



Behavioral Health and Recovery Services (BHRS) Cultural Competence Strategy Updates (FY19-20)

[Updates based on the last San Mateo County Cultural Competence Plan 2018-2019 \(please refer to plan for additional detailed activities that are continuing\)](#)

Goal	Activities/Focus	YEAR NINE (2018-2019)	YEAR TEN (2019-2020)
Systematic Collection of Baseline Data, Tracking and Assessment Provide the mechanisms and processes used for the systematic collection of baseline data, on-going info about groups served. (Criterion 3)	Office of Diversity & Diversity (ODE) Indicators, Demographic Data and Satisfaction Surveys Institutionalize local data review as a practice (plan for demographic changes by region/clinic) Improve data gathering (e.g. unknown or unreported ethnicity)	As the County's population continues to shift, the racial and ethnic composition continues to grow in diversity. Race and Hispanic Origin data shows White alone, who are not Hispanic or Latino, holding the largest percentage of County residents as of the July 1, 2016, U.S. Census estimate, with 39.8 percent, a decrease of 2.5 percent since April 1, 2010. Asian alone is the second largest racial subpopulation, with 28.9 percent, an increase of 4.1 percent since 2010. Hispanic or Latino numbers follow closely, with 24.8 percent, a decrease of .6 percent since 2010. Black or African American alone remained stable at 2.8 percent. Native Hawaiian and Other Pacific Islander alone grew to 1.6%, up .2 percent since 2010, and American Indian and Alaska Native alone grew to .8 percent, up .2 percent since 2010.	This fiscal year BHRS began looking closely at SMC data to understand demographics and the impact of COVID-19 in an effort to reduce disparities and provide appropriate resources. In addition, the demographic collection form was updated for HEI and ODE community events, this form has also been shared with our community-based partners and other organizations to utilize. The demographic form has also been translated into threshold languages. ODE with the support of a contracted provider developed and distributed survey to understand mental health and substance use disorder needs specific to San Mateo County. In addition, regular meetings began with individuals with substance use disorders to better understand the needs. ODE's continued collaboration with GARE has also supported the creation of SMART goals that include metrics to meet the needs of specific demographic groups within San Mateo County. Additionally, the LGBTQ collaborative resumed monthly meetings to identify needs of this community, and then transitioned to COVID response. This prompted the creation of a community survey that will be implemented in FY 20-21. Data on specific to ODE indicators will be gathered and analyzed in 2021.
	Review contract agencies' Cultural Competence (CC) Plans annually and provide feedback and recommendations	Twenty-two (22) Cultural Competence (CC) Plans received. ODE Cultural and Linguistic Standards Team reviewed CC Plans with AOD and provided feedback and recommendations to agencies based on a rubric.	Nineteen (19) Cultural Competence (CC) Plans received. ODE Cultural and Linguistic Standards Team reviewed CC Plans with AOD and provided feedback and recommendations to agencies based on a rubric. This year a reporting template was developed and implemented to assist with data reporting. In addition, ODE met with contract analysts, managers, Contractor's Association and individual agencies to understand current challenges and successes. To better connect with contractors on a monthly basis, a standing agenda item has been created at our Diversity & Equity Council (DEC) monthly meetings to discuss CC plans and dedicated time will be added quarterly to discuss specific standards. BHRS is also looking for ways to connect contractor's CC plan in other processes, such as RFP reviews, in order to better inform and understand each organization's efforts around CLAS.

<p>Workforce Development & Transformation Expand on Workforce Development and transformation that prioritizes cultural humility, inclusion and equitable quality care. (Criterion 5 & 6)</p>	<p>Multicultural Organizational Development (MCOD) is an organizational change framework focused on building BHRS capacity to advance equity, diversity and inclusion principles in the workplace.</p>	<p>During this fiscal year BHRS updated the MCOA action plan with measurable outcomes and timelines, this was supported by ODE staff and an outside consultant. BHRS leadership held focus groups to further define specific tasks and activities included in the plan. An MCOA tour began April 2019 to introduce all BHRS staff to the updated action plan which details specific action steps towards increasing a diverse workforce; such as tracking demographic data, at all levels of the organization. A poll was implemented to understand the current climate and sentiment about the organization among staff and serve as a baseline metric.</p>	<p>In addition to providing updates to BHRS executive team, this year MCOA became a standing agenda item at all leadership monthly meetings. Here, BHRS supervisors and managers are provided MCOA information and/or updates on progress. This fiscal year work began on establishing subcommittees to work on each goal of the MCOA action plan, surveys were conducted to gauge staff areas of interest.</p>
	<p>Understanding Cultural Humility All BHRS staff are required to complete Cultural Humility 101 as per our recent Policy 18-01: Cultural Humility, Equity and Inclusion Framework, established in February 2018.</p>	<p>In FY 18-19, 11 trainings were provided, 162 BHRS staff received Cultural Humility 101, Cultural Humility for Non-Clinical Staff -Building Bridges to Diversity & Inclusion, Culturally Responsive Clinical Supervision</p>	<p>To date BHRS has offered 27 foundational Cultural Humility courses from a variety of trainers including Dr. Melanie Tervalon and BHRS Staff and Partners who participate as part of the training cohort. Currently, there are 507 active BHRS Staff in LMS. As of June 26th, 2020, 176 BHRS staff or 34% had taken a foundational Cultural Humility course. This number does not include BHRS Staff who may have taken Cultural Humility related course (e.g. Becoming Visible: Using Cultural Humility in Asking SOGI questions). There are some barriers impacting this ongoing goal. Due to the content, the course is offered primarily in person and the course is limited to 40 people. For this fiscal year, the Shelter-in-place related to the COVID-19 pandemic severely impacted the delivery of this course. Due to the content of the course, it has not been offered virtually, the cohort began planning the development of a virtual option for the upcoming fiscal year. Additionally, the number of Cultural Humility Cohort trainers has greatly diminished due to BHRS turnover. Another strategy to address limited staff has been to contract out the facilitation of the SOGI training to community-based organizations.</p>

	<p>BHRS staff who have direct client contact are required to complete the Working Effectively with Interpreters in the Behavioral Health Setting training upon hire and complete a refresher every 3 years.</p>	<p>This fiscal year 2 sessions of our <i>Working Effectively with Interpreters in a Behavioral Health Setting</i> training were offered in October 2018 and April 2019 (33 total participants). Planning began for an update of the training videos, a project to adequately reflect interpretation challenges and successes in the behavioral health setting. To gather real life examples from BHRS providers, a survey and interviews were conducted. In addition, ODE began working with SMC Health Communications to secure videographer and began the creation of possible scripts/scenarios.</p>	<p>This fiscal year 2 sessions of our Working Effectively with Interpreters in a Behavioral Health Setting training were offered on November 2019 and April 2020 (173 total participants). BHRS in San Mateo County is the first department nationwide to create training videos on the effective use of interpreters in the behavioral health setting. This effort was led by ODE as a necessary resource to abide by the Culturally and Linguistically Appropriate services standard. The actors in the production were BHRS staff and providers. The videos provide examples on using an interpreter effectively, ineffectively as well as common challenges a provider may face when using an interpreter. Interpretation services are a resource that when used appropriately, can make a huge difference in the experience someone has with BHRS as well as their willingness to continue with services, build trust, and recommend our services. During FY 19-20 BHRS had a total of 75 new hires. Forty-eight (48) of the new hires are still active and 60% (26) have taken at least one of the Working with Interpreters in Behavioral Health Settings training that were available during this fiscal year. Nineteen (19) of the new hires who are still active and were eligible to take one of the sessions offered this fiscal year have not taken it. Ninety (90) percent of existing staff who have taken the course in 2017 or before having taken either a refresher course or an in-person course.</p> <p>There are some barriers impacting this ongoing goal. Staff are hired over the course of the fiscal year. The course has been offered, primarily, in-person. However, the largest attendance was during the Shelter-in-place related to the COVID-19 pandemic when the session offered in April 2020 was converted into a virtual training. However, some staff have had difficulty attending with a full caseload. The BHRS New Hire Orientation (provided by the Workforce Education and Training (WET) Team is only offered once a year due to its labor-intensive organization (3 Sessions) and insufficient staffing. However, changes have been implemented during this fiscal year. Specifically, the training was assigned via the BHRS LMS and the session was virtual.</p>
	<p>How to be an Effective Interpreter</p>	<p>This fiscal year presentation was provided to BHRS teams on appropriate provider/client language matching and language access services to better serve our limited English proficient (LEP) community members. ODE was also part of the panel to choose our new interpretation providers (in-person, telephonic etc.) for San Mateo County Health, through the panel we were able to ensure the provider maintained appropriate training and staff in regard to providing services in a health care setting. Additionally, ODE is working directly with contracted provider to immediately be informed of any challenges and/or grievances.</p>	<p>This fiscal year BHRS leadership received updates on provider/client language matching and language access services. Another strategy to support our limited English proficient (LEP) clients has been for ODE to provide one on one education and tech support to BHRS providers and teams, in transitioning from in-person to video remote interpretation (VRI) services. While also creating a close relationship with our interpretation providers to continue to improve language access service provision and immediately respond to any challenges and/or grievances that are reported.</p>
<p>Community Empowerment - Create opportunities for individuals with lived experience, families and community members to engage in decisions that</p>	<p>The Parent Project® is a free, 12-week course for anyone who cares for a child or adolescent. The classes meet for three hours each week. Parents learn parenting skills and get information about resources and other support available in their communities.</p>	<p>This year, the program reached a total of 1,000 graduates since the program began. From 2010 to June 2019, we have had 1411 parents attend at least 1 Parent Project® class. Of those 1411 parents, 1087 graduated from completed courses giving us a graduation rate of 77%.</p>	<p>From 2010 to June 2020, we have had approximately 1532 parents attend at least 1 Parent Project® class. Of those 1532 parents, 1187 graduated from completed courses giving us an approximate graduation rate of 77%. Currently the Parent Project is provided by three contracted agencies that are supported by and report to ODE on program data and activities. This year adaptations were made to provide the course on-line, as well as, support participants and their families with resources and behavioral health supports related to the COVID-19 pandemic.</p>

<p>Impact their lives (Criterion 4)</p>	<p>Health Ambassador Program (HAP) was developed as a response to feedback from the graduates of the Parent Project© who wanted to continue learning about how to appropriately respond to behavioral health issues and get involved within their communities and the broader BHRS decision-making processes.</p>	<p>The program experienced a year and a half pause in activities due to ODE staff turnover and lack of program coordinator. In February 2019 a reunion event was held to reconnect with ambassadors (27) and restart participation. This included connecting ambassadors to mental health and substance use services and collaboration with AOD on understanding social determinants of health and drug use. Ambassadors had the opportunity to attend the California Mental Health Advocates for Children and Youth Conference and participate in the first Wellness Recovery Action Plan (WRAP) provided in Spanish (a collaboration with our BHRS Office of Consumer and Family Affairs). As a result, ambassadors were prepared and began to provide community outreach within existing parent groups to discuss BHRS needs and services.</p>	<p>This year the HAP program had the opportunity to continue to build their capacity through activities such as: NAMI Basics training, ASIST (Applied Suicide Intervention Skills Training), Stigma-Free course, and Lived Experience Academy (LEA). Some of the successes for the group included HAP participation in public speaking events, such as MHSA input sessions, and hosting a Mental Health Awareness event in collaboration with the Latino Collaborative-HAP Zoom Webinar 2020 “Familia y Bienestar Durante COVID-19” (Family & Wellness during COVID-19). During the pandemic health ambassadors met weekly to provide additional support to the community, and this led to six warm-hand offs that connected youth and/or adults to behavioral health services. This fiscal year, 24 new community members graduated from the Health Ambassador Program, bringing the total number of ambassadors to 51.</p>
	<p>The Health Ambassador Program-Youth (HAP-Y)</p>	<p>HAP-Y was an Innovation (INN) program under the Mental Health Services Act (MHSA). San Mateo County Behavioral Health Recovery Services (BHRS) funded HAPY. StarVista, a nonprofit mental health organization based in San Mateo County, administered the program. HAP-Y engaged, trained, and empowered TAY as youth ambassadors to promote awareness of mental health, educate their peers about mental health resources, and increase the likelihood that young people in San Mateo County are knowledgeable and comfortable enough to seek out mental health services. Each cohort of youth ambassadors underwent a 14-week psychoeducational training program designed to enhance their knowledge of mental health, communicative best practices, and advocacy skills. Following the training program, the ambassadors engaged in outreach and peer education activities in school- and community-based venues.</p>	<p>HAP-Y engaged nearly 100 youth ambassadors (n=98) over the course of the multiyear program (2016-2020) of the 98 youth who completed a demographic survey and attended an initial training session, 89 went on to complete the full course of HAP-Y training and 69 completed at least one presentation. In total, 229 presentations were conducted and over 3,888 audience members were reached. San Mateo County BHRS presented interim HAP-Y outcomes to stakeholders, the MHSA Steering Committee, and the MHSARC in 2019. During this meeting, BHRS provided an update on progress toward program learning goals, client outcomes, and a proposed sustainability plan. The sustainability plan included a request of \$250,000 ongoing MHSA funds, beginning in FY 2020-21. BHRS is currently working with StarVista to ensure funding and the continuation of the program.</p>

	<p>Storytelling Program emphasizes the use of personal stories as a means to draw communal attention to mental health and wellness. While reducing stigma and broadening the definition of recovery, workshops consider social factors such as racism, discrimination, and poverty.</p>	<p>Fiscal year 18-19 was filled with many accomplishments for the Storytelling program. The Storytelling program trained 42 more facilitators to host workshops on the topics of: immigration, incarceration, and youth mental health. Further, the first ever mental health graphic novel was created, and the process was led by a Behavioral Health and Recovery Services consumer! The Graphic Novel was presented at a SMC Board of Supervisors meeting and the entire project was housed for display at the BOS County Offices. There were also significantly positive outcomes on participant self-efficacy. Participants continue to report positive feedback on the storytelling program and continue to report growth through the pre- and post-program questionnaires. Feedback included:</p> <ul style="list-style-type: none"> • “I feel people with mental illness are persons of worth, at least on an equal basis.”: Strongly agree increased from 77% to 91%. • “I see people with mental illness as capable people.”: Strongly agree increased from 69% to 86%, for an increase of 17%.¹ • “People with mental illness are able to do things as well as other people.”: Strongly agree, increased from 69% to 82%.¹ • “I’m kind to myself when I’m experiencing suffering.” Agree to Strongly Agree increased from 33% to 70% • “When I’m going through a very hard time, I give myself the caring and tenderness I need.” Agree to Strongly Agree increased from 25% to 73%² • “I’m tolerant of my own flaws and inadequacies.” Agree to Strongly Agree increased from 34% to 74%² • “I try to be loving towards myself when I’m feeling emotional pain.” Agree to Strongly Agree increased from 38% to 87%.² 	<p>In response to staffing shortage, this program is currently on hold and projected to be contracted out. Restructure in process.</p>
	<p>MHSA Community Program Planning (CPP) Process engages in ongoing community input opportunities. MHSA CPP includes training, outreach and involvement in planning activities, implementation, evaluation and decisions, of clients and family members, broad-based providers of social services, veterans, alcohol and other drugs, healthcare and other interests.</p>	<p>The Coastside needs assessment via the Mental Health Services Act 3-year planning process identified a need for mental health and substance use services. Existing and new partnerships were leveraged including faith-based groups, residential apartment complexes, non-profit organizations, schools, as well as community events to hear the needs of the community. This needs assessment was unique because it was developed through collaboration with community and county partners, and took a strength-based, community centered approach to the creation of new services for this area. Over 200 community members were heard and using this qualitative and quantitative data a</p>	<p>As a result of Coastside needs assessment, a request for proposal was written and the Cariño Project via ALAS was inaugurated in August 2020. The program will provide culturally centered community based mental health and substance use services including peer support groups, art, capacity building, and linkages to behavioral health services for marginalized communities.</p>

	<p>Grievance Process Office of Consumer and Family Affairs (OCFA) staff help resolve concerns or problems about individual rights relating to BHRS services received, including filing a grievance about services received from BHRS or providers. The grievance process considers all unique situations and circumstances, while listening with empathy, compassion and respect for clients' personal history and cultural values.</p>	<p>In FY 18-19 San Mateo County BHRS received a total of 94 grievances.:</p> <ul style="list-style-type: none"> • 83 for Mental Health services and 11 for AOD services. • 72% of grievances were about quality of care. • Average Resolution: 26.6 days: Shortest: 3. Longest: 90 • Insurance: HPSM 21, Medi-Medi 4, Medi-Cal 68, Unknown 1 • Age: Average: 44, Youngest: 1, Oldest: 80 • Conducted in: English: 88, in Spanish: 6 	<p>In FY 19-20 San Mateo County BHRS received a total of 73 grievances, a 22% decrease from the previous year.:</p> <ul style="list-style-type: none"> • 63 for Mental Health services and 10 for AOD services. • 59% of grievances were about quality of care. • Average Resolution: 24.9 days Past deadline: 1, with 126 days to completion. • Age: 10 to 79 y.o, Average: 40.9 • English: 70 Spanish: 3 • Insurance: HPSM: 23 Medi-Cal: 48 Medicare: 1 None: 1 • MHSA Programs: 21 Favorable: 48, Partially Favorable: 22, Not Favorable: 3 <p>BHRS attributes the decrease in grievances due to the COVID-19 pandemic. BHRS will continue to investigate this decrease in grievances in order to more clearly understand current data. ODE will continue to support OCFA in addressing any cultural competency grievances and responding promptly. Additionally, this process will include reviews of any identified system changes.</p>
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<p>Strategic Partnerships Strengthen and create new meaningful partnerships in the community to maximize reach and impact on equitable behavioral health outcomes. (Criterion 8)</p>	<p>Health Equity Initiatives (HEIs) were created to address access and quality of care issues among underserved, unserved, and inappropriately served communities. There are eight HEIs representing specific ethnic and cultural communities that have been historically underserved: African American Community Initiative; Chinese Health Initiative; Filipino Mental Health Initiative; Latino Collaborative; Native American Initiative; Pacific Islander Initiative; PRIDE Initiative; and the Spirituality Initiative.</p>	<p>HEI collaborations: On August 2018 a community event was put together by San Mateo County Health Equity Initiatives to show solidarity with social justice issues affecting our communities. Including the separation of families at the border. The purpose is to provide a space and opportunity for community healing, inspirational messages, and acknowledgement of trauma. To encourage community trust and showcase cultural diversity within San Mateo County.</p> <p>African American Community Initiative (AACI)- participated in and/or hosted the following activities: Black History Month Celebration Intergeneration Dinner: Black Queer Pride (collaboration with Pride Center) Hosted Origins of African American Health Disparities provider training led by Leanna Lewis Hosted Unconscious Bias and Black Mental Health: Implications for the Mental Health of African American Communities provider training led by Leanna Lewis 5 tabling opportunities 2 church-based psycho-education presentations</p> <p>Chinese Health Initiative (CHI)-members completed the following activities: North County Outreach Collaborative outreach worker position operational 6 tabling events AANHPI Proclamation at Board of Supervisors (collaboration with FMHI and PII) Peer support group at Mills High School (CSIP project)</p> <p>Filipino Mental Health Initiative (FMHI)-participated and/or hosted the following events and activities: Created TRIBE Advisory group to work on KultureArts community center development Hosted 3 events, co-hosted 2 additional events Hosted 3 provider trainings Tabled at 4 events Hosted 2 community psycho-education trainings Led 1 communication campaign</p>	<p>HEI collaborations: -Community Town Hall 5/1/2020: COVID-19 & Race: to share county efforts underway to address equity issues, hear our community voices about out the impact of COVID-19 and necessary resources. -Creating culturally appropriate PSA's on COVID-19, Race & Mental Health. -Each HEI meeting is focused on racial equity efforts at their monthly meetings. -All HEIs participated in the "Amazing Dialogue" event to onboard and inform incoming BHRS interns in equity work and community outreach. - All HEIs began supporting and have become an integral piece of the recovery plan and response efforts from San Mateo County Manager's office to the pandemic, by providing community input and representation for our marginalized communities. -All HEIs transitioned to virtual monthly meetings and hosting community activities on line beginning March 2020.</p> <p>African American Community Initiative (AACI) Discussed creating space for Black County employees to meet and find support. Working on meeting and/or training to address racism and racial equity. Working to support members & workforce in processing and healing from current and historical trauma. On October 2019 AACI led a dialogue about the African American History of 400 years of inequity and a celebration of Black Fatherhood in collaboration with the Ravenswood Family Health Center in East Palo Alto. In addition, the San Mateo County Board of Supervisors brought forward a resolution acknowledging the 400th anniversary of slavery, with the support of AACI. The City of Daly City also collaborated with AACI to celebrate Black History Month February 2020.</p> <p>Chinese Health Initiative (CHI) Xenophobia post card developed and translated to address community stress during the early months of the COVID-19 pandemic. Also, a Xenophobia virtual 6-week workshop for community members was held with the support of interpreters to also address these experiences. To further respond, CHI supported a resolution denouncing xenophobia and anti-Asian sentiment brought forth in May 2020. CHI worked with BHRS Workforce Education & Training to organize Cultural Competence Training for BHRS providers serving the Chinese community, in order to increase their understanding of and ability to communicate effectively with parents about their children's mental health concerns. CHI also posted racial equity resources & support on their Facebook page. Also, provided support to North County Outreach Collaborative (NCOC) Chinese Outreach worker in ensuring referral phone line is known about & can be accessed by community. CHI also worked to restore Chinese Family Support Group Monthly Youth Leadership meeting at Mills High School to empower & educate youth via pipeline incentives for high school students interested in improving Chinese behavioral health. Other incentives were also developed to increase overall community engagement and increase access to services. For mental health awareness month, CHI also collaborated with FMHI and PII on the creation of a video PSA for Asian communities in San Mateo County.</p>
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In a collaboration with Westmoor High School, FMHI put together a culturally-responsive parent education night geared towards Filipinx families. Also, in collaboration with the Pacific Islander Initiative and CHI, worked on collecting short video submissions from the community highlighting why talking about mental illness is so important & the cultural significance of these discussions. In October 2019, FMHI hosted a digital story telling workshop to encourage Filipinx LGBTQ+ community members to share their stories about mental health challenges and wellness with the goal of having these stories screened at future presentations and community forums. More importantly, in response to the COVID-19 pandemic, FMHI began a series called Kapwa Soul Session to Community. During these sessions, FMHI offered a safe and healing space to connect with new folks and provide them with tools to cope during this difficult time. This has allowed FMHI to attract potential new members, as well as being able to talk about the work they do in community.</p> <p>Latino Collaborative (LC) Speaker series on immigration trauma, environmental wellness, AOD System of Care, & holistic self-care at monthly meetings. Created Q&A for field-based staff regarding ICE interactions with clients and consumers. Held annual ""Sana, Sana"" as a two-part event focused on family separation at the border.</p> <p>Native & Indigenous Peoples Initiative (NIPI) held virtual Medicinal Drumming/healing event, May 22nd, 2020. NIPI provided opening blessings for several other events, such as PRIDE, Day of Prayer, in collaboration with other Health Equity Initiatives. Members of the initiative began discussions and planning on proclamation for the first Indigenous People's Day in San Mateo County.</p> <p>Pacific Islander Initiative (PII) Community outreach efforts to learn about community needs & providing information, monthly meeting discussions focused on how to support racial equity within Pacific Islander community. The initiative worked on printing and distribution of a suicide prevention card with messages specific to the community. The Pacific Islander Initiative also introduced the "Heal & Paint" program, a program designed to create space for the Pacific Islander community to engage in creative arts, connect to culture, and embrace healing. Over a 5-event series, PII held these sessions throughout San Mateo County.</p> <p>PRIDE Initiative (PI) Held Photovoice Workshop in Fall 2019 to encourage LGBTQ+ folks to find creative ways to support their mental health, recovery and overcome systemic barriers. In collaboration with ODE it hosted a 4-day Photovoice workshop to examine: how we cultivate our personal healing processes and find the support that works for us, what barriers we face with receiving mental health and recovery support, and what role community plays in building resilience and fighting against stigma. PRIDE's annual celebration transitioned from a one-day live event to virtual workshops held during Pride Celebration week, the workshops offered were on the topics of racism, sexism, gender expression insensitivity, heterosexism, homophobia, and transphobia.</p> <p>Spirituality Initiative (SI) conducted community outreach this year to assess needs & provide resources. One resource included having the Chinese Health Initiative (CHI) provide a presentation at one of the monthly meetings on the topics of racism and xenophobia. SI also distributed information about Dr. Otis Moss III video on the history of racism against Black communities in America. As a response to the pandemic, SI also supported San Mateo County's Health Officer in engaging over 70+ faith leaders in a COVID-19 webinar on the new County health orders and creating an FAQ in response to faith leaders inquiries and need for support.</p>
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	<p>Diversity and Equity Council (DEC) is made up of BHRS staff, contracted providers, community leaders and members and work to ensure that topics concerning diversity, health disparities, and health equity are reflected in the work of San Mateo County's mental health and substance use services. The formation of the DEC can be traced back to 1998 when staff members formed the state-mandated Cultural Competence Committee</p>	<p>In fiscal year 18-19 4 clinicians have engaged the Diversity & Equity Council (DEC) through the South Asian Workgroup, made up of Health staff from different divisions who tabled together at a South Asian community event (Holi) on 3/17 and reached 35 community members at the event. These clinicians are interested in applying cultural humility in their work and are currently gathering data on service usage and language access disparities related to their communities. The clinicians heard about the DEC through an ODE presentation at a clinical meeting and elected to form their own group associated with the DEC. This indicates that ODE's work and the DEC's work is spreading and that there are additional champions in other parts of County Health.</p> <p>Through the Arab Workgroup's effort, 27 people came together to watch Soufra, a film on healing, at Westmoor High. They learned about the challenge of outreach in communities they're not yet familiar with. The Soufra event had many fewer attendees than expected even though it did get a lot of event RSVPs. 10 attendees had never encountered ODE's work before. 13 attendees reported willingness to take action based on the film, including "volunteer with Arab Work Group," "connect with other Middle Eastern clinicians," and "learn how I can be an ally." 62% of attendees indicated they had experienced stress from living in the Bay Area as a Middle Eastern or Arabic-speaking person. This indicates that this marginalized community likely has a need not yet met by BHRS services. The DEC is continuing to explore the depth and details of this need.</p> <p>Again, through the Arab Workgroup, the DEC took Photovoices made in a FY17-18 CSIP Intern project to community events and sparked conversation about wellness in Arab communities. At least 50 people stopped to look at them and talk more about what they meant with viewers making comments like "I've never seen this for us before" or "This is important" or sharing their own stories of mental illness or thoughts of suicide or losses to suicide with the tablets. The Photovoices were also featured in a Facebook live stream viewed by 300 people during the Westmoor Breakfast on 5/19/19. We believe this is slowly decreasing stigma related to behavioral wellness in the local Arab community.</p>	<p>The Diversity and Equity Council (DEC) is a continuing space for emerging cultural/linguistic communities. During May 2020 the DEC hosted the first Town Hall on Race & COVID-19 to share county efforts underway to address equity issues, hear our community voices about out the impact of COVID-19 in their lives and what was needed at the time. This information was used to identify community priorities and it was shared to inform the County's larger recovery plan. Additionally, the LGBTQ collaborative resumed monthly meetings to identify needs of this community, and then transitioned to COVID response. This prompted the creation of a community survey that will be implemented in FY 20-21. The Town Hall became a series of events overseen by the DEC, planning began for a second and third town halls that took place later in 2020 to continue addressing COVID response. These activities led to additional collaborations with the GARE cohort to create and implement county forums specific to the topics of race and racism within our system. Please see information on GARE reported below.</p>
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	<p>Peer Recovery Collaborative is comprised of peer operated programs focused on education and community outreach to meet individuals where they are in their recovery journey. The collaborative is made up of Heart and Soul, Voices of Recovery and California Clubhouse, they continue to be strong partners working with BHRS and have sponsored the Peer and Family Member Summit.</p>	<p>Continued support for Peer Recovery Collaborative is comprised of peer operated programs focused on education and community outreach to meet individuals where they are in their recovery journey. The collaborative is made up of Heart and Soul, Voices of Recovery and California Clubhouse, they continue to be strong partners working with BHRS. In addition, work began on follow ups to the outcomes of the Peer Summit that took place in FY 17-18. Three subcommittees were identified to work on 1) Identifying common ground 2) Advocacy and 3) Workforce development when providing peer support in San Mateo County</p>	<p>This year ODE supported Voices of Recovery staff by providing a training on serving LGBTQ+ clients. This training worked with staff to address:</p> <ol style="list-style-type: none"> 1) Supporting clinicians in caring for LGBTQ+ community and queer clients. 2) Language around gender identity, sexual orientation and working with youth. 3) COVID-19, virtual meetings and LGBTQ specific considerations. <p>This fiscal year the Peer Recovery Collaborative created a COVID-19 Peer Taskforce (Heart & Soul, CA clubhouse and The Mouton Center and Putnam Clubhouse). The Taskforce began meeting weekly to share response strategies during the ongoing pandemic. In response to the social unrest during the summer of 2020, the collaborative began planning to provide a series on race and white privilege.</p>
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	<p>Anti-Stigma Initiative Suicide Prevention Initiative Co-Occurring Initiative & Mental Health Awareness Month (MHAM)</p>	<p>Suicide Prevention: The Suicide Prevention program aims to coordinate efforts to prevent suicide in the San Mateo County community. The primary program activities and/or interventions provided include:</p> <ol style="list-style-type: none"> 1. Suicide Prevention Committee (SPC): The purpose of the SPC is to provide oversight and direction to suicide prevention efforts in San Mateo County. The SPC meets every month. The target population is a diversity of community partners, suicide survivors and the San Mateo County community at large. For 2018-2019, SPC focused on two projects (1) Suicide Surveillance and (2) Suicide Prevention Month. 2. September Suicide Prevention Month (SPM): The purpose of SPM is to encourage all in the community to learn how all have a role in preventing suicide. The 2018 SPM included a: (1) proclamation, (2) calendar of events, (3) communication campaign, (4) film screening and panel event and (8) other events hosted by community partners. 3. Suicide Prevention Training: Throughout the year, San Mateo County Behavioral Health and Recovery Services provides a variety of suicide prevention trainings, including: <ul style="list-style-type: none"> • Parenting Skills & Family Relationship Programs • Parent Project - Changing Destructive Adolescent Behavior (Adolescent) • Gatekeeper Trainings • Applied Suicide Intervention Skills Training (ASIST) • Mental Health First Aid - Adult and Youth • Question Persuade Refer (QPR) • Reconozca Las Señales (Spanish) • Crisis Intervention Trainings • Crisis Intervention Training <p>MH Stigma and Discrimination Reduction: MHAM 2019: Each year, San Mateo County joins our state and country in celebrating Mental Health Awareness Month (MHAM) in May. MHAM is one of the best times of the year where we can increase awareness and inspire action to reduce stigma against those with mental health and substance use conditions. This year, we partnered with local agencies and libraries from the San Mateo County Libraries and Peninsula Library System to promote over 40 MHAM events (nearly double the amount we hosted last year) free and open to the public throughout the county. This partnership was formed to bring a national and statewide mental health movement to a local and familiar community space – public libraries. Given this partnership, this year’s MHAM theme is “Words of Wellness” in which we will spread the messages of hope, resiliency and inclusion in our libraries and elsewhere in the community.</p>	<p>Suicide Prevention: A new suicide prevention strategic planning process was launched in October 2019 to develop a new San Mateo County Suicide Prevention Roadmap 2020-2025. The effort was led by the San Mateo County’s Suicide Prevention Committee (SPC), a collective of passionate suicide prevention advocates, including behavioral health/social service providers, law enforcement, local crisis hotline, transportation agency, suicide attempt survivors and suicide loss survivors. The new Suicide Prevention Roadmap will be released early 2021. The SPC also developed crisis response cards to support individuals coming to the medical ER with issues relating to COVID-19.</p> <p>MH Stigma and Discrimination Reduction: For the first time hosted Mental Health Awareness Month calendar of events, virtually.</p> <p>A San Mateo County-wide Community Stigma Baseline Survey was launched to assess mental health and substance misuse knowledge, beliefs and behavior. The San Mateo County Behavioral Health & Recovery Services Office of Diversity and Equity commissioned an independent research firm, Strata Research Inc., to implement a baseline survey among San Mateo County residents who were at least 18 years of age. This 15-minute survey was completed by 450 residents in San Mateo County during March 2020. This survey built off of the statewide mental health stigma survey conducted by RAND Corporation.</p> <p>Key findings from the Community Stigma Baseline Survey are listed below.</p> <p>Mental Health</p> <ul style="list-style-type: none"> • One-third of San Mateo County adults (36%) have had a mental health issue. • Among those who have had a mental health issue, almost two-thirds (72%) sought treatment. • San Mateo County adults scored highest on Mental Health Inclusive Behavior across the three domains used to assess overall knowledge, beliefs and behavior, followed closely by Mental Health Knowledge. <p>Substance Misuse</p> <ul style="list-style-type: none"> • One in ten San Mateo County adults (13%) have had a substance misuse issue. • Among those who have had a substance misuse issue, one-half (55%) sought treatment. • San Mateo County adults scored highest on the Substance Misuse Knowledge domain. <p>MHAM 2020: This year, San Mateo County is joining Each Mind Matters, California’s Statewide Mental Health Movement, in promoting the theme Express Yourself for our Mental Health Awareness Month (MHAM) activities. As we celebrate 2020 MHAM, we are focusing on how expressing ourselves in different ways can raise awareness about mental health, break down barriers between people, build our own wellness and strengthen our communities. Due to COVID-19, all of our events were held virtually. This year’s MHAM supported over 23 courses which varied from virtual open mics, paint and dance classes, mental health panels, and more. All events were free and available to the public. MHAM was a collaboration with community-based organizations, clients community members and workforce staff coming together to organize and support all events.</p>
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	<p>Outreach Collaboratives are strong collaborations with local community-based agencies and health and social service providers are essential for cultivating a base of engaged community members.</p>	<p>San Mateo County Behavioral Health and Recovery Services (SMC BHRS) continues to fund the North County Outreach Collaborative (NCOC) and the East Palo Alto Partnership for Mental Health Outreach (EPAPMHO) to provide outreach and engagement activities throughout San Mateo County.</p> <p>For FY 2018-2019, SMC BHRS providers reported a total of 5,417 attendees at all outreach events. Of these, 865 attendees were reached through individual outreach events and 4,552 attendees were reached across 77 group outreach events.</p> <p>On March 28, 2019, San Mateo County Pride Center was approved for a two-year Innovation funding extension by the State of California Mental Health Services Oversight and Accountability Commission (MHSOAC). Thanks to the unanimous support of the MHSOAC Steering Committee, the San Mateo County Board of Supervisors and the MHSOAC, the Pride Center will continue as an innovation pilot program through June 30, 2021. The two-year funding extension will allow the Pride Center to strengthen its collaboration efforts; measure clinical outcomes of clients; and develop a replicable best practice model to share statewide and nationally.</p>	<p>Data on total outreach efforts expected January 2021.</p>
	<p>The Cultural Humility Community of Dialogue Cohort was established in 2017. To seek opportunities for engagement, create visibility for cultural humility trainings and to be resource/toolkit guide for cultural humility trainers.</p>	<p>The Cultural Humility Community of Dialogue Cohort has continued to meet on a monthly basis. This year group planning began to expand number of trainers available and learn if modifications could be made to original training curriculum.</p>	<p>The Cultural Humility Cohort consulted with Dr. Melanie Tervalon, one of the creators of the Cultural Humility curriculum, regarding creating and standardizing a virtual version of the training. This year work began on a training of trainer's curriculum. Currently, several new BHRS staff have been trained in the delivery of the model.</p>

	<p>Community-Informed Culturally Responsive Improvement Process ODE is beginning to develop and pilot a community-informed process for making culturally responsive improvements to our system. It is intending to reinforce the role of the DEC and more meaningfully embed it in a feedback loop with the Quality Improvement Committee (QIC). This exchange of information between the DEC, the QIC, the HEIs and the Director will lead to cultural competence going beyond compliance and towards institutional transformation and continuous quality improvement of services</p>	<p>This year ODE formally created the Community Response Team to assist and immediately respond, in collaboration, to urgent community needs. For example: community interactions with ICE, distributing information on public charge, addressing the closing of a large predominantly Latinx/immigrant, employer in San Mateo County.</p>	<p>Collaboration with PHPP, Bay Area Community Health Advisory Council and StarVista on the Race & COVID-19 Town Halls beginning in Spring 2020, community input sessions to inform San Mateo County's COVID-19 response and long term-recovery.</p> <p>BHRS ODE also has partnered with over 15 agencies to address the issue of digital literacy/divide highlighted by the COVID-19 pandemic. As a way to avoid further disparities in our marginalized communities this effort will proactively develop solutions to mitigate barriers to digital literacy and the resources needed for engagement in health visits and wellness supports. Through the Mental Health Service Act (MHSA) and the Coronavirus Aid, Relief, and Economic Security (CARES) Act, BHRS has secured funding for BHRS Contractors to provide technology supports (devices and data plans), for one year, for clients and family members of clients that would benefit from telehealth and/or other behavioral health services but, do not have the resources to purchase the technology needed.</p>
<p>Policy & Systems Change Influence organizational level policies and institutional changes across San Mateo County agencies to positively impact behavioral health outcomes. (Criterion 7)</p>	<p>Language access services include includes translating materials in threshold languages Spanish, Tagalog, Chinese, a language line for over-the-phone interpretation services and a process for scheduling in-person language interpreters including ASL.</p>	<p>In FY 18-19 BHRS translated a total of 6 documents into threshold languages. One of the translated documents was a community response guide created by the Office of Diversity & Equity (ODE) to address and provide resources for issues impacting our marginalized communities; ICE raids, public charge etc. BHRS staff made 1,312 unique requests for in-person interpretation services in 19 different languages and 991 requests for telephonic interpretation services in 20 languages.</p>	<p>BHRS translated a total of 14 documents in FY 19-20, into threshold languages. Site visits were conducted January in 2020 at BHRS clinics as an assessment of required "You Have a Right to an Interpreter" signage. Information was updated on threshold languages, including the addition of Burmese as an emerging language. One of the documents translated this year was the BHRS new client brochure, to engage all communities and inform of BHRS services. In addition, the Office of Diversity & Equity (ODE) also created and translated COVID response guides on community resources and wellness tips for adult and youth into BHRS staff made 840 unique requests for in-person/video remote interpretation services in 18 different languages and 1,864 requests for telephonic interpretation services in 21 different languages. Of these telephonic requests, over 20% were from our ACCESS Call Center which is a gateway and entry point for community members into BHRS services. This fiscal year BHRS is working on making updates to our current language access policies, there will be submitted and reviewed by our Quality Management team.</p>

	<p>Government Alliance on Race and Equity (GARE) is a national network of government working to achieve racial equity and advance opportunities for all.</p>	<p>Continuation of GARE San Mateo County monthly meetings and collaboration with Health divisions on a County wide Racial Equity Action Plan and racial equity training materials development. This year was the 3rd introductory cohort to complete the GARE training, bringing the total to 21 Health GARE team members. In addition, subcommittees were established to support the components of the action plan.</p>	<p>In August 2019, 80 BHRS managers and supervisors were trained on Racial Equity in a training titled Race, Health and Equity. Throughout Health 268 managers and supervisors have been trained as well as 91% of Health divisions. This training covers the historical context, current health disparities, the levels of racism as well as how important it is to connect with this subject personally, so we can make a difference as public servants and members of our larger community. Overall, the training was received positively, and most staff members cited sharing their own personal experiences with race and racism the most impactful part of the training. Additionally, staff filled out commitment cards for how they would drive racial equity forward in their everyday work. This effort has served to normalize conversations about race and racism within BHRS and has been coupled with the Multi-Cultural Organizational Development (MCO) Plan.</p> <p>As preparation to this training, BHRS staff were invited to view & discuss episodes from the film "RACE: Power of an Illusion." These film screenings were held across the county. BHRS worked closely this year with the Health Executive Council, Public Health Policy & Planning and GARE cohorts to provide a racial equity speaker series to all San Mateo County Health staff. During these sessions staff identified priorities such as:</p> <ul style="list-style-type: none"> Strong County Health Leadership commitment on racial equity. Increased safety for staff to normalize conversations on racial equity. Intentional implementation efforts with resources and accountability. Increased staff time, capacity and resources to engage and advance racial equity. Engage a broad set of staff and partners to advance equity. Ensure engagement from clients and community leaders. Performance metric(s) to support equitable outcomes. <p>BHRS joined newly formed County GARE cohort supported larger county efforts on racial equity i.e. racial equity budget tool and staff training recommendations.</p>
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