

Wellness Matters

An E-Journal of San Mateo County Behavioral Health and Recovery Services

April 2012

National Public Health Week April 2- 8



Join Stamp Out Stigma and meet with members from the BHRS Lived Experience Speakers Bureau

Friday, April 6th
8:30 - 10:00 am
225 W. 37th Avenue
Room 100, San Mateo.

Learn more about Public Health Week on page 13.

Should Jails and Prisons Be Treatment Facilities? (Second Installment)

By Stephen Kaplan, Director of Behavioral Health and Recovery Services

In the June 2011 edition of *Wellness Matters* (linked below), I wrote about the many excellent programs and services we have for persons with substance use challenges and/or mental health issues involved in the criminal justice system. I also indicated that despite these services we still had many significant gaps, and that BHRS was engaged in discussions with representatives from law enforcement and criminal justice to develop recommendations on better responding to the individuals who bear the consequences of those service gaps.

Our discussions have continued with our colleagues from law enforcement, and I want to share with you the areas we are focusing on to improve our response capacity and capabilities. It is our intent to work collectively towards implementing these ideas.

Focus Area 1: Avoid arrests, jail and hospital admissions by providing training, information, and alternatives for police officers dealing with mentally ill or substance-using individuals.

- Expand Crisis Intervention Training to law enforcement personnel.
- Provide direct consultation to field officers involved in crisis situations.
- Increase response capacity for SMART and enhance triage functions.

Focus Area 2: Avoid protracted jail stays by providing information and alternatives to the DA, PD, Probation and Courts

who must make quick decisions regarding disposition of cases.

- For individuals arrested and jailed, provide a clinical review and assessment of their community supports to the relevant criminal justice representative before decisions are made.
- Review the feasibility of expanding Drug Court and Pathways eligibility.

Focus Area 3: Implement community-based solutions that will reduce criminal justice involvement of mentally ill or substance-using individuals.

- Create Full Service Partnership slots for persons discharged from jail, PES, psychiatric in-patient services.
- Establish a short term crisis residential for adults with a serious mental illness.
- Increase residential detoxification beds.

Focus Area 4: Avoid arrests and jail admissions by providing earlier intervention for families and others who are trying to identify assistance for someone experiencing deterioration of their mental health that may result in crisis and legal system involvement.

- Develop a structured response for families/others to petition the Behavioral Health Director for immediate, in-the-field evaluation.
- Strengthen the LPS conservatorship process.

As we continue our work to refine our efforts to better serve individuals who are at risk of interfacing with the

criminal justice system, it is critical that we listen carefully to what those most impacted are telling us.

As part of NAMI's policy platform regarding the criminalization of people with mental illness, they state the following:

NAMI believes that mental health systems have an obligation to develop and implement systems of appropriate care for individuals whose untreated brain disorders may cause them to engage in inappropriate or criminal behaviors.

And in 2005 SAMHSA convened a meeting entitled "Building Bridges: Consumers and Representatives of the Mental Health and Criminal Justice Systems in Dialogue," and issued the following consensus statement:

We envision a consumer-driven prevention and recovery support system for individuals and families in the criminal justice system who are affected by trauma and mental illness, and for individuals at risk of involvement in the system. The support system the participants envision would span a continuum that includes prevention, diversion from incarceration, treatment, education, and community reintegration services. Peer support would be available within a mental health recovery unit at correctional facilities, and a transition team would ease community reintegration. ☺

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**BHRS South
County Clinic**

4th Annual Hope Awards

*Celebrating Clients'
Success and Recovery*

Thursday, April 5th

4:00 - 6:00 pm

802 Brewster Ave

Redwood City

Please Join Us!

RSVP Lee Harrison

650.363.4111 x303

LeHarrison@smcgov.org

School Based Mental
Health and County
Office of Education

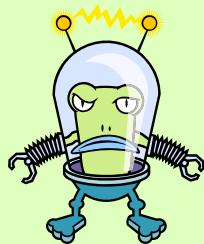
Annual Student Art Show

Space: Planets, Time
Travel, Aliens!

Opening Night
Reception

Friday, April 27th

4:00 - 7:00 pm



1290 Commodore
West, San Bruno
(650) 583-1260

Pathways Mental Health Program – A Prosecutor’s Perspective

In 2006 leaders from several San Mateo County criminal justice and other county health departments came together in an effort to come up with a better way to deal with individuals who came into the court system charged with criminal conduct and who had a need for mental health treatment. The representatives were from the Probation Department, the District Attorney’s Office, the Private Defender Program, the Superior Court, the Sheriff’s Office, County Correctional Health and Behavioral Health and Recovery Services.

Despite the different perspectives on crime, punishment and treatment, each of these leaders brought to the table, a collaborative mission was undertaken to find a new way of working with incarcerated persons with serious mental health issues. Under the leadership of Superior Court Judge Mark Forcum, these leaders met on a regular basis and hammered out a new program called the Pathways Mental Health Treatment Court.

The Pathways Program,

started in late 2006, was an immediate success, and has continued to provide an alternative to incarceration for individuals in our county jail with serious mental health issues.

Understand that for a career prosecutor, such as myself, with 35 years of convicting, and seeking to incarcerate criminal offenders, there is a significant skepticism about any new approach that allows an offender to avoid jail. However it did not take long for this prosecutor to be sold on the new approach offered by the Pathways Program. Just one year later in the first annual report of the Pathways Mental Health Treatment Program in 2007, I stated that the Pathways Program was the most progressive step ever taken in our county criminal justice system, to work with persons with mental health issues to ensure they do not re-offend and return to jail.

Five years have passed and now my view is from the position of the elected District Attorney. My enthusiasm and support for the Pathways Program has not diminished at all, and I continue to believe that the Pathways Program

provides the best alternative for defendants with serious mental health problems who qualify for Pathways treatment. However, the program is not a success just because of the structure, rules and guidelines that we created six years ago. It is successful due to the work of the employees of the Probation Department, BHRS, and Correctional Health, such as Terry Wilcox-Rittgers, Bonnie MacAskill, Michael Leon, Tennille Tucker, Teresa Bassett and many others who work with passion and devotion to help the Pathways clients avoid a repetition of the conduct that led to their incarceration. Pathways Mental Health Court’s success has been also due to the compassion and insight provided by Judge Mark Forcum, and Myra Weiher and Alex Easterbrook of the Private Defender Program.

All of this explains why the District Attorney’s Office wholeheartedly supports the Pathways Mental Health Treatment Program.

- Steve Wagstaffe,
District Attorney

2012 Federal Poverty Guidelines released

The federal government announced the new federal poverty limits for 2012. The State of California adopted these new limits for all of its health insurance programs (Medi-Cal, Healthy Families, etc.) as of April 1st, 2012. This might have an impact on some of the BHRS clients who were previously denied free Medi-Cal or MCE coverage.

- A disabled single adult might qualify for free Medi-Cal after April 1st with a monthly gross income of

\$1,181 or less.

- A non-disabled single adult with monthly gross income of \$1,239 or less will now qualify for MCE.
- The monthly income limit for the ACE County program has also increased to \$1,862 for a single adult.
- The limits for married couples or single parent households with one child have increased by approximately \$40 - \$50 per program from last year.

BHRS clients who are unsure if they would now qualify for free health insurance coverage under the new federal poverty guidelines can contact Stefan Luesse, Manager for Health Insurance Outreach & Coordination, at 650.573.3502, for a free consultation, or can ask to meet with a Financial Intake Clerk at the front desk of any BHRS Clinic for a free on-site income eligibility screening. ☺

- Stefan Luesse

April 2012

Mental Health Services Act Update - Sandra Santana-Mora, MHSAC Coordinator

In the previous issue of *Wellness Matters*, I addressed the particulars of the Governor's proposal specifically regarding the administration of the Mental Health Services Act at the State level. In this issue, I will elaborate on other aspects of the Governor's proposal.

As we have discussed in previous MHSAC updates, Assembly Bill 100 (A.B. 100)—the bill signed by the Governor a year ago that initiated dramatic changes in the Mental Health Services Act world—left us with several unanswered questions: While the State Department of Mental Health (DMH) and the Mental Health Services Oversight and Accountability Commission (MHSOAC) no longer approve Counties' MHSAC Plans, Counties still have to submit plans to the State, although the recipient(s) on that end has/have not been identified. Here is another obscure point: Once the components have been rolled out, Counties are to develop a "three-year integrated plan;" the timeline for this plan, and what does it mean exactly to have an integrated plan, are unclear. And these are just two examples that illustrate the ambiguity generated by A.B. 100.

The latest proposal by the Governor aims at clarifying some of these uncertainties, while introducing more changes. Starting in FY 12/13, the Governor proposes the following: to designate the

MHSOAC to receive Counties' plans; to repeal the Counties Performance Contract; to repeal a requirement that the MHSOAC develop plan guidelines for Prevention and Early Intervention and for Innovation; to designate the County Board of Supervisors to approve plans; to appropriate \$60 million to State Department of Public Health for the "California Reducing Disparities Project;" to repeal the State's role in developing planning guidelines; and to repeal the role of DMH in informing availability of funds annually to Counties. Some of these changes do not have great local implications; in our County, our MHSAC plan is part of our overall Health System budget, therefore it is indeed approved by the Board of Supervisors as part of that process. But some of other proposed changes are worrisome: The proposal to redirect \$60 million to the Department of Public Health does worry us because it proposes amending the Act to redirect local dollars to a statewide project (this would set a dangerous precedent); we also see the repeal of the performance contract as worrisome, as it would eliminate an instrument that ensures transparency, because it outlines Counties' and State' statutory and regulatory responsibilities with regards to the Mental Health Services Act.

We have also learned of a

Spot Bill (S.B. 1136 introduced by Senator Darrell Steinberg), which proposes other changes to the Mental Health Services Act not clearly delineated at this time. A "spot bill" is "a bill that proposes non-substantive amendments to a code section in a particular subject, introduced to assure that a germane vehicle will be available at a later date after the deadline has passed to introduce bills. At that future date, the bill can be amended with more substance included" (www.leginfo.ca.gov). One can think of a spot bill as a placeholder. When it is unclear what that placeholder might one day hold, it's a good idea to remain vigilant and to follow any developments closely, which is exactly what we plan to do. You can find the full text of S.B. 1136 at the link below.

Locally, we will continue our planning process unchanged with regards to previous years. You are cordially invited to a meeting of the Mental Health Services Act Steering Committee to that purpose. The Committee will meet jointly with the Mental Health and Substance Abuse Recovery Commission (see right for details). Thanks in advance for spreading the word about this meeting, and I look forward to seeing you on May 2. In the meantime, please write or call me with your MHSAC questions: email: SSantana-mora@smcgov.org, phone: 650.573.2889. ☺

S.B. 1136: http://www.aroundthecapitol.com/Bills/SB_1136/20112012/



Where is the Monkey?

CAM the Change Agent Monkey was recently seen at Voices of Recovery San Mateo County (VORSMC). CAM has been acknowledged by San Mateo County Change Agents for showing leadership in creating CHANGE! CAM is periodically passed to individuals and organizations whose spirit and work exemplify the spirit of the Change Agent Initiative. Keep your eyes peeled for which partner she is past to next! ☺

Joint Meeting

Mental Health Services Act Steering Committee and Mental Health and Substance Abuse Recovery Commission

Wednesday, May 2nd

3:00 - 4:30 pm:

MHSAC Business

4:30 - 5:30 pm:

Tony Hoffman Awards

Health Services Building
Room 100
225 W. 37th Ave.
San Mateo

MHSAC Meetings are held the first Wednesday of the month. Meetings are open to the public. For more information, please call 650.573.2544 or visit www.smchealth.org/MHSAC

Now Accepting Applications

The Mental Health and Substance Abuse Commission is seeking substance use clients and mental health consumer members.

Contact Chantae Rochester at 650.573.2444.



Faith and Spirituality - Another Means of Support For Incarcerated Clients

Day of Partnering VI



**Wednesday,
April 25th**

1:00 - 4:00 pm

Cordilleras MH Facility
200 Edmonds Road
Redwood City

RSVP 650.802.6400
(Main AOD line)

Refreshments Provided
No need to have attended
previous DOP events!

*Presented by the Cultural
Competence Council &
Change Agents*

It is widely acknowledged that spirituality and faith are often important factors in a client's/consumer's well-being and recovery. This month, we speak with two leaders of the faith-based community, who have committed their time to working with mentally ill incarcerated individuals:

Reverend Mary Frazier - Pastor and founder of Bread of Life Evangelistic Outreach in EPA, has been in ministry for over thirty years and a Pastor for 20 years. Some of her volunteer services include: Chaplain for the SMC Correctional facilities, Women's Advisory Council, AIDS Program Advisory Board, AIDS Community Research Consortium, Service League, Achieve 180 Advisory Council, EPA Mental Health Advisory Group and EPA Ceasefire Advisory Council.

Franciscan Sister Maureen Sinnott, Ph.D., M.Div. - A clinical psychologist who has a private practice in Redwood City, and whose ministry also includes serving as a disaster mental health psychologist for the Red Cross as well as a clinical psychologist for organizations assisting formerly incarcerated women. She is also active in the National Alliance on Mental Illness.

What has inspired you to work with the mentally ill who are/were incarcerated?

Mary: I am the mother of three and the grandmother of nine. I am the eldest of three children. My father and both brothers were alcoholics and are now deceased. My oldest son Eric was an IV drug user from age 18 until he was 28 years old. My first exposure to jails and prisons was with my oldest son. I ministered at McAllister Prison in Jenks, Oklahoma during the time I was in Bible College preparing

for ministry. When I returned to California I became a volunteer Chaplain through Service League of San Mateo County. Because of his IV drug use, Eric was diagnosed with HIV/AIDS his first year in drug and alcohol recovery. He passed away in 1993 after living with the virus for nine years.

As a result of Eric's friendship with the founders of Free At Last Drug and Alcohol Treatment Program, we began a partnership in 1994 that continues to this day. The Bread of Life (which was an Evangelistic ministry before it became a church 1991) congregation consists of approximately 80 % individuals in drug and alcohol recovery, and some are dual diagnosed.

Maureen: More than 40 years ago, while I was living in Taiwan I was asked to meet with a young, seriously mentally ill aboriginal man who had been found guilty of murder. He had already been sentenced to death but was awaiting his date of execution. I met with him regularly and was inspired by his deepening faith in the midst of so much darkness. According to the guards, he became a model prisoner sharing his spirituality with his fellow prisoners. Sadly, he was executed a year after I met him. In the midst of my grief I committed myself to advocating for the incarcerated mentally ill in his memory. I could never have imagined that, years later, my younger brother would become a member of this population for a brief time.

How has your faith supported you in working with this population?



Mary Frazier



Maureen Sinnott

Mary: Many of the inmates I have contact with have a history of substance abuse, and they are dual diagnosed. Some of these individuals have suffered from mental illness from their youth, having used illegal drugs to get relief, because of the stigma attached to seeking mental health services. This is especially true of people of color.

Spirituality plays a great role in my life. My spiritual path is Christianity. I consider the outreach to incarcerated individuals as part of my calling as a minister. I believe that every individual I connect with is a divine appointment. I believe that we are tri-part beings, spirit, soul (mind, will, and emotions) and body. Many times we only take care of the mental and the physical: the spiritual is ignored. Most of the individuals that I know in drug and alcohol recovery (dual diagnosed or not) that are successful have a spiritual path. My faith has sustained me in every area of my life.

Maureen: Living in a religious community for over 50 years with other nuns who pray daily and are committed to social justice issues continually renews my faith. Moreover, my faith is enkindled every time I minister within the jails or transition homes for the formerly incarcerated. When we are having religious services, individual therapy, or a trauma

Pathways Participants - Beating the Odds

E.V. came to the Pathways* Program in 2008 with a long history of unemployment, substance use, homelessness, and incarceration. In fact, E.V. was on both parole and probation when he was first admitted.

When E.V. was first released from jail, he had no clothes and was given a paper suit. He also had no money and no place to go. A Pathways case manager purchased new clothes and hotel vouchers for E.V.—a very significant step in building self-esteem in someone who was homeless and largely neglected by society.

Extensive efforts went into helping E.V. reinstate his Supplemental Security Income (SSI), and to find him long-term housing. He had previously resided under a bridge. Despite the board and care home placement, E.V. would return to living under the bridge.

In 2010, E.V. was connected with Telecare Full Service Partnership (FSP) through a Pathways referral. This stable environment helped him to establish a real sense of “home.” “It feels nice to have a place to

go back to. It’s no fun to live under a bridge,” said E.V.

Currently E.V. sees his psychiatrist monthly and attends dual diagnosis group therapy weekly at Telecare and South County Mental Health Clinic. The connection with professional treatment providers is a significant stepping stone in his recovery and treatment, as he tends to hold periods of abstinence and exhibits more insight following medication and participation in group therapy. With this improved insight and judgment, E.V. has expressed remorse for his past actions, and understands why it is important to adhere to his probation requirements, to take his psychiatric medication, and to attend his group therapy—all of which are significant steps in preventing him from returning to the criminal justice system. He now even takes great care in his personal hygiene, which was not the case when he was homeless.

E.V. will be graduating from Pathways this month, successfully completing his probation and managing to stay out of the criminal justice system

through his dedication. He will continue to receive services from Telecare and Pathways as a proud alumnus after his graduation.

E.V. has lived a socially marginal life due to his severe mental illness, the absence of family support, and a long history of homelessness, criminal activities, and substance abuse. Through his story, we have great confidence, that someone who is largely neglected by our society does in fact have the potential to beat the odds in life and succeed in personal recovery and treatment.

Pathways would like to extend its sincerest appreciation to Telecare and other professional treatment providers for E.V. Together, we make a difference in people’s lives. ☺

- Ting-yi Huang

**Pathways is the San Mateo County Mental Health Court Program that offers treatment services to seriously mentally ill individuals who are incarcerated.*

Faith & Spirituality

(Continued from page 4)

recovery group I am in awe at the insight, compassion, encouragement and hope they offer one another. I have come to believe that what is most life-changing for the incarcerated and formerly incarcerated mentally ill is peer support. The wisdom they have acquired through walking down the road to recovery, even the detours, are among the greatest life-altering and inspirational stories ever told!

How has this work impacted you?

Mary: I consider myself a very fortunate woman to be able to minister to this population. I have become more sensitive to the needs of others. I am able to be a great deal more transparent about myself, and a lot less judgmental about others. The Bible tells us we should visit those in jail. I consider it a privilege to work with the incarcerated.

Maureen: Serving in the jails and transition homes has sparked a great passion in me to advocate not only on the individual level but also on the system level for the incarcerated with lived experience of mental illness. I serve on the

board of NAMI (National Alliance on Mental Illness), the San Mateo Mental Health Substance Abuse Recovery Commission, Reentry Advisory Board, St. Vincent de Paul Restorative Justice Advisory Board, Psychologists for Social Responsibility and actively participate in many county and church meetings to help turn up the volume on the voice of this vulnerable and underserved population. Nothing energizes me more than advocating for their needs! ☺

Photovoice Facilitator Training

Must attend all 3 days:

April 5th: 10:30 am - 3:30 pm

April 12: 8:30 - 11:30 am

April 23: 3:00 - 4:30 pm

Teams of two people per agency are encouraged to participate.

For more info visit: www.smchealth.org/stories

Register with Omar Aljundi:

OAljundi@smcgov.org



Share Your Story

The Office of Diversity and Equity is seeking Digital Storytelling participants to share their story by creating a 2-3 minute film.

Project will begin in May. View digital stories at:

www.smchealth.org/stories

For more info, contact Regina Moreno at

RMoreno@smcgov.org



Women in County Government

Taking the Next Step

Tuesday, April 17
12:00 - 1:00 pm

455 County Center,
Room 101
Redwood City

Leadership panel featuring members of the County's Executive Leadership Team discuss taking the next step for career development and more.

Register via LMS



PREP Program Now Available in San Mateo County



Prevention and Recovery in Early Psychosis (PREP) was established in 2006 as a partnership between Family Service Agency of San Francisco and the University of California in San Francisco. Since its founding, PREP has expanded the number of people and families served by receiving Mental Health Services Act funding in San Francisco, Alameda and most recently, in San Mateo.

PREP is an early-intervention treatment program for schizophrenia and early psychosis, which uses a strength-based roster of services to create a two year plan designed specifically to put families back on track.

The program has two major components, both of which are critical to creating a countywide system of effective intervention. First is a public education campaign designed

to reduce stigma, provide hope to people struggling with the disease, educate the public and frontline service providers about the warning signs of psychosis, and inform the public about the existence of the PREP Program as a major resource. Second is a comprehensive, rigorous, and client/family-centered array of services designed to reduce and control symptoms of serious mental illness associated with psychosis, restore cognitive capacity damaged by the disease, and promote community reintegration. Although there is no known cure for psychosis, our goal is stable remission that will allow the individual to live a normal, prosperous, and fulfilling life.

To qualify for PREP services an individual must be between the ages of 14-35 with first onset of Schizophrenia, Schizoaffective disorder, Schizophreniform or Psychosis NOS (Not Otherwise Specified)



within the past two years. In addition, a PREP therapist will conduct an initial phone screen with a provider or family member to determine if an assessment should be scheduled. The PREP referral line is 650.504.3374. To learn more about the program visit: www.prepwellness.org.

PREP is located at 1108 South El Camino Real in San Mateo and our program manager, Cassandra Golding, Ph.D. can be contacted through email at cgolding@fsasf.org or by phone at 650.872. 9619.

- Perry Olshan,
PREP Division Director

AOD Prevention Partners Host "Chronicles of Hope" Video/Discussion



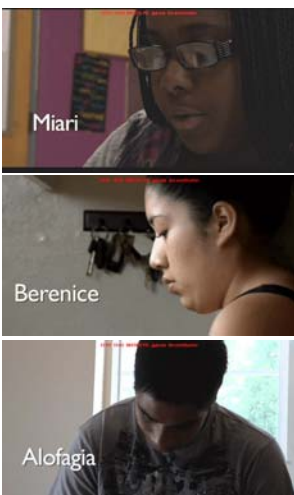
"Chronicles of Hope," a new video produced by Nuestra Casa, was the highlight of the March 14th Countywide AOD Prevention Workgroup meeting. In 2011, Nuestra Casa received a grant from the Silicon Valley Community Foundation to produce this film, which follows three East Palo Alto youth and brings to life the challenges that they and their peers face as they make the transition from middle school to attend high schools outside of their community. East Palo Alto has not had a public high school for many years. After completing the 8th grade, students transition into a public high

school in the neighboring Sequoia Union High School District. School data indicating that East Palo Alto students have historically underperformed (high school graduation rates for East Palo Alto students are currently around 40%), are reflected in these incredibly moving and insightful personal stories told by each of the students. The stories also bring up the complexity of challenges faced by the students, as well as personal, family, community, and systemic factors that impact their lives. The students who appear in the film were selected to represent the diversity of the East Palo Alto community. Their stories and the authentic

presentation within this well-constructed documentary was followed by a discussion facilitated by Julio Garcia. Julio is a community partner in the East Palo Alto Substance Abuse Prevention Coalition, community organizer, as well as a staff member of both Nuestra Casa and One East Palo Alto. This eleven minute film is designed to spark dialogue, create awareness, and lead to positive change efforts.

To learn more, and find out how you can host a viewing and begin a dialogue about this film, contact Julio Garcia at jgarcia@nuestracasa.org

- Esther Lucas



Students featured in "Chronicles of Hope."

April 2012

Drug Court Offers An Opportunity For Recovery

A large proportion of criminal defendants have a substance use disorder. Most crimes are either directly or indirectly connected to addiction.

Through a collaborative partnership between the San Mateo County Courts, Probation Department, District Attorney Office, Private Defender Office, and Behavioral Health and Recovery Services, the Drug Court program offers individuals facing a number of non-violent criminal charges for drug related offenses, an opportunity to enter into a court-monitored substance abuse recovery track in lieu of standard criminal sanctions.

Tammy, a Drug Court participant, shares her struggles with substance abuse and addiction, and how the Drug Court program has helped her.

Tammy had used various drugs, including alcohol, abu-

sively, for 33 years. When her mother died in 2003, she was introduced to methamphetamine, and it wasn't long before she was catapulted into a new level of consequences because of her drug use. "I had never been to jail before in my life," said Tammy, but her new addiction resulted in her being arrested nine times in five years. "I lost my friends, jobs, car, house...everything" she declared.

"I knew I needed to do something, so I put all of my faith in the Drug Court team. They had faith in me until I could find faith within myself"—said Tammy. She relapsed once, which resulted in a "flash" incarceration – a Drug Court technique that brings the seriousness of the violation to the immediate attention of the participant.

After completing a 90-day

residential treatment program based on the 12 steps of the Anonymous programs, neither the Drug Court team nor Tammy believed she was ready for outpatient treatment. The Drug Court authorized an additional 90 days in treatment in a behavioral modification based residential treatment program.

For the first time in 33 years Tammy has been clean and sober for nearly one year. Drug Court has continued to assist her with transitional housing and is assisting her in locating permanent housing. Tammy is active in her local Narcotics Anonymous fellowship. She is working and has purchased a car to help her get to work and to meetings. When asked to sum up her current situation she says simply, "I'm really blessed." ☺

- Mark Korwald

Drumming & Spirituality as Healing and Recovery



On March 9, over 75 BHRS clients, family members and staff gathered in San Mateo

for an event some participants later called "Awesome!" "Great!" "Love it!" "20 years in the county – best education & experience ever," and asked for "more, more, more!"

The event, which received an almost perfect score (4.95 out of 5) from the 54 participants who returned an evaluation form, was **Drumming & Spirituality as Healing and Recovery**. A dynamic, powerful, hands-on training (pun intended) organized by the Spirituality Initiative and the Latino Collaborative, drew a full house of participants who

were treated to an afternoon of stress-reducing, anxiety-decreasing, balance-inducing drumming for healing.

The experienced facilitator, Dr. Sal Nunez, Ph.D, is a clinical psychologist, professor and researcher who investigates the physiological, neurological, and psychological healing properties of drumming practices and has been integrating drumming into local and statewide behavioral health settings. In 2009 his methodology was found to meet the standards of Community Defined Practices through SAMHSA funding.

The event was characterized by the engaged, positive, respectful attitude of the audience, which was composed of 50% providers and 50% clients/consumers and family members. Besides creating a

space of fun and honoring presence, the participants experienced a relaxed sense of joy and alert calmness that allowed for mindful drumming, vocalizing and dancing as a "journey within" from which they emerged renewed and empowered.

After drumming participants shared their deeply-felt experiences, speaking from the heart and agreeing on the profound, positive effects the drumming had on their bodies, minds and spirits. The group then engaged in a dialog about how to promote more drumming and other indigenous healing practices in BHRS, our communities and beyond (see photos page 12).

☺

- Jairo Wilches

photography
recovery
spirituality
photovoice

Express your spiritual voice through photography!
(No experience Necessary).

Digital cameras available

Open to: BHRS clients/family and staff
Three Fridays:
April 20th,
May 4th & 18th

9 a.m. to noon
San Mateo

Contact:
Jairo Wilches at
650.573.2890, email:
JWilches@smcgov.org

Or
Omar Aljundi at
650.372.3273, email:
OAljundi@smcgov.org

Spirituality:
a powerful resource in the wellness and recovery of most people

Achieve 180 Provides New Transitional Employment Opportunities

8th Annual San Mateo County Disaster Preparedness Day

Is Your Family Ready?

Saturday, June 9
10 am - 2 pm

San Mateo County Event Center, 2495 S. Delaware Street, San Mateo

Arrive before 11 am for free parking and free admission to the County Fair.

For more information, contact the Office of Emergency Services at 650.363.4790.



In October 2009, the County of San Mateo received a Federal Second Chance Grant from Bureau of Justice Assistance to develop Achieve 180, a re-entry program for high risk offenders in the County jail. The goal of Achieve 180 is to improve community safety by increasing the successful reintegration of formerly incarcerated persons into the community and thereby reducing recidivism.

After two years, Achieve 180 stakeholders identified the need to strengthen the workforce development and employment components. According to the data, 67% of female and 40% of male inmates in San Mateo County report being unemployed before incarceration. For inmates that were employed, incarceration often results in the loss of employment. Research indicates that work skills and employment are critical elements to successful re-entry. In September 2012, the County received a second round of funding which came with an increase in funds from the previous year, which allowed us to begin addressing this need and to fund an employment specialist.

To further our focus on employment, Supervisor Adrienne Tissier spearheaded an effort that resulted in the County recently accepting a Caltrans Cooperative Agreement for over \$2.2 million, which will



provide transitional employment opportunities to our clients.

The Agreement brings resources, jobs, and beautification to the County. Achieve 180, in partnership with JobTrain, will provide transitional employment opportunities to help the formerly incarcerated to launch new careers and to break out of the existing cycles of poverty, homelessness, drugs, crime, and incarceration. The objectives of this project are: (1) provide assistance to Caltrans with roadside maintenance such as litter removal; (2) provide work experience for those formerly incarcerated; and (3) facilitate self-sufficiency. Everybody wins!

Part of "re-entry" is breaking old negative patterns and working to create new and positive behaviors and futures. We would like to share one such success story where employment has played a role in helping our client to make a 180 degree change in his life.

Arthur became an Achieve 180 client in February of 2011. In custody, Arthur participated in the TAILS program (teaches inmates how to train and care for abandoned dogs)

in the Men's Transitional Facility. Arthur then entered residential drug treatment at Project 90, which he successfully completed, then entered their transitional housing facility. Arthur had worked as a commercial truck driver for many years, but his license was suspended for use/addiction to drugs. While in treatment, Arthur began the process of petitioning for reinstatement of his Class A commercial driver's license and was eventually able to get it back. Arthur has been employed by a well-known moving company since July, and is in the process of obtaining independent, long term housing.

This story underscores the fact that employment is key to a formerly incarcerated individual's successful re-entry into the community; and when a job is coupled with community support and recovery, the chances for re-offending and incarceration are greatly reduced. The work we do really does make a difference! Re-entry support works.~

- Shirley Melnicoe



Service Connect: Navigating the Criminal Justice Realignment

Service Connect – a partnership between Human Services Agency (HSA) and BHRS, with County Probation as the lead agency – was formed to serve the forensic population released from prison under last year’s AB 109 legislation. Limited to non-violent, non-serious and non-sex offenders, AB 109 shifts responsibility for their supervision and treatment from the state penal system to California’s counties. Beginning October 1, 2011, persons who formerly would have been placed on state parole are supervised by county probation departments, under Post-Release Community Supervision (PRCS). In addition, those who would have served terms of three years or fewer in state prison will now be held in county jails, and placed on county-supervised PRCS in lieu of state parole.

In San Mateo County, HSA Service Connect staff members – one social worker and one benefits analyst – provide the AB 109 population with safety net services (short term housing, food and clothing), benefits assistance (ACE/MCE and GA), and case planning services (including educational and vocational referrals). These services are provided on a case-by-case basis as part of an engagement strategy.

The BHRS Service Connect staff consists of one psychiatric social worker (hired in December of last year) and one

AOD case manager assessor (hired in November). Since October 1, 2011, BHRS staff has seen 95 unduplicated consumers. Of these 95 consumers, 79 have received a medical screening questionnaire and the AC/OK screening for mental health and substance abuse. Those consumers who are amenable to being further assessed are provided an assessment and a referral to the appropriate level of care. BHRS staff has undertaken 63 Addiction Severity Indexes and 32 mental health assessments.

The AB 109 population is being referred to a continuum of services. Several Service Connect participants who require an intensive level of services are being linked with Telecare’s Full Service Partnership. Voices of Recovery provides peer mentorship and WRAP planning groups tailored to the AB 109 population. Many AB 109 participants have been referred to substance abuse programs. A few referrals have been made to regional clinics and some participants are being referred to ACCESS Brief Treatment services.

County Probation provides community correctional supervision and case management, with the goal of reducing recidivism and ensuring public safety. The department has assigned six officers to work with the AB 109 population. Early on, an officer administers a standardized assess-

ment in order to categorize the individual’s recidivism risk and intervention needs. Those findings, along with the officers’ sense of an individual’s progress over time, are shared with HSA and BHRS staff during bi-weekly multidisciplinary team meetings where service planning takes place.

Historically, many members of the AB 109 population have had a high level of forensic recidivism, along with elevated rates of both addiction and mental health problems. For several reasons—including the challenge of establishing a life in the community after incarceration—most individuals are not requesting treatment services upon release. Of those who do seek services, many are not interested in residential treatment, partly due to recently coming from a prison setting and not wanting to be physically restricted. Despite these hesitations about engaging in treatment (or at the appropriate level of service), Service Connect staff have referred 31 AB 109 participants to AOD services and 14 to mental health services. Ongoing engagement and outreach work with a wider set of individuals is part of the BHRS role at Service Connect, which maintains an open door policy for consumers and potential consumers at 400 County Center, 1st Floor, in Redwood City. ☺

- Carlos Morales



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“My doctor saved my life by just talking to me.”

ASK all your clients if they smoke.

ADVISE them to quit.

REFER them to 1-800-NO-BUTTS for FREE telephone counseling.

This material was made possible by funds received from the California Department of Public Health.

Celebrating the Life of Rae Tapia

Rae’s story raises public awareness of young people battling with depression, as well as the many struggles faced by transgendered youth. Join us as we explore steps to create a safer, stigma-free community.

Tuesday, May 1st • Reception 6:00 - 6:30 pm • Program 6:30 - 8:00 pm
 Woodside High School, Performing Arts Center
 199 Churchill Avenue, Woodside, California 94062

Spanish Speaking Parents Group Grupo Para Padres



Every Friday
(ending April 27)
4:00 - 5:00 PM

- Parenting with a different cultural context.
- Effective family communication.
- Strategies to improve your child's behavior.
- Relating with the school system.
- What is ADD?
- When are medications necessary?
- Social support and community resources.

North County Clinic
375 89th Street
Daly City

For more information, contact Patrizia Zilahi
650.301.8664.

For a flyer in Spanish, visit the BHRS online calendar.

www.smhealth.org/bhrs/calendar

Training & Education



Psychiatric Grand Rounds
12:15 - 1:30 pm
Health Services

Building, 225 37th Avenue, Room 100, San Mateo
"Anorexia Nervosa: From Hospitalization to Family Based Therapy"

Tuesday, April 10
Presented by Mina Fisher, MD, Clinical Instructor, Dept. of Child and Adolescent Psychiatry, Lucile Packard Children's Hospital, Stanford, CA

"Mental Health Care in Homeless Populations"

Tuesday, April 24
Presented by Dorian Bailey, MD, Psychiatry Resident, Chief Resident, BHRS.

Forum: Acceptance and Commitment Therapy for Anxiety

Thursday, April 5
11:00 am - 12:30 pm
2000 Alameda de las Pulgas Atrium, 1st Floor
San Mateo. Register via LMS.

Behavioral Health is Public Health!

Friday, April 6
8:30 - 10:00 am
Forum lead by Stamp Out Stigma.
Health Services Bldg. Rm 100
225 W. 37th Ave., San Mateo

LGBTQI Youth
Wednesday, April 11

9:00 - 11:00 am
Youth Services Center, 222 Paul Scannell Drive, San Mateo. RSVP Scott Peyton
650.312.5347 or MPeyton@smcgv.org.

Ethical & Confidential Issues in Substance Abuse Treatment Settings

Monday, April 23
8:30 - 9:00 am: Registration
9:00 am - 4:30 pm: Program
262 Harbor Blvd., Bldg A, Hacienda/Veranda Room,

Belmont. RSVP to AOD Services 650.802.6400.

Introduction to Prevention and Recovery in Early Intervention

Wednesday, May 2

9:00 am - Noon OR
1:00 - 4:00 pm

Presented by: Dr. Kate Hardy, Clinical PsychD., UCSF, Silicon Valley Community Foundation, 1300 El Camino Real, San Mateo. Register via LMS.

Trauma Informed Care: Systems & Supervision

Thursday, May 10

9 - 11:30 am: Staff/Providers
1:00 - 4:00 pm: Administrative & Clinical Supervisors
Silicon Valley Community Foundation, 1300 El Camino Real, San Mateo. Register via LMS.

Cultural Humility Training

Thursday, May 24th

8:30 - Noon
Presented by Dr. Melanie Tervalon. Room 100, 225 37th Ave., San Mateo. Register via LMS.

Employee News

Welcome

- **Sherry Bernardino**, MH Intern, North County
- **Christina Kessler**, PSA, Central County

- **Anna Shirin**, Relief Counselor, CYOC

Congratulations

- **Alan Louie, MD**, nominated by his peers as one of the "Top Doctors" in U.S. News and World Report
- **Ziola Pardo**, gave birth to a son, Antonio Rafael Pardo.

Goodbye & Congrats

- **Esther Lucas**, retired last month after 21 years. She is known as the "historian" at AOD due to her knowledge and expertise, she will be greatly missed.
- **Tricia Romine**, YSC Medical Office Specialist, retired last month after 23 years of service. We wish her well in her retirement.

LMS - Learning Management System (Register for Trainings)
<https://sanmateocounty.csod.com/client/sanmateocounty/default.aspx>
Need help on LMS? Contact Kathy Rae Brown at 650.372.8543 or KBrown@smcgv.org.

BHRS Training Calendar:

www.smhealth.org/bhrs/trainingcalendar

New SMC Health System Website:

Staff, Providers & Partners: be sure to check out the new BHRS section under the "For Providers" tab for helpful information and resources at:

www.smchealth.org.



TOP DOCTORS 2012

Congratulations to Alan Louie, MD (Training Director, BHRS Psychiatry Residency Program) and Daniel Becker, MD (Medical Director of Psychiatry at Mills-Peninsula Hospital) on being nominated as one of the top 1,009 psychiatrists on the list of U.S. News and World Report's Top Doctors.

April 2012

Q-Tip for Quality - Holly Severson, RN, MSN

Invaluable Training Resources Right at your Fingertips

Quality Management is pleased to announce that we have several new and updated e-learnings for county staff and contractors. Read on for the details—please note that BHRS staff should, whenever possible, take these e-learnings via our Learning Management System (LMS). As a reminder, in LMS these can be found by searching using the keyword “BHRS.” Contractors can access them on the external county website. (See link below.)

Exciting news! Three of our existing trainings now qualify as “Law & Ethics” training, which will be of great help for staff who are required by their licensing boards to take specific Law & Ethics continuing education units (CEUs). These are:

- 5150 Certification Training for San Mateo County.
- HIPAA for BHRS - Mental Health.
- Critical Incident Management & Mandated Reports Training for BHRS.

There are also three new QM e-learnings, which should be taken by any new staff or contractors who use Avatar. The first two are already available; we expect the third will be posted in early April. Those who take these courses can earn general CEUs/CMEs. These are:

- Introduction to the BHRS Avatar Electronic Medical Record.
- Documentation Training Series: Avatar Progress Notes for BHRS.
- Documentation Training Series: Avatar Client Treatment & Recovery Plans for BHRS.

All contract agency clinicians who do not use Avatar should still take “Basic Documentation for BHRS Online,” which is available at the website below.

External website trainings are available here—look for the titles mentioned above:

www.smchealth.org/node/483.

Additional crucially important resources, including several Avatar reference guides, instructions to obtain an Avatar password, and links to related forms are also located on the external website at:

www.smchealth.org/node/477.

QM staff members always appreciate any feedback or ideas you'd like to share with us! ☺

Quality Improvement Committee Meeting

Wednesday
May 9th

10:15 am - Noon

BHRS Conference Room, 225 37th Ave., 3rd Floor
San Mateo



Employee Spotlight



Eliseo Amezcua

Unit Chief/Supervisor
ACCESS and AOD

Years at BHRS:

6 years

Years at SMC:

11 years

Hometown: Santa Ana, CA

What do you do?

Screen, consult on and triage cases; manage Call Center functions, including authorizations for mental health and AOD services to our Private Provider Network and AOD Treatment Providers; find appropriate services for adopted and foster care children living in this county; troubleshoot challenging cases and situations; provide back-up support to clinicians when needed; and supervise an awesome administrative and clinical staff.

What do you enjoy most about your job?

Helping others, working with a talented staff, helping fix problems and the madness of

it all!

Most satisfying experience?

Having kids that were in a group I used to run in Juvenile Hall tell me they are “clean and sober” when I randomly run into them on the street; having clients tell me I can “move mountains;” and the first time we had “zero call backs” at the Call Center!

Favorite hobbies/activities:

Yoga, tennis, music, writing, fine dining.

“If I weren’t an ACCESS/AOD Unit Chief, I’d be ...” a musician or a tennis instructor. ☺



Chinese Family Support Group

Providing psycho-education, benefits, community resources, support and more to Cantonese and Mandarin speaking individuals.

Meets the last

Thursday of every month,

6:00 - 7:30 pm

1950 Alameda de las Pulgas, San Mateo.

Contact: Alice Tong

650.573.3686 or Maureen Lin 650.261.3721 ext 239.

Latino Collaborative Provider Networking Event



On February 17, the Latino Collaborative held its first Latino Provider Networking event. The event was an opportunity for providers who work with the Latino Community in San Mateo County to have a forum to share their own personal experiences and share resources with each other.

Over 44 providers from all over the county participated, representing different departments and agencies. Some of the providers that participated represented HSA, Star-Vista, Latino Commission, El Centro de Libertad, Friends for Youth, San Carlos School District, Center for Independence of Individuals with Disabilities, VRS, Employment Development Department, BHRS (youth and adult), Caminar, and Coastside Hope, to name a few. Providers identified both strengths within the La-

tino Community as well as barriers to accessing services. 90% of the providers that attended also identified as Latinos and were appreciative for the opportunity to network with other Latino Providers, discovering a community that shared similar experiences. Some providers shared that they were the only Spanish speaking provider in their department and appreciated the opportunity to build connections and partnerships with other agencies.

With the Latino population being the fastest growing ethnic population in the United States, California holding the highest percentage, and national statistics reporting that access to health care and quality of care for the Latino populations has not changed or improved much in the last 10 years (National Health Care Report, 2007), it is important to continue assessing prevention and early intervention methods that reach un-

derserved communities.

One of the key elements in reducing disparities within a prevention and early intervention process is to build community partnerships that are sustainable and ongoing. We hope that this event offered the opportunity for providers to build new relationships in the community to support and assist consumers in receiving good quality of care and increase their awareness of resources. We thank everyone who participated and helped make this event a success.

We invite individuals interested in participating in the Latino Collaborative to attend our monthly meetings, which occur the 4th Tuesday of every month, from 3:30 -5:00 p.m. at 2000 Alameda de Las Pulgas, San Mateo, Suite 201. latinocollaborative@smcgov.org.



Ziomara Ochoa



Latino Collaborative Networking Event



Networking Event (top), Drumming Event (bottom)



Drumming & Spirituality as Healing and Recovery Event

April 2012

NATIONAL PUBLIC HEALTH WEEK®

April 2 - 8, 2012

Since 1995 National Public Health Week (NPHW) has called attention to the importance of awareness and education to improve the public's health. This year, BHRS will participate with a special presentation from **Stamp Out Stigma** on the impact of treatment of behavioral health conditions as a part of a comprehensive, effective health care service. Panelists will speak to their own experiences struggling with stigma and other barriers that can keep individuals from receiving important comprehensive emotional, physical and behavioral health care treatment as well as their own recovery processes.

Come join Stamp Out Stigma and meet with members from the BHRS Lived Experience Speakers Bureau on **April 6th from 8:30 to 10:00 am in room 100, 225 W. 37th Avenue in San Mateo.** Breakfast treats will be served.

Join in on NPHW activities available in San Mateo County throughout the week, visit:

www.smchealth.org/publichealthweek

For more information about National Public Health Week visit: www.nphw.org
From the National Public Health Week Website:

Sometimes the Smallest Changes Can Make a Difference: If we take small actions, our communities, homes and families will see

the large benefits of preventive care and grow the movement. Each year, nearly 1 million Americans die from diseases that could have been prevented. When it comes to mental and emotional well-being, the little things truly make an impact. Early detection of mental health problems and proper treatment are just a few of the ways people can stay healthy.

By identifying the signs of depression and suicide early and referring people to the appropriate resources, Americans can reduce their risk of devastating mental health issues. Even the smallest preventive changes and initiatives can make a big difference in living healthier lives

Start small...

- Promote positive early childhood development, including positive parenting and violence-free homes.
- Seek out proper treatment, promote your community's resources and receive proper screening for mental health issues.
- Provide positive parenting practices to reduce the likelihood of child maltreatment and the emergence of child behavioral problems.
- Identify the signs of depression and suicide and refer people to appropriate resources.
- Write a letter to the editor

of your local paper in response to a recent article that stresses the importance of promoting mental and emotional well-being during NPHW and beyond.

- Encourage employers to provide comprehensive mental health services as part of health care plans and promote violence-free environments.
- Become more involved in your community by becoming a mentor, tutoring youth or joining a faith or spiritual community.
- Encourage children and adolescents to participate in extracurricular and out-of-school activities.

At BHRS, there are many ways to be involved:

- Check out upcoming meetings and trainings on our Training Calendar: www.smchealth.org/wet. Find trainings that will help you make an impact: Mental Health First Aid, Applied Suicide Intervention Skills Training, Parenting Project, just to name a few.
- Become a Change Agent www.smchealth.org/cod
- Get involved in Health Equities Initiatives: www.smchealth.org/HEI
- Learn about Suicide Prevention efforts: www.smchealth.org/suicideprevention

- Kristin Dempsey



To subscribe to *Wellness Matters* (click the red envelope at the top of the page) or to view previous issues, visit: www.smchealth.org/wm

Forward comments, suggestions or contributions for *Wellness Matters* to Diane Tom, Editor: DiTom@smcgov.org



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