



SAN MATEO COUNTY HEALTH
**BEHAVIORAL HEALTH
& RECOVERY SERVICES**

**Annual Report
Fiscal Year 2024-2025**



San Mateo County Health administers public health programs and provides clinical and supportive services to the community. County Health's mission is to help everyone in San Mateo County live longer and better lives.

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Director's Message

I am pleased to present the inaugural Annual Report for Behavioral Health and Recovery Services, highlighting our Fiscal Year (FY) 2024-25 efforts. This period marks a transformative era driven by California's Proposition 1, a landmark initiative to re-envision public mental health and substance use services. Prop. 1 has been a catalyst for transformation across the State and reforms funding from the millionaire's tax to focus on individuals with the most significant needs, including those living with serious mental illness and/or substance use disorders and those who are at risk of homelessness, unhoused, or justice involved.

As a behavioral health plan, BHRS's responsibility is to provide or arrange Specialty Mental Health Services (SMHS) and Drug Medi-Cal services to Medi-Cal beneficiaries within San Mateo County. In addition, BHRS has historically served as a safety net provider, treating vulnerable and low-income populations regardless of their insurance or immigration status, ability to pay, or any significant barriers preventing access to behavioral health care; stepping beyond our mandated Medi-Cal role and serving broader community behavioral health needs.

As we navigate statewide changes and an evolving behavioral health landscape, our focus on meeting client needs remains steadfast. We are strengthening partnerships and infrastructure, with key emphases on data management, fiscal transparency, quality monitoring and workforce development. We are grateful to our community partners and providers for their continued collaboration to support clients.

This past fiscal year, BHRS kicked off an exciting new chapter with what we're calling our transformation journey, a strategic vision aimed at reshaping the way we provide care across our behavioral health system. We expanded services across several areas including crisis intervention, housing supports, substance use treatment, perinatal and youth support, and enhanced behavioral health access in primary care clinics. We've launched new programs and statewide mandates like the Mobile Crisis Response Team and CARE Court, and made significant progress implementing CalAIM, the multi-year transformation of Medi-Cal service delivery.

Looking ahead, BHRS will continue to adapt and meet challenges with innovation and collaboration. We remain committed to serving the most vulnerable and ensuring that the voices of our workforce, community, clients, families and partners are central to our work to come.

Dr. Jei Africa

Director
Behavioral Health and Recovery Services



BHRS MISSION

We provide prevention, treatment, and recovery services to inspire hope, resiliency, and connection with others to enhance the lives of those affected by mental health and/or substance use challenges. We are dedicated to advancing health and social equity for all people in San Mateo County and for all communities. We are committed to being an organization that values inclusion and equity for all.

OUR VISION

We envision safer communities for all where individuals may realize a meaningful life and the challenges of mental health and/or substance use are addressed in a respectful, compassionate, holistic, and effective manner. Inclusion and equity are valued and central to our work. Our diverse communities are honored and strengthened because of our differences.



OUR VALUES

Person and Family Centered: We promote culturally responsive person-and-family centered recovery.

Potential: We are inspired by the individuals and families we serve, their achievements and potential for wellness and recovery.

Power: The people, families, and communities we serve, and the members of our workforce guide the care we provide and shape policies and practices.

Partnerships: We can achieve our mission and progress towards our vision only through mutual and respectful partnerships that enhance our capabilities and build our capacity.

Performance: We use proven practices, opportunities, and technologies to prevent and/or reduce the impacts of mental illness and additions and to promote the health of the individuals, families, and communities we serve.

Services Overview

The Behavioral Health and Recovery Services (BHRS) division of San Mateo County Health provides mental health and substance use services across the core continuum of behavioral health services including prevention and early intervention, wellness and recovery supports, outpatient and inpatient treatment, residential, rehabilitation, detoxification, medication assisted treatment, crisis services and more. BHRS is committed to supporting treatment of the whole person to achieve wellness and recovery, and promote the physical and behavioral health of individuals, families, and communities of all ages in San Mateo County including the uninsured and undocumented. BHRS strives to provide integrated and culturally responsive services and employs mental health clinicians, psychiatrists, alcohol and drug counselors, peers, family partners and other professionals through county clinics, contracts with community agencies and a network of private providers.



Find a comprehensive online resource updated annually for BHRS offerings, including service and program descriptions and contact information at smchealth.org/bhrsservices or scan the QR code.



CONTINUUM OF CARE

BHRS holds close to 300 contracts with valued partners to deliver services throughout the County.



Mental health and substance use treatment support is available across San Mateo County through BHRS Regional Clinics and community partners.





“ Edgewood’s partnership with BHRS has profoundly strengthened our ability to deliver exceptional mental health care through our Full-Service Partnership (FSP) Wraparound programs and our Transitional Aged Youth (TAY) Drop-In Centers. Together, we are transforming lives, supporting youth and young adults, and their families with lifesaving, community-based resources that meet people where they are, and honor who they are.

Our programs are built on the belief that healing happens best at home, surrounded by family, and grounded in community. Our dedicated teams walk beside each young person and family every step of the way, offering care that is not only effective, but deeply compassionate, fostering stability, belonging, and lasting wellness. ”

Angela Buelow, Senior Director of Programs at Edgewood

Our Clients

14,396

BHRS clients served in FY 24-25

12,919

accessed mental health services

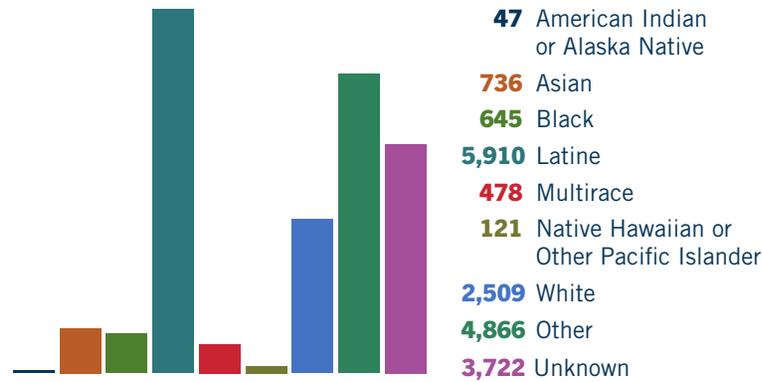
2,464

accessed alcohol and other drug services

Race/Ethnicity

Data includes individuals who identified with a particular race or ethnicity category, either solely by itself or in combination with another race or ethnicity category.

FY 2024-25



16.9%

of all BHRS clients experienced homelessness (2,439 individuals)

45.2%

of clients who accessed alcohol and other drug services experienced homelessness (1,113 individuals)

13.5%

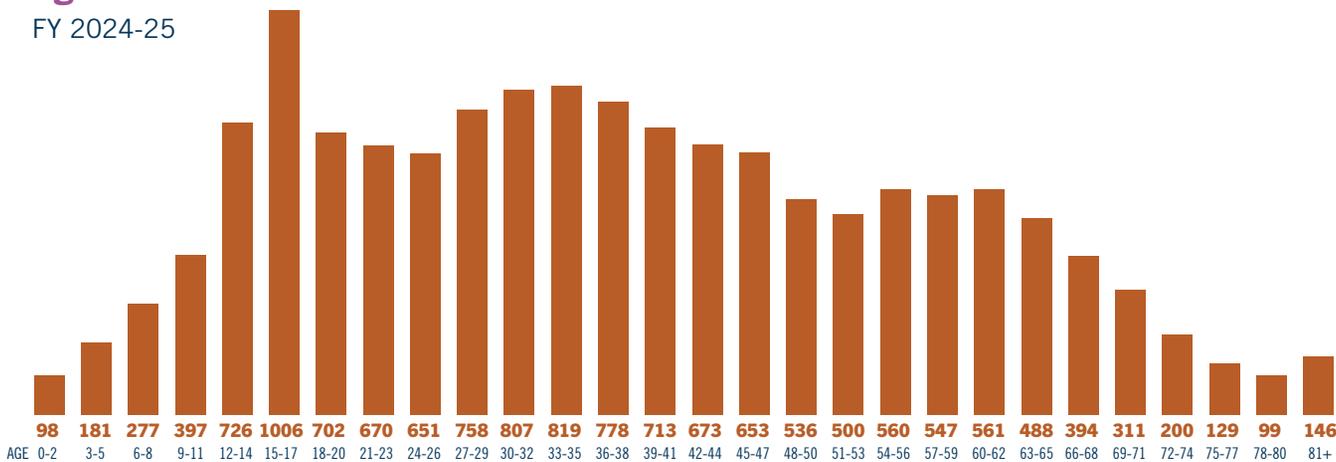
of clients who accessed mental health services experienced homelessness (1,749 individuals)

Gender Identity

- 5,120** Male
- 4,718** Unknown
- 4,556** Female
 - 35** Transgender Female
 - 31** Another
 - 29** Genderqueer
 - 26** Transgender Male

Age

FY 2024-25



Primary Language

- 9,056** English
- 3,467** Spanish
- 1,384** Unknown/ Not Reported
 - 130** Portuguese
 - 76** Tagalog
 - 42** Cantonese
 - 35** Mandarin
 - 32** Russian
 - 25** Arabic
 - 22** Turkish



BHRS is committed to supporting treatment of the whole person to achieve wellness and recovery, and promoting the physical and behavioral health of individuals, families, and communities of all ages in San Mateo County including the uninsured and undocumented.

According to the
FY 24-25 Department
of Health Care Services
Consumer Perception
Surveys:

90%
of clients were satisfied
with mental health
services overall

92%
were satisfied with
alcohol and drug
services overall

Advancing Health Equity

Health Equity Initiatives

The Health Equity Initiatives (HEIs) are collaborative groups that aim to make behavioral health services more accessible, inclusive and responsive across San Mateo County. Funded by the Mental Health Services Act (MHSA), the HEIs unite clients, family members, community partners and BHRS staff to listen, learn and lead together. Through monthly meetings, trainings, community gatherings and events, the HEIs promote shared connection and celebrate lived experience. They identify barriers, reduce stigma, and guide BHRS in delivering culturally responsive, community-centered care.

1,741

Number of clients reached in monthly HEI meetings over the fiscal year

15,427

Number of individuals (clients, community members, family members and staff) reached at HEI trainings and events



Workforce, Education and Training

The BHRS Workforce Education and Training (WET) team offers education, training and professional development opportunities to County staff, contractors, providers, clients/consumers and family members to provide the highest quality of care to those in need. Providers reported that BHRS trainings enhance their clinical skills, foster cultural awareness and improve client centered care.

Offerings Include:

- Cultural Humility 101
- Cultural Considerations: Responding Multi-culturally with Culturally and Linguistically Appropriate Services via Cultural Complexities in Assessment
- Portals into Their World: Social Media and Screens' Impacts on Kids and Teens
- Engaging African American and Black Clients and Families: Building Trust and Deepening Practice in Behavioral Health
- Law and Ethics Training
- Mindfulness Based Substance Use Treatment (MBSAT): Introduction to Mindfulness with Trauma-Impacted Youth
- Pronouns and Transgender 101

73%

of BHRS staff endorsed that BHRS trainings improve their ability to integrate culturally informed practices at work

71%

of BHRS staff reported that trainings offered were effective in enhancing the skills relevant to their current roles

Health Ambassador Program

BHRS Health Ambassadors are trusted community members who use their lived experience, compassion and cultural understanding to promote healing and well-being. Established in 2014, the Health Ambassador Program (HAP) empowers clients, family members and community leaders to foster recovery, resilience and connection. Grounded in their lived experience and training, Ambassadors support their own wellness, their loved ones and their broader community through advocacy, education and outreach that promotes safety, hope and empowerment.

Health Ambassadors:

- Facilitate youth and adult behavioral health education (e.g., Mental Health First Aid, Wellness Recovery Action Plan (WRAP), Know the Signs Suicide Prevention, Parent Project®, NAMI programs) to build community understanding and compassion.
- Help in identifying community needs and share feedback with the County to ensure services are responsive, inclusive and trauma informed.
- Promote awareness of behavioral health and wellness resources to help reduce stigma and encourage healing centered, help-seeking behaviors.
- Support culturally responsive and trauma-informed outreach and engagement efforts to foster trust and belonging.

89

BHRS Health
Ambassadors



Lived Experience and Peer Support

In behavioral health, Peer and Family Support Specialists are individuals who have lived experience with mental health conditions or substance use disorders or family members of those individuals. Peers have long provided support in prevention, early intervention, treatment, recovery and crisis services and can offer clients a unique perspective - having gone through a similar experience can be vital when navigating complex systems.

“Working with a peer support specialist has helped me with socialization. I have struggled with social isolation for 35+ years. My peer support specialist has helped me be able to share more about my recovery journey. I have flourished and formed friendships with other BHRS clients. The support has allowed me to advocate with my case managers & doctor. My peer support specialist has supported me by helping me get connected with food resources through the Meals on Wheels and Senior Food Pantry program and by encouraging me to attend weekly groups and movie night.”

Tim, BHRS Client

“Working with a peer support specialist has helped me feel supported in advocating for myself. Knowing that I have a person who has lived experience has made me more self-aware. One of the ways I've been helped is by learning how to socialize through a peer support specialist re-social group. This group has helped me understand different self-care practices through meditation and yoga. I have always struggled with social isolation, and the group has supported me. Working with a peer support specialist has also helped me connect to the outside community. I found the local Senior Center here in Daly City, and attending the Senior Center helps me be physically fit and maintain my mental health through staying active.”

Craig, BHRS Client

“Having mental health or addiction issues, there's a stigma involved with that. I know from firsthand experience how that stigma can affect your life. Being able to be there for people and have them see that you understand - more than just empathize with them but actually have lived their life, their context - I think that's really important because it's easier to trust someone when you know that they truly understand.”

Eric Santos, Peer Support Specialist

TOP - Small Group (2)
2-3 Goal ~~DEAS~~

• SUB COMMITTEE A
Goals / ACTION PLANS
Needs Assessment
CREATE SERVICES ROADMAP

• ENGAGE w/ SCHOOLS TO ENRICHTE
RE: YOUTH SERVICES AVAILABLE

• UNDERSTANDING THE SCOPE OF MENTAL
HEALTH SERVICES IN THE JAILS
ADVOCATE FOR UNMET NEEDS
RE-ENTRY PLANS

2-3 Goal ~~DEAS~~

• Reflect communities on the
Coastside thru Provision
of Services

2. Continue supporting Wellness
literacy public training of MH
e.g. AMHFA, YMHFA, Life skills,
to bust stigma

The Behavioral Health Commission (BHC) reviews and evaluates the County's behavioral health needs, services, facilities and programs and contributes to the decision making and operations of BHRS. The BHC advises the Board of Supervisors and the BHRS Director, and members include family members, consumer/clients, professionals and interested residents. By state law, at least 50% of the members must be consumers or family members of mental health services.

PROGRAM FOCUS

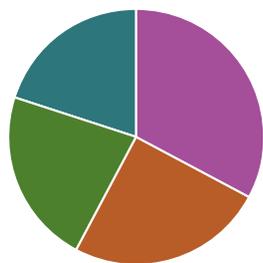
CARE Court

The Community Assistance, Recovery, and Empowerment (CARE) Act went into effect July 2024 and provides community-based behavioral health services and supports to those living with untreated schizophrenia spectrum or other psychotic disorders through a new civil court process. It is designed to disrupt the revolving-door of homelessness, short-term hospitalization, and incarceration for those with untreated serious mental illness. For over a year now, this evidence-based program connects eligible adults in crisis to a CARE Agreement or Plan, which may include comprehensive treatment, housing and supportive services for one year and may be extended for up to 12 additional months if needed. CARE serves people who need help most and works with clients and their families to help them towards recovery so they can remain in our community and thrive.

Referrals

A referral is when someone reaches out to the BHRS CARE team on behalf of a person. They may have questions about the process, inquire about eligibility criteria, or seek support in writing a petition.

105 Referrals in FY 2024-25



Referral Housing Status

- 33% Permanent
- 25% Homeless
- 22% Institution
- 20% Temporary

Petitions

Petitions are the specific legal document that officially begins a CARE Court case.

59 Petitions in FY 2024-25

24

dismissals

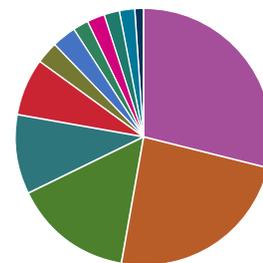
15

active CARE
agreements

3

voluntary
engagement

Petition Sources



29% Penal Code 1370*

24% BHRS

15% California Department
of State Hospitals

10% Family Member

7% Hospital

3% Clinician

3% Psychiatric Emergency
Response Team

2% California Department
of Corrections and
Rehabilitation

2% Community Wellness and
Crisis Response Team

2% Conservatorship

2% Police Department

1% Community Based
Organization

*Refers to California Penal Code 1370, when a defendant is found mentally incompetent and their trial is suspended.

A CLIENT STORY

James* was referred to Care Court while transitioning away from a temporary conservatorship. Early in the process, there were concerns about James' ability to succeed outside of a secure facility monitored by staff. The CARE Court team, however, strongly advocated for his placement in a social rehabilitation program, recognizing that with the right supports he could thrive in the community. Through coordinated efforts, James was admitted to social rehab, where he began receiving consistent structure and support. His peer support worker played a key role throughout this transition—building trust, encouraging him to engage with treatment, and attending weekly Narcotics Anonymous meetings alongside him to strengthen his recovery. To further his stability, the CARE BHRS team subsidized payment for the social rehabilitation program while a representative payee was being set up, ensuring continuity of care without financial disruption. James now attends all CARE Court hearings, remains actively engaged with services, and has made significant progress. With the combined advocacy of the CARE Court team and the steady support of his peer worker, James has transitioned from a highly restrictive environment to a community setting and is now stably connected to a Full-Service Partnership program for ongoing care.

*Name has been changed to protect privacy.



PROGRAM FOCUS

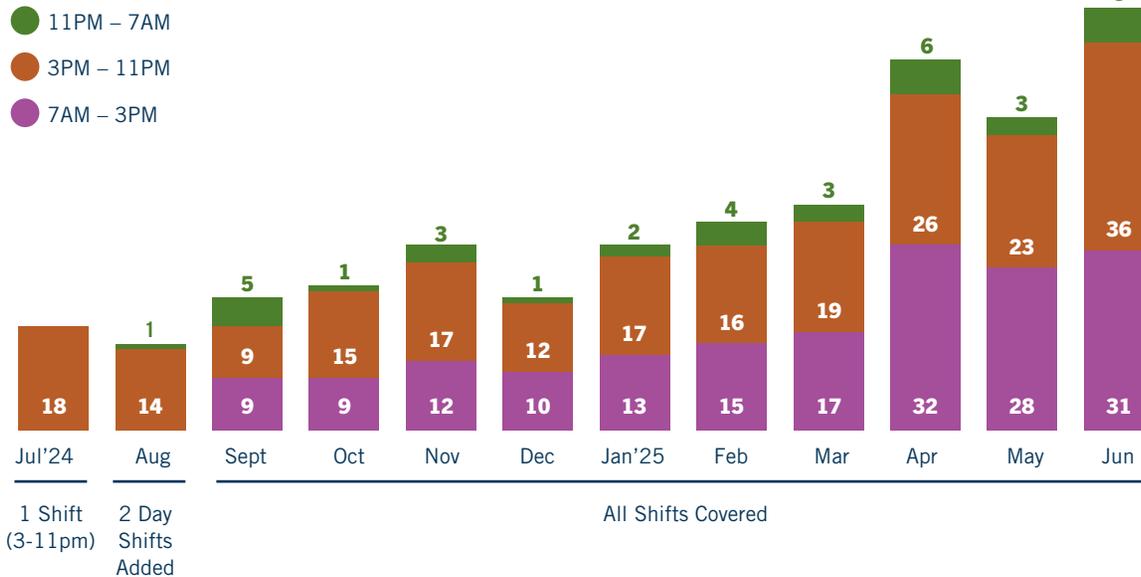
Mobile Crisis Response Team

Fully launched as of September 2024, the San Mateo County Mobile Crisis Response Team provides specialized 24/7 in-person mobile crisis response and is a partnership of BHRS and Telecare Corporation. The MCRT responds to individuals that are experiencing an escalation of behavioral health symptoms and can help connect to BHRS services. The MCRT can be accessed by calling the San Mateo County Crisis Line at (650) 579-0350.

In May 2025, as part of Mental Health Awareness Month, BHRS launched an outreach campaign, developed with community input, to raise awareness of this service and how to access it.

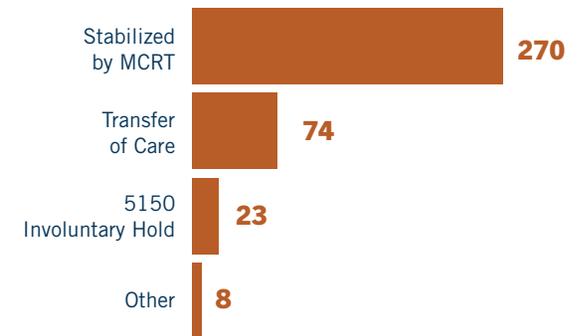
MCRT Deployments

July 1, 2024 – June 30, 2025



Outcome of Response

September 1, 2024 – June 30, 2025



32 minutes
average response time

Time between when the call was logged to when providers arrive on-scene.

A CLIENT STORY

A concerned family member, Diana*, called the San Mateo County Crisis Line regarding her adult nephew, Michael*, who was recently discharged from a substance use disorder residential program in another county. Diana sought help due to her increasing concern for Michael's co-occurring mental health and substance use issues. Since returning from the program, Michael experienced a relapse and returned to alcohol consumption, resulting in blackouts, falling down and damage to household property. Diana, who had received support in Al-Anon Family Groups in the past, was distressed by Michael's alcohol use and conflict in their relationship. When Diana called into the Crisis Line, it was determined that deployment of the Mobile Crisis Response Team (MCRT) was appropriate. Upon arrival, the MCRT assessed the situation and facilitated Michael's agreement to be transported to Serenity House Crisis Residential Treatment program in San Mateo. Since their initial visit, the MCRT has maintained ongoing support by providing case management services to both Diana and Michael. This has included sharing information with Diana about family-to-family groups with the National Alliance on Mental Illness (NAMI), an educational program for family members of individuals with mental health conditions, as well as assisting Michael with the transfer of his Medi-Cal to San Mateo County and connecting him to services within Behavioral Health and Recovery Services.

*Names have been changed to protect privacy.



PROGRAM FOCUS

Cordilleras Health and Healing Campus

The new Cordilleras Health and Healing Campus, which spans 20 acres near Redwood City, offers programs for adults with serious mental illness and substance use challenges, many with histories of repeated psychiatric hospitalizations. Currently, there are four, 16-bed locked Mental Health Rehabilitation Centers (MHRC's) and a 57-bed cohousing development operated by different service providers. The Cordilleras Health and Healing Center MHRC's have a multidisciplinary care team model of psychiatrists, therapists, nurses, peer support specialists and social workers, and is focused on improving client recovery and independence, reducing acute hospitalizations and providing stable, supportive housing and community connection. The entirety of the Cordilleras Health and Healing Campus is set to open by the end of January 2026.

91%

average occupancy rate for the Mental Health Rehabilitation Centers

81

individuals served at Cordilleras in FY24-25



A CLIENT STORY

For Robert*, his move from Cordilleras Mental Health Rehabilitation Center back into the community was not just a transition—it was a milestone that had once seemed out of reach. Thanks to the supportive environment and programs at Cordilleras, he met that transition with confidence, strength and purpose. Growing up, life was far from easy for Robert. A difficult childhood and a strained relationship with his mother led to challenges during adolescence, including substance use that began in high school. “I started using psychedelics and other drugs, and it quickly became a habit,” Robert recalled, “I lost my car, couldn’t keep a stable job—I knew I needed help.” That help came in the form of placement at Cordilleras. Robert was there for six years total, first at the former Cordilleras Mental Health Center facility, and then at the Sage House MHRC on the new Cordilleras Health and Healing Campus. There, he found structure, support and the tools and guidance needed to take meaningful steps toward recovery. Robert shared, “The programs really helped me learn about myself. I was able to maintain a drug-free lifestyle, create a healthy environment and make many lasting friendships that have helped me stay sober. Cordilleras was truly somewhere I felt I could thrive.” Today, six years into sobriety, Robert remains medication-compliant and is working toward securing his own apartment. “My time at Cordilleras helped set me up for success,” he said proudly. Robert’s journey is a testament to resilience, recovery, the power of community support and the lasting impact such programs can have.

*Name has been changed to protect privacy.



PROGRAM FOCUS

Full-Service Partnership

Funded by the Mental Health Services Act (MHSA), Full-Service Partnership (FSP) is an intensive and comprehensive community-based mental health program that provides “whatever it takes” support. FSP is available to youth and their families, transition-age youth ages 18 to 25, adults and older adults, individuals who are unhoused or at risk of homelessness, criminal justice involved, or clients with repeat hospitalizations. FSP develops individualized care plans including behavioral health treatment, crisis intervention, housing, employment, education and transportation. The program aims to reduce hospitalization and incarceration, enhance long-term community integration, prevent out-of-home placements for youth, support educational and vocational success, and address trauma and family needs. BHRS contracts with FSP providers to ensure capacity for meeting the need in the community.

The adult/older adult FSP programs were at

86%

capacity on average.

Total: 361 slots

The transition-age youth program was at

92%

capacity on average.

Total: 40 slots

The child/youth FSP programs were at

76%

capacity on average.

Total: 80 slots



FSP Client Counts

By Age Groups



A CLIENT STORY

When Jack* was referred to the Wraparound Turning Point Full-Service Partnership program by his adoption social worker, he had been living with his new foster parents

for less than six months. Jack had grown up in an environment of poverty, abuse, bullying and exposure to drug addiction before his placement in foster care. He had transitioned into six different home and school placements, until settling into his current foster home. Jack struggled with symptoms of PTSD that resulted in nightmares, problems with concentration, chronic irritability and self-isolation. He had a hard time opening up to his new foster dads and school peers and would often stay in his room or make passive aggressive comments. His foster dads wanted to be his forever home but were unsure if that would be possible due to the tension in their relationships. With time, a clinician helped the family learn to talk about the traumas Max had experienced and the ways he continued to be impacted by them. Both dads expressed that they had parallels in their own life, and their emotional connection to Jack's experiences of loss and grief grew. As Jack began to have shifts in his relationships at home, friendships began to bloom at school, and he soon had a close group of friends whom he felt safe to express his true self to.

Alongside this clinical work, Jack's care coordinator worked closely with a team of professionals including a social worker, Court Appointed Special Advocate (CASA), public health nurse, lawyer, and gender clinic clinician to identify supportive structures for him. This has included an appropriate school placement to provide the most opportunities and resources, summer camps for trans youth and their families, transportation resources and a crisis safety plan. In the family's year with Wraparound FSP services, Jack and his dads have become committed to moving forward with the adoption process and have built a foundation to tackle challenges together. When Jack is feeling overwhelmed, rather than hide away or criticize, he's now able to talk about his concerns with his dads, and they are able to listen and come up with solutions as a family.

*Name has been changed to protect privacy.



Our Staff

BHRS strives to provide culturally responsive services and employees mental health clinicians, psychiatrists, alcohol and drug counselors, peers with lived experience, family partners and other professionals through county clinics, contracts with community agencies and a network of private providers.

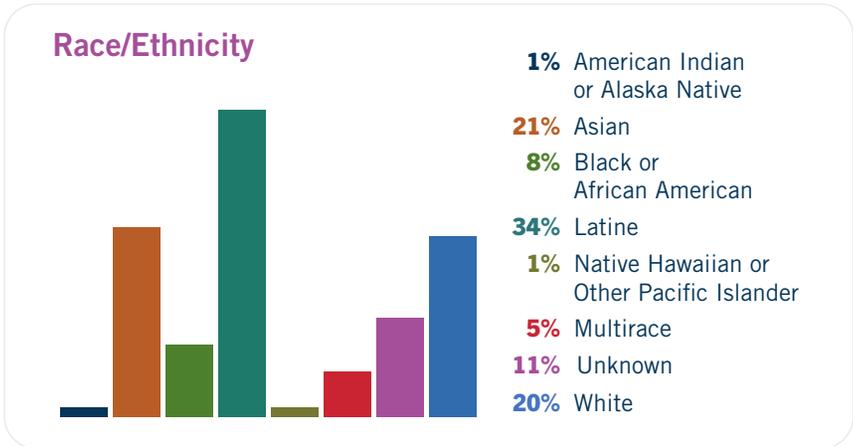
518
employees

73%
of BHRS staff are in a client facing role

57%
of BHRS staff have been with the County of San Mateo for at least five years

69%
of BHRS employees report either high or relatively high levels of contribution and satisfaction

93%
of BHRS employees agree that they've been exposed to learning opportunities related to social and racial equity





New Hire Welcome

Early onboarding and orientation allows employees to build connections early on with colleagues and immerse themselves in BHRS and County culture, values and policies. In FY 24-25, BHRS developed and began to offer a quarterly New Hire Welcome to all new employees. By engaging with colleagues and BHRS leaders in the New Hire Welcome, new employees develop an initial support network to be built on over time, which supports long-term staff engagement and resilience.

41

new employees completed the New Hire Welcome in FY 24-25

Looking Forward

This year, BHRS kicked off an exciting new chapter with what we're calling our transformation journey, a strategic vision aimed at reshaping the way we provide care across our behavioral health system. Over the past several years, BHRS has been responding to a series of legislative and policy initiatives that are reshaping how we serve our community. These initiatives reinforce and bring to the forefront our responsibility as a Behavioral Health Plan for providing or arranging Specialty Mental Health Services (SMHS) and Drug Medi-Cal services to Medi-Cal beneficiaries within our county.

Initiatives driving this transformation journey include:



BH-CONNECT

A newly approved initiative expanding access and quality of services for Medi-Cal members, with a focus on workforce development and community-based care.



California Advancing and Innovating Medi-Cal (CalAIM)

A multi-year initiative to drive delivery system transformation, improve quality outcomes, and support whole-person integrated care for Medi-Cal members.



Proposition 36, Senate Bill No. 43 (SB 43)

Expanding definitions and criteria for behavioral health treatment, including updates to involuntary treatment laws to better serve those with severe mental health and substance use disorders.



Children and Youth Behavioral Health Initiative (CYBHI)

A historic investment in the mental health and well-being of children and youth, emphasizing school-based services and early intervention.



Mobile Crisis Services

Behavioral Health Bridge Housing (BHBH)

Behavioral Health Continuum Infrastructure Program (BHCIP)

Expanding crisis response, housing supports, and infrastructure to meet the needs of our most vulnerable communities.



Proposition 1 Behavioral Health Services Act

Brought together a vision for behavioral health transformation across the state. This landmark initiative reforms funding from the millionaire's tax, prioritizes services and housing for individuals with the most significant needs, including those experiencing homelessness and substance use disorders.



Amidst the changing behavioral health landscape, our focus remains on equity work and serving the most vulnerable individuals living with substance use and mental health challenges. BHRIS is committed to ensuring that the voices of our workforce, community, clients, families and partners are at the center of our transformation journey.

Call 1(800) 686-0101

Behavioral Health and Recovery Services Access Call Center

Call anytime 24/7 to get help for yourself or a loved one. A trained professional will ask questions to help find the right care for you, and you will receive a referral for a telephone, video or in-person appointment with a mental health or substance use treatment provider.

BHRS services, including the Access Call Center, offer language assistance services other than English.

BHRS serves members of Health Plan of San Mateo (HPSM) Medi-Cal, HealthWorx and Care Advantage members; and Kaiser Medi-Cal. Those without insurance are referred to appropriate community resources.

Call (650) 579-0350

San Mateo County Crisis Line

Call anytime 24/7, for help during a mental health crisis, substance use issue, or thoughts of suicide. The San Mateo County Mobile Crisis Response Team can come to you in person. **If in doubt, please reach out. We're here to help.**



Scan QR code to add the San Mateo County Crisis Line to your contacts so you can get help when you need it.

You can also call or text 988 for the suicide and crisis lifeline. If you or someone are at risk of harming themselves or others, call 911.

