



COUNTY OF SAN MATEO MENTAL HEALTH & SUBSTANCE ABUSE RECOVERY COMMISSION

Unadopted Minutes Wednesday, November 3, 2021 Zoom Meeting

BOARD MEMBERS PRESENT: Sheila Brar, Chris Rasmussen, Frieda Edgette, Jean Perry, Chelsea Bonini, Cherry Leung, Katelyn Chang, Kristina Bell, Don Mattei, Leticia Bido, Randy Torrijos, Michael Lim, Yoko Ng, Hudson Fox, Paul Nichols

STAFF: Scott Gruendl, Chantae Rochester, Doris Estremera, Sylvia Tang, Claudia Saggese

BOARD MEMBERS ABSENT:

Excused:

Un-excused: Jan Wongchuking, Candice Hawley

OTHERS PRESENT (signed in): Carol Goshu, Bruce Adams, Joshua Dorado, Pat Willard, Arturo Selazar, Armaan Arora, Charo Martinez, Clara Jaeckel, Kate Phillips, Pat Way, Susan Cortopassi, Sydney Hoff,

CALL TO ORDER

The meeting was called to order at 3:32 p.m. by Sheila Brar

INTRODUCTIONS

New members were introduced

APPROVAL OF TODAY'S AGENDA

Approval of the Agenda

► **M/S/C** Mattei/Bido

APPROVAL OF MINUTES

Approval of minutes from the October 6, 2021 Mental Health & Substance Abuse Recovery Commission Meeting with the following changes:

1. I would propose the work Recovery in our name. Should read: I would propose the word Recovery in our name.
2. MHSRC, should read: Mental Health Rehabilitation Center (MHRC)
► **M/S/C** Edgette/Rasmussen

Correspondence, Announcements, and Public Comment

STANDING COMMITTEES

A. Committee for Children & Youth

Reported by Chris Rasmussen

Next meeting will be held on November 17, 2021 at 4:00 p.m.

Via Teams

The Children & Youth Committee is looking for a commissioner to chair to the committee. Interested members should contact Chris.

B. Committee for Adults

Reported by Yoko Ng

Next meeting will be held on November 17, 2021 at 10:30 a.m.

Via Teams

C. Committee for Older Adults

Reported by Patricia Way

The next meeting will be held on December 1, 2021, at 10:30 a.m.

Via Teams

D. Mental Health Services Act Steering Committee

Reported by Leticia Bido and Jean Perry

The next meeting will be held on December 2, 2021 at 3:00 p.m.

Via Zoom

Director's Report

Presented by Scott Gruendl, Assistant Director

Scott reviewed articles in the Director's Update.

Please see the [latest issue](#) of the *Director's Update* from Scott Gilman.

Topics include:

- Suicide Prevention Trainings for Community Gatekeepers
- First Women's Residential Detox Program
- New ODE Recognition Series
- Commissioner Retires - Patricia Way
- Congratulations Chauncey Chatman, Housing Hero Award
- New Health Policy Removes Barriers
- COVID-19 Update

Find past issues [here](#).

Old Business

Vote for Slate of Officers

Chair Sheila Brar

Vice Chair Chris Rasmussen

Member at Large Jan Wongchuking

CALBHB/C Cherry Leung

Passed unanimously.

New Business

No new business.

Liaison, Task Force and Ad Hoc Committees

Suicide Prevention Committee

Reported by Yoko Ng

We met Tuesday, November 2, 1:30-3:00

The first part of the meeting was a communication workgroup and mental health emergency response update. The last part of the meeting was a data workshop where we discussed current suicide data and requested additional data.

Our next meeting is Tuesday, December 7, 2021 at 1:30 via zoom.

Public Comment

Randy Torrijos

Supervisor Pine’s office is working with Sylvia to present the Suicide Prevention Roadmap at Board of Supervisors (BOS) Meeting in December. It will be accompanied with some form of resolution focusing on suicide as a health concern.

California Association of Local Behavioral Health Boards and Commissions (CALBHB/C)

Reported by Cherry Leung

We had our quarterly meeting on October 20. Several programs supported by the state were discussed:

- 1. The Behavioral Health Continuum Infrastructure Program
 - a. Provides the Department of Health Care Services funding to invest in mobile crisis infrastructure
 - b. To expand the community continuum of behavioral health treatment resources
 - i. A portion of this funding is available for increase infrastructure targeted at children and youth (25 years and younger)
- 3. Integrated School Based Behavioral Health Partnership Program
 - a. Provides prevention and early intervention for and access to behavioral health services for students
 - b. Allows county behavioral health agencies and local educational agencies to collaborate
- 4. United Parents and Advocates
 - a. Reported on parents and caregivers needs through the parent voice statewide survey

- b. Parents express that want trauma informed training for schools
- c. Better communication between schools and mental health providers
- d. Accessibility of behavioral health services for every child
 - i. Enough children's mental health facilities and clinicians
 - ii. Increase support groups

You can find more information at the CALBHB/C website <https://www.calbhbc.org/>. The next presentation will be Moving Toward an Effective Behavioral Health Crisis Care Continuum, addressing resources and gaps on November 5, 2021 10-11:30 a.m.

Public Comment

Jean Perry

I want to point out to our newer members that the CALBHB/C website is an excellent source of information. They have recordings of trainings and things that relate to almost every subject that we're dealing with, so look around the website.

Pat Willard

I want to read a tweet from Santa Clara County, the trustee response urgent support team, as a community driven mobile response team that we use community residents, mental health workers and emergency medical services providers to respond to the needs and crisis in the community, without involvement of law enforcement. Had the four cities programs that currently exists sought community input instead they received no public input. The City of Alameda County recently devised a program that would partner with the fire department EMS and mental health professionals, such as those that exist around San Mateo County. Had the four cities provided an opportunity for public comment, this group of police chiefs would have heard that the committee much prefers fire department involvement as opposed to law enforcement involved. Mental health crisis response, where the subject to the call is not a danger to themselves or others.

Community Wellness & Crisis Response Committee

Reported by Chris Rasmussen

A draft proposal was sent to all members, I will give an overview. Our commission set a priority to advocate more for right sizing of law enforcement, mental health employees call for service. Realizing that police are overburdened and, in some cases, not right response, we understood the County has very good services, but they are not fully integrated into the 911 system to be able to respond to mental health calls for service.

- We attempted to be part of the Community Partnership Program (we are happy to report that we will be part of the committee)
- Decided our efforts were better spent to outreach to clients of San Mateo County
- We came up with a recommendation to the Board of Supervisors based on talking to clients and hearing public comments and researching alternative models across the county, the recommendations are:
 - Review and update dispatch protocols to reflect complicated mental health concerns and add mental health to the 911 answering protocol
 - Embed a licensed clinician directly into the dispatch center to triage mental health calls for service
 - Create a standalone unit designed to independently operate mobile crisis response teams to serve the entire county

Public Comment

Chelsea Bonini

I think the plan is good in terms of integrating through dispatch, however; I don't sense within the recommendations enough of a response that would be non-police oriented. I raise the question whether the group looked at different response models. Whether it's using other first responders or using community members. I don't feel comfortable with the police response integrated under Psychiatric Emergency Response Team (PERT). I do not believe that mental health calls need to have armed people there, I don't think that police are the right responders. I think we must think outside box on this. Have these things been considered? and did we arrive at this because this is where we think we are? On this I'm unable to move it to the BOS or is there more discussion that could be had because I think there's maybe some room for more discussion.

A: Yes, we have looked at every single model out there, there's not one that fits everything. The biggest thing, when we were talking with Scott Gilman, is that there's a menu of services that we provide (the county), we have adequate crisis services. The findings are that we're not integrated into the 911 system. When a call comes into 911, you get either a police response, a fire response or you get an ambulance, that's it. It's up the law enforcement officers or the fire department to go that extra step to contact mental health services so integrating mental health services into the 911 system, having a dispatcher embedded into or a clinician embedded into the dispatch center is very out of the box. There aren't many agencies that are doing that and having a stand-alone crisis unit is exactly what that is. We could have a little deeper dive into it once we have a crisis unit established, we could have the experience, volunteer people, peer support, we can have all that wrapped into that crisis team. A standalone crisis unit that can respond 24/7.

Chelsea Bonini

I don't see all of that in the document. I don't see enough, and it's housed under PERT it feels like that's not enough of a distancing.

Jean Perry

My comment has to do with infrastructure. We are talking about there isn't even a chair for the mental health person to sit at this point, so we need to have rethinking. The physical layout of our dispatch centers to allow this to happen, another way in which infrastructure is needed to make this sort of thing happen is to look at the kind of places where people may need to go if they are having a crisis, one resolution is that they will be responded to by a team that can deescalate and connect them in a reliable way to next day services or whatever it is they need. What they don't need is to be incarcerated, they don't need to be hospitalized, but there are a lot of other services like Scott was talking about a menu of services that could be accessed by anyone in the county. I think that's a major problem with our county that even when these services exists, actually being able to connect people with them with all the different jurisdictions, the law enforcement team may not even know that there is something like First Chance or Serenity House or a lot of options on that spectrum for what people need and what their families need when they're experiencing crisis so this I don't think is meant to be exhaustive, but I think it would make us think while we have this infrastructure money on the rise, and what should we try to build in. My last point is we need to be so important to learn from these four pilots' cities, this is going to give us information to help us sort out from all those dozens of different models that exist, what seems to be a workable thing for our population, the people of San Mateo County because right now it's a hodgepodge of what people need but even more of

a hodgepodge of how they can get connected to service. It is important that we get the important ingredients out there, so they are under discussion, and so the family in Half Moon Bay is going to get the same access to the same needed services as the family in Daly City or San Mateo.

Randy Torrijos

This would not be a recommendation that would go to the Board of Supervisors for a vote. This would be the approval of the commission for the Ad/Hoc Committee to approach the supervisors individually and hopefully the County Manager to present these ideas and have separate discussions with them. A meeting with Supervisor Pine will happen but I can't speak to the other Supervisors or the County Manager. I will do my best to help the Ad/Hoc Committee members set up these meetings.

Don Mattei

I think it is one of the better documents I have seen in years, it puts a lot of stuff together. I agree with the single point of contact and that's dispatch and a lot of those calls to be triaged at that level and there may not be a response with an officer because it has been sent to a professional person who is going to respond. I think the clarification by having a professional person speaking to the call or the 911 person is very important. Another thing is that the services are typically not open 24/7 or on the weekends. By having the professional at the dispatch center, I think a lot of changes could happen, and a lot of calls can be diverted in different ways. I do believe this is a good document to engage the Supervisors and to see what we can do to change the system.

Clara Jaeckel

I am member of the Redwood City Police Advisory Committee but I'm not speaking for the committee I'm just making this comment as an individual resident of San Mateo County. I strongly support the recommendations to update the dispatch processes to handle mental health calls for service most appropriately as described. I also support the recommendation for a standalone crisis unit but echoing some of what was said in the previous discussion, I believe it's important to have a mental health crisis response resource that is not tied to law enforcement. This is key for the safest outcomes for the person in crisis, so I would urge you as much as possible too when speaking to the supervisors to advocate keeping this an independent unit and not how it is under PERT, which is to the Sheriff's Office, we really need a crisis response team that is unarmed and independent from the Sheriff's.

Pat Willard

I didn't hear input on this before going to the Board of Supervisors. I want to read you a list of participants that were involved in the creation of the San Clara County Trust Program that Be

- The cultural community's wellness program
- Criminal justice
- National Alliance of Mental Illness
- Silicon Valley Debug
- Stanford Center for youth with mental health

As well as meetings with:

- African American Community
- Chinese Community
- Filipino Community

- Spanish Speaking community stakeholders
- North County/Santa Clara County Transitional Aged Youth

All those focus groups were involved in providing input defining the Santa Clara County Trust Program.

Chris Rasmussen

We can make that more pronounced. That was the whole idea of this. Scott Gruendl wrote something, PERT is one program within the crisis unit response for BHRS and like I was alluding to there's a whole menu of services. Having it under that roof doesn't necessarily mean it is the PERT program and that deputies will be going out; it is under that roof of supervision. If it is housed there, it could be a standalone unit, separate from the law enforcement, because the supervisor has supervision over several units, not just the program. It could be housed under that umbrella of crisis services and not be attached to the PERT program.

Leticia Bido

I want to confirm that we could take out the either and just propose it, as only.

Presentation

Patricia Way, Thank You!

Presented by MHSARC

Patricia ay took the loyalty Oath as a Commission on November 15, 2015 and served as a family member on the Mental Health and Substance Abuse Recover Commission until the end of her second term on September 30, 2021. During that time, she volunteered on various committees. Pat served as Chair of the Older Adult Committee, Chair of the full Commission, and Co-Vice Chair of the full Commission. She served during the leadership of previous BHRS Directors Steve Kaplan and David Young, and the current director, Scott Gilman. Pat has always believed in the importance and power of the family members and consumers with lived experience in guiding the Commission.

Well Wishes & Thank You

Carol Gosho, President, NAMI San Mateo

Pat and I go back over 20 years. We went through the support group training together in Santa Rosa, she and her husband Steve helped me get NAMI back on its feet financially by getting Margaret Taylor to host her retirement dinner as a fundraiser for NAMI San Mateo County. We both served as Co-President. Pat ran the NAMI office for a while when we only had a part time office manager. And there was one point where we, for some reason, we're going around photographing all the motels in the county. I think to show what needed fixing and what the status of these motels were and at one point we were almost attached by someone who thought we were invading their privacy. We host a Thanksgiving annual pie event, unfortunately, we had to cancel it last year and this year, but Pat is famous for her pecan pie. Hopefully next year we will resume that function and you all, will have to show up for her pecan pie. Pat, thank you so much for all the service that you have given to this county and to the families and our love ones and, as you know, as a parent your work is never done so, you may be retiring, but we will be calling on you, for help, thank you.

Scott Gruendl

On behalf of the division of Behavioral Health and Recovery Services I like to genuinely, thank you for your service to both us and our communities that we serve. Because you've

done it in such a stoic way, you achieved this status of respect both with the professional community and the community we serve, you really are a go to person and a leader when it comes to the work that we do. What you didn't see in the Directors Update in the article about Pat was that she provided us with direction to the Commission as to what they should do once she is gone and somehow, I have feeling you're probably going to want to share that yourself. It is nice to have people involved in the process that are here day in and day out and you've been involved in so many other efforts that have made a difference in this community for the folks that we work for every day to make their lives better and help them recover and manager their conditions, and so we are eternally grateful for the time that you've committed and personally I really do appreciate you as not as just a Commission member but I've always appreciated talking to you when you into our office or I've had an opportunity to fill in for the director and you definitely will be missed. Thank you!

Pat Way

I want to say what a great job Chris with the draft recommendation from the ad/hoc committee that is co-chaired by Sheila and Chris. That was a robust committee, I was part of it for a quite a while, and I think you're right on target with your draft for the Board of Supervisors. When you finally get it approved and send it to the BOS remember to respectfully as for a reply as soon as possible. Families, consumers, and the mental health professionals need to know what's going to happen to people in crisis, they are loved ones, they are sons and daughters, husbands, and wives. Mental health crisis must happen 24/7. Other things to keep an eye on:

- The rebuild of Cordilleras
- San Mateo Medical Center 3AB
- Housing continuum
- Improve/expand on the work at Serenity House

You are such a great group of people, and I thoroughly enjoyed working with you.

Michael Lim

Pat, you've always been a voice of reason and, most importantly, the voice of wisdom. From your list it doesn't sound like you'd be far off from your retirement. I just want to give you a heads up that I know how to get hold of you and I will find you. Thanks for all your service, especially with your list. I will endeavor to aspire to follow in your footsteps and you have left us huge shoes to fill.

Don Mattei

I've known Pat for quite some time, she's always been a tireless person who's helped me and with a lot of projects with CIT, smart field crisis community engagement. She was instrumental in a lot of things, one of the things I admire about her most is that she never, never ever gave up on improving the system, and I just wanted to thank you for the help you gave me. Thank you, you will be missed.

Sheila Brar

Thank you, Pat, for all you've done. It's a very wide sentiment of how impactful your voice and advocacy have been, and you've made the lives for people who are living with mental health issues in San Mateo County better, so thank you for everything.

Meeting Adjourned: The meeting was adjourned at 5:10 p.m. by Sheila Brar

Next MHSARC Meeting: December 1, 2021 from **3:30-5:00 p.m.**
Virtual Meeting

Next Executive Committee Meeting: Wednesday, December 14, 2021 at 12:00 p.m.
Virtual Meeting

PLEASE BE SURE TO CONTACT CHANTAE ROCHESTER AT 650.573.2544 IF YOU ARE UNABLE TO ATTEND EITHER THE MHSARC 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.