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

June 2012

SMMC Embraces “Lean” Philosophy to Foster Continuous Improvement

By Viral Mehta and Elaina Acosta, SMMC Kaizen Promotion Office

Kaizen in Japanese literally means, “to break something apart and put it back together better.” Kaizen events bring together multi-disciplinary, multi-level teams that collaborate to make improvements to a focused area. Such events have a defined scope, targeted results, and specific actions to be completed, and generally involve 10-15 people over a full week. SMMC’s Kaizen events are a part of our work in embedding Lean Management within our organization, which started on a small scale in 2009. In a nutshell, Lean offers a set of tools and mindsets that foster a culture of continuous improvement and comprehensive staff engagement.

Based on the success of the initial work, in 2011, SMMC decided to engage in a full-blown effort that included putting nearly our entire management and executive management through a 6-month training program. Our application of these principles started with Primary Care Clinics as well as Acute Psychiatry, and will soon spread to the Pharmacy and then beyond. In this article, we will share more about how Lean and Kaizen’s work, and then focus on the powerful work happening in Acute Psychiatry.

We began the Lean process in Acute Psychiatry with a week-long Value Stream Mapping (VSM) event in November 2011. The diverse team included staff from both 3AB and Psychiatric Emergency Services (PES), along with broader participation from Aging and Adult Services and Behavioral Health and Recovery Services, and very important, a consumer and a family member. In including representatives from outside of SMMC, we aim to involve, learn from, and collaborate with partners. Even more fundamentally, each team is re-

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Kaizen Event (#4) Team—3AB Discharge Process

Consumers & Family Members Contribute to SMMC Psychiatry Improvements

Liz Evans, RN, SMMC Deputy Director of Psychiatric Services & Interim Chief Nursing Officer

As the Deputy Director, I am privileged to be very deeply involved with the Lean transformation of SMMC Acute Psychiatry. Learning about the methodology and the process has been very rewarding and informative. However, what stands out most for me is how incredible it has been to have the involvement of people with lived experience on our teams. So far, as you have read in the above article, we have had five teams working on the Value Stream Map and four Kaizen events. Five people with lived experience and five family members have made outstanding contributions to our improvement efforts.

Many of our improvements have come from ideas sparked by these participants, and supported by them. Let me give you just a few examples:

At the first Kaizen event on Improving the Patient Experience in Psychiatric Emergency Services (PES), a panel of three consumers shared their experience of being brought to the hospital—sometimes against their will—and advised us on the things that were most important to them.

One consumer said “it is really not so important what you have on your walls, etc., what is important is the way you interact with us, greet us and the generosity of spirit...”
Budget News

Unlike the last few years our budget news for the upcoming fiscal year is more optimistic. While we are awaiting the completion of the State and County budget processes, we are not planning for any service reductions and may find some opportunities to increase services in some areas.

Over the past two years the Governor has put forth significant realignment proposals impacting BHRS, including mental health managed care, Medi-Cal services to children and youth, MHSA, and substance use treatment. While similar to the mental health realignment that took effect in 1991 with respect to funding going directly to counties and these counties becoming fully responsible for managing the service needs of consumers, there are concerns related to these most recent proposals as to the adequacy of funding and the associated risk to counties for taking on the full responsibility for services to the eligible individuals. We will have a much clearer picture of the benefits and risks over the next year or so.

The second major realignment proposal implemented this current fiscal year is related to individuals who have committed certain crimes and instead of the State assuming responsibility, as has been the case, counties have the supervision, incarceration, and treatment responsibilities.

Each County is implementing a locally developed plan. In San Mateo we have a strong collaborative process and portions of the realignment funding have been designated for mental health and substance use treatment services.

We are receiving positive news regarding the trend for Mental Health Services Act funding. These projections indicate that we may return to the level of MHSA funding from a few years ago. A movement of the trend line toward this restoration is indeed encouraging. We have developed a list of service enhancements should these projections hold.

Finally at the County level we have submitted a budget that does not include any reductions in county funds in support of BHRS. The Board of Supervisors will hold budget deliberations later this month to approve the fiscal year 12-13 budget.

School Based Mental Health Services

Beginning in October of 2010 significant changes were made statewide in the delivery of mental health services to children and youth with serious emotional disturbances. For many years both the provision and funding of services was the responsibility of county mental health departments. The responsibility has now shifted to school districts with each district determining who the provider(s) of services will be for their students. Paul Sorbo, Deputy Director Children and Youth System of Care, and Linda Simonsen, Clinical Services Manager II, have been meeting with special education directors over the past several months to determine whether BHRS will continue to provide services. I am very pleased that almost all of the districts have agreed to have BHRS as their sole provider. It is a testament to the high quality work of all the staff that provides school based mental health services.

Acute Psychiatric Services

The lead article for this month’s Wellness Matters detailed an important quality improvement process that has been initiated at the San Mateo Medical Center’s Psychiatric Emergency Services and In-patient Psychiatric unit. Through the hard work by the team participants, some high quality improvements both in the short term and longer term have been identified and some already initiated.

We at BHRS are very excited to be partnering with Dr. Susan Ehrlich, Dr. Steve Cummings, Liz Evans and the other SMMC staff in enhancing the experience for consumers and family members in need of acute psychiatric services. We look forward to implementing the changes and tracking over the coming months how they have contributed to improving outcomes.

Peninsula Family Services offers Senior Peer Counseling services to support the LGBT Community.

650.403.4300 ● 24 Second Ave. ● San Mateo ● www.peninsulafamilyservice.org
June is LGBT PRIDE Month

In the spirit of reminding ourselves about our commitment to the Lesbian, Gay, Bisexual, Transgender (LGBT) community in San Mateo County, I encourage us to honor our LGBT brothers and sisters this month and all months to follow in a collaborative effort to reach equality for all.

In honor of LGBT PRIDE month, the San Mateo County BHRS PRIDE Initiative would like to invite you on a journey of wellness to help us break down the stigma that is too often associated with the LGBT community.

I want to share with you how the PRIDE Initiative has supported our community over the last year and how we will continue to do so in the next fiscal year.

Starting in September 2011, the PRIDE Initiative had a strategic planning day to hear from the community the needs and potential areas of focus of our work. A few lessons learned from that day: there are three higher risk LGBT populations—adult/older adults, youth and transitional age youth and Latino men; and there are three specific areas of concern—alcohol, tobacco and other drugs, mental health, and overall health.

To start to address the above findings, the PRIDE Initiative has been very busy this year. I will share with you a few of our accomplishments: Monthly active PRIDE meetings; a Queer and Questioning Q2 youth group was started; the Trevor Project gave a suicide prevention training; an adult/older adult survey was disseminated; a PRIDE Initiative presentation to the Wellness Recovery Action Plan for better collaboration and cultural competence; the first LGBT Community Night in Daly City; the first LGBT older adult film festival; a committee started to look specifically at the needs of our Transgender clients and consumers within this issue of Wellness Matters.

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

The public comment period for the MHSA FY 12/13 Plan that began on May 2nd closed on Wednesday, June 6th—the same day of the publication of this issue of Wellness Matters. In our following issue we’ll cover the details. Thank you to all of you who read the plan and provided input into our proposal!

I’d like to update you on the State budget, as the Governor’s May revision of the proposal released in January includes some MHSA news: The May version of the budget includes the provision of $15 million in Mental Health Services Act funds for the State Department of Public Health (DPH) in 2012-13 for the California Reducing Disparities Project (CRDP), with the intent to provide a total of $60 million toward this project over a period of four years. This is different from the January budget proposal in that the $60 million for four years are proposed to come out of State Administrative Funds, not from resources that would otherwise be funneled to counties. This welcome shift is the result of efforts by the California Mental Health Directors Association as well as by other behavioral health stakeholders who expressed great concern about this new diversion of MSHA dollars as it was proposed in the January budget. The new proposal would keep the State’s support of the CRDP under the recently reduced statutory limit of 3.5% of MSHA funds that can be expended by State agencies.

Another proposal involves the Office of Statewide Health Planning and Development or OSHPD. After a recent study, the State Department of Mental Health concluded that $444 million of MSHA dollars are available over four years for expenditures on statewide Workforce Education and Training (WET). The 5-year WET plan developed by the California Mental Health Planning Council amounted to $6 million short of that figure. The Governor’s new proposal involves providing OSHPD with appropriation authority while ensuring compliance with the MHSA statutes, for OSHPD to devise a plan to expend these $6 million in available MHSA-WET funds. In addition, $9 million in available MHSA-WET revenues have been identified for expenditure on regional partnerships in FY 2014-15.

In terms of the reorganization of the State level administration of mental health services, the Governor’s May proposal continues its plan to establish a Department of State Hospitals and to eliminate the State Department of Mental Health. No additional details were provided in the proposal regarding the reorganization of mental health or substance abuse administration.

We’ll keep you up to date on any relevant developments.
Dr. Alan Louie has served as the San Mateo Behavioral Health and Recovery Services Psychiatric Residency Training Director for over eleven years. In that time, he helped the program advance to even greater successes than it had ever had before—recruiting top candidates and keeping the training of future community based psychiatrists at the cutting edge.

Dr. Louie recently accepted a very special position—Professor in Psychiatry and Director of Psychiatric Education at Stanford University. Stanford created this position with Dr. Louie in mind. He will plan and oversee all the educational services at Stanford related to psychiatry—from the College level all the way through post-graduate programs and Stanford’s own Psychiatric Residency Program. Though a great loss to BHRS and San Mateo County Health Services, his move is a great gain for Stanford and will help our future relations with Stanford University.

Dr. Louie worked primarily at the University of California, Langley Porter Psychiatric Institute, before joining us in 2000. He had not served as a Residency Training Director before but quickly learned "the ropes" and helped restructure our program to reflect current and state of the art teaching techniques, recruit excellent faculty (both paid and voluntary), and provide highly respected teaching himself. A major achievement was raising the bar on the quality of the applicants and successfully recruiting a very diverse set of residents each year—in culture, ethnicity, background, training, and aspirations. We as a County are blessed because of his achievements—the residents work in our County clinics and provide excellent, culturally sensitive care. Over the past 10 years, 75% of the residents identified themselves as people-of-color. Many of the residents stay and work in the County or near by as Community Psychiatrists after graduation—fulfilling one of the major goals of the Program.

The program’s budget was reduced and the number of positions was slated to decrease by one position per year. Dr. Louie was able to come up with creative alternatives by obtaining additional funding to allow the Residency to remain at four residents per year from the Peninsula Health Care District and through additional revenue from Kaiser for chemical dependency teaching and services provided to and by the residents.

Under Dr. Louie’s leadership, the program was recognized for numerous awards and, over the years, several Residents won grants from the Federal Government and from the American Psychiatric Association. Dr. Louie himself has had many honors and achievements—the most recent being the Parker J. Palmer Courage to Teach Award given by the Accreditation Council for Graduate Medical Education (ACGME) earlier this year. His achievements have strengthened our County and he will be very much missed once he leaves us on June 30th. A national search is underway to recruit for a new Residency Training Director—but no one will quite be able to replace Dr. Louie. All of us at BHRS and Health Services wish Dr. Louie every success in his new venture.

- Bob Cabaj
BHRS Medical Director

2012 Tony Hoffman Award Recipients:

William Stevens (consumer), Penney Mitchell (volunteer), Carlos Rocha (law enforcement), Greg Wild (service provider - Heart & Soul) are recognized at the Mental Health and Substance Abuse Recovery Commission meeting on May 2nd for their respective categories.

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Cedar Street Apartments - Grand Opening

More than 200 individuals attended the Cedar Street Apartments Grand Opening on May 10th at the site, 104 Cedar Street in Redwood City. Cedar Street Apartments is owned by Cedar Street Apartments, Inc. and the supportive services programs will be provided by the Mental Health Association of San Mateo County (MHA), both local nonprofits. Residents will live in one of 14 single-occupancy studio apartments surrounding a central courtyard. The facility is funded through HUD’s 811 program which provided development costs as well as ongoing subsidies for each of the units and by the Mental Health Services Act. There are shared common areas for group activities and support services provided on-site. The site includes a community room, an on-site manager apartment, laundry rooms, and office space.

Attending the ribbon-cutting ceremony was the Vice-Mayor of Redwood City Jeff Gee, County Supervisors Carol Groom and Don Horsley, as well as representatives from the County—BHRS Steve Kaplan and California Housing Finance Agency Nanette Guervarra.

As part of the event, MHA launched the “Wellness Activity Fund” to provide for the ongoing programming designed to improve the residents’ quality of living through healthy living activities, exercise, and educational and vocational activities.

“This new facility is a commitment to improving the quality of life for all within our community,” said Rev. Tom Harshman, Manager of Spiritual Care and Mission Integration at Sequoia Hospital, and the Cedar Street Apartments Board President. “We have much to be proud of today.”

“This 3-year project is the result of a collaborative effort on the part of Redwood City, County of San Mateo, HUD, State HCD, and private funders as well as local foundations,” said Melissa Platte, executive director of MHA. “It is truly a group effort, and it will have a huge impact on the lives of its residents.”

“Thanks to all of our supporters and funders, our clients will always have a safe, decent and affordable place to call home,” said MHA Board President Elise Clowes.

2012 NAMI Walks

On Saturday, June 2, the "BHRS Health and Hope for All" team joined 2000 other supporters and stigma busters at the 8th Annual Bay Area NAMI Walks in Golden Gate Park. There were 25 walkers on our team of staff, family and friends. Thanks to all who walked or contributed to the WALK and a special thanks to the team co-chairs, Matt Boyle, Suzi Reed, Chantae Rochester, Jairo Wilches. Our team raised over $2000, most of which will go directly back to the San Mateo County NAMI affiliate for programs they provide for free to San Mateo County family members and clients.

Thank you to all the walkers and supporters. Please join us next year!
Wellness Matters

First Latino Parent Project Class Ends with Graduation

On May 10th, a group of 16 parents proudly received certificates recognizing their attendance in a 10-week parenting class held at the Fair Oaks Community Center in Redwood City. The parents were part of the first-ever Latino Parent Project class sponsored by the Office of Diversity and Equity, and taught entirely in Spanish by Claudia Saggese from the Office of Consumer and Family Affairs, and by community member, Jennie Barela. During the course of the 10 weeks, the parents learned about topics such as active listening, addressing problematic behavior, adolescent drug use and managing conflict. The children of the class participants were involved in youth activities in a separate room so that the parents could focus on the class material without distractions. At the end of the class, parents shared stories of how the course changed their lives, and how they immediately began using the skills from the class with their children at home. Based on the success of this class, the Office of Diversity and Equity is looking to host additional Latino Parent Project classes in the near future. 

- Joe Balabis

Honoring the Life of Rae Tapia

On Tuesday, May 1st, students, friends, family and community members gathered to honor the life of Rae Tapia, a transgender Latina youth who died by suicide in Redwood City on April 17, 2011. Approximately 120 people attended the event held at the Woodside High School Performing Arts Center. The program featured the premiere of the video Rae, a ten minute documentary that describes Rae’s struggles with depression as she tried to come to terms with her transgender identity in the face of subtle and not so subtle bullying at school. Attendees were also very moved by a musical performance by Rae’s brother, Eligio, and testimonials by Rae’s mother, Gloria Tapia, and her good friend and classmate, Stephanie. Representatives of the Woodside High’s Gay-Straight Alliance and Dulce Garcia, Sexual Health Education & Prevention Coordinator of the Gay Straight Alliance (GSA) Network, emphasized the importance of accessing supports like the GSA, Star Vista’s suicide prevention hot-line and the Trevor Project. The evening concluded with a Call to Action. Participants were asked to write down how they planned to make the world a safer place.

The event was sponsored by: San Mateo County Behavioral Health Recovery Services Office of Diversity and Equity, PRIDE Initiative, Latino Collaborative and the Tapia Family.


While Tyler Clementi’s story has raised national attention, Rae Tapia’s story raises local awareness regarding the struggles faced by young people battling with depression as well as the many challenges faced by transgender youth.

- LGBT youth ages 14-21 are significantly more likely to report depression and anxiety than heterosexual peers.
- 90% of LGBT students report being harassed or assaulted during the past year.

- Luna Calderon
PRIDE Initiative
On April 26, the Filipino Mental Health Initiative (FMHI) hosted a community health forum entitled Behind the Smiles in Daly City. The event was intended to shed light on the issues of mental illness and substance use in the Filipino community that often are hidden behind smiles and laughter. There are currently over 70,000 Filipinos living in San Mateo County, making up almost 10% of the total County population, and about 4% of the clients receiving services from BHRS. The prevalence of mental illness and substance use within the Filipino community is not fully known as data for this community is not readily available. Issues of access to services and stigma towards mental illness and substance use within the Filipino community have served as barriers to receiving treatment.

At the event, audience members were asked various questions regarding their views of mental illness and substance use, and the results were alarming. Over 80% of the crowd reported knowing someone who is sad or depressed, or who is suffering from a problem with alcohol or drugs. About 25% reported that they did not know where to go for help if they were feeling depressed or had a problem with alcohol or drugs. Finally, close to 90% of the audience felt that mental illness and alcohol or drug use were problems in the Filipino community.

Guest speakers included Chris Esguerra, BHRS Deputy Medical Director, and Jei Africa, BHRS Health Equity Initiatives Manager. Both spoke to the audience about the importance of treatment, and the need for more Filipino providers in the behavioral health field. The memorable moment of the evening came when two community members shared very emotional accounts of their personal struggles with mental illness and substance use. One spoke of how her depression, alcohol and drug use destroyed her relationships with friends and family, and led to her being homeless for a period of time. The other spoke of his addiction to crystal meth and how his life is much different now that he is in treatment and living clean and sober.

Individuals from around the Bay Area attended the event, including some from San Francisco, Alameda and Contra Costa Counties who wanted an FMHI counterpart in their home counties. The event drew over 120 people, as well as 15 community agencies that provided resources and referrals to the attendees. The event was supported by a number of local officials, including Councilwoman Carol Klatt of Daly City, County Supervisor Rose Jacobs-Gibson and the Philippine Consulate in San Francisco. State Assemblymember Fiona Ma awarded FMHI with a Certificate of Recognition for its efforts in raising mental health awareness in the community.

FMHI’s next event is a training for clinical providers and school-based educators and administrators entitled Working with Filipinos: History, Culture, and Perspectives. This training will be held on June 7 from 9:00am-1:30pm at the San Mateo Main Library, Oak Room and is FREE for all registrants. To register for the event, please contact Joe Balabis at JBalabis@smcgov.org.

FMHI is one of the initiatives housed under the Office of Diversity and Equity at BHRS and funded by the Mental Health Services Act.

- Joe Balabis
Filipino Mental Health Initiative

5th Pacific Islander Parent Project

Graduates of the most recent Pacific Islander Parent Project class are shown with class facilitators, Nani Wilson (back row, 2nd from the left) and Sisilia Fifita (back row, 3rd from left).
What’s Spirituality Got To Do With Heath, Wellness & Recovery?

The Spirituality Initiative recently held a Photovoice workshop for a very diverse group of 16 consumers, providers and family members from Behavioral Health and Recovery Services. Photovoice is a community based participatory research project centered on a specific issue, in this case addressing the question “what role does spirituality play in your health, wellness and recovery?”

To try to answer this question, participants embarked on a process of exploration which resulted in powerful images and stories shedding light on a relationship that has been often ignored or misunderstood by most mental health systems in the US. They tell us that spiritual engagement can be found through art, nature, meditation, connection with others and with loved ones, or through faith-based practices and organizations.

Regardless of each individual’s path, spirituality is shown as a main source of hope, meaning, resiliency and purpose, which in turn constitutes the foundations anchoring healthier choices and attitudes improving the wellness and recovery that our system aims to foster.

In the coming months we will present this work (see two of the posters at left), at several locations around the county and soon you will also be able to take a look online at: www.smchealth.org/stories, where other photovoice projects will be uploaded as well.

This project is part of a concerted effort by the Spirituality Initiative to raise awareness about the importance that spirituality has in the wellness and recovery of most people, including BHRS clients, providers and family members. Other parts of this effort include an original spiritual assessment tool created by the initiative and featured in SAMHSA’s Recovery to Practice webinar in April; a spirituality resource guide that will help clients and providers find spiritual engagement opportunities in the county suited to their interests; and a spirituality policy that will clarify key points related to the inclusion of spirituality in the work of BHRS. Stay tuned for updates on these exciting items in the coming weeks and months!

For more information about the BHRS Spirituality Initiative and to get involved, please contact Jairo Wilches, at 650.573.2890 or JWilches@smcgov.org. For more information about Photovice please contact Omar Aljundi, at 650.573.3273 or OAljundi@smcgov.org.

-Jairo Wilches
Spirituality Initiative

LGBT PRIDE Month

(Continued from page 3)

BHRS: LGBT Senior Peer Counseling contracted by Peninsula Family Service and a Celebration of Life for a transgender Latina youth who died by suicide (see story page 6).

The above only reflects a small portion of the PRIDE Initiative’s capacity and energy. The PRIDE Initiative is made up of such wonderful community advocates and for all the above to take place it really takes the entire County input to move forward with the efforts. Many of the above efforts were co-hosted with other County Initiatives and/or other agencies. To name a few, the PRIDE Initiative partners with: Peninsula Family Service, Second Harvest Food Bank, Jewish Family and Children’s Services, Asian American Recovery services, Outlet, San Mateo Youth, Star Vista, Latino Collaborative, Pacific Islander Initiative, Suicide Prevention Initiative, Anti-Stigma Initiative, Liwanag Cultural Center, Trevor Project, Kennedy Middle School, San Mateo County Youth Commission.

Thanks to San Mateo County Behavioral Health and Recovery Services for supporting the PRIDE Initiative and offering MHSA resources for PRIDE to be in existence.

PRIDE Initiative has many exciting upcoming events all around system change in San Mateo County. In the upcoming fiscal year PRIDE will be creating and disseminating a tool to see how LGBT friendly and resource ready San Mateo County is. Our LGBT community lives, works and thrives in San Mateo County. I honor my community this month. I am proud to say that I work in San Mateo County and that I am a lesbian. I look forward to working with anyone who has a commitment to LGBT equality in San Mateo County. I also look forward to working with our new co-chair who will be introduced at our next PRIDE meeting on June 6th. Please come and support the new co-chair, support PRIDE, and support LGBT equality. To learn more about the PRIDE initiative and information on meetings, events and resources, visit www.smchealth.org/PRIDE.

-Maddie Houghton
PRIDE Initiative Co-Chair

"Spirituality seeks forces between life and death./ The human soul, the love / strength and wellness / consumes our wellness / spirituality and recovery / towards a miraculous recovery.*

- The Mysterious, AKA Frank F.
First Chinese WRAP Group Wraps UP

On April 30th, the Chinese Health Initiative (CHI) wrapped up its first Chinese Speaking Wellness and Recovery Action Plan (WRAP) workshop in San Mateo County.

WRAP is a widely recognized wellness program developed by Mary Ellen Copeland, Ph.D. to assist mental health consumers in developing hands-on tools to maintain or achieve psychological and physical well-being.

The workshop was facilitated by Wing Tse, who is well versed with the mental health community in San Francisco. The workshop is also co-facilitated by Mark Wang, BHRS Community Worker.

Since the first session began on January 30th, the goal of the workshop was to 1) instill a sense of hope; 2) develop a personalized and flexible treatment plan that addresses each person’s unique needs in a supportive environment; 3) learn new and creative ways to solve problems; 4) provide a social peer network, and 5) learn relaxation skills.

The workshop was delivered in both Mandarin and Cantonese. Previously, WRAP has been introduced in English- and Spanish-speaking languages, but not to Chinese-speaking, mental health consumers living in San Mateo County. The workshop consisted of a series of nine classes, with an average of five to eight attendees with a variety of psychiatric symptoms.

The small workshop size provided an intimate and supportive environment for attendees to freely express their feelings and thoughts. It was inspiring to hear one attendee comment that he felt socially isolated due to a mental illness and language barriers prior to the participation in the WRAP workshop; however, he was finally able to find a social connection with other individuals through a mutual understanding of mental illness because it was delivered in his native language. The attendee now aspires to share his personal recovery in the hope of helping other individuals with similar experiences.

Workshop evaluations stated the participants were interested in receiving more information and education in Chinese. While CHI currently sponsors a Chinese Family Support Group, we are also considering forming a Chinese Consumer Support Group based on the feedback from the participants. If you have a client who might be interested in participating in this support group, please contact Diane Tom at: DTom@smcgov.org.

The Chinese Health Initiative, under the BHRS Office of Diversity and Equity, funded by the Mental Health Services Act, strives to improve the emotional and physical health and well-being of the Chinese community through culturally sensitive access to services.

For more information about CHI, visit www.smchealth.org/CHI.

- Ting-ying Huang
Chinese Health Initiative

Mental Health Loan Assumption Applications - Due August 17th

Another cycle of applications are being accepted for the Mental Health Loan Assumption Program. Qualified applicants may receive up to $10,000 in educational loan repayments from the Mental Health Loan Assumption Program (MHLAP) in exchange for a 12-month service obligation working or volunteering in a hard-to-fill or retain position in the County Public Mental Health System. MHLAP is administered by the Health Professions Education Foundation.

For Information and Requirements: www.oshpd.ca.gov/HPEF/MHLAP.html
For the San Mateo County hard to fill criteria: www.smchealth.org/WET

MHLAP is supported by funds secured from the MHSA
Training & Education

**Psychiatric Grand Rounds**
12:15 - 1:30 pm
Health Services Building, 225 37th Avenue, Room 100, San Mateo
*“Latina Teen Suicide”*
Tuesday, June 12
Presented by Evelyn Alarcon, MD, Psychiatry Resident, San Mateo County BHRS.

Grand Rounds will not be held in July and August. They will resume in September.

**Working with Filipinos: History, Culture & Perspectives**
Thursday, June 7
9:00 Registration
9:30 am—1:30 pm - Program

**Reverse Mentoring**
Tuesday, June 12
9:00—11:00 am
San Mateo County Office of Education, 101 Twin Dolphin Drive, Redwood City.
A mentoring approach where those earlier in their careers help teach more senior staff the youth perspective at work. Drop in registration.

**PREP (Prevention and Recovery in Early Psychosis) Community Night**

**Employee News**

**Welcome**
- Myriam Rodriguez-Ocampo, Patient Service Assistant, Floater.
- Julie Palana, MH Intern, TDS

**Congratulations**
- Jei Africa, on being honored by KQED and Union Bank’s Local Heroes celebration as a part of LGBT Pride month.
- Gay Echeverria, LCSW, on her retirement. Gay began with the County in 1992 as a volunteer therapist and eventually moved to Outpatient Services for youth and families.
- Linda Kuhli, LCSW, on her retirement. Linda began working for the County in 1980, working with youth and adults in different units. She then moved to the South-Central Youth Team.
- Alan Louie, MD, Psychiatry Residency Training Director on his new position as the Professor in Psychiatry and Director of Psychiatric Education at Stanford University (see story page 4.)
- Elia Zapata, BHRS Administrative Secretary II, retired at the end of May after 20 years of service with the county—nine with BHRS.

**Employee Service Award**
30 Years
- Jay Issler, Youth Services – Therapeutic Day Schools.

Need help on LMS or questions regarding trainings? Contact Kathy Rae Brown at 650.372.8543 or KBrown@smgov.org.

BHRS Training Calendar:
www.smhealth.org/bhrs/trainingcalendar
Q-Tip for Quality - Michele Friedman, RN, BSN

The Quality Management website has moved to the San Mateo County Health System’s new website www.smchealth.org. This site is available to anyone with internet access. The website is designed for BHRS staff, agencies, contractors, clients/families, and the public. We hope you add it to your online “Favorites.”

From the homepage www.smchealth.org, navigate to the “For Providers” header and then hover over the “Behavioral Health Providers” area to select an area of interest.

- **AOD Providers** – links to an online handbook.
- **Avatar Information** – how to get Avatar access & training, reference manuals, related information for AOD & MH contractors.
- **Consultation & Referrals** – resources, PREP, Puente Clinic, Pathways & more.
- **Credentialing Information** – forms for AOD & MH contractors.
- **Managed Care Providers** – links to a manual & forms.
- **Mandatory Posting for Consumer/Family Information** – links to flyers, posters, brochures & provider directory that should be available in waiting areas and/or upon request.
- **Training & Workforce Development** – links to online trainings and resources available to agency staff & contractors. BHRS staff members are encouraged to access these trainings, and many more, through their Career Development Site on LMS.
- **Youth Mental Health Contractor Information** – provides information and links for youth service providers.

If you already know the general theme you are looking for, go to www.smchealth.org and find the white “Search” box with the magnifier symbol located in the upper right portion of the screen. Enter the keywords of your request in the box, then click go. The search results will reference all items that contain the word(s) you entered – quite a handy shortcut!

**QM always appreciates any feedback or ideas you’d like to share with us.**

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**Quality Improvement Committee Meeting**

Wednesday July 11th
10:15 am - Noon
BHRS Conference Room, 225 37th Ave., 3rd Floor
San Mateo

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**Employee Spotlight**

**Stefan Luesse**
Health Insurance Outreach & Coordination Manager

**Years at BHRS:**
5 years

**Years at San Mateo County:**
12 years

**Hometown:** Düsseldorf, Germany.

**What do you do?**
I work on policy planning around new health care laws and implementation and training of new health insurance enrollment processes. I also provide face-to-face assistance with enrollment into all public health programs and for Social Security benefits.

**What do you enjoy most about your job?**
The ability to assist BHRS clients to become more self-sufficient and enable them to address medical and mental health and substance use treatment needs.

**Most satisfying experience?**
When I assisted a wheelchair bound client from the Older Adult treatment team in accessing Medi-Cal benefits and thereby assuring that she could secure necessary in-home support assistance and avoid permanent placement in a long-term care facility. The application took several months and several in-person deliveries of required documents as well as intensive advocating with HSA leadership, but was finally approved to the benefit of the client.

**Favorite hobbies/activities:**
I will publish my 2nd book - a biography on German character actor Gert Froebel - this fall. I also like experimental cooking and soccer, although my home team has not made it back into Germany’s Premier League in over 20 years.

“*If I weren’t an Health Insurance Outreach & Coordination Manager I’d be a ...*”
Restaurant owner.
SMMC Continuous Improvement  
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required to include and honor the consumer’s voice, and enhancing the consumer’s experience is an overarching goal of Lean. In practice, the consumer’s voice has been universally recognized by our teams as inspiring, educational, affirming, and a tremendous asset to improvement work.

A VSM team identifies the current state, defines a desired future state, and creates a strategic roadmap to take the organization from the current to the future state. During this week-long event, the team determined that some of the problems facing Acute Psychiatric Services include the system-wide lack of a sufficient number of appropriate lower levels of care and the resulting high percentage of days consumers spend on our inpatient psychiatric unit (3AB) waiting for placement, once they have recovered from the crisis that brought them to the hospital. The team identified that there was a significant gap between the care that our clients and families need and deserve and the care that 3AB and the larger health system was currently providing.

The team concluded that the consumer experience could be greatly enriched by better organization of how patients are brought into care and how they are connected post-hospitalization. In a future state, staff would be better equipped with and informed about best practices to improve the experience of our consumers and their families.

To achieve these goals, four Kaizen events were planned. Each Kaizen week was based on direct and methodical observation of work in the actual workplace, including observation of consumers, nurses, social workers and providers. Based on the knowledge acquired from such observations, as well as consumer and family perspectives, team members generated ideas, designed solutions, and tested them iteratively using Plan-Do-Check-Act cycles.

Our first Kaizen focused on Patient Experience in PES, where the team identified communication with consumers and between staff, the PES environment, the medication room, as target areas for improvement. Ideas implemented aimed to: a) increase patient satisfaction by creating more privacy and better aesthetics b) streamline handoffs between staff c) standardize the greeting as consumers come into the department and d) better organize the charts and medication room to maximize time spent with clients.

In the second Kaizen, we looked at the Discharge Process from the inpatient unit (3AB). Our in-house computer experts added a few application features within the week that allow for real-time visual communication and coordination. In the central workstation, a large monitor now displays the key components of the discharge plan and its status, quickly and easily discernible by color. We also developed Standard Work for our daily rounds, which include a status on the involvement of the consumer and family; a resultant daily status printout that will keep consumers informed of their discharge plans.

During our third event, we focused on the Patient Experience on 3AB. We aimed to create a more structured, therapeutic environment, and wanted to involve consumers more in their treatment plan. Within the week, we developed an interactive tool for nurses to be able to use in helping consumers understand both their treatment and discharge plans. This treatment planning tool, which focuses on the consumer’s strengths and their own identified treatment goals, increases the collaborative effort between the consumer and staff in the recovery process. During the week, we also modified a daily report for consumers, to give them a complete picture of the day’s available group activities.

The fourth Kaizen explored another component of the Discharge Process: reducing days people spend waiting on 3AB for the next level of care. More specifically, the team analyzed levels of care, financial decision support, outpatient appointments, and the decision-making process for discharge and placement. To address these issues, Standard Work was created for a levels-of-care guide, the required content and format of psychiatric admission assessments, admission alerts and a streamlined method of involving the outpatient team in the discharge process. In addition, a new procedure for follow up care was developed and a new process was generated for the invitation of consumers to a more appropriate, lower level of care at Cordilleras.

These four events didn’t mark the end of our Lean work in Acute Psychiatry – but rather just the beginning. In the spirit of continuous improvement, we are in the process of establishing mechanisms to sustain the momentum from these powerful weeks. We are also implementing several key metrics that will ensure that we continue making solid progress, and have already planned for a few more Kaizen events of varying durations for 3AB and PES. Stay tuned! 🌈
you show us." It was a powerful moment to have many dedicated PES staff in the room, hearing from people who have been through the experience. This idea of "generosity of spirit" informed the rest of our week and helped us come up with the elements for greeting consumers who come into PES.

Another really important idea from a consumer came in the second and third Kaizen event for 3AB. It was "keep me informed, and tell me again because I may be very confused and not understand what is happening." This important idea sparked the development of a daily client report sheet to keep clients informed of their staff and their daily goals. This consumer also participated in real time on the unit, telling her incredible story of recovery to our clients, and will be part of an ongoing project to have more stories of hope and recovery on the unit.

Our family member participants have provided valuable input and have helped to come up with tangible improvements, such as better posters and handouts for families on getting support when their loved ones are on the unit. An exciting project that came out of the Kaizens is about developing an interactive patient education computer portal that was immediately taken up by a family member when she realized that she had a connection to a company that could help us develop this interactive tool. I realize that I have only touched on a few of the many ideas for improvement that have come from our consumer and family involvement, however, the message I would like to convey is that there is a lot of hope, excitement and really great work that has been generated thus far by the "generosity of spirit" that these consumers and family members have shown us by their participation in our Kaizen events. I want to extend a sincere thank you on behalf of San Mateo Medical Center Acute Psychiatry to: Rodney Roddewig, Pamela Ward, Anne Bloor, Nancy Wilson, Elizabeth Cornejo, Sharon Roth, Claudia Saggese, Melinda Henning, Juliana Fuerbringer and Dorothy Christian. You have been very inspirational to us and we look forward to continuing this work with you.