



**San Mateo County Health System
Behavioral Health and Recovery Services Division**



Mental Health Services Act (MHS) Three-Year Plan Launch

Monday, March 13, 2016 / 3:00 - 5:00 PM

Health System Campus, Room 100, 225 37th Ave., San Mateo, CA

MINUTES

1. Welcome & Introductions

3:10 PM

Supervisor Dave Pine, District 1, Board of Supervisors

2. MHS Background

3:15 PM

Doris Estremera, MHS Manager

The background of MHS components and annual allocated funding was explained. This included reviewing Community Services and Supports (CSS), Prevention and Early Intervention (PEI), Innovations (INN), Workforce Education and Training (WET), Capital Facilities and Information Technology, and Housing.

The Community Program Planning (CPP) Process consists of the consistent input of the MHSARC and the Steering Committee and the broader stakeholder input gathered during the three year plan. During the Three-Year Plan CPP Process, this meeting is the launch for the MHS Three-Year Planning process that is set out to engage a broad group of stakeholders to gather input on existing programs and to prioritize needs. Once recommendations on programs and strategies and priority needs are established, they will be presented to the MHSARC where a 30-day public comment period and a public hearing.

3. Input

3:25 PM

- AB1929 Housing Funds

Steve Kaplan, Director BHRS

Janet Stone, Housing Policy & Development Manager

BHRS has approximately \$1.2 million of Mental Health Services Act (MHS) Housing funds that are under the County's control. The agency is collaborating with the Department of Housing (DOH) to develop a project that would provide permanent affordable housing to persons with severe mental health illness. DOH would partner with an experienced, qualified developer to complete, own, and operate the project. DOH is reviewing its project pipeline and considering two models. The first would be to acquire a small or mid-size multi-family building in which approximately five units would be dedicated to serving the MHS-supported residents. The other model would be to acquire a shared home with approximately five bedrooms to serve the MHS-supported residents. The project would need to be within close proximity to reliable transit.

DOH plans to include language regarding targeting a development for MSHA-supported residents in the Request for Proposals to developers to be released this spring. The MSHA funding may be used for capital improvements or operating reserves related to the development. The funds must be expended by December of 2018.

4. Strategy Brainstorm Activity

3:40 PM

- Review preliminary findings

Doris Estremera, MSHA Manager

During the first phase of the CPP process, input on needs and gaps in services was sought, as of the date of the MSHA Three-Year Plan Launch, 15 out of 24 input sessions with diverse stakeholder groups had been completed. The list of stakeholder groups was shared with the audience. Feedback from the public was asked for whose voice was missing from the list: Contractor's Association, law enforcement, youth, Institute for Human and Social Development, older adults, and FAST. It was explained that MSHA funded programs would receive a one-on-one meeting to discuss specific program and client needs further.

Dr. Faye McNair-Knox asked a question regarding how we will ensure that voices of low income individuals or other marginalized communities are heard, they do not typically attend the input sessions. There will be additional sessions held in isolated and higher need communities like East Palo Alto and the Coastside/Pescadero.

The goal during the input sessions was to assess the current MSHA funded programs by understanding what's working well across the BHRS system, and what needs improvement. Using the feedback received so far, some of the input was shared with the audience about what needs improvement. Additional input sought from the audience. Helene Zimmerman of NAMI, Michael Horgan from California Clubhouse, and Christopher Jump from Heart & Soul provided public comment, attached.

Members of audience were asked to participate in a community input session by selecting one of the key preliminary themes from the needs assessment phase (Crisis Intervention, Culturally Relevant Outreach, Integrated Peer/Family Support, Integrated Co-Occurring Practices, Older Adult Engagement, and Support Services for Clients) and to work with the facilitator to answer the following questions, see attached breakout notes.

- 1) Given the current programs addressing these issues, what are some ways they can be improved?
- 2) What other best practice or new strategies should be considered to address the issues?

Next steps will include Completing Phase 1 – additional input sessions, needs and follow up with MSHA funded programs; Recommended strategies and prioritization at next MSHA Community Input meeting; Final plan development and presentation to the MHSARC and 30 Day Public Comment and Public Hearing; Present to the Board of Supervisors for adoption; Controller to certify expenditures; Submit to the State MHSOAC

5. Adjourn

4:45 PM



San Mateo County Behavioral Health & Recovery Services (BHRS)
Mental Health Services Act (MHSA)



Group #1: Crisis Intervention

Q1: Given the current programs addressing these issues, what are some ways they can be improved?

- SMART
- FAST
- CIT
- StarVista Crisis Hotline

Q2: What other best practices or new strategies should be considered to address the issues?

- Youth transitioning from foster care. How can we better serve the population and improve the continuity of care?
- Practical solutions for folks who do not identify as having mental illness.
- Increase resources to connect clients with therapy and case management in the community, at home, and in clinics.
- Identify resources for family members that include crisis response for families.
- Broaden the use of peer support and community liaisons to help clients receive timely access to care.
- School based response & funding for suicide prevention + family support for youth
 - Mobile crisis response funding/ home based services. Geographically/ dif. Regions
- Look into: HEAD SPACE (Santa Clara County)
 - Can we better serve the mild-moderate mental illness population?
 - Increase infrastructure for crisis response and provide respite opportunities for youth and adults via drop-in center
- Expansion of CIT, FAST
 - Increase cultural humility training of responders and be understanding and practice co-occurring capabilities by starting at using the language of recovery.
 - Increase the age group of the population served, including adults/older adults.
- Increase urgent care services w/ direct link to ACCESS call center and services on site
- SMART is great at transportation, but they need to provide more than just that.
- Prevention and & reintegration services for those that don't have Medi-Cal/Medicare



San Mateo County Behavioral Health & Recovery Services (BHRS)
Mental Health Services Act (MHSA)



Group #2: Culturally Relevant Outreach

Q1: Given the current programs addressing these issues, what are some ways they can be improved?

- NCOC
- EPAPMHO
- HEI's
- Chinese Outreach Worker

Q2: What other best practices or new strategies should be considered to address the issues?

- Parent Project – often there is a shortage of the amount of food. Can there be more food to ensure everyone is fed?
- Parent project is not culturally sensitive. There are many different family dynamics that are presented in culturally and ethnically diverse communities. Look into the Positive Parenting Program widely used in UK.
- Improve the collaboration between HEIs. For example, PRIDE and Filipino Mental Health Initiative could collaborate to meet the identified community need.
- Listen to the community and implement their ideas.
- Extend the term or create an agile position for the Chinese community worker because of huge stigma in the Chinese community, especially due to immigration changes. There is a clear need and a relationship has been built between the outreach worker and the community is important to maintain.
- Collaborate between HEI and County Counsel to support the community.
- Create new cultural groups based on population of the region and support these communities to be self-sustainable.
- Recruit therapists that represent the cultures mentoring program
- Alternative to talk-therapy (ex. Gardening) that are culturally appropriate.
- Utilizing community services as a process of recovery (eg. Church)
- Open public spaces for healing exercise (eg. Tai-chi)
- Housing for interns of behavioral health services + SMC employees + Community Based Organizations employees



San Mateo County Behavioral Health & Recovery Services (BHRS)
Mental Health Services Act (MHSA)



Group #3: Integrating Peer/Family Support

Q1: Given the current programs addressing these issues, what are some ways they can be improved?

- Peer recovery collaborative
- Lived Experience Academy
- Peer/Family Partners

Q2: What other best practices or new strategies should be considered to address the issues?

- Administrative Infrastructure
- Transportation- public or private
- Expanding Peer Support Training
- Parent Support for Increasing/Teen/Independent Children
- Family Systems Training
- Family Support – Educational Programs
- Family has limited support without violating HIPPA
- More Outreach
- Dealing with Stigma-More educational programs dealing with Stigma
- Disbursing educational information within the community
- Mentorship Program/Expanding Mentorship Program
- Mentor/Mentorship Program at time of discharge
- Family Program
- A Parallel Family-to-Family Program
- Look into “Raising the Voice” Program
- More money for brochures
- Peer counseling classes at the college level
- Address experience and training opportunities after training
- Looking for Outside Service Providers
- Crisis Intervention Training
- VRS Coordination



San Mateo County Behavioral Health & Recovery Services (BHRS)
Mental Health Services Act (MHSA)



Group #4: Integrated Co-Occurring Practices

Q1: Given the current programs addressing these issues, what are some ways they can be improved?

- AOD Provider Contracts

Q2: What other best practices or new strategies should be considered to address the issues?

- Adaptation of programs using:
 - Cultural humility, LGBT
 - Variety of programs beyond Legacy 12-step
- Collaboration of programs to better understand service provision
 - Inter-agency referrals
 - Evaluative needs and services
- Broaden the training requirements in Request For Proposals for AOD programs
- 360° evaluation of programs consumer/recovery community and staff
- Continuum of Care
 - Trauma informed care needs to go a step further to increase the system of care once in recovery and thereafter.
 - Trauma informed care needs to increase capacity to be able to treat
- Each AOD program needs to have a MH specialist/counselor/team on staff
 - Including at our Resource Centers
- In the case of discharge continuity of care is in place that places the client first using:
 - Peer support/family partners
 - Associate Social Worker



San Mateo County Behavioral Health & Recovery Services (BHRS)
Mental Health Services Act (MHSA)



Group #5: Older Adult Engagement

Q1: Given the current programs addressing these issues, what are some ways they can be improved?

- Senior Peer Counseling
- OASIS

Q2: What other best practices or new strategies should be considered to address the issues?

- Recruit Older Adults to participate in advisory groups, etc.
- Transportation for seniors to services.
- Reminders: phone, etc. Often elders are missing appointment due to non-compliance.
- Outreach to OA housing/boarding care etc.
- Promote volunteerism via the clinical community
- Better non computer related outreach
- Senior Peer Counseling Program
 - Recruitment for volunteers
- Recruitment for clients.
- Engage family to collaborate with care providers
- Specific, targeted anti-stigma
 - Ex: Lived Experience/digital story telling
- Expand Lived Experience/Lived Experience Education Workgroup
- Develop questionnaire to assess interests/ availability
- Integrate Behavioral Health and Older Adults
- Look into Second Harvest food for elders that are receiving BHRS services
- Engaging gate keepers of the older adults.
 - No early meetings or evenings
 - Provide snacks/coffee
 - Mid-day is best



Group #6 Support Services for Clients

Q1: Given the current programs addressing these issues, what are some ways they can be improved?

- Samtrans (Not a program) “Redi wheels.”
- Lyft (provides discounts?).
- Kinship Program (Edgewood).
- Seniors in RWC; On-line program to pick up/drop off (volunteers matched with needs).
 - California Clubhouse has an existing partnership with Stanford to understand barriers experienced by peers =Need expansion of support services offered through MHSA.
 - More attention and support needed for out of hospital transition of clients (outpatient) Youth out of treatment also.
 - More support needed for peers beginning employment or reentry into workforce-follow up support.

Q2: What other best practices or new strategies should be considered to address the issues?

- Work to support what already exists; focus on process improvement.
 - Details- communication between driver and dispatcher. Example: need for wheelchair not communicated w/ transportation service, resulting in delay of service or cancellation.
- Need for transportation is well known, but no conversation or opportunity for improving current system to improve communication (cultural sensitivity) with mental health clients = fragmented system.
- Work on driver’s skills for working with MH clients, there is stigma in many cases once destination is revealed.
- Work on or expand on who is allowed to drive clients, it is a critical need, currently NOT reimbursable or funded for staff or providers providing transportation.
- Have child seats and booster seats available for clients.
- Transportation IS part of MH services NOT separate.
- Childcare should be an option for group meetings.
 - Encourage or support after school programs that can help clients be available for afternoon appointments/services.
- PRC topic> “Housing Navigator” someone to collect all housing information and be point of reference across groups and organizations.
- PREP current transportation challenges serve as an example of the gaps in support services:
 - Currently only have one vehicle to transport clients to peer support groups.
 - Group facilitator begins pick up route 2hrs before class, and then drives 2hrs after to drop off.
 - Transportation needed throughout county, but only have capacity to provide service to Pacifica and Daly City.
 - Solution to upgrade vehicle and look for new driver (not facilitator), but there is no funding to cover all of county and a new driver would require pulling someone else from current staff.
 - PREP also provides bus tokens, which are good for local clients but those from farther areas (coast side) = 2hr+ bus ride.

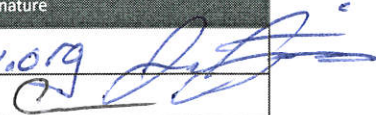
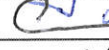

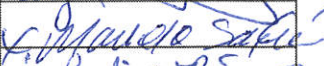
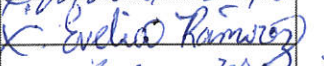


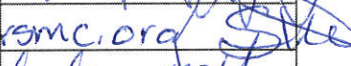
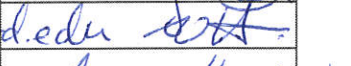
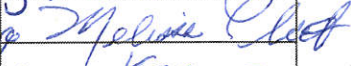




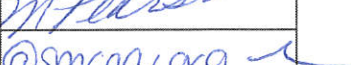
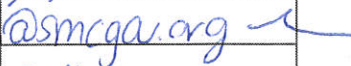

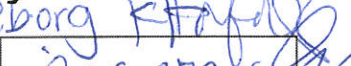
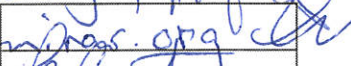

[illegible]

Stakeholder Group	Name(s)	Title (if applicable)	Organization (if applicable)	Email	Signature
	Cecilia Jane Roberts			cecilia.jane.roberts@va.hoo.com	Cecilia Jane Roberts
	Tiffany Bailey	services coord.	MHA	TiffanyBailey@mh.org	
	Nancy Chen	Mental Health Program Specialist	BHRS ODE	nchen@smgov.org	
	FAITH CHAN				
	Roshelle Gaudet	Supervisor & Ed. Specialist	Stanford U.	Roshelle@stanford.edu	
	Pam LOZOFF	Path Outreach Specialist	Stanford	Pam.1ozoff@stanford.edu	
	Matt Boyle	BHRS Analyst	BHRS	mboyle@smgov.org	
	Jiro Arase-Barham		California Clubhouse	jiro.arase@gmail.com	
	Margie Salas	Program Dir	Star Vista		
	PAUL HUNT		CALIFORNIA CLUB HOUSE		
	Laura Moberaten		NAMI		
	JUDY SINGER		NAMI		
	John R. Butler	Client	South County	NewHope@aol.com	
	Andrew Shu	Clubhouse	Clubhouse	andrewyshu@gmail.com	
	Maria Constantino	staff Generalist	Clubhouse	mconstantino@piedmont.edu	
	Kathy Stern	Family Member	NAMI	Kathy4730@gmail.com	
	Ron Dugrenvi	SF	NAMI	ron.dugrenvi@hotmail.com	
	Deb Higgins	Board member	Clubhouse	dhiggins22@hotmail.com	
	Juliana Everbringer	Board Member	Clubhouse	oncommittee	
	Dr. F. McNair	Exec Director	One East Palo Alto	mcnair@1epa.org	
	Andrew Grey		Agency's Adult Svcs	andrewgrey@smgov.org	
	JEAN CHEN		NAMI	jeanchenccc@hotmail.com	
	DOUG FONG	CLIN SW. MGR	BHRS	DFong@smgov.org	
	Julio Garcia		KOVS MC	Jgarcia@kvs.org	
	Vera Hill		MHS A	Vhill2010@gmail.com	
	Stephanie Weisner	Dept Dir	Star Vista	stephanie.weisner@star-vista.org	

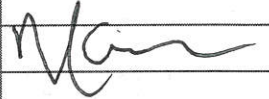

[illegible]

[illegible]

[illegible]

Stakeholder Group	Name(s)	Title (if applicable)	Organization (if applicable)	Email	Signature
	Justin Francis	secretary	BHRS	jfrancis@smcga.gov	
	Calvin Shelton	Heart & Soul - Board member		CalShelton2005@gmail.com	
	Yoshie Hill	Executive Assistant	Heart and Soul, Inc	yoshie.hill@heartandsoulinc.org	Yoshie Hill
	Ginger Mendola	BFPD	Edgewood	gingerm@edwood.org	
	Maricela Sandin	Const Client		msandin@icg.org	
	Evelia Ramirez	Consumer			
	Mary Latham	Consumer	Californian Clubhouse	maryjulialatham@gmail.com	Mary Latham
	Frances Lobos	program coordinator	BHRS - ODE	flobos@smcga.gov	
	Jerry Thompson	President	WAMI San Mateo	jerry.RW123@gmail.com	
	Sharon Heath	Program Director	VORSMC	sheath@vorsmc.org	
	Vicki Harrison	Program Manager	Stanford Psychiatry	vickih@stanford.edu	
	Leanna Harper	Family Partner / family member	Caminar	leannah@caminar.org	Leanna Harper
	Melissa Platte	Executive Director	MHA	melissap@mhsmc.org	
	Kim Gillette	Director	DCYHC	kgillette@smcga.gov	
	Margrit Rinderknecht	Board member	California Clubhouse	margrit@luckymr.net	
	Jennifer Fan	Behavioral Health Director	Edgewood	jfan@edgewood.org	
	Jessie Thompson	MHA	MHSA / Public		
	Marilyn Pearson		Public		
Calif. Clubh.	Julia McLaughlin	Peer Nurse RN	SMHC	jumclaughlin@smcga.org	
IHSD	MANUFACTURING AREA AND HEALTH MGR		IHSD	manaoi@ihedinc.org	
PREP/BEAM	Bruce Adams	Program Manager	Felton Institute	badams@felton.org	Bruce Adams
	Keisarina Hatfota	Manager of Empowering Youth	PCRC	khafota@percweb.org	
Caminar	Alison Barrea	CSW	Caminar	AlisonB@Caminar.org	
VORSMC	Brian Bates	Rec Coach	VORSMC	bbates@vorsmc.org	

Stakeholder Group	Name(s)	Title (if applicable)	Organization (if applicable)	Email	Signature
Client/Consumer	Aisha Williams		Lived Experience Academy	aishamwilliams92@gmail.com	
Client/Consumer	Alan Cochran		Lived Experience Academy	ak_cochran@yahoo.com	
Client/Consumer	Patrishia Ragins*	MHSARC Commissioner		patrisharagins@yahoo.com	
Client/Consumer	Rocio Cornejo*	MHSARC Commissioner		rocio.cornejo9@yahoo.com	
Client/Consumer	Wanda Thompson*	MHSARC Commissioner		w.thompson1967@yahoo.com	
Client/Consumer - Adults	Jairo Wilches	Liaison and BHRS Wellness Champion	BHRS, Office of Family and Consumer Affairs	jwilches@smcgov.org	
Client/Consumer - Adults	Michael Lim			mhl-lim@outlook.com	
Client/Consumer - Adults	Michael S. Horgan	Program Coordinator	Heart & Soul, Inc.	michaelhorgan@me.com	
Client/Consumer - Adults	Patrick Field			pfield3311@gmail.com	
Client/Consumer - Adults	Rodney Roddewig*	MHSARC Commissioner	MHSARC	rrodney2k6@gmail.com	
Client/Consumer - Older Adult	Carmen Lee	Program Director	Stamp Out Stigma	carmensos@aol.com	
Client/Consumer - SA	Carol Marble*	MHSARC Commissioner		carolmarb@aol.com	
Client/Consumer - SA	Eduardo Tirado*	MHSARC Commissioner	Voices of Recovery	etirado@vorsmc.org	
Client/Consumer - SA	Louise Orellana*	MHSARC Commissioner	Voices of Recovery	lorellana@vorsmc.org	
Client/Consumer and Veterans	Edmund Bridges*	MHSARC Commissioner		edmund.bridges@vfrsolutions.org	
Cultural Competence & Divers	Jei Africa	Director	Office of Diversity & Equity	jafrica@smcgov.org	
Disabilities	David DeNola		Center for Independence	davidd@cidsanmateo.org	
Disabilities	Maisoon Sahouria		Center for Independence	maisoons@cidsanmateo.org	
Disabilities	Vincent Merola	Systems Change	Center for Independence	vincentm@cidsanmateo.org	
East Palo Alto Community	Rev. William Chester McCall		Multicultural Counselling & Educational Services of the Bay Area	chester.wellness@gmail.com	
Education	Joan Rosas	Associate Superintendent	SMC Office of Education	jrosas@smcoe.org	
Family Member	Dorothy Christian*	MHSARC Commissioner		Dchristian28@yahoo.com	
Family Member	Judith Schutzman*	MHSARC Commissioner		judyschutzman@aol.com	
Family Member	Juliana Fuerbringer		California Clubhouse	julianafuer@gmail.com	
Family Member	Patricia Way*	MHSARC Commissioner	MHSARC	patcway@hotmail.com	
Health Care	Dr. Dan Becker	Medical Director	Mills Peninsula Health Svcs	beckerdf@sutterhealth.org	
Law Enforcement	Eric Wollman*	MHSARC Commissioner	Burlingame Police	mmortz@burlingamepolice.org	

Other - Advocate	Randall Fox	Health, Law and Policy Advocate	Former MHSARC Chairman	randallfox@sbcglobel.net	
Other - Aging and Adult Services	Michelle Makino	Program Services Manager	SMC Health System, Aging & Adult Services	mmakino@smcgov.org	
Other - Domestic Violence	Caitlin Billings		Community Overcoming Relationship Abuse - CORA	caitlinb@corasupport.org	
Other - Peer Support	Ray Mills	Executive Director	Voices of Recovery	raymills71@gmail.com	
Provider of MH/SU Svcs	Cardum Harmon	Executive Director	Heart & Soul, Inc.	cardumh@heartandsoulinc.org	
Provider of MH/SU Svcs	Clarise Blanchard	Director of Substance Abuse and Co-occurring Disorders	Star Vista and BHRS Contractors Association	cblanchard@star-vista.org	
Provider of MH/SU Svcs	Gloria Gutierrez	MH Counselor	BHRS	GGutierrez@smcgov.org	
Provider of MH/SU Svcs	Joann Watkins	Clinical Director	Puente de la Costa Sur	watkins3121@gmail.com	
Provider of MH/SU Svcs	Melissa Platte	Executive Director	Mental Health Association	melissap@mhasmc.org	
Provider of Social Services	Lynn Schuette		Community Overcoming Relationship Abuse- CORA	Lynns@corasupport.org	
Provider of Social Services	Mary Bier		North County Outreach Collaborative	marykbier@gmail.com	
Provider of Social Services	Sheri Broussard		HIP Housing	sbroussard@hiphousing.org	
Public	Betty Savin*	MHSARC Commissioner		betty Savin@yahoo.com	
Public	Cherry Leung*	MHSARC Commissioner		cherry.leung@ucsf.edu	
Public	Josephine Thompson*	MHSARC Commissioner			
San Mateo County District 1	David Pine*	Supervisor, District 1	Board of Supervisors	DPine@smcgov.org	
San Mateo County District 1	Randy Torrijos*	Staff to David Pine	Board of Supervisors	Rtorrijos@smcgov.org	
	Juliet Vimahi			jvimahi@pcrcweb.org	
	Melinda Parker		Spirituality Initiative	maparker@smcgov.org	
	Shanna 'Uhila		East Palo Alto Behavioral Health Advisory Group	write2shanna@gmail.com	
	Tiffany Hautau		East Palo Alto Behavioral Health Advisory Group	tiffanyhautau@yahoo.com	