to make a difference in their lives and their community

The Advocacy Academy is for individuals with behavioral health challenges and their family members who want to learn skills to be effective advocates within BHRS and beyond.

Learn the skills to bring your voice to the Behavioral Health & Recovery Services (BHRS) committees, particularly to the MHSA Health Equity Initiatives and all other workgroups. Learn how to advocate for positive change, social inclusion, consumer & family education and outreach, and much more.

Training provided by trainers with Lived Experience from The Copeland Center for Wellness & Recovery.

Date: Six consecutive Thursdays:

February 3, 10, 17, 24, March 3 and 10

Time: From 3 to 5 PM

Location: On Zoom

For more information or to apply, contact ocfa@smcgov.org or call (800) 388-5189

Stipends will be provided

No experience necessary, only a desire to generate positive change. Apply today!

Deadline to apply: Friday January 21, 2022

The Advocacy Academy is funded by MHSA funds



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BEHAVIORAL HEALTH & RECOVERY SERVICES