



SAN MATEO COUNTY HEALTH

**BEHAVIORAL HEALTH
& RECOVERY SERVICES**

Behavioral Health and Recovery Services (BHRS)

Cultural Competence Strategy Updates (FY20-21)

Updates based on the last San Mateo County Cultural Competence Plan 2020-2021 (please refer to plan for additional detailed activities that are continuing)

Goal	Activities/Focus	YEAR TEN (2019-2020)	YEAR ELEVEN (2020-2021)
<p>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)</p>	<p>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)</p> <p>Improve data gathering (e.g. unknown or unreported ethnicity)</p>	<p>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.</p>	<p>In the midst of this momentous and timely work, the COVID-19 pandemic became an immediate and critical priority and has had a large and wide impact on Cultural Competence efforts in San Mateo County. Responding to the COVID-19 pandemic:</p> <ol style="list-style-type: none"> 1) the County intentionally prioritized our communities' health and wellness and shifted to activities dedicated to COVID-19 response and recovery, 2) allowed the County to expand the ways to engage with our communities including virtual meetings and telehealth services, 3) strengthened existing community relationships and partnerships, 4) BHRS leadership within San Mateo County (i.e., Board of Supervisors, County Manager's Office and the Health Department) sought out support from other divisions, 5) made intentional efforts to support our most vulnerable communities to amplify their voice and respond to their needs quickly, and 6) BHRS worked to address the needs of our workforce in assisting our clients and families, while caring for themselves. <p>In June 2020, the San Mateo County Board of Supervisors (BOS) adopted Resolution No. 20-394 in support of Black Lives Matter and in August 2020, the BOS adopted Resolution No. 20-584, which recognized racism as a public health crisis. Soon after on September 14, 2021, the BOS adopted Resolution No. 21-672 to advance and improve San Mateo County's racial equity efforts and confirming its commitment to efforts to increase racial equity through all County policies and programs; to enhance educational efforts aimed at understanding, addressing, and combating racism in all forms to promote fairness and justice for our</p>

			<p>most impacted communities; and, to support collective liberation of all people in San Mateo County.</p> <p>In 2020, the BOS and County Manager's Office (CMO) made high profile public commitments to racial equity. A BOS' resolution condemning racial injustice sponsored by the President of the BOS, David Canepa, was approved, and the CMO took administrative actions designed to promote racial equity, including the appointment of San Mateo County's first Chief Equity Officer in April 2021.</p> <p>*San Mateo County has a total estimated population of 770,038. This is a 7.18% increase since 2010.</p> <p>*More than 446% of the County population five years of age and older spoke a language other than English at home.</p> <p>*Based on claims data, San Mateo served 1,136 clients in FY 2018-19, which was a slight decrease of 53 clients from CY 2018. San Mateo's penetration rate was on par with medium-sized counties in the 18-64 age group, higher in the 12-17 age group, and lower in the 65+ age group. The overall penetration rate (1.02 percent) was lower than medium-sized counties (1.06 percent) although slightly higher than the statewide average (0.93 percent).</p>
	<p>Review contract agencies' Cultural Competence (CC) Plans annually and provide feedback and recommendations</p>	<p>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>	<p>Twenty-two (14) Cultural Competence Plans received. ODE Cultural and Linguistic Standards Team reviewed CC Plans with AOD and provided feedback and recommendations to agencies based on a rubric. Contractors continued to utilize the plan template.</p> <p>Summary of Successes 2020-2021</p> <ul style="list-style-type: none"> • Implementation of plan template for contractors to support data collection. • BHRS subcommittee dedicated to increasing BHRS leadership participation and communication with DEC and our Health Equity Initiatives, as part of our MCOA action plan. • Expansion of virtual trainings around cultural competence. • Additional funding will be available in FY 21-22 to support contractors needing the most support with language access services. <p>Areas of Improvement 2020-2021</p> <ul style="list-style-type: none"> • Increase rate of plan submission. Only 42% of contractors submitted a plan FY 20-21, ODE has provided deadline extensions and has begun meeting with individual contractors to provide one on one support with plan development. • Aggregation of data from 2012 to present pending, to understand continuing trends and new challenges brought on by the COVID-19 pandemic. • Implementing more opportunities to inform contractors on CLAS requirements and their application still pending. The DEC will be working

			on a strategic plan in early 2022 that will include specific actions to address this need.
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<p>Multicultural Organizational</p>	<p>In addition to providing updates to BHRS executive team, this year MCOD became a standing agenda item at all leadership monthly meetings. Here, BHRS supervisors and managers are provided MCOD information and/or updates on progress. This fiscal year work began on establishing subcommittees to work on each goal of the MCOD action plan, surveys were conducted to gauge staff areas of interest.</p>	<p>1) Multicultural Organizational Development (MCOD) continues to be implanted and analyzing work culture (please see poll results table included), now with the full support of the BHRS Executive team, each member will oversee a specific activity within the plan goals. This year, subcommittees began to form to complete tasks that will support workforce development, hiring practices and policy revisions. 2) Addition of County Equity Measure established to track the percent of staff who have taken at least 3 of the Harvard Implicit Association Tests. These tests will be used to help staff identify potential unconscious biases and help strengthen the leadership team. 3) Training of Executive Team with Dr. Melanie Tervalon (co-creator of the Cultural Humility Curriculum), to support ongoing work and assignment of accountability partners. This structure will support advancement of MCOD. .</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>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.</p> <p>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>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. Since the inception of this training, a total of 66% (307) of BHRS staff (including contracted providers) have completed the Cultural Humility Training, meeting our original metric goal of 65%.</p> <p>During fiscal year 2020-2021 BHRS had a total of 86 participants, 18% of the workforce eligible, including contracted providers, to complete a cultural humility training. Since the initial curriculum was designed to be provided in-person due to the topic areas covered, the COVID-19 pandemic further reduced capacity to provide robust training sessions, lowering participation. In 2019 and in 2021, two Cultural Humility Training of Trainers sessions were facilitated, a total of 10 new facilitators were trained, and we received guidance and permission to develop a virtual training based on the original curriculum. To encourage participation, weekend sessions for this training are being made available. Finally, this upcoming year there will be a BHRS subcommittee dedicated to overseeing the progress with this training and its provision, as part of our MCOD action plan.</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 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>BHRS had a total of 32 new hires this FY 20-21 including regular, extra-hire, relief, and interns. Of these new hires 29 provide some direct service and interact regularly with clients and/or community. Of these direct staff 45% (13) took the Working with Interpreters in Behavioral Health Settings training. Since the inception of this training in 2010, BHRS has trained a total of 308 active staff, approximately 66% of our current workforce. Of this group, 37% (114) have taken a refresher. This Fiscal Year (FY) 2020-2021, a total of 93 BHRS staff completed this training. The training was adapted to be provided virtually over 2 sessions. Participants received additional information on video remote interpretation. BHRS new staff participate in multiple orientations. New staff are informed of the requirement to attend the “Working with Interpreters in a Behavioral Health Setting” during the New Hire Orientation, the BHRS Internship Orientation and the Onboarding Orientation provided by the BHRS Payroll/HR. Supervisors are also asked to inform their new hires during their team onboarding process. New hires are also given BHRS policy documents referencing this requirement. Lastly, the training was assigned via the BHRS LMS when the session was offered virtually due to the COVID pandemic. Generally, two in-person Working with Interpreters in a Behavioral Health Setting are provided annually (April and October). 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. Additionally, some staff have difficulty attending in-person and/or virtual trainings with a full caseload and many being reassigned to support our County Covid-19 response. Additionally, the BHRS New Hire Orientation (provided by the Workforce Education and Training Team) wasn’t offered this past fiscal year due to COVID and staffing vacancies and is typically only offered once a year due to its labor-intensive organization (3 Sessions).</p>
	<p>How to be an Effective Interpreter</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>This training is currently inactive due to contractual challenges with providers, the greatest being that BHRS would have to cover the cost for the interpreters’ time to take this training. A new contract cycle beginning 21-22 will be an opportunity to introduce alternatives to meet this gap. Such as requiring all providers to go over an introductory document that prepares interpreters to work in the behavioral health setting in San Mateo County.</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>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>San Mateo County (SMC) Behavioral Health and Recovery Services’ (BHRS) Office of Diversity and Equity (ODE) began offering the Parent Project® courses in 2010. To date, ODE has completed 85 courses and graduated approximately 1,263. Supporting program for Pacific Islander community- One East Palo Alto outreach efforts and StarVista (Peninsula Conflict Resolution Center) resource/materials packages.</p> <ul style="list-style-type: none"> § 96% feel confident about their parenting skills as a result of taking Parent Project § 67% feel overall satisfied with the relationship with their child § 63% feel supported as a parent o Community Empowerment § 83% feel they can positively help their community after taking

			<p>Parent Project</p> <ul style="list-style-type: none">o Access <p>§ 83% responded knowing where to go to receive behavioral health services</p> <p>§ 75% are more willing to seek behavioral health services for themselves and/or a loved one if needed</p> <p>An ongoing challenge continues to be Program Coordinator position vacancy. A couple of ODE staff are supporting contractors and facilitators as much as possible. Response time and overall program monitoring has been affected, such as collecting 6-month survey data and data analysis.</p>
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<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>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>In FY 20-21, monthly meetings have continued despite the program coordinator position being vacant. This year the health ambassadors were key in providing COVID support and outreach, these efforts included a PSA to promote vaccination and distributing mental health resource cards at vaccination sites. 10 new ambassadors graduated in May 2021. Ambassadors helped in April and May vaccination County clinics and were part of the "Vacuna, Mi bienestar, Mi comunidad" event with the purpose of reaching the communities most affected by the pandemic. The BHRS’ Health Ambassador Program started a door-to-door canvassing in San Mateo, East Palo Alto, Redwood City and Half Moon Bay., where they distributed masks and flyers with the 5 most important messages that San Mateo County highlights about the COVID-19 vaccine and how to register to receive notifications for the next vaccination clinic. The one-on-one conversations and distribution of materials continue happening in Spanish at laundromats, grocery stores and food distribution centers. In addition to participating in a Stigma free virtual workshop and sex trafficking webinar and received training to become NAMI trainers.</p>
	<p>The Health Ambassador Program-Youth (HAP-Y)</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>In the last fiscal year, 33 youth went through HAP-Y programming in the three cohorts that were hosted. This includes the current group, Cohort 14, who are still going through the training program and will have their community involvement activities completed by December 2021. HAP-Y was able to smoothly transition into virtual programming. The Fall and Winter cohorts had more youth start and complete programming in comparison to in-person programming. One reason for this may be the accessibility to joining meeting virtually and not having to stress over finding transportation. For the first time, youth were able to participate in planning and hosting an event for county-wide Mental Health Awareness Month efforts with Office of Diversity and Equity. Two separate groups, made up of HAP-Y youth, were involved in these projects. A big challenge that HAP-Y staff encountered was with outreach for summer training session. To engage and provide a safe space to youth who identify as LGBTQ+, summer cohort was LGBTQ+- focused cohort. Another challenge that arose was the limited options for presentation opportunities for participants to conduct their individual presentations.</p>
	<p>Adult Mental Health First Aid (MHFA) is an interactive 8-hour public education program that helps the public identify, understand, and respond to signs of mental illnesses and substance use disorders. Participants will gain an overview of mental illness and substance use disorders in the U.S., learn the risk factors and warning signs, build understanding of the impact of mental illnesses, and reviews common treatments. Those who take the course to become certified as Mental Health First Aiders learn a 5-step action plan encompassing skills, resources and knowledge to help an individual in crisis connect with appropriate</p>		<p>Adult Mental Health First Aid o Stigma Discrimination Reduction § 83% feel that they strongly agree or agree that they are willing to take action to prevent discrimination against people with mental health conditions. o Cultural Humility § 87% feel that spirituality can be a tool for recovery from mental health problems. § 80% feel that they strongly agree or agree that the adult mental health first aid training was relevant to them and their cultural background and experiences (race, ethnicity, gender, religion, etc.) § 70% feel that they strongly agree or agree that they have a better understanding of how mental health and substance use challenges affect different cultures through the adult mental health first aid training.</p>

	professional, peer, social, and self-help care.		
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	<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>In response to staffing shortage, this program is currently on hold and projected to be contracted out. Restructure in process.</p>	<p>In response to staffing shortages, this program is now offered in a limited capacity through an external contracted provider and through the Health Equity Initiatives, such as African American Community Initiative's event in May of 2021 "Hope for change" with ODE support. The Lived Experience Academy graduates also presented and shared their experiences, by sharing the graphic novel "#BeTheOneSMC Where there is life, there is hope" during May Mental Health Month events.</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>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>This past fiscal year, in response to ongoing feedback from stakeholders for deeper engagement in MHSA, the MHSA Steering Committee was restructured. On October 7, 2020 the MHSA Steering Committee reviewed a proposed structure that would allow for increased meetings per year and working committees to recommend improvements on MHSA structures and programs. On November 4, 2020, the Mental Health and Substance Abuse Recovery Commission (MHSARC) voted to amend their bylaws to establish the MHSA Steering Committee as a Standing Committee of the commission and appoint chairperson(s) to work closely with the MHSA Coordinator to plan, develop goals and objectives, and report to the broader MHSARC monthly. The MHSA Steering Committee now meets four times per year in February, May, September, and December.</p> <p>Highlights</p> <p>1) Housing Taskforce: Early fiscal projections anticipated a recession due to the COVID-19 pandemic. Given this uncertainty, a strategic approach to addressing the input received during the MHSA Three-Year Plan development was proposed. Twenty-two strategies prioritized by stakeholders were organized under 5 MHSA Strategic Initiatives with the intent to engage stakeholders in deeper planning and develop strategy direction for MHSA investments for when revenue improved. Housing was the initiative prioritized by the MHSA Steering Committee. A Housing Initiative Taskforce was convened, between March and May 2021, to accomplish the following goals:</p> <ul style="list-style-type: none"> • Define a housing continuum of services for individuals living with mental illness

		<ul style="list-style-type: none">• Identify gaps at all levels of support or intensity in treatment• Articulate and prioritize broad housing-related outcomes• Identify and prioritize activities to fund under each prioritized outcome• Taskforce members included 30 diverse stakeholders including clients, family members, service providers and County departments. The Housing Initiative Taskforce began with a series of informational presentations including “Housing for BHRS Clients” and “Board and Care Housing Supports.” Members then convened once a month, led by an MHSA housing consultant and the MHSA Manager. <p>2) Youth S.O.S. (March 2021): The Youth Stabilization, Opportunity & Support (S.O.S.) Team start-up activities began in March 2021 with full implementation scheduled to launch July 1, 2021. The Youth S.O.S team is a non-law enforcement, trauma-informed, culturally responsive response to youth (age 0-21) who may be in a crisis anywhere in San Mateo County. The team will be dispatched via the StarVista Crisis Hotline, available 24 hours-per-day, 7 days-per-week. The Youth S.O.S. Team consists of a triage clinician and a family partner to help improve the families’ level of comfort and trust, and support linkages and warm hand-offs for youth and families.</p> <p>In response to the Family Urgent Response System (FURS), established by Senate Bill 80 and amended by Assembly Bill 79, which requires counties to develop and implement a mobile response system for current and former foster youth and their caregivers, BHRS and the Human Services Agency partnered to implement a coordinated effort. For current and former youth in foster care, the Youth S.O.S. Team will provide an immediate, in-person, 24/7 response.</p> <p>A comprehensive input process for Youth S.O.S. came after County-wide budget constraints and concerns related to ensuring an integrated approach to youth crisis response, led to the withdrawal of the RFP opportunity. Starting in October 2019, the Youth Committee of the Mental Health and Substance Abuse Commission (MHSARC) met monthly to plan an integrated approach to youth in crisis. See Appendix XX for the Youth S.O.S. Team Scope of Work and Flow Chart developed as part of this planning process.</p> <p>3) MHSA Annual Report (in progress) Highlights: Innovation, The Cariño Project in Half Moon Bay soft-launched July 1, 2020, in the midst of the COVID- pandemic and devastating wildfires. The lead organization, Ayudando Latinos A Soñar (ALAS), found itself with increased demand for mental health services. The Cariño Project brought increased culturally responsive mental health services, peer support groups, art and wellness activities, capacity building, outreach, and linkages to behavioral health services and resources for marginalized Latinx and farmworker communities. A virtual ribbon-cutting event was held in September 2020 to acknowledge the launch of The Cariño Project. Most recently, a Request for Quotes (RFQ) process was facilitated in collaboration with the Healthcare for the Homeless and Farmworker Health (HCH/FH) Program to identify the co-occurring substance use service provider for The Cariño Project. The services will include co-occurring substance use case management and early intervention services.</p>
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	<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 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>	<p>In FY 20-21 San Mateo County BHRS received a total of 87 grievances, a 19% increase from the previous year.: 63 for Mental Health services, 12 for AOD services and 15 specifically for youth services. Approximately 74% of grievances were about quality of care. Grievances past deadline: 0 Longest: 89 - Shortest: 1 Average days to resolution: 24 Ages: from 8 to 87 - Average: 42.3 Languages: English: 89 Spanish: 1 HPSM: 29 Medi-Cal: 56 Medicare: 1 Unknown: 4 MHSA grievances: 14</p> <p>Program Improvements</p> <ul style="list-style-type: none"> • AOD/Access: Faster start of services for clients moving into SMC • Improved Shelter-in-Place programming, including expanding availability of tech tools and inter-program learning collaboration • Transitional housing for vulnerable clients exiting AOD residential treatment. • Methadone client transferred to out of county clinic • FSP provider committed to improve documentation • Canyon Oaks Youth Center (COYC) implemented a trauma informed way that is sensitive to youth's specific treatment needs during AWOL safety protocol. • COYC wrote a COVID 19 home visit protocol to be shared in writing with youth and their families. • COYC medication steward provided a medication training for staff person involved in the medication error and also provided a training and overview of youth medication changes during the following staff meeting
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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: -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. 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. 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>	<p>Staffing for the co-chair's positions were heavily impacted through the COVID-19 pandemic. HEIs were frontline in the COVID-19 pandemic response as they were a major source to communities for information. A lot of work was done, despite the transitions, to provide support through all HEI quarterly meetings. ODE also supported/planned the virtual 2021 CA Health Equity Summit: Healing Communities Beyond 2020: Our Health, Our Culture, Our Climate that took place on June, and purchased 25 tickets for BHRS staff, co-chairs, community members, SMC commissioners, HAP, youth, and contractors to support building community knowledge and capacity on health equity. Highlights & Accomplishments HEIs implement activities throughout San Mateo County that are intended to: · Decrease stigma · Educate and empower community members · Support wellness and recovery · Build culturally responsive services African American Community Initiative (AACI) One of the goals of AACI is to increase collaborative efforts with other HEI's to identify the health needs of communities of color and ultimately decrease disparities for communities of color. Black History Month events in 2020 & 2021 focused on the mental wellness of African Americans of all ages. It acknowledged the chronic stress of racism and that everyday family challenges (such as securing resources, family stability) can add even more stress. The Initiative offered workshops and activities that provided coping strategies for the whole family to mitigate stress. Participants remarked that the workshops and speakers were very helpful and meaningful. The event planning began in the annual AACI strategic planning facilitated by Leanna Lewis. In FY 20-21 community members participated in and/or hosted the following AACI events: • Black History Month Celebration • Black Lives in Recovery/ Told Through Our Stories of Anti-Racism-BLM • Suicide Intervention & Prevention for the African American Community • Race and COVID; Diversity and Equity Townhall meeting • Tabling Opportunities Chinese Health Initiative (CHI) During the FY 20-21 the CHI created public spaces where members of the community, BHRS staff and other residents could feel comfortable openly talking about issues they would normally prefer to talk about in a private setting, namely immigration and suicide. With the opportunity to elevate these voices, community members feel more confident and less anxious about these issues. CHI participated in AANHPI Mental Health Day Proclamation, and tabling events in Daly City with Filipino Mental Health Initiative. CHI also planned and facilitated AAPI Hate event, monthly family support groups, an AAPI focused support circle for the county staff, and piloted a behavioral health mentoring program at Mills High School. CHI also collaborated with Millbrae library for the Mandarin Story Time event, and collaborated with Adult and Aging, Self Help for the Elderly and Travonde for series of promoting health education with the elderly population called Asian Be Well. CHI along with FMHI, Pacific Islander Initiative attended SMC API Caucus monthly membership meeting to present on recent hate crime against the API community.</p>
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		<p>Filipino Mental Health Initiative (FMHI) In addition to holding weekly focus groups & FilipinXChange sub-committee to strategize responses, needs assessments and working to collaborate/support local businesses, FMHI provided a variety of events and community support/resources this year. 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. 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.</p> <p>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>	<p>In FY 20-21 the FMHI made efforts consisting of creating a community calendar where people could have access to outlets for social interaction and connection, as well as forming a bi-weekly support group (Kapwa Soul Sessions). This effort began in the fourth quarter of fiscal year 2019-2020 and FMHI was able to continue this through 2020-2021. These efforts aimed to address community needs brought on by the pandemic, but also focused on pointing them to the resources and support in the community. In addition, FMHI made sure the themes of Kapwa Soul touched on current events that were intensifying stress levels. Other COVID-19 responses included collaborating with other Filipinx organizations to create spaces for community, in the form of an open mic, to address both the pandemic and racial injustices that erupted after the death of George Floyd these events attracted 40 to 60 community members at each event: this included events in July, September and October of 2020. These served as vital spaces for expression and touched on topics that included political upheaval and unrest in the Philippines, how community has come together to support one another in the pandemic, addressed mental health issues, and served as a forum for many youths to connect with their culture and community. FMHI also engaged a number of youth and community members to express themselves creatively through a project that aimed to address the emotions people were feeling about racial injustice and the Black Lives Matter movement. FMHI-SMC, together with the group made up of the COVID Bayanhihan Response (groups involved with open mic showcases, put a call out for community (especially youth) to be a part of this project. Over the course of several months, starting in June, FMHI onboarded a group of 9 youth and community members, and brainstormed, planned and carried out pre-production related activities – including the script writing. Ultimately due to many scheduling challenges, this project was postponed. Despite the challenges, it was a tremendous learning experience for everyone, as well as an opportunity to share each other's passion, skills, and talents towards this endeavor; this was especially true for the youth participants, who described the experience as giving them purpose, voice, and opportunities to express themselves.</p> <p>Overall, FMHI has had to think more creatively about how to continue engaging community and keep them informed, especially among our older adult Filipinx population that does not always access information online. As a result, the initiative created a wellness outreach campaign called the "Mano Po Project." This included interfacing with elders and other vulnerable community members at places like one of the Daly City food bank distribution centers, where members volunteered to help hand out goods, while also providing important information about COVID-19 safety and mental health/wellness resources available in San Mateo County. These activities underscore the strengthening of FMHI's approach to create activities that engage community members in a culturally responsive manner with the goal of building a consistent network of members, partners and collaborators who have successfully been doing this work in the community.</p> <p>In FY 20-21, FMHI participated and/or hosted the following events and activities:</p> <ul style="list-style-type: none"> • Filipinx PSA planning/filming (in solidarity and response to BLM Movement) June 2020 - October 2020 – 9 attendees • MHSOC Public Hearing for Social Enterprise Cultural Center- 30+ attendees • Daly City Bayanihan Showcase: Build that Self-Care for Back to School- 40+ attendees • Daly City Bayanihan Showcase: Fiesta Celebrating Filipinx American History Month- 50+ attendees • FMHI Co-chair and members speak at the Exceptional Women in Publishing Conference: Our Stories Our World focused on mental health – 20 attendees • DCP Volunteers: Mano Po Project – 8 attendees • Mano Po Kwentuhan Korner Online Space (for sharing wellness and connection stories)- 14 attendees
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			<ul style="list-style-type: none"> • Kapwa Soul Sessions between July 2020 to June 2021- 6-10 attendees per session • Daly City Bayanihan Showcase: People Power in a Pandemic- 40+ attendees • Engaged in Mobilization for the Justice for Angelo Quinto Coalition (signed letter with 160+ orgs to advocate for Antioch officials to adopt mental health response- 200+ participants) <p>Latino Collaborative (LC) In FY 20-21 the Latino Collaborative welcomed several presenters sharing local resources into its meetings. Because the majority of members have direct contact with the community via direct services or outreach and prevention, these informational presentations can impact services. Presentations included:</p> <ul style="list-style-type: none"> • Stanford Health Care research program on COVID-19 clinical trials • Catholic Charities on immigration policies • Immigrant Posada/ Pilgrimage <p>In addition to resource sharing and promotion, LC members participated in the MHSA Community Program Planning Process. During the input session members provided specific suggestions (prevention, direct services, workforce education and training) to support complex cases in San Mateo County. The feedback and input collected was presented and considered for the MHSA budget. The LC was able to switch all interactions, activities, and documents to a virtual platform.</p> <p>Native American Initiative & Indigenous Peoples Initiative (NIPI) The NIPI has not only provided mental health resources to San Mateo County residents but has also contributed to the professional development of San Mateo BHRS providers through trainings and workshops Initiative members have organized. The collaboration with CBO-Nuestra Casa, Pride Center and Phoenix Garden-BHRS has provided NIPI with the exposure to work in the community. Unfortunately, limited community members identify as Native/Indigenous are receiving services in sister counties i.e., San Jose Indian Health Center and San Francisco Indian Health Center. NIPI has partnered with SMC Libraires to further education to the community. NIPI is in the process of collaborating with San Jose Indian Health Services to increase outreach to San Mateo County and will continue to strengthen the relationship with Nuestra Casa East Palo Alto. NIPI's trainings throughout the year have increased (via ZOOM) interest with increasing traditional healing practices in a clinical setting as well as in the community. In FY 20-21, NIPI participated and/or hosted the following events and activities:</p> <ul style="list-style-type: none"> • Provider training - Native American Mental Health • Annual Indigenous Peoples Day: Promoting awareness to communities • HOSTED Virtual Drumming and Spirituality as a Method of Healing and Recovery (collaboration with Spirituality) • NIPI has partnered with SMC Libraires to further education to the community. • Alcatraz honoring of Indigenous peoples <p>Pacific Islander Initiative (PII) The FY 20-21 PII continued with strengthening its virtual work and outreach to the community due to COCOVID-19 restrictions. Partners alike gathered to discuss their hopes and goals for the Pacific Islander Initiative. Several partners who had purposefully disengaged from the group after losing trust in its leadership were able to return, speak about their experiences, and commit to re-engaging. With this tone shift, PII embarked on the third year of long-term planning, building a comprehensive five-year plan that includes a youth leadership and mental health career pipeline program (PIONEER). PII also changed its meeting time from 6pm to 11am and utilized virtual Zoom calls for all its meetings. Trust, engagement, and collaboration has greatly increased over the course of the past year. The Pacific Islander Initiative engaged with community members directly through events and community trainings throughout the year. PII has</p>
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			<p>continued to focus on reducing stigma and increasing awareness about suicide in Pacific Islander communities.</p> <p>In FY 20-21 PII participated and/pr hosted the following activities and events:</p> <ul style="list-style-type: none"> • Hosted Series of Heal and Paint- Journey to Empowerment • Leadership Workshop • Native Heritage Month • Provided COVID-19 support for PII community <p>PRIDE Initiative (PI)</p> <p>FY 20-21 the LGBTQ of San Mateo County has been deeply impacted by COVID19 and COVID-19 delta variant, which has limited-service availability and increased disparities in a community that already faced isolation. This year PRIDE felt it was particularly important to hold a PRIDE event due to the impacts of COVID-19 pandemic, racial injustices, and gender inequalities. The initiative decided to have another virtual Pride event, along with the help, of the Pride Initiative members and the LGBTQIA+ community partners, the initiative was able to shift the event from an in-person to a virtual one. The Pride Initiative met and decided to have an entire week of workshops and end the week with a Grand Finale celebration event. This included a Community SOGIE workshop; Transgender/ Nonbinary Inclusive- Resources workshop; Kaiser Gender clinic resources workshop; CORA Healthy LGBTQ relationships workshop; Aging & Adult services Panel; Health Equity Initiatives Outreach workshop; LGBTQIA Biblical workshop; and Coast pride services workshop. PRIDE had their Grand Finale hosted by DJ Ben which featured a diverse line up of entertainment and special guest local poets. Overall, 1,074 participants via social media attended during SMC Virtual PRIDE week 2021 and Grand Finale Celebration 2021. We also collaborated with San Mateo County Fair Grounds and collaborated for a Pride Day at the Fair 2021 event. And collaborated with SMC County Health for a Grand Rounds Pride Month presentation to medical practioners.</p> <p>In FY20-21, PRIDE participated and/or hosted the following events and activities:</p> <ul style="list-style-type: none"> • SMC Virtual PRIDE Week – 1,074 attendees • Pride Day at the Fair • SOGIE training • Pride Grand Rounds <p>Spirituality Initiative (SI)</p> <p>In FY 20-21 the Spirituality initiatives ongoing monthly meetings have become a place where a cross section of the community comes to learn more about San Mateo County BHRS, community partners/stakeholders, consumers, and family members of those with lived experience, furthermore the opportunity to interact with those who are in leadership positions have been rewarding for all. For instance, the meeting in April Rev. Jane Doty MacKenzie, of the Burling Presbyterian Church, presented highlights from her churches 60-page safety plan of guidelines for staff to reopen. SI members were able to ask questions, learn about the church's successful parking lot services, and the outside worship experiences.</p> <p>Second, June of 2021, SI featured the community outreach person of the PRIDE Center, Marilyn Fernando, who spoke about the resources that are available for the LGBTQ+ community. The initiative also participated in the PRIDE event on June 8th, by collaborating and attending several celebrations/events through the month which expanded the insights to all those who attended. Since members of different faith communities attend the SI meetings along with family members, clinicians and those with lived experience, there is a healthy dialogue which is ensued. Throughout the year SI brings in speakers who enhance the understanding of BHRS and the surrounding community. During this FY 20-21 the SI held presentations that had impact upon those present as well as the broader community:</p> <ul style="list-style-type: none"> • Dr. Rev Janet Bower Care Ministry Seminar – Autism and Strategies for Parents, in January presented about their Feb 10t seminar • Isaac Frederick, both a BHRS counselor, SI Co-Chair and faith-based
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			<p>leader during February African American Month presented about the role of African American Athletics voice about social injustices and exercising their civil right to peaceful protest.</p> <ul style="list-style-type: none"> • Poetry Reading – Poem written and read by Community member Tatiana; “PAUL ROBESON-SPEAK OF ME AS I AM”. • Burlingame Presbyterian Church spoke about their parent’s seminar to support children/youth safe transition to in-person learning. • Clinical Serv Manager Regina Moreno of BHRS presented about Labyrinth at Phoenix Garden. • Power Meditation and open discussion about Juneteenth. <p>This year the initiative collaborated with the African American Community Initiative on the first annual “Amazing Souls of Black Folks”. This is event recognized the resiliency of African Americans while facing systematic racisms, the historical contents of slavery, and post which included Jim Crow, and the prison-industrial complex, a short-film on the history of misdemeanors and how African Americans became targeted to prosecute at higher rates for free labor.</p> <p>Lastly, the Spirituality Initiative, along with San Mateo County Health, Office of Diversity & Equity, Office of Consumer and Family Affairs, Adult Resource Management, other county, and community partners/stakeholders put on a series of virtual townhalls during the fiscal year beginning in June 2020 through January 2021. SI was instrumental in creating the Faith Based letter sent to faith leaders throughout the county in support of the COVID vaccine, correspondence about safety protocols, updates about plans to reopen, and resources for testing and vaccination sites throughout the county. Over 50 clergy/faith leaders signed the pledge. In addition, SI found two parishes – Daly City United Methodist Church and St Matthew Catholic Church who held an onsite clinic for vaccinations for their congregants as well as the surrounding community.</p> <p>BHRS hosted Workforce Wellness Month (WFWM) in April 2021 to respond to staff burnout and collective trauma during Pandemic, infusing cultural healing practices into activities offered. These activities also included contracted providers as well. The Native & Indigenous Peoples Initiative collaborated with BHRS to host a healing ceremony at a local garden, this included activities for staff to commemorate loved ones and provided an ongoing space for community to gather. General results from the WFWM included: 90% of attendees reporting that session(s) were helpful in providing skills for their wellness/resilience or self-care, 88% reported that attending the session(s) provided them with new skills/tools or a sense of well-being that will help them to minimize the impact of the pandemic. Ninety-three percent reported that the speaker/trainer of their session demonstrated or discussed Cultural humility or sensitivity. This has provided BHRS with a baseline and direction to keep supporting the workforce</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>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>	<p>The DEC currently has 198 members, 45% are BHRS or County staff, 32% represent Community-Based Organizations and 23% identify as community or Health Equity Initiatives member. In the FY 20-21 the Diversity & Equity Council, in collaboration with San Mateo County Public Health, Policy and Planning, StarVista, Bay Area Community Health Advisory Council, the Office of Diversity & Equity and Health Equity Initiatives, held a total of 4 virtual Town Halls that focused on Race & COVID-19. The events created opportunities for community members and organizations to share collective challenges, growth and experiences this past year. Approximately 516 participants attended and provided input on supports needed, and what are the priorities of our communities as we continue to respond to the pandemic. As a result of the information and feedback received: Digital (tablets, county hotspots for internet access) support has been made available, mental health support cards are being provided, PPE was distributed and mask mobile, vaccination equity group for marginalized communities was formed, other supports included: school support, rental assistance, BHRS sponsored workforce wellness month, FB live events with other groups to share resources. The DEC continues to focus on immediate response to community needs during COVID recovery. Partnerships were strengthened through the town hall collaboration; this has broadened opportunity for DEC to be involved in larger equity efforts and provide support for other HEIs and CBOs.</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>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>	<p>Despite funding challenges in FY 20-21, the collaborative hosted a discussion series on White Privilege, Institutional Racism and Being an Ally, to promote community discussions and education around racial equity and social justice. In FY 21-22, with incoming state funds and peer work certification, the focus will be on restructuring the work and the goals identified at the last Peer Summit: advocacy, workforce development and common grounds. ODE staff shortages have also limited the support available for training implementation and ongoing support.</p>
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<p>Anti-Stigma Initiative Suicide Prevention Initiative Co-Occurring Initiative & Mental Health Awareness Month (MHAM)</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. 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>	<p>1) Completed San Mateo County's first Community Stigma Baseline Survey While we know stigma is a major barrier, how pervasive is such stigma in our San Mateo County community? Are our current stigma reduction programs reducing this stigma overtime? To answer these questions, BHRS ODE launched and completed San Mateo County's first Community Stigma Baseline Survey around mental health and substance misuse knowledge, beliefs, and behavior. The BHRS ODE 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 the statewide mental health stigma survey conducted by RAND Corporation.</p> <p>2) With the current COVID-19 pandemic, these risk factors for suicide are exacerbated. Embracing suicide as a personal and public health issue, the San Mateo County Suicide Prevention Committee created a 2021-2026 Suicide Prevention Roadmap to outline a strategy on how to collectively prevent suicide in our community. This Roadmap is part of a larger vision to reduce suicide deaths, suicide attempts and pain associated with suicidal thoughts so that everyone in our community can realize healthy and meaningful lives.</p> <p>3) San Mateo County joins our state and country in celebrating Mental Health Month (MHM) in May each year. In May of 2021, 156 participants responded to the evaluation survey for MHM events/activities and results are as follows:</p> <ul style="list-style-type: none"> o Stigma Discrimination Reduction *100% strongly agree or agree that they can recognize the signs that someone may be dealing with a mental health problem, substance use challenge, or crisis. *100% strongly agree or agree that they will reach out to someone who may be dealing with a mental health problem, substance use challenge, or crisis. o Access *100% feel that they strongly agree or agree that they are more willing to seek support from a mental health professional if they think they need it. o Cultural Humility *90% feel that cultural background influences the way that people seek help for mental health problems. *90% strongly agreed or disagreed that this program was relevant to me and other people of similar cultural backgrounds and experiences (race, ethnicity, gender, religion, etc.).
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	<p>Total Wellness is a collaborative peer-based care model integrating primary care with behavioral health coordinated by nurse care managers. This promotes one coordinated client care plan including behavioral health, physical health, and wellness goals.</p>	<p>Sustained through the Health Plan of San Mateo. In FY 19-20, 661 unique clients were served for mental health services under Primary Care Interface.</p>	<p>Now sustained by Health Plan of San Mateo.</p>
	<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>Data on total outreach efforts expected January 2021.</p>	<p>FY 19-20 Data NORTH COUNTY OUTREACH COLLABORATIVE (NCOC) North County Outreach Collaborative outreach is conducted by Asian American Recovery Services (AARS), Daly City Peninsula Partnership Collaborative (DCP), Daly City Youth Health Center (DCYHC), Pacifica Collaborative, and Pyramid Alternatives. The goals of NCOC include: 1) establishing strong collaborations with culturally/ linguistically diverse community members; 2) referring 325 clients to BHRS for mental health and substance abuse services; 3) establishing strong linkages between community and BHRS. PROGRAM IMPACT NCOC continues to improve timely access and linkages for underserved populations by making sure when a person is in their waiting room they are immediately greeted and seen in a timely manner. NCOC are also advocates for reducing stigma and discrimination in services. Staff continue to attend and participate in Office of Diversity and Equities HEI's, share NCOC updates and reports back to the NCOC Community Outreach team. In FY 2019-20, there were 12,506 attendees at individual and group outreach events across the five provider organizations in the NCOC. NCOC FY 19/20 Page 174 Total clients served 12,506 Total cost per client \$18 SUCSESSES Client Statements: "I finally realized that I am no longer a victim but am a survivor." "I realize that I am not alone" "The world really scares me, but I am glad I have you to talk to"</p>

“I don’t know where I would be without therapy each week”

CHALLENGES

The North County Outreach collaborative faced many similar challenges to other programs this year brought on by COVID-19. In the Pacifica Collaborative, losing a long-time outreach worker who had spent years building trust in the community was a huge setback to their work.

Star

Vista’s clients often face transportation challenges. Other program’s such as DCYHC rose to the challenge of moving their services to a virtual setting and meeting their clients’ complex needs as the pandemic worsened.

EAST PALO ALTO PARTNERSHIP FOR BEHAVIORAL HEALTH OUTREACH

The East Palo Alto Partnership for Behavioral Health Outreach (EPAPBHO) collaborative is comprised of community-based agencies from the East Palo Alto region of San Mateo County to provide culturally appropriate outreach, psycho-education, screening, referral and warm handoff services to East Palo Alto region residents. One East Palo Alto (OEPA) served as the lead agency and work in collaboration with El Concilio of San Mateo County (ECSMC), Free at Last (FAL) and the Multicultural Counseling and Educational Services of the Bay Area (MCESBA).

EPAPBHO is committed to bridging the mental health divide through advocacy, systems change, resident engagement and expansion of local resources leading to increased resident awareness and access to culturally and linguistically appropriate services. EPAPMHO provides the following services including:

- Technical assistance to BHRS initiatives to increase community education activities and integration of mental health services with other community organizations.
- Community Outreach and Access (marketing and publicity, including translation).
- Promote increased East Palo Alto resident participation in County-wide mental health functions and decision-making processes.
- Sustain and strengthen education materials for and conduct outreach to residents regarding mental health education and

awareness.

PROGRAM IMPACT
EPAPBHO FY 19/20

Total clients served 517

Page 175

Total cost per client \$394

SUCSESSES

Success Story #1: A single mother of four (4) children came to the office for services. Staff noted

she appeared overwhelmed and anxious. Staff listened as she shared some of her issues, which

included her financial stresses and handling her four children in school with limited access to

the internet for school. She was asked about talking with someone who she trusted or a counselor. She agreed to speak to a counselor for her bouts of depression. She was unable to go immediately but said she would make an appointment to the Ravenswood Clinic. She was

provided a flier "Control Your Depression, what you can do to help yourself." A follow up call was made and she is feeling better as she was called back to work, we assisted her with her PG&E bill and she took heed to the suggestions made on the flier. She has walking more often

and was very grateful for the call. Staff also assisted her with her Census.

Success Story #2 Sione came to APV for help with his court case in August. There were many issues surrounding his case, but one of the major factors he was reluctant to speak about was

his depression and his need to smoke marijuana and drink in hopes for some relief.

After

supporting Sione with his court case and advocating for a lesser sentence by implementing an

action plan, staff was able to link Sione to HealthRight 360 (HR360) and begin his journey

towards recovery. Today, Sione is a lot more talkative and engaged with his family through the

support from Anamatangi. Sione and his family have been receiving spiritual counseling with Mama Dee, Rev. Dan Taufalele and has been consistent in attending his meetings with HR360.

The program looks forward to what the future holds for Sione Fehoko (JJ), and will continue to

walk by faith and not by sight.

			<p>CHALLENGES</p> <p>FAL describes their biggest challenge this year being COVID-19 and how it has caused them to continue pivoting and evolving their way of helping the community.</p> <p>ECSMC's challenges are similar to years past – the diversity of each community in terms of culture, language, history, levels of acculturation and literacy are challenges that clients face when also dealing with poverty. Additionally, ECSMC could not make referrals for those who were seeing other providers outside of the County system. Furthermore, as with previous years, most of the cases were not severe mental illness. Finally, appointments for clients are not always available at the time needed though appointments could be made. However, ECSMC staff still take the time to establish some level of support and most of all, hope for all clients. APV staff have experienced the impact of COVID-19 on their families throughout their pandemic. In-person gatherings and face-to-face meetings are the methods of engaging Pacific Islanders (PI) and young people in the community. Over the years, raising awareness and reducing stigma around mental health have been conducted through creative PI gatherings such as music, song, dance and drumming as well as meals. Home visits have been the way to reach parents about their children, meeting face-to-face, explaining processes of school systems, social service systems, behavioral health systems and supporting their navigation have been Mamadee and her team's success. However, COVID-19 exacerbated the barriers that families have dealt with, leading to clients and families suffering in silence from the pandemic, depression, unemployment, health issues, undocumented status, just to name a few. To mitigate the challenges, APV has pivoted their outreach and referral process to include wellness checks via phone and email, delivered wellness packages to homes, referrals and warm hand-offs to community resources and assistance programs. They will continue to develop and adapt programming as the pandemic continues to meet the growing need</p>
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			<p>in the community.</p> <p>OUTREACH WORKER PROGRAM</p> <p>The purpose of the Lesbian, Gay, Bisexual, Transgender, Queer+ (LGBTQ+) Outreach program is to identify existing gaps in service provision that lead to underutilization of behavioral health and substance use recovery services by the LGBTQ+ community. Research has shown that LGBTQ+ folks experience disproportionately high rates of substance use as well as diagnoses of mental health conditions. While these heightened challenges are noted, LGBTQ+ community members are less likely to seek services and experience exacerbation of these challenges due to: 1) historical systemic identity-based discrimination of LGBTQ+ community members within health settings and society at large 2) lack of training of service providers to provide care that is culturally-responsive to the needs of LGBTQ+ folks, 3) lack of data collection on this communities' needs, which impairs our ability to see the scope of the challenges faced and disrupts potential funding allocation, among additional factors. The target population of this program is LGBTQ+ community members across all intersections of age, race, ethnicity and socioeconomic services, though priority is given to low-income folks, and folks with serious mental illness (SMI). Additionally, service providers and community-based organizations are the focus of much of this program in terms of training and consultation support. The primary program activities involve providing trainings and consultation to service providers across BHRS, contract providers, SMC Health division partners and community organizations; connecting LGBTQ+ community members to services that are currently providing culturally responsive care to LGBTQ+ folks; and strengthening connections between and the capacity of existing LGBTQ+ entities in San Mateo County. Additionally, this program collaborates with partners to create community events to increase opportunities for connection, as well as bring awareness to LGBTQ+ community issues and challenges.</p>
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PROGRAM IMPACT

The efforts of the outreach worker program focus on connecting clients to clinical services as

well as training clinicians, service providers and staff in community-based organizations on ways to improve services provided to LGBTQ+ community members and giving focus to making these spaces more affirming and inclusive of LGBTQ+ folks. The details below speak to these

efforts. In total, 15 trainings were provided within this fiscal year for the following groups:

- BHRS Central Clinic staff – 10 participants
- BHRS Interface staff- 10 participants
- BHRS South County Clinic staff -12 participants

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- South San Francisco Library trainings (3 sessions) -34 participants
- Lived Experience Academy – 12 participants
- Spirituality Initiative – 25 participants
- SMC C.A.F.E. participants- 30 participants
- Carl B. Metoyer Center for Family Counseling training – 6 participants
- Pop Up Photovoice Facilitators (2 trainings) - 15 participants
- LGBTQ+ Photovoice participants (4 session workshop)- 5 participants
- San Mateo County Probation Department – 40 participants
- SFSU Counseling MS Cohort- 15 participants

As a result, approximately 214 individuals received training that could improve the mental

health outcomes of the clients they serve, and create more opportunities for allyship, support and visibility that can be found across communities in San Mateo County.

Within this fiscal year, the outreach program manager attended and participated in 203 collaborative meetings including meetings with the following groups;

- Suicide Prevention Committee
- Northwest School-based Mental Health Collaborative
- Mental Health Awareness Month Planning Committee
- Domestic Violence Death Review Team (DVDRT)
- Prison Rape Elimination Act (PREA) Review Board
- Trauma Learning Collaborative
- Pride Center Staff meetings
- Gender & Sexualities Alliance (GSA) Coordinator Meetings
- Transgender Day of Remembrance (TDoR)

Planning Committee

- Pride 2020 Planning Committee
- Consultation meetings
- ODE staff meetings

In terms of direct referrals the Program Manager:

- Assisted 3 community members who were previously homeless with connections to temporary housing and shelters.
- Referred 4 community members to receive gender affirming medical care at San Mateo Medical Center's Gender Clinic
- Referred 9 people to the San Mateo County Pride Center for clinical services and peer support programs.

SUCSESSES

The annual Transgender Day of Remembrance (TDoR) gathering serves as a space of community

healing as the community comes together to collectively mourn the loss of transgender and nonbinary siblings whose lives have been taken by hate-based violence. On this day, Page 178

participants also reaffirm their commitment as a community and with allies to fight against anti-transgender violence and discrimination.

The gathering begins with a candlelight vigil and

procession through the streets, holding signs with the name of each person remembered in order to bring greater visibility to the losses the community has suffered and for passerby's to become aware that the lives of these folks deserve to be recognized.

Once the procession is complete, the events program features trans and nonbinary speakers

who speak about their own lived experiences.

The part of the program is powerful and features

trans and nonbinary folks of all ages, different races/ethnicities, and their varied life experiences. By hearing these stories, a deeper understanding of their experiences is cultivated,

not only in regard to the higher rates of violence and discrimination they may have faced, but

also about the ways in which they have come to find confidence in their identities and what makes them feel seen and heard. Participants have said that hearing from speakers has given

them hope they can overcome struggles around their identities and can thrive as a trans/nonbinary person. Another powerful part of this event is the Reading of Names. A

slideshow is created with the photos and names of each person being memorialized. An alter is created with individual memorials for each person to allow participants to learn about the person who passed and what was important to them.

Overall the event honors folks as multi-dimensional human beings and encourages allies to move beyond acknowledgement of the issue toward action.

Transgender Day of Remembrance 2019 Speakers with Supervisor Dave Pine (third from left), and the Redwood City Library partner Derek (first from left side).

Additionally, the annual San Mateo County Pride Celebration creates a space to celebrate all identities with fellow community members, feel visibility, connect with other LGBTQ+ folks and share community resources. Throughout the event, LGBTQ+ visibility is key as LGBTQ+ voices are highlighted all day through dance, entertainment, community flags and statements from prominent LGBTQ+ figures in the community.

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Due to Covid-19, the typical in-person event was moved to a virtual event and was expanded to a whole week of festivities. The collaborative group that came together to create this virtual week of events was led by the PRIDE Initiative in partnership with the San Mateo County Pride Center, the San Mateo County LGBTQ+ Commission, the Office of Diversity & Equity, CORA and community members.

A total of 14 virtual events were held, including workshops, author readings, drag storytime hour, a drag show, focus groups, a documentary screening, wellness-based activities, and a grand celebration that was livestreamed and recorded with the help of PennTV!

Per the PRIDE Initiatives' annual report, "Overall, there were 9,500 views on the PRIDE Initiative Facebook during the week of the Virtual PRIDE Celebration. The day of the Grand Finale there were 6,115 views on Facebook, as well as 244 people attended the workshops during the week on Zoom."

		<p>CHALLENGES A challenge faced in implementing this program includes the need to devote much time to increasing awareness of LGBTQ+ needs and decreasing implicit bias of providers, while simultaneously trying to connect LGBTQ+ folks to county services. While the goal is to increase the number of LGBTQ+ folks receiving services through the health system, this cannot be actualized until the providers are ready and capable to provide culturally humble services. Lack of staffing makes scaling outreach difficult. Furthermore, partners who do not work at LGBTQ-specific organizations such as PRIDE Initiative members and the LGBTQ+ Commission are also working fulltime jobs, and there is a limit to how much time and energy they can put into creating a more equitable, inclusive health care system. Lastly, the challenge in finding “unduplicated clients” who identify as LGBTQ+ in San Mateo county is exacerbated by the fact that the county does not have many social outlets for LGBTQ+ folks to meet each other outside of the Pride Center which many seek out to find care and peer support. Many LGBTQ+ folks often seek community outside of San Mateo County.</p> <p>SENIOR PEER COUNSELING See program description in General System Development- Older Adult System</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 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>Monthly meetings continue to take place, to be resource/toolkit guide for cultural humility trainers. The monthly schedule changed, and contracted facilitators are encouraged to attend meetings per their contract. Staff time and capacity continues to be a problem, which has diminished monthly participation. ODE staff shortages have also limited the support available for training implementation and ongoing support. This group will also receive support from the newly formed BHRS subcommittee dedicated to overseeing the progress with cultural humility trainings, as part of our MCOA action plan. .</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>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>This last fiscal year offered unexpected opportunities to hear from community, mainly due increased needs due to COVID and disparities within marginalized communities. For example, the Town Halls hosted by DEC, three Faith Leader Webinars (June 2020, December 2020, January 2021), that allowed for direct communication with communities. The Faith Leader convenings brought the created spiritual letters, etc., & support document. Outreach to faith leaders to support/creative vaccination spaces.</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>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.</p> <p>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>In FY 2020-2021 the BHRS saw 203 unique requests for interpretation services on video or in-person, 91% were video remote interpretation due to COVID-19 pandemic. There were 2,979 unique requests for telephonic interpretation, and 27 unique requests for translation of written materials into San Mateo County threshold languages. According to FY19-20 data, 82.46% of clients with a preferred language other than English received a service in their preferred language.</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>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>	<p>Highlights in FY 20-21:</p> <ul style="list-style-type: none"> i. The GARE Health team began work on revising the SMC Health Racial Equity Action Plan (REAP). ii. The San Mateo County Health Executive Committee (HEC) were integral in the creation of the REAP and all received the Race, Health & Equity Training. iii. The BHRS Director is part of the HEC Racial Equity Subcommittee which includes Health GARE member(s) iv. Expansion of Race, Health & Equity training to all our Health workforce: 10 sessions provided in 2021 with 493 staff training in San Mateo County Health. v. Monthly meetings and subcommittees continue to take place to oversee data collection, policy & procedures, training, REAP, communications & recruitment. vi. A Racial Equity 21-Day Challenge was developed, provided, and made available for county and CBOs staff. vii. Under the direction of our San Mateo County Equity Officer, the SMC Core Equity Team has begun to create a REAP for the entire County. viii. The Health GARE team now works in conjunction with the County GARE team. ix. SMC Equity Officer, the Health GARE teams, and the SMC Core Equity Team (which includes members from all SMC departments) is working on a GARE survey to disseminate in late 2021 to all County staff.
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